#### LAW OFFICES FINGER & FINGER A professional corporation

KENNETH J. FINGER DOROTHY M. FINGER CARL L. FINGER \* DANIEL S. FINGER\*\*

> \* Admitted in N.Y. & Ct. \*\* Admitted in N.Y. & N.J.

Dear Prospective Cooperator:

Annexed hereto you will find the application that must be completed and signed in order for your application to become a Cooperator at Fleetwood Park Corp. to be processed. Please note that the application must be 100% complete for it to be accepted and reviewed by the Board. We are required to return incomplete applications to you and that will delay the process and cause additional fees to be incurred.

The following fees must be submitted with the application:

- 1. \$300.00 payable to Fleetwood Park Corp.
- 2. \$250.00 payable to Finger & Finger, A Professional Corporation

The Purchaser is also responsible for the following fees which may be incurred prior to closing:

a. Completion of any documents/questionnaire for lending institution: \$250.00

When your application is COMPLETE, with all supporting documentation, please submit four (4) copies of the application to Finger & Finger, A Professional Corporation. All questions must be answered either with the requested information or "not applicable" if question does not apply. No interview will be scheduled until a complete application including any necessary supporting documentation has been submitted, including a loan commitment if you will be receiving financing to purchase the cooperative unit, and all of the above fees. When the interview is scheduled all prospective shareholders AND all prospective residents of the apartment must attend the interview.

# If your application is incomplete in any fashion, we are required to reject the application and return it to you. A reprocessing fee of \$175.00 will be required to be submitted with the completed application.

We wish you the best of luck in your purchase and look forward to welcoming you in your new home as Cooperators.

Very truly yours, <u>ca@fingerandfinger.com</u> (914) 949-0308 Ext. #4 *Finger & Finger A Professional Corporation* 

158 Grand Street White Plains, New York 10601 914 949-0308

## **COOPERATIVE APPLICATION**

Please initial indicating the inclusion of each of the following items:

 Application form.
 Credit Report authorization.
 Criminal background and sex offender registration authorization.
 Financial Statement for each applicant and supporting documentation.
 Two most recent income tax returns.
 Most recent pay stub.
 W-2 Form.
 Landlord reference letter from current landlord.
 Two personal letters of reference.
 Two professional letters of reference.
 Completed verification of depository.
 Completed verification of employment.
 Loan Application (if financing).
 Loan Commitment (if financing).
 Contract of Sale.
 Processing fee payable to Finger & Finger.
 Additional supporting documentation (if any)

I hereby certify that the attached application is complete and true. I am submitting the entire application and all supporting documentation herewith. I understand that this application will be considered in its current form (subject to receipt of the depository verification and employment verification) by Finger & Finger and that the Cooperative Corporation is relying on this representation and the veracity of the information contained in this application.

#### **TO: FINGER & FINGER, A PROFESSIONAL CORPORATION**

#### **RE: CREDIT REPORT**

Subject Information: Please Print:			
Applicant Name:		Home Phone:	
Current Address:	City:	ST:	Zip:
Previous Address:	City:	ST:	Zip:
Previous Address:	City:	ST:	Zip:
Social Security Number:	Sex:	Date of Birth:	
Drivers License Number:	S	State:	
Co-Applicant Name:		_ Home Phone:	
Current Address:	City:	ST:	Zip:
Previous Address:	City:	ST:	Zip:
Previous Address:	City:	ST:	Zip:
Social Security Number:	Sex:	Date of Birth:	
Drivers License Number:	s	State:	

In connection with this application made by myself, I understand that investigative background inquiries may be made on me concerning matters of consumer credit, criminal convictions, motor vehicle information and/or other reports. These reports can include information as to my character, work habits, performance, education and experience along with

reasons for termination of employment from previous employers, if any. I understand that you may be requesting information from various Federal, State, and other agencies which maintain records concerning past activities relating to my credit, criminal, driving, civil and other records and experiences, including claims involving me, in the files of insurance companies, if any.

I authorize, without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from any liability and/or responsibility for doing so. I hereby consent to any potential landlord's or members of the corporation, company, or partnership managing or owning the property where I have applied for residence, obtaining the such information from T-R Information Services and/or any of their agents. This authorization and consent shall valid in an original, fax or copy form.

I authorize Finger & Finger, A Professional Corporation to obtain the above mentioned information including the credit report, and to disseminate the report as necessary for the processing of my application.

Applicant's Signature: X	Date:
Applicant's Signature: X	Date:

## **RELEASE OF INFORMATION AUTHORIZATION**

## AUTHORIZATION TO OBTAIN A CRIMINAL REPORT AND SEX OFFENDER <u>REPORT</u>

I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR INSTITUTION TO RELEASE TO THE COOPERATIVE FOR WHICH I AM MAKING APPLICATION TO PURCHASE AND/OR ITS REPRESENTATIVE ANY AND ALL INFORMATION THAT THEY HAVE CONCERNING ANY CRIMINAL ACTIVITY AND SEX OFFENDER HISTORY. 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
Signature:	
Address:	
City:	
State :	Zip Code:
Social Security #:	

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Print Name:	Date Of Birth
Signature:	
Address:	
City:	
State :	Zip Code:
Social Security #:	

#### **COOPERATIVE APPLICATION**

APPLICANT'S NAME:	SS#	
CO-APPLICANT'S NAME:	SS#	
HOME ADDRESS:		
CITY:	STATE/ZIP CODE:	
YEARS AT RESIDENCE:	RENT/OWN:	
IF RENTED, MONTHLY RENT:		
IF OWNED, MONTHLY PAYMENTS:		
HOME TELEPHONE NUMBER:		
BUSINESS TELEPHONE NUMBER:		
OCCUPATION OF APPLICANT:		
BUSINESS OR EMPLOYER:		
EMPLOYER ADDRESS:		
LENGTH OF EMPLOYMENT:		
OCCUPATION OF CO-APPLICANT:		
BUSINESS OR EMPLOYER:		
EMPLOYER ADDRESS:		
LENGTH OF EMPLOYMENT:		
ESTIMATED ANNUAL INCOME:		
WAGES; APPLICANT <u>: \$</u>	CO-APPLICANT: <u>\$</u>	
OTHER: APPLICANT: \$	CO-APPLICANT: \$ ed upon request)	

Please list name, relationship and age of each person who will reside with you in the apartment.

NAME	RELATIONSHIP	AGE
	<b>KLL/TIONDIII</b>	non

#### PRESENT LANDLORD:

NAME:		_
ADDRESS:		-
CITY:		
PHONE:		_
DATE OF OC	CUPANCY : From	_to
PRESENT MC	ONTHLY RENTAL: \$	

### COOPERATIVE APARTMENT TO PURCHASE:

Apartment Number:Street Address:		
Ownership as: Joint tenantsor Tenants in Common		
(name or names must be entered above as you wish your stock certificate and other	er documents to be drav	vn)
APPLICANT'S ATTORNEY:		
Name:		_
Firm:		_
Address:		_
Telephone:       ()       Fax ()		-
Purchase price of stock/apartment <u>\$</u>	<u>.</u>	
Present Estimated Carrying Charge per month \$	<u>.</u>	
SPECIAL CONDITIONS		
Financing? YESNOAMOUNT \$	_	
BANK	_	
TERM	_	
INTEREST	-	
Do you or any prospective occupants have any pets? Yes:Pet:	_No:	
Do you plan alterations to the Apartment? Yes:Type:	_No:	-
Do you or any prospective occupants play a musical instrument? Yes:	Instrument:	<u>No:</u>
Do you own an automobile? Yes:Number:No:		
Do you have any lawsuit by our against you pending in a Court of Law?	If so, provide of	letails.
Have you ever been evicted from rental premises or been involved in a Lawsuit v If yes, please explain.	with a past or present la	ndlord?

If the applicant has any additional information which may be pertinent or helpful, please submit same on additional pages.

#### FINANCIAL STATEMENT

I. <u>ASSETS</u>: Please provide the following information regarding Checking Accounts, Savings Accounts, IRAs, Insured Market Rate Accounts, CDs, Brokerage Accounts and others (ATTACH LATEST STATEMENT):

Financial Institution or Bank or Brok	terage Account
Address of Institution or Branch	
Type of Account	Name of Owners (singly / jointly)
Account Number	Approximate Balance
Financial Institution or Bank or Brok	terage Account
Address of Institution or Branch	
Type of Account	Name of Owners (singly / jointly)
Account Number	Approximate Balance
Financial Institution or Bank or Brok	terage Account
Address of Institution or Branch	
Type of Account	Name of Owners (singly / jointly)
Account Number	Approximate Balance

Address of Institution or Branch	
Type of Account	Name of Owners (singly / jointly)
Account Number	Approximate Balance
Address of Home (if owned)	
City	State
	Name of Owners (singly / jointly)

**LIABILITIES**: Please include all mortgages, credit cards, auto loans, leases, finance company loans and/or monthly obligations and debts owed by you. (ATTACH LATEST STATEMENT(BUT NOT CREDIT CARD PURCHASES): (add pages if necessary)

Creditor	Name of Debtor (Individual or Joint)
Address of Creditor	
Type of Account	Monthly Payment
Account Number	Approximate Balance left to pay
Creditor	Name of Debtor (Individual or Joint)
Address of Creditor	
Type of Account	Monthly Payment
Account Number	Approximate Balance left to pay
Creditor	Name of Debtor (Individual or Joint)
Address of Creditor	
Type of Account	Monthly Payment
Account Number	Approximate Balance left to pay

Applicant and Co-Applicant hereby authorize the above-named banks to disclose to Cooperative and the Board of Directors of Cooperative, and the Application or Interview Committee of the Cooperative, and Finger & Finger, A Professional Corporation, all relevant information regarding the status of all their checking and saving accounts, including average balances, length of time open, etc.

The undersigned applicant(s), desiring to purchase the shares of stock of the Cooperative Corporation, hereafter known as the "Corporation" allocable to the above Apartment, and to assume the Proprietary Lease in connection therewith, hereby certifies: That the above information is complete and correct, and that applicant has read, is familiar with and agrees to comply with all the provisions of the Proprietary Lease and the House Rules of the Corporation. Applicant understands that the consent of the Corporation's Board of Directors is required under the Proprietary Lease to the proposed assignment thereof, that the Board of Directors will rely on the information furnished above, and that information requested is essential to any decision made with respect to this application. The applicant agrees that he or she and/or spouse will meet in person with representatives of the Corporation and hereby consents to verification by the Corporation of all matters set forth herein, including appropriate credit investigation.

The applicant(s) also authorize the Cooperative Corporation or Finger & Finger, A Professional Corporation, to make inquiry of any credit reporting agency such as "TRW" and obtain information as to credit standing of the applicant(s).

The undersigned has filled out the information sheet following and understands that this information is essential in considering this application. It is further understood that this application is subject to approval by the Cooperative Corporation. This proposal shall result in no legal obligation on the part of the Cooperative Corporation and all information submitted becomes the property of the Cooperative Corporation and will not be released to the applicant.

Applicant(s) acknowledge that:

1. Neither the Corporation, nor its officers, nor its transfer agents shall have any liability or responsibility with respect to any matter or concerning any act of proposed seller or any real estate or mortgage broker in connection with any contract or undertaking contemplated herein.

2. If any information provided by the seller or prospective purchaser is false or incorrect and the Board of Directors of the Cooperative Corporation relies on this false information to its detriment, then the seller or purchaser as the case may be agrees to indemnify and hold the Board harmless for any damages that may arise by their (the Board's) approval of the assignment.

3. Neither the Corporation nor its officers, nor its transfer agents have made any representation with respect to the value of shares of stock or the Proprietary Lease covering the subject apartment, nor any recommendation to the prospective purchaser with respect to the advisability of the purchase thereon.

4. Any false, willful or material misrepresentation stated in the application by the purchaser will be construed as material breaches of the Lease resulting in summary eviction proceedings against the tenant shareholder. The undersigned hereby affirms that the information contained in this application is true and accurate to the best of the belief of the undersigned,.

#### APPLICANT'S SIGNATURE:\_\_\_\_\_

#### APPLICANT'S SIGNATURE:

Dated:\_\_\_\_\_

## **REQUEST FOR VERIFICATION OF DEPOSIT**

INSTRUCTIONS: Please complete, sign, and return with completed application to:

*Finger & Finger, A Professional Corporation* 158 Grand Street White Plains, New York 10601

PART I: APPL	ICANT INFORMA	ΓΙΟΝ	
Applicant(s) Name(s	):	<u></u>	
Depository Name: Depository Address:			
Account: Type	Name	Number	Balance

Applicant Statement: I have applied to purchase a cooperative and stated the presence of deposits with you as shown above. You are authorized to verify this information and to supply the attorneys identified above with the information requested in Part II. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or its officers.

## Applicant(s) Signature(s):\_\_\_\_\_

Account: Type		Name		Number		Balance	
Loans Outs Loan:	standing to Ap	plicant:					
No.	Date	Orig. Amt.	Balance	Paymt.Amt.	Security	# Late Paymts	

Remarks and Additional Information which may be of assistance in determining credit worthiness:

VERIFICATION:	
Signature of Depository:	
Title:	
Date:	

## **REQUEST FOR VERIFICATION OF EMPLOYMENT**

INSTRUCTIONS: Please complete, sign, and return with completed application to:

Finger & Finger, A Professional Corporation 158 Grand Street

White Plains, New York 10601

PART I:	A PDI IC A NT	INFORMATION		
Applicant Na				
Applicant Ac				
Applicant Ac	<u> </u>			
Employer Na	me:			
Employer Ad				
	authorizes verificat	pplied to purchase a c	cooperative and stated	that I am now or formerly was employed by you. My he applicable section below.
PART II:	CURRENT EI	MPLOYMENT		
Applicants D	ate of Employm	ent:		
Applicant's H	Present Position:			
Probability of	f Continued Emp	oloyment:	Period:	
Current Base				
		(i.e. annu	ally, monthly, wee	kly, hourly, other - specify)
Earnings:		Year to Date	Past Year	
	Base Pay			
	Overtime			
	Commissions			
	Bonus			
If Overtime of	or Bonus is Appl	icable, is its conti	nuance likely:	Overtime:
				Bonus:
Remarks:				
PART III:	PAST EMPLO	DYMENT		
Dates of Emp	ployment:			
1	mination: Amour	nt: \$	Period:	
•				kly, hourly, other - specify)
Position Held	d:	•		
Reason for L	eaving:			
VERIFICAT	0			
Signature of				
Title:	2			Date: