

200 East 16th Street Housing Corp.

200 East 16th Street
New York, NY 10003

PROCEDURE FOR RESALE OF APARTMENTS

The Board of Directors of 200 East 16th Street Housing Corp. has established policies and procedures for the consideration and approval of the resale of an apartment in this Cooperative.

Enclosed please find a Purchase Application Package. All of the requested documents must be submitted to:

**Orsid Realty Corp 109-15
1740 Broadway
New York, NY 10019
Attention: Yajaira V. Crespo – Colon**

***Contact information for Linda Romano: Direct: 212-484-3741 & Email: lromano@orsidr.com

in one (1) original set

Should you fail to follow these instructions exactly, the package will be returned to you for correction and will delay processing of your package for Board approval. **Only completed packages will be sent to the Board of Directors for review.**

PLEASE NOTE THAT ONLY CERTIFIED CHECKS, OFFICIAL BANK CHECKS OR MONEY ORDERS ARE ACCEPTED.

The following fees are payable upon submission of the Sale Application:

- Non-refundable processing fee in the amount of **\$350**, payable to **Orsid Realty Corp.**
- Non-refundable credit report fee in the amount of **\$75 PER APPLICANT**, payable to **Orsid Realty Corp.**
- **A Non-Refundable Criminal and DMV Background Fee in the amount of \$200 per applicant/occupant.** Please make the check payable to **Orsid Realty Corp.** (Please note that everyone over the age of 18 must complete the authorization form).
- Financing fee in the amount of **\$250**, payable to **Orsid Realty Corp.** This fee is applicable only if financing and is refunded if the applicant is not approved.
- Refundable move-out deposit from the shareholder in the amount of **\$500**, payable to **200 East 16th Street Housing Corp.**
- Refundable move-in deposit from the purchaser in the amount of **\$500**, payable to **200 East 16th Street Housing Corp.**

Please Note:

- **MAXIMUM FINANCING ALLOWED: 80%**
- **APPLICATIONS MAY TAKE UP TO 3 WEEKS FOR PROCESSING. •**

FLIP TAX IS 3% OF THE PURCHASE PRICE DUE BY SELLER.

- **BOARD INTERVIEWS ARE SCHEDULED EVERY 3rd MONDAY OF THE MONTH. THE SUBMISSION MUST BE MADE AT LEAST 3 WEEKS PRIOR TO THE SCHEDULED INTERVIEW DATE. THERE IS ONE INTERVIEW DATE SCHEDULED PER MONTH. LATE SUBMISSIONS WILL HAVE TO WAIT UNTIL THE NEXT SCHEDULED INTERVIEW DATE.**
- **Please note that all applicants and occupants age 18 and over must complete the criminal authorization form and provide two reference letters. If employed, an employment letter is required. If enrolled in school, a letter from the school confirming the enrollment status is required.**
- **All applicants/occupants ages 18 and over must sign the building acknowledgement forms.**
- **All applicants/occupants ages 18 and over must be present to be interviewed by the Board.**
- **Full paged bank statements for all accounts listed on the financial condition statement are required.**
- **Please note that if a submission is made before the tax filing deadline, the most recent W2 issued will be required in addition to the completed tax returns requested within the application.**
- **For applicants who own real estate, please provide a letter from the Management Office for all properties. In addition, the Real Estate/School Tax invoices are required for all properties. If you are receiving rental income, a copy of an executed lease agreement is required.**
- **If this is an Estate Sale, please provide a copy of the Death Certificate and a copy of the Letters Testamentary/Letters of Administration either before the submission or with the submission. Applications will not be processed if the estate documents are not submitted.**
- **If the seller or buyer are being represented by a POA (power of attorney representative), please make sure to include a copy of the POA within the submission along with a full force affidavit if the POA was issued over 12 months ago (please contact your attorney for further details).**

Please Note: Move in/out security deposits are refundable only after the move is complete, the House Rules have been adhered to, and no damage has been done to any part of the building.

These fees do not include any closing fees imposed either by this office or the attorney for the Cooperative Corporation or any closing agent. The Managing Agent's processing fees may include, but are not be limited to, financing fees, postage reimbursements, fees in connection with the drafting of documents such as maintenance escrows or security deposits, purchases by a Trust or any non-individual entity, purchases with Guarantors, etc. In addition, the Cooperative's attorney may also charge fees in connection with review or drafting of documents in connection with this purchase.

If your application is approved, your attorney will receive a full set of closing instructions setting forth closing procedures, requirements, and fees. Please check with your attorney prior to closing for a list of such charges.

If you have any questions regarding move in policies or renovation procedures, please contact the Assistant Property Manager assigned to your building. Please note Renovation Packages will not be forwarded to the Board for approval until a closing has occurred. In addition, moves into a building cannot occur on the day of closing without prior arrangement with the Superintendent for the building, and until the appropriate insurance certificate has been forwarded to this office.

Very truly yours,

Orsid Realty Corp.

**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, you're Attorney. Please advise all parties involved and provide them with the broker's 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 e-mail addresses below and advise who the point person (main contact) is. Please be advised that all parties will not be called/e-mailed, only the main contact.

Brokers: replace your purchase and lease applications every three (3) months to make sure you have a current one. Submission of old packages will cause delays in the processing. Call our office and updated packages will be e-mailed to you.

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

MOST REQUESTED ITEMS FOR 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 Orsid Realty Corp.* 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>
Bank Questionnaire	\$150	Linda Romano	lromano@orsidr.com 212-484-3741	Please mail \$150 with questionnaire and reference the Building & Apartment #.
Building Insurance	No Charge	Elizabeth Castillo	ecastillo@orsidr.com 212-484-3771	Front Desk will provide Insurance Broker's name and phone number.
Financials	\$15	Linda Romano	lromano@orsidr.com 212-484-3741	Please note we charge \$15 for each year. Payment must be received with request
By-Laws	No Charge	Elizabeth Castillo	ecastillo@orsidr.com 212-484-3771	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:

**Orsid Realty Corp.
1740 Broadway
New York, NY 10019**

**200 EAST 16 STREET HOUSING CORP.
200 EAST 16 STREET, NEW YORK, N.Y. 10003**

***RESOLUTIONS PASSED BY THE
BOARD OF DIRECTORS***

At a meeting of the Board of Directors held on October 24, 2005, the majority of the Board passed the following Resolutions pertaining to the sale of apartments:

IT IS RESOLVED THAT sale of apartments to individuals purchasing on behalf of a full-time student will not be approved.

IT IS FURTHER RESOLVED THAT the sale to an individual purchasing on behalf of a non-student will be considered by the Board if the purchaser is included as a co-shareholder with the non-student on the stock certificate and Proprietary Lease.

IT IS ALSO RESOLVED THAT all prospective shareholders and roommates who will reside in an apartment on a full-time or part-time basis after said purchase be present at the sale interview conducted by the Board of Directors.

-BOARD OF DIRECTORS

200 E. 16th Street
PURCHASE APPLICATION

Managed by:

Orsid Realty Corp.
1740 Broadway
New York, New York 10019
212-586-4524

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SECTION I

CO OPERATIVE PURCHASE APPLICATION

COOPERATIVE PURCHASE APPLICATION

Purchaser: _____

Purchaser: _____

Purchaser's Attorney: _____ Telephone: _____

Attorney's Firm and Address: _____

Building: _____ Apartment No.: _____

Number of Shares: _____ Monthly Maintenance: _____

Purchase Price: _____

Name on Stock Certificate and other documents: _____

Financing: _____ No _____ Yes Amount: _____

Bank: _____

Real Estate Broker: _____

Company: _____

Address: _____

Telephone : _____

Seller's Name: _____

Forwarding Address: _____ Telephone: _____

Seller's Attorney: _____ Telephone: _____

Attorney's Firm and Address: _____

Anticipated Closing Date: _____

Anticipated Date of Possession: _____

INFORMATION REGARDING PURCHASER(S)

Purchaser: _____

Home Address: _____

Length of Occupancy: _____

Telephone: _____

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:

INFORMATION REGARDING PURCHASER(S)

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: _____

INFORMATION REGARDING PURCHASER(S)
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 his/her/their knowledge and belief.

Signature of Purchaser/Applicant: _____

Signature of Spouse/Co-Applicant: _____

SECTION 2

AUTHORIZATION FOR CREDIT AGENCY, CRIMINAL BACKGROUND CHECK AND DRIVER'S LICENSE REPORT

CREDIT AGENCY AUTHORIZATION

AUTHORIZATION 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 NEED TO KNOW CREDIT REPORTING, WHICH AGENCY MAY OBTAIN, PREPARE AND FURNISH AN INVESTIGATIVE CONSUMER REPORT INCLUDING INFORMATION ON MY (OUR) 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.

Purchaser/Lessee (Print): _____

Social Security #: _____

Address: _____

Purchaser/Lessee Signature: _____

Purchaser/Lessee (Print): _____

Social Security #: _____

Address: _____

Purchaser/Lessee Signature: _____

Date: _____

**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: _____

OFFICE USE ONLY)

(FOR

TENANT DATA PLEASE RETURN TO:

JOHN B. LOVETT & ASSOCIATES

ATTN: YAJAIRA V. CRESPO-COLON

FAX 718 445-9704

BUILDING REFERENCE: 200 East 16th Street/APT# _____

RELEASE OF INFORMATION AUTHORIZATION
AUTHORIZATION TO OBTAIN A DMV REPORT

I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR
INSTITUTION TO RELEASE TO _____ AND/OR ITS
REPRESENTATIVE ANY AND ALL INFORMATION THAT THEY HAVE
CONCERNING ANY MOTOR VEHICLE REPORT PERTAINING TO
APPLICANT LISTED BELOW.

I HEREBY RELEASE THE INDIVIDUAL, COMPANY, OR INSTITUTION
AND ALL INDIVIDUALS CONNECTED THERE WITH 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 #: _____

Driver's License #: _____

State: _____

SECTION 3

FINANCIAL CONDITION (NET WORTH) (See also Section 11)

Please note that all information listed here should be documented in Section 11
Fill in all blanks, writing "NO" or "NONE" where necessary to complete information

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__

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 Valule):

Other Assets (Itemize): _____

Total Assets: _____

PURCHASER

Base Salary (W-2): _____

Self Employment Income: _____

Bonus & Commissions: _____

Dividends & Interest Income: _____

Real Estate Income (Net): _____

Other Income – itemize: _____

Total Annual Income: _____

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: _____

CO-PURCHASER

Base Salary (W-2): _____

Self Employment Income: _____

Bonus & Commissions _____

Dividends & Interest Income _____

Real Estate Income (Net): _____

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 filed 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. Of 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>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SCHEDULE OF REAL ESTATE

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

SCHEDULE OF NOTES PAYABLE

<u>To Whom Payable</u>	<u>Date</u>	<u>Amount Due</u>	<u>Interest</u>	<u>Asset 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 same is a full and correct exhibit of my/our financial condition.

Applicant's Signature: _____

Date: _____

Co-Applicant's Signature: _____

Date: _____

SECTION 4

**INSERT
CONTRACT OF SALE
HERE**

SECTION 5

**INSERT LOAN APPLICATION
INSERT COMMITMENT LETTER
& OTHER
FINANCING INFORMATION
HERE**

SECTION 6

**INSERT
SIGNED COPY OF LAST TWO (2) YEARS' TAX
RETURNS INCLUDING W-2 OR 1099'S AND
ALL SUPPORTING SCHEDULES AND
ATTACHMENTS FOR EACH APPLICANT.**

**PLEASE NOTE "TAX EXTENSIONS" WILL
NOT BE ACCEPTED BY THE BOARD FOR
REVIEW.**

SECTION 7

INSERT

**LETTER FROM CURRENT LANDLORD OR
MANAGEMENT COMPANY STATING LENGTH
OF TENANCY, AMOUNT OF RENT PAID, ETC.**

**IF APPLICANT(S) ARE SELLING ANOTHER
RESIDENCE, A COPY OF THE FULLY-
EXECUTED CONTRACT OF SALE FOR SUCH
RESIDENCE SHOULD BE INCLUDED.**

SECTION 8

**INSERT LIST OF ALL
PERSONAL LOANS
HERE**

SECTION 9

**INSERT
LETTER FROM EMPLOYER
STATING EMPLOYMENT PERIOD
& CURRENT SALARY
& COPY OF PAY STUBS**

**IF EITHER APPLICANT IS SELF-EMPLOYED A LETTER
FROM APPLICANT'S ACCOUNTANT AS DESCRIBED
HEREIN IS ACCEPTABLE.**

**IF APPLICANT IS RETIRED, PLEASE SUBMIT PENSION
AND/OR SOCIAL SECURITY INFORMATION.**

**IF THERE IS A DISCREPANCY BETWEEN THE SALARY
STATED IN THE LETTER OF EMPLOYMENT AND THE
PREVIOUS YEAR'S TAX RETURN, PLEASE PROVIDE A
WRITTEN EXPLANATION AND SUPPORTING
DOCUMENTATION.**

SECTION 10

**INSERT TWO (2)
BUSINESS AND TWO (2) PERSONAL
LETTERS OF REFERENCE FOR EACH
APPLICANT.**

**COUPLES BUYING AN APARTMENT
TOGETHER MAY SUBMIT "COMBINED"
PERSONAL REFERENCE LETTERS.**

SECTION 11

**INSERT
SUBSTANTIATING DOCUMENTATION
INCLUDING BANK, IRA, CD, AND ANY ALL
OTHER STATEMENTS FOR ALL
ASSETS LISTED IN SECTION 3**

SECTION 12

ACKNOWLEDGEMENTS
&
AUTHORIZATIONS

ACKNOWLEDGMENT OF SUBLET POLICY

**TO POTENTIAL PURCHASER/SHAREHOLDER 200 EAST 16TH STREET
RE: SUBLET POLICY OF 200 EAST 16TH STREET HOUSING CORP.**

I understand the following with regard to the Sublet Policy of the captioned cooperative:

1. Any Shareholder requesting permission from the Board of Directors to sublet their apartment must own shares in the Corporation for a period of one year prior to seeking Board permission to sublet their apartment.
2. All subtenants are subject to the application procedures of the Cooperative. The Shareholder must contact Orsid Realty Corp to coordinate the approval of a proposed subtenant.
3. A shareholder must be current in its obligation to the Cooperative (including payments of any and all documents due on their account, including maintenance, assessments and other charges) in order for a sublet to be considered. If a shareholder is delinquent in their obligations, no sublease will be considered until the shareholder is in good standing.
4. I further understand that any violation of this or any other aspect of the Sublet Policy will result in the immediate termination of the sublease and eviction of the subtenant. In addition, the shareholder will be subject to Sublet Fines, Legal Action and any corresponding fees resulting therefrom and the possible termination of their Proprietary Lease.
5. All subleases may only be for a one (1) year period with any subsequent year(s) of renewal or extension subject to the review and approval of The Board of Directors.

NO MOVE IN CAN OCCUR WITHOUT PRIOR APPROVAL OF THE BOARD OF DIRECTORS.

This sublet policy is subject to any and all sublet fees in effect at the time.

The policy is subject to change at any time and shareholder agrees to comply with any amended policy.

Agreed to:

Purchaser's Name

Date _____

Purchaser's Signature

Date _____

ACKNOWLEDGMENT OF PET POLICY

The undersigned purchaser of apartment _____ at 200 East 16th Street New York, NY represents that I/we will not possess any new/additional dogs in the future without the prior consent of the Board of Directors of the Cooperative Corporation in regard to my/our purchase of the above referenced apartment. This representation is made knowing that the Cooperative Corporation/Condominium Association is relying upon this statement and will consider approving the purchase/leasing of the aforementioned apartment based upon this representation.

The undersigned further represent that I/we are aware that any breach of this statement constitutes a material misrepresentation.

Print Name

Signature

Date

Print Name

Signature

Date



ORSID REALTY CORP.
REAL ESTATE MANAGEMENT

PLEASE NOTE YOU WILL BE CHARGED A FEE FOR INSTALLATION
WINDOW GUARDS REQUIRED

You are required by law (Section 131.15 of the New York City Health Code) to have window guards installed if a child ten (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 put in window guards at any time (you need not give a reason)
- If a child ten (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 ten (10) years of age or younger live in apartment
- _____ No children ten (10) years of age or younger live in my apartment
- _____ youngewant window guards even though I have no children ten (10) years of age or

PLEASE NOTE YOU WILL BE CHARGED A FEE FOR INSTALLATION

New Owner (Print)

New Owner's Signature and Date:

_____ Building and Apt. Address



ORSID REALTY CORP.

REAL ESTATE MANAGEMENT

Date: _____ Re: Apt. _____

In connection with your proposed purchase of the above captioned apartment, please acknowledge by signing where indicated, and return a copy with your application. Please be advised that with respect to the term "renovation" this includes: painting and floor scraping as well as any major alterations such as kitchen or bathroom renovations, replacement of major plumbing fixtures, electrical work in the apartment, etc. Prior to beginning any work, please contact the Managing Agent to review the required procedures for your job in detail.

The approval process includes BUT IS NOT LIMITED TO submission of the following:

1. The scope of work to be performed, together with any proposed plans and specs;
2. Proof of insurance of any and all contractors naming the Corporation and the Managing Agent as additional insureds;
3. The names and license numbers and phone numbers of any and all contractors and subcontractors;
4. The signed alteration forms to the Managing Agent;
5. Any other documents or requirements that the Corporation, Managing Agent or City agency may require
6. Payment of any renovation fee and deposit in an amount specified in the Renovation Agreement.

I understand that any work to be done in the apartment, including any major or minor renovation or cosmetic work project, will require the **prior** approval of the Board of Directors. I also understand that no work can be commenced in the premises **until** this approval is granted. I/We further understand that **non-compliance with this renovation policy may result in penalties up to and including the termination of my/our proprietary lease with the cooperative.**

This policy is subject to change or modification by the Board of Directors at any time.

Applicant's Signature

Co-Applicant's Signature

Date

200 East 16th Street Housing Corp. Moving Policies

Please be advised of the following policies regarding moving:

1. A \$500 refundable deposit, payable to 200 East 16th Street Housing Corp., must be received at least ten days prior to moving in or out.
2. All moves into the building must be pre-scheduled with the Superintendent of 200 East 16th Street Housing Corp, 212-254-7334.
3. The Superintendent requires no less than 2 business days' notice to schedule a moving date and time.
4. An alternate date and time will be suggested if the requested date and/or time is not available.
5. All moves into or out of the building must be pre-scheduled for Monday – Friday and commence no earlier than 9:00 a.m. and be fully completed no later than 4:00 p.m. No weekend moves or moves outside this timeframe will be permitted under any circumstances.
6. **No move in will be permitted prior to the closing date regardless of the reason.**
7. **Please also note that moves cannot occur on the closing date regardless of the reason.**
8. All moving companies must be insured and licensed in the State of New York.
9. A faxed copy of the mover's insurance policy showing proof of general liability and workers compensation coverage and naming 200 East 16th Street Housing Corp. and Orsid Realty Corp. as additional insureds must be sent to the attention of Yajaira V. Crespo at (718) 445-9704 at least 48 business hours prior to the move.
10. Upon completion of the move, please arrange for the Superintendent to perform an inspection. If it is ascertained that damage has occurred, the amount will either be deducted from the \$500 deposit or the purchaser will be billed for any difference, otherwise, the deposit will be refunded in full.
11. Any individual found to be in violation of this moving policy will forfeit their moving security deposit and may be subject to additional fines and penalties including any legal fees relating thereto.

AGREED AND ACCEPTED:

PURCHASER

DATE



Date: _____

I/We have received and read a copy of the House Rules and agree to abide by same:

Print Name of Purchaser

Signature of Purchaser

Print Name of Purchaser

Signature of Purchaser

Building Address and Apt. # _____

200 East 16th Street Housing Corp.

HOUSE RULES

1. The public halls and stairways of the building shall not be obstructed or used for any purpose other than ingress to and egress from the apartments in the building, and the fire towers shall not be obstructed in any way.
2. No patient of any doctor who has offices in the building shall be permitted to wait in the lobby.
3. No public hall above the ground floor of the building shall be decorated or furnished by an Lessee in any manner without the prior consent of all of the Lessees to whose apartments such hall serves as a means of ingress and egress; in the event of disagreement among such Lessees, the Board of Directors shall decide.
4. No Lessee shall make or permit any disturbing noises in the building or do or permit anything to be done therein which will interfere with the rights, comfort or convenience of other Lessees. No Lessee shall play upon or suffer to be played upon any musical instrument or permit to be operated a phonograph or a radio or television loud speaker in such Lessee's apartment between the hours of eleven o'clock p.m. and the following eight o'clock a.m. if the same shall disturb or annoy other occupants of the building. No construction or repair work or other installation involving noise shall be conducted in any apartment except on weekdays (not including legal holidays) and only between the hours of 8:30 a.m. and 5:00 p.m.
5. No awnings shall be used in or about the building except such as shall have been expressly approved by the Lessor or the Managing Agent, nor shall anything be projected out of any window of the building without similar approval.
6. No sign, notice, advertisement or illumination shall insured or exposed on or at any window or other part of the building, except such as shall have been approved in writing by the Lessor or the Managing Agent.
7. No article shall be placed in the halls or on the staircase landings or fire towers, nor shall anything be hung or shaken from the doors, windows, terraces or balconies or placed upon the windowsills of the building.
8. No bicycles, scooters or similar vehicles shall be allowed in a passenger elevator and baby carriages and the above-mentioned vehicles shall not be allowed to stand in the public halls, passageways, areas or courts of the building.
9. Garbage and refuse from the apartments shall be disposed of only at such times and in such manner as the superintendent or the Managing Agent of the building may direct.
10. Water closets and other water apparatus in the building shall not be used for any purposes other than those for which they were constructed, nor shall any sweepings, rubbish, rags or any other article be thrown into the water closets. The cost of repairing

any damage resulting from misuse of any water closets or other apparatus shall be paid for by the Lessee in whose apartment is shall have been caused.

- 11.** No animal shall be kept or harbored in the building unless the same in each instance be expressly permitted in writing by the Lessor; such permission shall be revocable by the Lessor. Sponsor may give original purchaser consent to harbor animals, which consent may not be revoked by Lessor. In no event shall dogs be permitted on elevators or in any of the public portions of the building unless carried or on leash. No pigeons or other birds or animals shall be fed from the windowsills, terraces, balconies or in the yard, court spaces or other public portions of the building, or on the sidewalk or street adjacent to the building.
- 12.** No radio or television aerial shall be attached to or hung from the exterior of the building without the prior written approval of the Lessor or the Managing Agent.
- 13.** The Lessor shall have the right from time to time to curtail or relocate any space devoted to storage or laundry purposes.
- 14.** No group tour or exhibition of any apartment or its contents shall be conducted, nor shall any auction sale be held in any apartment without the consent of the Lessor or its Managing Agent
- 15.** Any consent or approval given under these House Rules by the Lessor shall be revocable at any time
- 16.** No Lessee shall install any plantings on the terrace, balcony or roof without the prior written approval of the Lessor.
- 17.** The agents of the Lessor, and any contractor or workman authorized by the Lessor, may enter any apartment at any reasonable hour of the day for the purpose of inspecting such apartment to ascertain whether measures are necessary or desirable to control or exterminate any vermin, insects or other pests and for the purpose of taking such measures as may be necessary to control or exterminate any such vermin, insects or other pests. If the Lessor takes measures to control or exterminate carpet beetles, the cost thereof shall be payable by the Lessee, as additional rent.
- 18.** Unless expressly authorized by the Board of Directors in each case, the floors of each apartment must be covered with rugs or carpeting or equally effective noise reducing material, to the extent of at least eighty (80) percent of the floor area of each room excepting only kitchens, pantries, bathrooms, maid's rooms, and closets.
- 19.** These House Rules may be added to, amended or repealed at any time by resolution of the Board of Directors of the Lessor.

HOME INSURANCE POLICY

Proof of insurance must be provided to this office prior to closing evidencing Public Liability/Personal Injury in the amount of \$200,000 per accident and \$50,000 for Property Damage per accident; Water Damage Insurance in the amount of \$5000 if Casualty Insurance does not cover water damage; Casualty Insurance on the contents of the apartment of at least \$25,000. All such insurance policies shall name the Cooperative Corporation (200 East 16th Street Housing Corp.) and the Managing Agent (Orsid Realty Corp.) as additional insured. Should your insurance carrier have a problem obtaining such coverage, please contact the Building's carrier, Steven Principe of Nationwide Insurance at 516-221-2599.