

THE CRYDER HOUSE, INC.

166-25 POWELLS COVE BOULEVARD
BEECHHURST, NEW YORK 11357

PROCEDURE TO PURCHASE AN APARTMENT:

The following procedure must be followed for the sale of a cooperative apartment. **No sale may occur without first obtaining approval from the Board of Directors of Cryder House, Inc.**

Purchaser must submit **ONE (1) original set and TEN (10) COLLATED SETS of COPIES of the PURCHASE APPLICATION (11 COPIES TOTAL)** with the following fees:

1. **\$350.00** Non-refundable Processing Fee, payable to John B. Lovett & Associates, Ltd. **PAYMENT MUST BE SUBMITTED WITH YOUR APPLICATION.**
2. **\$75.00** PER APPLICANT, Non-Refundable Credit Report Fee, payable to John B. Lovett & Associates, Ltd. **PAYMENT MUST BE SUBMITTED WITH YOUR APPLICATION.**
3. **\$200.00 PER APPLICANT/OCCUPANT, Non-Refundable Criminal Background Fee** per applicant/occupant. Please make the check payable to John B. Lovett & Associates, Ltd. **(Please note that everyone over the age of 18 must complete the authorization form).**
4. **\$1,500.00** Refundable Move Out deposit (Paid by the Seller), payable to the Cryder House, Inc. **PAYMENT MUST BE SUBMITTED WITH YOUR APPLICATION.**
5. **\$1,500.00** Refundable Move In deposit (Paid by the Purchaser), payable to the Cryder House, Inc. **PAYMENT MUST BE SUBMITTED WITH YOUR APPLICATION.**

FEES TO BE PAID AT CLOSING:

- a. **\$250.00** Preparation of closing document, payable to the John B. Lovett & Associates, Ltd. **(PAID AT CLOSING)** by the Purchaser(s)
- b. **\$1,000.00** Administrative Fee (Paid by the Seller), payable to The Cryder House, Inc., **PAID AT CLOSING.**
- c. **\$.05/Share, Stamp Transfer Tax** (Paid by the Seller), payable to the John B. Lovett & Associates, Ltd., **PAID AT CLOSING.**

********Please note that additional fees will be applicable at the time of closing from the Corp.'s Transfer Agent/Corp. attorney's office.***

Your completed package must be sent to:

John B. Lovett & Associates, Ltd.
109-15 14th Avenue
College Point, New York 11356
Attention: Donna Achaia

PLEASE NOTE THE FOLLOWING:

- **CONCESSION:** Applications with seller concessions ("give-backs") WILL NOT be accepted. DO NOT submit an application IF there are any concessions due back at closing as it will NOT be processed but returned back to the applicants.
- **DEBT TO INCOME RATIO CANNOT EXCEED 30%** (If Applicant (s) own another property and that property will be sold, please include a copy of the contract of sale for that property. If Applicant plans on keeping that property as well as the monthly expenses for the intended unit at the Cryder House, DTI CANNOT exceed 30%)
- **NO PETS ALLOWED**
- **FINANCING WILL BE PERMITTED UP TO 100% OF THE PURCHASE PRICE**
- **PROCESSING OF YOUR APPLICATION TAKES APPROXIMATELY UP TO EIGHT (8) WEEKS**
- **ALL INCOMPLETE PACKAGES WILL BE RETURNED, NO EXCEPTIONS!!!**
- **ALL CHECKS MUST BE IN FORM OF MONEY ORDER OR BANK CERTIFIED CHECKS**
- **DO NOT BOUND OR STAPLE APPLICATIONS TOGETHER. BINDER CLIP OR RUBBER BAND IS REQUIRED.**

After the completed package is received and reviewed, it will be submitted to the Board of Directors for their review. At this time a personal interview will be scheduled between the prospective purchaser(s) and the Interview Committee of the Board. The Board will hold one (1) meeting. **EVERYONE WHO IS TO RESIDE IN THE APARTMENT MUST BE PRESENT AT THE INTERVIEW.**

The purchaser(s) will be notified of the Board's decision in writing. Only at this time may a closing date be scheduled with the building attorney's office.

Should you have any questions regarding the application packet documents, please Contact the undersigned directly.

Sincerely,
John B. Lovett & Associates, Ltd.

Donna Achaia

Donna Achaia
Transfer Agent
Phone (718) 559.0264
Email: donna@lovettrealty.com

THE CRYDER HOUSE, INC.

166-25 POWELLS COVE BLVD.
BEECHHURST, N.Y. 11357
(718) 767-0333, FAX (718) 767-0335
thecryderhouse@aol.com

Dear Applicant (s)

We are pleased that you have decided to purchase an apartment at The Cryder House and look forward to working with you during the course of this sometimes arduous process. Be assured that we at Cryder House will do everything in our power to expedite matters to the best of our ability.

All completed sale application processed by Management and are submitted to the Board of Directors by the first of the month will be reviewed by a screening committee of the Board of Directors on the first Wednesday of the following month. However, please note that the processing time frame for Management to process your application will take approximately 2-3 weeks before the 1st of the month. After reviewing the documentation, the Screening Committee makes, or does not make a recommendation to invite an applicant(s) to participate in a personal interview. Thus informal interview serves both to disseminate information to the prospective shareholder(s) as well as to get a sense if the applicant(s) would make a good fit for Cryder House. The board then acts on the application on the first Wednesday of the next month. Applicant's attorney is advised in writing of the decision of the Board of Directors forthwith.

If your completed application is submitted in a timely manner, the entire application process, culminating in written notification regarding the Board's decision, should be completed in approximately eight weeks. If the application is returned to the applicant(s) because it is incomplete, the process will take longer

Prior to proceeding with this purchase, you should be aware of certain rules in the Cryder House Proprietary lease:

- The premise shall be occupied as a private dwelling by the Shareholder(s)
- Canine pets are prohibited.
- Any misrepresentation of income, occupants or pets will be grounds for the corporation to rescind their consent of sale for one year from the date of closing.
- You will be required to obtain liability insurance (minimum \$300,000.00) for your apartment and to present proof of such insurance coverage prior to closing.

Yours truly,

Board of Directors
The Cryder House

THE CRYDER HOUSE, INC.

166-25 POWELLS COVE BLVD.
BEECHHURST, N.Y. 11357
(718) 767-0333, FAX (718) 767-0335
thecryderhouse@aol.com

Dear Perspective Shareholder:

We'd like to share with you the following important information about insuring yourself and your home at The Cryder House.

Your Personal Property

Your personal property such as carpeting, wallpaper, improvements, betterments, fixtures, furniture, clothes, electronics, and other personal property are insurable under your Homeowner's policy. Damages to property of this nature should be reported to your insurance company. If it is determined that the damage is the responsibility of another (a neighbor or the Apartment Corporation), your company will subrogate (sue on behalf) against the responsible party, possibly making a recovery of payments and reimbursing you for your deductible. By this process, you avoid taking action against another, only to learn that the damages may not have been their legal responsibility. Management does not make the decision as to liability. ***The Apartment Corporation's insurance carrier will not cover the property of the resident***

Your Liability

You, the resident, are liable for any damages to the property of other residents if you are found to be negligent. If you permit the overflow of a sink, a bathtub, an appliance or any other plumbing equipment, the Apartment Corporation is generally not liable. There may be special circumstances surrounding an occurrence. Your Proprietary Lease should be reviewed for specifics.

If you feel that you may have been responsible for damage to another's property (including property of the apartment Corporation), we strongly suggest you report the incident to your insurance company immediately. Failure to provide prompt notice may enable your carrier to avoid paying any and all claims. In the absence of a resident maintaining insurance, the resident may be held personally liable for any and all damages he or she may cause.

Your Employees

If you hire a cleaning person, health aide or contractor of any type, you may be subject to the Workers Compensation Law of New York State. You must consult with your own insurance representative to ascertain if you are insured, and if not, how to obtain such insurance.

The Apartment Corporation requires a Certificate of Insurance from most contractors working on the premises, which will contain evidence of liability and workers compensation coverage. All contractors must be qualified, licensed and insured, and must be approved by Management. Shareholders must inform Management of any and all work to be done by contractors. Alteration agreements can be found on Management's website, www.lovettrealty.com. Failure to inform Management of scheduled contracted work will result

in the cessation of the work may result in a fine, and the shareholder may be held personally liable for damages to property and/or injury to the contractor or to others.

Management will make every effort to address questions in this or any other area surrounding your home ownership. We highly recommend that you seek competent professional advice in order to properly structure your insurance coverage.

We ask that you comply with the above stipulations for your own protection, and so that The Cryder House continues to be a welcoming and safe place in which to live.

Yours truly

Board of Directors
The Cryder House



IMPORTANT INFORMATION REGARDING YOUR SOCIAL SECURITY NUMBER

PROTECTING YOUR PRIVACY

In order to protect your privacy please remove/blackout your social security number from each financial institution document inserted into the application.

- Financial condition (net worth)
- Tax returns
- Personal loans
- Bank statements
 - IRA
 - CD's
 - Savings

The Credit Agency Authorization Form in the application is the only form that requires your Social Security number. ONLY send one (1) Credit Agency Authorization Form to our office with your original application - do not make or send additional copies of the Credit Agency Authorization Form. The Credit Agency Authorization Form containing your Social Security number will be shredded in our office as soon as we submit the information to the Credit Agency and obtain your credit report.

If you have any questions please contact the Management Office.

IMPORTANT NOTES

Due to the large volume of calls, and applications, received by this office, we kindly ask that you refrain from calling for an update, during the three (3) week processing period. When an update is ready, we will contact your point person, which we recommend should be your Real Estate Broker, or in the absence of a Broker your Attorney. Please advise all parties involved and provide them with the brokers and/or attorney's contact information.

In an effort of fairness, we must process applications on a first come first serve basis.

If you are concerned about the receipt of the package, please use a method of return receipt via USPS, Fed Ex, messenger service or hand delivery, etc.

If there is a problem with the application submitted you will be notified accordingly.

Please be advised that submission of an incomplete package may extend the three week processing period.

After the application is processed and submitted to the Board you will be advised, via telephone, or e-mail, on the next step of the process.

Please provide an e-mail address or phone number below and advise our office who will be the point person, (main contact). Please be advised that all parties will not be called/emailed, only the main contact.

Brokers: For current applications please visit our website, www.lovettrealty.com Submission of old packages will cause delays in the processing.

Please provide your bank/mortgage broker/appraiser with the attached information.
Thank you for your cooperation.

MOST REQUESTED ITEMS THAT YOU MAY NEED DURING A PURCHASE, REFINANCE & EQUITY LINE OF CREDIT.

Please note personal checks will not be accepted. All payments must be in the form of Bank certified check, Money order or Company Checks, *payable to John B. Lovett & Associates, Ltd.* Credit Cards are not accepted. Please note all contact information and fees for the following items:

<u>ITEM</u>	<u>COST</u>	<u>CONTACT PERSON</u>	<u>CONTACT #</u>	<u>MISC. INFO</u>
Questionnaire	\$175	Front Desk	(718) 445 9500 x110	Please mail \$175 with questionnaire and reference the Building & Apartment #.
Building Insurance	\$0.00 (Free)	Front Desk	(718) 445 9500 x110	Front Desk will provide Insurance Broker's name and phone number.
Financials	\$20	Dale	(718) 445-9500 x142 dale@lovettrealty.com	Please note we charge \$20 for each year. Payment must be received with request
By-Laws	\$25	Dale	(718) 445-9500 x142 dale@lovettrealty.com	Located in Offering Plan. Please note payment must be received with request.
Most Recent Amendment	\$25	Dale	(718) 445-9500 x142 dale@lovettrealty.com	Located in Offering Plan. Please note must be received with request.
Offering Plan (Black Book)	\$300	Dale	(718) 445-9500 x142 dale@lovettrealty.com	Please note payment must be received with request.

ALL PAYMENTS, FORMS &/OR REQUESTS SHOULD BE SENT TO:

**JOHN B. LOVETT & ASSOCIATES, LTD.
109-15, 14TH AVENUE
COLLEGE POINT, NY 11356**

PURCHASE APPLICATION
CRYDER HOUSE INC.

Managed by:
John B. Lovett & Associates, Ltd.
109-15 14th Avenue
College Point, New York 11356
718 445-9500 (Fax) 718 445 9704

Purchase Application

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SECTION I

CO OPERATIVE PURCHASE APPLICATION

The Cryder House, Inc.
166-25 Powells Cove Blvd.
Beechhurst, N.Y. 11357

John B. Lovett & Associates, Ltd.
109-15 14th Avenue
College Point, New York 11356

PURCHASE APPLICATION FOR COOPERATIVE

PURCHASER (S) INFORMATION:

Purchaser: _____
Purchaser: _____
Purchaser's Attorney: _____ Telephone: _____
Email Address: _____ Fax: _____
Attorney's Firm and Address: _____

SUBJECT BUILDING INFORMATION:

Building Name: _____ Building Address: _____
Number of Shares: _____ Apt No.: _____
Monthly Maintenance: \$ _____
Purchase Price: _____
Name on Stock Certificate and other documents: _____

BANK INFORMATION:

Financing: _____ No _____ Yes Amount: _____
Bank: _____

BROKER INFORMATION:

Broker: _____ Company: _____
Address: _____
_____ Telephone: _____

SELLER (S) INFORMATION:

Seller's Name: _____
Seller's Name: _____
Forwarding Address: _____ Telephone: _____

Seller's Attorney: _____ Telephone: _____
Attorney's Firm and Address: _____

Email Address: _____ Fax: _____
Anticipated Closing Date: _____
Anticipated Date of Possession: _____

INFORMATION REGARDING PURCHASER(S)

Purchaser: _____

Home Address: _____

_____ Email: _____

_____ Telephone: _____

Length of Occupancy: _____ Rent: _____

Employer's Company Name & Address: _____

Telephone: _____ Supervisor: _____

Salary per Annum: _____ Commission & Bonus: _____

Spouse/Co-Applicant: _____

Employer's Company Name & Address: _____

Telephone: _____ Supervisor: _____

Salary per Annum: _____ Commission & Bonus: _____

Name of all persons and relationships who will reside in apartment and, if children, please state age: _____

Name of all residents in the building known by applicant: _____

Does applicant wish to maintain any pets? If so, please specify: _____

Does Applicant plan alterations to apartment? If so, please specify: _____

LANDLORD REFERENCES:

Present Landlord or Agent: _____

Address: _____ Telephone: _____

Previous Landlord or Agent: _____

Address: _____

Address of previous residence and approximate length of occupancy:

FINANCIAL REFERENCES: (Please list **first** the bank, type of account (savings, checking, money market, etc.) and account number with the **most** assets).

- a. Bank: _____
Address: _____

Type of Account: _____
Account Number: _____
- b. Bank: _____
Address: _____

Type of Account: _____
Account Number: _____
- c. Bank: _____
Address: _____

Type of Account: _____
Account Number: _____
- d. Bank: _____
Address: _____

Type of Account: _____
Account Number: _____
- e. Bank: _____
Address: _____

Type of Account: _____
Account Number: _____
- f. Certified Public Accountant, if any: _____
Address: _____

- g. For information regarding source(s) of income, contact: _____

BUSINESS PROFESSIONAL REFERENCES:

1. Name & Address: _____

2. Name & Address: _____

3. Name & Address: _____

4. Name & Address: _____

SPECIAL REMARKS:

Please give any additional information which may be pertinent or helpful:

The undersigned hereby affirms that the information contained in this application is true and accurate to the best of her knowledge and belief.

Signature of Purchase Applicant: _____

Signature of Spouse/Co-Applicant: _____

SECTION 2

FINANCIAL CONDITION (NET WORTH)

STATEMENT OF FINANCIAL CONDITION

Please note that all information listed here should have documentation

Name: _____

Address: _____

For the purpose of procuring credit from the above named company, or its assigns, the following is submitted as being a true and accurate statement of the financial condition of the undersigned on the _____ day of _____, 20__

FILL ALL BLANKS, WRITING "NO" OR "NONE" WHERE NECESSARY TO COMPLETE INFORMATION

ASSETS

Cash in Banks: _____

Savings & Loan Shares: _____

Earnest Money Deposited: _____

Investments: Stocks & Bonds: _____
(see schedule)

Investment in own Business: _____

Real Estate owned (see schedule)

Automobiles: (Year & Make)

Personal property & Furniture: _____

Life Insurance:

Cash Surrender Value: _____

Other Assets – itemize: _____

Total Assets: _____

LIABILITIES

Notes Payable:

To Banks: _____

To Relatives: _____

To Others: _____

Installment Accts Payable:

Automobile: _____

Other: _____

Other Accounts Payable: _____

Mortgages Payable on Real Estate:

(see schedule) _____

Unpaid Real Estate taxes: _____

Unpaid Income taxes: _____

Chattel Mortgages: _____

Loans on Life Insurance Policies:

(Include Premium Advance): _____

Other debts – itemize: _____

Total Liabilities: _____

Net Worth: _____

PURCHASER & SPOUSE SOURCE OF INCOME

Base Salary: _____

S/E Income: _____

Bonus & Commissions: _____

Dividends & Interest Income: _____

Real Estate Income (Net): _____

Spouse Income (specify): _____

Other Income – itemize: _____

Total Annual Income: _____

STATEMENT OF FINANCIAL CONDITION (cont'd)

CONTINGENT LIABILITIES

As Endorser or Co-maker on Notes: _____
Alimony Payments (Annual): _____
Are you a defendant in any legal action? _____
Are there any unsatisfied judgments? _____
Have you ever taken bankruptcy? _____
Explain: _____

GENERAL INFORMATION

Personal Bank Accounts carried at: _____
Savings & Loan Account at: _____
Purpose of Loan: _____

SCHEDULE OF STOCKS AND BONDS

<u>Amount or No. Shares</u>	<u>Description</u>	<u>Marketable Actual Market Value</u>	<u>Non-Marketable (Unlisted Securities) Estimated Worth</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SCHEDULE OF CASH IN BANKS AND BROKERAGE

<u>Location</u>	<u>Account</u>	<u>Balance</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

STATEMENT OF FINANCIAL CONDITION (cont'd)

SCHEDULE OF REAL ESTATE

<u>Description & Location</u>	<u>Cost</u>	<u>Actual Market Value</u>	<u>Mortgage Amount</u>	<u>Maturity</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

SCHEDULE OF NOTES PAYABLE

Specify any assets pledged as collateral, indicating the liabilities which they secure:

<u>To Whom Payable</u>	<u>Date</u>	<u>Amt</u>	<u>Due</u>	<u>Interest</u>	<u>Assets Pledged as Security</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

The foregoing statements and details pertaining thereto, both printed and written, have been carefully read and the undersigned hereby solemnly declares and certifies that it is a full and correct exhibit of my/our financial condition.

Date: _____ Signature of Purchase Applicant: _____

Signature of Spouse/Co-Applicant: _____

SECTION 3

**INSERT
CONTRACT OF SALE
HERE**

SECTION 4

**INSERT COMMITMENT LETTER, LOAN
APPLICATION**

&

**3 ORIGINAL AZTEC RECOGNITION
AGREEMENTS** (Signed by Bank officer & applicant (s))
HERE

SECTION 5

**INSERT LAST TWO YEARS (SIGNED)
COMPLETE FEDERAL/STATE TAX
RETURNS WITH W-2 FORMS HERE**

(ALL SCHEDULES MUST BE INCLUDED
& COPIES SHOULD BE SIGNED)

SECTION 6

**INSERT
LETTER FROM EMPLOYER
STATING EMPLOYMENT PERIOD, TITLE
& CURRENT SALARY
& COPY OF LAST THREE PAY STUBS
HERE**

(IF RETIRED, PLEASE SUBMIT THE FOLLOWING: SOCIAL SECURITY AWARD LETTER, PENSION AWARD LETTER, BANK INTEREST FORM 1099 AND DIVIDEND FORM 1096)

(IF SELF-EMPLOYED, INCOME MUST BE VERIFIED BY ACCOUNTANT'S CERTIFICATION AND A BUSINESS FINANCIAL STATEMENT FROM YOUR ACCOUNTANT IS REQUIRED AS WELL AS LAST TWO YEARS BUSINESS OR CORPORATION TAX RETURNS SHOULD BE SUBMITTED)

SECTION 7

**INSERT
SUBSTANTIATING DOCUMENTATION
SUCH AS, BANK STATEMENT, IRA, CD,
401K, SAVINGS, AND ANY OTHER ASSETS
LAST 3 MONTH'S OF EACH STATEMENT**

**FULL STATEMENTS MUST BE SUBMITTED. INCOMPLETE
STATEMENTS WILL CAUSE DELAY IN PROCESSING OF
APPLICATION & WILL BE RETURNED BACK TO BUYER/BROKER.
SUBMITTING 1 PAGE OF A STATEMENT IS NOT ACCEPTABLE.**

HERE

(If submitting an internet print out for bank statements,
applicants name and last 4 account # MUST be listed or
copies will be deemed unacceptable)

SECTION 8

**INSERT STATEMENT FROM THE
APPLICANT EXPLAINING, IN DETAIL, THE
SOURCE OF FUNDS FOR THE PURCHASE
OF THE APARTMENT.**

**PLEASE PROVIDE DOCUMENTATION TO
SUPPORT STATEMENT**

ACKNOWLEDGMENTS & AUTHORIZATIONS

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SECTION 9

ACKNOWLEDGMENT FOR PARKING, OVERSIZE VEHICLE, & STORAGE BINS

ACKNOWLEDGMENT FOR PARKING, OVERSIZE VEHICLE & STORAGE BINS

**The Cryder House, Inc.
John B. Lovett & Associates, Ltd., Managing Agent
109-15 14th Avenue
College Point, New York 11356
718-445-9500**

Each apartment is awarded one (1) parking space ONLY and is charged on a monthly basis. If you are requesting a parking space, this notice is to notify you that you will either be given an indoor or outdoor space in the garage or, on the deck or front parking area. There is a waiting list for a second parking space which is not transferable with the purchase of apartment.

In addition, please note that the parking spaces in the garage or, on the deck and front, are designed to accommodate the maximum number of average size cars. Oversized vehicles do not easily fit into these spaces. They are difficult to park and because of their size, create a potential for the damage to the car parked next to your space.

Therefore, if you are contemplating a purchase of a new car, please be advised that no oversized vehicles will be permitted to park in the garage or, on the deck, or in the front. If you are not sure as to what is considered "Oversized", please contact the site office, (718) 767-0333, for clarification.

Each Cryder House apartment has a standard storage bin in the basement. The storage bin for this apartment will be assigned to the purchaser for a fee.

The Cryder House maintains a bicycle storage room in the basement. You may request a bicycle storage rack, subject to availability, for a one-time fee of \$1005.00.

Please indicate by your signature below that the above is fully understood and agreed upon by the Purchaser(s).

Apt #:_____

Signature of Purchaser: _____

Signature of Purchaser:_____

SECTION 10

WINDOW GUARD QUESTIONNAIRE

WINDOW GUARD QUESTIONNAIRE

LEASE NOTICE TO TENANT

WINDOW GUARDS REQUIRED

You are required by law to have window guards installed in all windows if a child 10 years of age or younger lives in your apartment.

Your landlord is required by law to install window guards in your apartment if you ask him to install window guards at any time (you need to give a reason),

OR

If a child 10 years of age or younger lives in your apartment.

It is a violation of law to refuse, interfere with installation, or remove window guards where required.

Check One:

_____ Children 10 years of age or younger live in my apartment

_____ No Children 10 years of age or younger live in my apartment

_____ I want window guards even though I have no children 10 years of age or younger

Tenant: _____

Tenant's Signature: _____ Date: _____

Tenant's Address: _____

Return this form to:

Owner Manager: John B. Lovett & Associates, Ltd.
109-15 14th Avenue
College Point, New York 11356

For further information call: Window Falls Prevention 212-676-2158

SECTION 11

MOVE IN / MOVE OUT SECURITY DEPOSIT FORM

MOVE-IN/MOVE-OUT AGREEMENT

**The Cryder House, Inc.
John B. Lovett & Associates, Ltd., Managing Agent
109-15 14th Avenue
College Point, New York 11356
718-445-9500**

The undersigned hereby agree to comply with the provisions of the Rules and Regulations of the Cryder House, Inc. in the delivery (Move-In) or the removal (Move-Out) of furniture, furnishings, and personal property from the apartment identified below. In addition, the undersigned agrees to the following policy and procedures established by the Board of Directors:

1. The payment of the following fees at the time of scheduling and in advance of the **Move-In**:
 - a. By certified check, bank check, or money order, the amount of **One Thousand Five Hundred (\$1,500.00) Dollars**, (Paid by the Purchaser(s)) payable to the Cryder House, Inc., as a refundable move in security deposit. Deposit, which shall be refunded to the Purchaser, subject to the condition as hereafter provided.
 - b. By certified check, bank, check or money order, the amount of **One Thousand Five Hundred (\$1,500.00) Dollars**, payable to the Cryder House, Inc, as a refundable move out security deposit. Deposit, which shall be refunded to the Seller, subject to the condition as hereafter provided.
2. The date of the Move-In or Move-Out from the apartment **must** be scheduled with On-Site office, 718-767-0333 one week in advance. It is understood that the total amount of the Security Deposit shall be forfeited if the resident fails to do the following:
 - a. Schedule the Move-In or Move-Out of property with the On-Site office (or arranges for the delivery or removal of property from the apartment at other than the time scheduled.
 - b. Have the Approval-Inspection letter **Signed** by the Superintendent on the scheduled day of Move-In/Move-Out, and return such signed Approval-Inspection letter to the Management Office at 109-15 14th Avenue, College Point, New York 11356.
 - c. **Moving in/out of the building must be done on weekdays ONLY between the hours of 9:00 a.m. and 8:00 p.m. ALL MOVES MUST BE COMPLETED BY 8:00 P.M. NO EXCEPTION WILL BE MADE.**
3. Any carrier engaged for the delivery or removal of property shall be advised to comply with the instructions of the Building Staff assigned for the monitoring and supervision of the Move-In or Move-Out.
4. **In addition, a Certificate of Insurance from your moving company for Workmen's Compensation and Public Liability Insurance in the amount of \$500,000 property damage and \$500,000/\$1,000,000 bodily injury must be provided to the Managing Agent. The certificate must name the Cryder House, Inc., and John B. Lovett & Associates, Ltd. as Additional Insured. Upon submission of this certificate, building superintendent will advise the moving company with proper service entrance for move in/out.**

5. The undersigned shall be responsible for damages caused in the common elements of the Cryder House, Inc. during the process of the Move-In or Move-Out.
6. The cost for repairs and replacements for damages to the common elements caused by and during the Move-In or Move-Out shall be deducted from the amount of the Security Deposit. The amount of the cost for any repairs and replacements resulting from the damages attributed to the Move-In or Move-Out from the apartment shall be the sole determination of the Managing Agent which shall be based upon prevailing costs for similar repairs and replacements.
7. It is understood that the Cryder House, Inc., shall return to the undersigned the full amount of the Security Deposit within thirty (30) days of the date of the Move, or the net amount of the Security Deposit after deducting the amount of the cost of repairs and replacements, if any, within thirty (30) days after the date of determination of the cost thereof. In the event of a Move-Out the refund should be sent to the forwarding address indicated below.
8. It is further understood that the amount due or payable to the undersigned from the **SECURITY DEPOSIT** may not be assigned to another party.

AGREED: _____ DATE OF MOVE: _____

Name of Shareholder: _____ Apt. No.: _____

Signature of Shareholder: _____ Date: _____

Name of Purchaser/Subtenant: _____ Date: _____

Signature of Purchaser/Subtenant: _____

Forwarding Address for return of **Move-Out Deposit** (Please print name and address clearly).
If the unit is currently vacant and a Move-Out Deposit is not required, please indicate "N/A" below.

Address: _____

Phone #: _____ **Email** _____

SECTION 12

AUTHORIZATION FOR CREDIT AGENCY

CREDIT AGENCY AUTHORIZATION

Authorization for TENANTS DATA VERIFICATION CO., INC. to obtain a credit report

In order to comply with the provisions of 15 U. S. C. Section 1681(d) of the Federal Fair Credit Reporting Act, I (we) authorize you to retain TENANT DATA VERIFICATION CO., INC. which agency may obtain, prepare and furnish an investigative consumer report including information on my character and general reputation, personal characteristics and mode of living, whichever are applicable, as well as information regarding employment, credit and current financial position. If this is a lease application, I (we) further authorize John B. Lovett & Associates, Ltd., at its discretion, to make a copy of such credit report available to the owner of the unit which I (we) propose to lease. In addition, within a reasonable period of time, upon written request to John B. Lovett & Associates, Ltd., I (we) may obtain a complete and accurate disclosure of the nature and scope of the investigation requested.

Receipt is acknowledged to the summary of rights enclosed herewith.

Purchaser/Lessee (Print): _____

Purchaser/Lessee Signature: _____

Social Security #: _____

Address _____

Purchaser/Lessee (Print): _____

Purchaser/Lessee Signature: _____

Social Security #: _____

Address _____

Date: _____

SECTION 13

**AUTHORIZATION
FOR
CRIMINAL BACKGROUND
CHECK**

**RELEASE OF INFORMATION AUTHORIZATION
AUTHORIZATION TO OBTAIN A CRIMINAL REPORT**

I hereby authorize any individual, company or institution to release to John B. Lovett & Associates, Ltd., and/or its representative any and all information that they have concerning any criminal activity.

I hereby release the individual, company or institution and all individuals connected therewith from all liability for any damage whatsoever incurred in furnishing such information.

Print Name: _____ Date of Birth _____

Address: _____ Sex: Male ☐ Female ☐

City/State/Zip: _____

Social Security Number: _____

Signature: _____

Print Name: _____ Date of Birth _____

Address: _____ Sex: Male _____ Female _____

City/State/Zip: _____

Social Security Number: _____

Signature: _____

(FOR OFFICE USE ONLY)

TENANT DATA PLEASE RETURN TO:

JOHN B. LOVETT & ASSOCIATES

ATTN: DONNA ACHAIA

FAX (718) 445-9704

BUILDING REFERENCE: CRYDER HOUSE, INC./APT# _____

SECTION 14

NAMEPLATE REQUEST & KEY APPROVAL

NAME PLATE REQUEST & KEY APPROVAL

**John B. Lovett & Associates, Ltd.
109-15 14th Avenue
College Point, New York 11356
718-445-9500**

Please complete the information requested on the form and acknowledge that you will supply the superintendent with a set of keys upon moving into your apartment.

Apt. No.: _____

Name on Mailbox: _____

Name on Directory: _____

I (we) acknowledge that a set of keys to the apartment must be given to the superintendent upon moving in.

Signature: _____

Date: _____

SECTION 15

ACKNOWLEDGMENT OF HOUSE RULES

ACKNOWLEDGMENT OF HOUSE RULES

John B. Lovett & Associates, Ltd.

109-15 14th Avenue
College Point, New York 11356
718-445-9500

Cryder House, Inc.

166-5 Powells Cove Blvd.
Beechhurst, NY 11357

By signing below, I (we) acknowledge receipt of the Cryder House, Inc. House Rules.

Also, this will confirm that I (We) **do not now have a dog, and will not own nor harbor a dog in this apartment, or anywhere on the premises.** This is pursuant to the House Rules of the Cryder House and such rules are a part of the Proprietary Lease.

Apt. No.: _____

Name of Purchaser(s): _____

Signature of Purchaser(s): _____

Date: _____

SECTION 16

LEAD DISCLOSURE STATEMENTS

DISCLOSURE OF INFORMATION ON LEAD-BASED PAINT AND LEAD-BASED PAINT HAZARDS

Lead Warning Statement

Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead Poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

Seller's Disclosure (initial)

- _____ a) Presence of lead-based paint and/or lead-based paint hazards (check one below):
() Known lead-based paint and/or lead-based hazards are be present in the housing (explain): _____

() Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.
- _____ b) Records and reports available to the seller (check one below):
() Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

() Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Purchaser's Acknowledgments (initial)

- _____ c) Purchaser has received copies of all information listed above.
- _____ d) Purchaser has received the pamphlet *Protect Your Family from Lead in Your Home*.
- _____ e) Purchaser has (check one below):
() Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or
_____ () Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

Agent's Acknowledgment (initial)

- _____ (f) Agent has informed the seller of the seller's obligations under 42 U.S.C. 4852(d) and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.

Seller: _____ Date: _____ Seller: _____ Date: _____

Agent: _____ Date: _____ Agent: _____ Date: _____

Purchaser: _____ Date: _____ Purchaser: _____ Date: _____

**LAST
PAGE
OF THIS
DOCUMENT**