

# INTERLAKEN OWNERS, INC.

Self-Managed, Garden Cooperative Apartments  
87 Mill Road  
Eastchester, New York 10709-1300  
Telephone (914) 961-2200 Fax (914) 961-2410  
87millroad@optonline.net

## PURCHASE APPLICATION INSTRUCTIONS

Please read these Purchase Application Instructions carefully before submitting your information to the Interlaken Management Office. Applications must be notarized and contain all of the necessary documents. Incomplete applications will not be processed.

The Contract of Sale, Bank/Mortgage Company Commitment, Recognition Agreement (Aztec wording), Purchase Application and Proof of Homeowners Insurance must all contain accurate and identical information. All five (5) documents must exactly match in name, any middle initials or middle names of the potential shareholder(s) as they will appear on the Stock Certificate.

**If one or more persons are purchasing the apartment, the Contract of Sale should also be written as:**

- As Joint Tenants with the right of survivorship; or,
- As Joint Tenants in common.

**\*\*TO THE BUYER - PARKING SPACES & GARAGES ARE NOT INCLUDED WITH THE SALE. TO RENT A PARKING SPACE AT AN ADDITIONAL \$45 PER MONTH, OR A GARAGE AT AN ADDITIONAL \$75 PER MONTH, PLEASE STOP AT THE MANAGEMENT OFFICE (AFTER YOUR CLOSING) AND HAVE YOUR NAME PLACED ON THE WAITING LIST.**

**Spouses/Partners and children over the age of eighteen (18) who will be residing in the apartment require a background check. The fee for this service is \$150 per person.**

The prospective buyer(s) is/are required to provide a complete package of the following documents:

The completed Purchase Application form  
Employer Letter - on corporate letterhead - stating length of employment & annual salary  
Copies of the last two (2) years of W-2 & 1040 forms  
Copies of the last three (3) months of bank account statements  
The Contract of Sale signed by both the Seller(s) and the Buyer(s) with the correct apartment address and building number (i.e., not 1-L or 2-R)  
Lead Disclosure signed by both the Seller(s) and Buyer(s)  
Proof of Homeowners Insurance

The non-refundable Application Fee of \$450 by check or money order, payable to Interlaken Owners, Inc. By paying this fee you are giving consent for the Co-op to order a professionally conducted background check which includes a national criminal background search and credit checks

A \$100 fee (separate from the Application Fee) if a Co-op Form is required

A \$250.00 Sellers Move-out Fee by Check: A \$50 inspection fee (non-refundable) will be charged to seller(s) payable before closing. The balance (\$200) will be returned to the seller(s) after the move-out if no damages are found.

A \$250.00 Buyers Move-In Fee: The Move-In Fee and Move-In Form must be submitted to the Management Office prior to the closing on the apartment.

The Interlaken Owners Prospectus & Amendments are available for a two week rental and \$200 deposit.

If a mortgage is involved:

Three (3) signed, original Bank Recognition Agreements, which must be Aztech wording.

The Commitment Agreement from the bank or mortgage company must be signed by both the bank's representative and the buyer(s).

**All fees must be paid by check or money order, payable to Interlaken Owners, Inc.**

Other than a date set in the Contract of Sale (for the purposes of financing only), a closing date on the cooperative unit should not be scheduled until the prospective purchaser(s) are interviewed and approved by the Interlaken Board of Directors.

Your prospective purchaser(s) will be notified by phone as to the date and time of their interview with the Board. Interviews are conducted twice a month, in the evening (to be determined by the Board). Please allow time for the results of the background and credit check to become available and for the Management Office and the Board to review the completed purchase application.

All persons listed on the stock certificate must be present at the Board Interview. In addition, all persons who will be residing in the apartment must be interviewed.

The prospective shareholder should call the Management Office after 1:00 p.m. the day after the interview to learn of the Board's decision. If the buyer(s) are approved, their attorney should contact Interlaken Owners' attorney via email to schedule a closing date. A minimum of one week's notice is required for a closing date.

The buyer pays \$350 fee to counsel for lease/stock (payable to Novick, Edelstein, Lubell, Wasserman & Leventhal, PC)

# PURCHASE APPLICATION

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STREET ADDRESS: \_\_\_\_\_ UNIT- APT: # \_\_\_\_\_ SHARES: \_\_\_\_\_  
PURCHASE PRICE: \$ \_\_\_\_\_ MONTHLY MAINTENANCE: \$ \_\_\_\_\_  
AMOUNT OF FINANCING: \$ \_\_\_\_\_  
DEPOSIT ON CONTRACT: \$ \_\_\_\_\_ PROPOSED CLOSING DATE: \_\_\_\_\_  
SPECIAL CONDITIONS, IF ANY: \_\_\_\_\_

SELLER(S): \_\_\_\_\_ SS#: \_\_\_\_\_  
\_\_\_\_\_ SS#: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

ATTORNEY: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

FIRM: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

PURCHASER: \_\_\_\_\_ SS#: \_\_\_\_\_  
D/LI: \_\_\_\_\_

CELLPHONE#: ( ) \_\_\_\_\_ HOME #: ( ) \_\_\_\_\_

CO-PURCHASER: \_\_\_\_\_ SS#: \_\_\_\_\_  
D/LI: \_\_\_\_\_

CELLPHONE#: ( ) \_\_\_\_\_ HOME #: ( ) \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

ATTORNEY: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_ FAX: ( ) \_\_\_\_\_

FIRM: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

NAME(S) COOPERATIVE STOCK WOULD BE HELD IN: \_\_\_\_\_

REALTOR: \_\_\_\_\_ AGENCY: \_\_\_\_\_ PHONE: \_\_\_\_\_

MORTGAGE: \_\_\_\_\_ CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

ATTORNEY: \_\_\_\_\_ FIRM: \_\_\_\_\_ PHONE: \_\_\_\_\_

**PERSONAL INFORMATION REGARDING APPLICANT(S)**

DATE \_\_\_\_\_, 20\_\_\_\_

**APPLICANT**

**CO-APPLICANT**

<b>NAME:</b>	_____	_____
<b>ADDRESS:</b>	_____	_____
<b>DATES OF RESIDENCE:</b>	_____ <b>TO</b> _____ <b>RENT/OWN/BOARD</b>	_____ <b>TO</b> _____ <b>RENT/OWN/BOARD</b>
<b>DO YOU OWN A CAR:</b>	<b>VECHILE #1</b> _____	<b>VECHILE #2</b> _____
<b>OCCUPATION:</b>	_____	_____
<b>NATURE OF BUSINESS:</b>	_____	_____
<b>EMPLOYER:</b>	_____	_____
<b>ADDRESS:</b>	_____	_____
	_____	_____
<b>PERIOD OF EMPLOYMENT:</b>	_____ <b>TO</b> _____	_____ <b>TO</b> _____
<b>POSITION HELD:</b>	_____	_____
<b>PRIOR EMPLOYER AND POSITION OR RESIDENCE IF LESS THAN 3 YEARS:</b>	_____	_____
<b>INCOME ESTIMATE FOR THIS YEAR:</b>	_____	_____
<b>ACTUAL INCOME LAST YEAR:</b>	_____	_____
<b>OF WHAT COUNTRY ARE YOU A CITIZEN:</b>	_____	_____
<b>EDUCATIONAL BACKGROUND (OPTIONAL):</b>	_____	_____
	_____	_____

**ADDITIONAL INFORMATION REGARDING APPLICANTS**

**Names and relationships of all persons who will reside in the Apartment:** \_\_\_\_\_  
\_\_\_\_\_

**Names of anyone in Interlaken Owners known to Applicant:** \_\_\_\_\_

**Are any pets to be maintained in the apartment? If yes indicated number and kind:** \_\_\_\_\_

<b>SCHEDULE OF BONDS AND STOCKS (please complete on the reverse side of this page, if necessary)</b>					
Amount of Shares	Description (Extended Valuation in Column)	Marketable Value	Non-Marketable Value		
<b>SCHEDULE OF REAL ESTATE</b>					
Description and Location	Cost	Actual Value	Mortgage Amount	Maturity Date	
<b>SCHEDULE OF NOTES PAYABLE (please complete on the reverse side of this page, if necessary)</b>					
Specify any assets pledged as collateral, including the liabilities they secure:					
Balance Due	Date	Purpose	Payable To	Monthly Payments	Comments

**PLEASE DISCLOSE THE FOLLOWING. IF YES, PROVIDE THE REASON**

- Bankruptcy**      NO      YES      \_\_\_\_\_
- Foreclosure**      NO      YES      \_\_\_\_\_
- Litigation**      NO      YES      \_\_\_\_\_
- Unpaid judgments**      NO      YES      \_\_\_\_\_
- Salary garnishments**      NO      YES      \_\_\_\_\_
- Alimony payments**      NO      YES      \_\_\_\_\_

**Prior rejections by other Co-op or Condo Boards**      NO      YES (if YES, provide name and address of the property)

The undersigned hereby applies to obtain the consent of the Board of Directors of Interlaken Owners, Inc. to the transfer and assignment of the Proprietary Lease for the indicated apartment and related shares of stock. This application is required to be completed by proposed purchasers for the information of the Board of Directors of Interlaken Owners, Inc.

In applying for consent to this proposed sale, the undersigned understands that such consent is required by the terms of the Proprietary Lease. The undersigned also understands that the information outlined within is essential to this application. If it is desired to inspect the undersigned's present place of residence, arrangements may be made to do so. The undersigned and all intended occupants of the apartment will meet in person with representatives of the cooperative apartment corporation if requested to do so.

The undersigned agrees to waive any claim against the Board of Directors or Interlaken Owners, Inc. to recover any expenses or liabilities, which I/we incur in connection with the application process. Neither the Board of Directors nor Interlaken Owners, Inc. is responsible for the consequences of any delay in processing the application, or any other expenses incurred during the process, nor rejection of same. I/we acknowledge that the Board of Directors is not required to give any reason for rejection, and that I/we will be bound by the Board's decision.

**The foregoing application (pages 1 through 3) has been carefully prepared, and the undersigned hereby solemnly declare(s) and certify that all the information contained herein is true and correct.**

Date \_\_\_\_\_ 20\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_ 20\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_ 20\_\_

\_\_\_\_\_

Notary

# Credit Check Application Form

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Apartment Applying for: \_\_\_\_\_ Apt# \_\_\_\_\_ Move in: \_\_\_\_\_

## Applicant

Name \_\_\_\_\_ SS# \_\_\_\_\_

Phone # ( ) \_\_\_\_\_ Cell # ( ) \_\_\_\_\_ DOB Appl: \_\_\_\_\_

Dr. Lic. or State issued ID Appl. \_\_\_\_\_ State \_\_\_\_\_

Current Address \_\_\_\_\_ City St \_\_\_\_\_ Zip \_\_\_\_\_

(If current address is less than 3 years)

Previous Address \_\_\_\_\_ City St \_\_\_\_\_ Zip \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor? Yes No

If yes, please explain:

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## Current Landlord Information

Property Name or Property Management Co. \_\_\_\_\_

Landlord or Contact Name \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Landlord Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Monthly Rental Amount \_\_\_\_\_ Resided on premises From: \_\_\_\_\_ To: \_\_\_\_\_

## Employment Information

Employer/Company Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Position **Salary \$** \_\_\_\_\_ Start Date/Length of Employment \_\_\_\_\_

Employers email address \_\_\_\_\_

*I confirm that all the information supplied is true and correct. I understand that I can be turned down for the apartment if I have falsified any information on this application. I hereby authorize the verification of all above information by ATS, Inc. including my credit, housing court filings, rental, check writing, employment history including salary, and criminal background.*

Applicant's Signature \_\_\_\_\_ DATE \_\_\_\_\_

**Disclosure of information on Lead-Based Paint and/or 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**

(a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):

(i) IOI Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

Please refer to Phase I Environmental Site Assessment dated 7/20/95

(ii) \_\_\_\_\_ 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 (i) or (ii) below):

(i) IOI 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).

Please refer to Phase I Environmental Site Assessment dated 7/20/95

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

**Purchaser's Acknowledgment (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 (i) or (ii) below):

(i) \_\_\_\_\_ 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

(ii) \_\_\_\_\_ 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 they have provided is true and accurate.

<u>[Signature]</u> Seller	<u>1-22-17</u> Date	_____	Seller	_____	Date
INTERLAKEN OWNERS, INC.		_____	Purchaser	_____	Date
Purchaser	_____	Date	Purchaser	_____	Date
Agent	_____	Date	Agent	_____	Date



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**MOVE IN — MOVE OUT POLICY**

1. The rules for moving in or out of Interlaken Owners will be as follows:

- a. Monday through Saturday only between the hours of 8:30 a.m. to 4:00 p.m.;
- b. Interlaken Management Office must be notified at least one (1) week in advance;
- c. Buyers submit refundable move-in deposit of \$250.00 in a check.
- d. Sellers must submit a \$50 Inspection fee in a check (NONREFUNDABLE).
- e. Sellers must submit a refundable move-out deposit of \$200.00 in a check. If there is any damage to Interlaken common areas, it will be deducted from the deposit.

Name of shareholder: \_\_\_\_\_

Signature of shareholder: \_\_\_\_\_

Address of shareholder: \_\_\_\_\_

Date of Move in/Move Out: \_\_\_\_\_

Estimated time: \_\_\_\_\_

Date

Interlaken Owners, Inc.

## **INTERLAKEN OWNERS, INC.**

*"The Lake Community of Eastchester Since 1940"*  
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### **BUYER'S FEE SCHEDULE**

(subject to change)

- **Application Fee**  
\$450
- **Background Check Fee**  
\$150 for each additional person over age 18
- **Move-In Fee**  
\$250 (refundable if no damage is done)
- **Completion of Co-op Questionnaire, if required by mortgage lender**  
\$100
- **Co-op's Prospectus (if required by the Buyer's attorney or mortgage lender)**  
\$200 deposit for 2 week rental of document
- **Buyer fee for lease/stock payable to Novick, Edelstein, Lubell, Wasserman & Leventhal, LLC, the Coop's Attorneys based on the location of the transfer (closing) \$350**
- **If closing scheduled and then cancelled by Buyer \$350**
- **Power of Attorney review \$350**