

ATLANTIC CONDOMINIUM PURCHASE APPLICATION

Directions

Applicant(s), please complete the enclosed application and submit it with the required attachments to the managing agent at the address listed below. If you are purchasing this apartment through the services of a real estate broker you may have your broker submit the application to the managing agent. The managing will verify that the application is complete, perform a credit search on the applicants and submit the application to the Co-op admissions committee. The committee will review the application, interview the applicant(s) and make a decision on whether or not to approve the purchase of the apartment by the applicant(s).

About the Unit

Unit _____ Shares _____ Size _____
Address _____

About the Sale

Purchase Price _____
Desired Closing Date _____

About the Seller(s)

Seller 1 _____
Seller 2 _____

About the Applicant(s)

Applicant 1

Name _____
Telephone (H) _____ (W) _____
E-mail _____ SS# _____
Date of Birth _____ State _____

Applicant 2

Name _____
Telephone (H) _____ (W) _____
E-mail _____ SS# _____
Date of Birth _____ State _____

Applicant(s) Residence History

Applicant 1

Current Address _____

Agent/Landlord _____ Phone _____

How long? _____ Rent _____

Previous Address _____

Agent/Landlord _____ Phone _____

How long? _____ Rent _____

Applicant 2

Current Address _____

Agent/Landlord _____ Phone _____

How long? _____ Rent _____

Previous Address _____

Agent/Landlord _____ Phone _____

How long? _____ Rent _____

Potential Residents

Name	Age	Relationship to Applicant(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Pets _____

Applicant(s) Employment History

Applicant 1	
Current Employer	_____
Years with Firm	_____ Position _____
Address	_____ _____
Supervisor	_____ Phone _____
Previous Employer	_____
Years with Firm	_____ Position _____
Address	_____ _____
Supervisor	_____ Phone _____
Applicant 2	
Current Employer	_____
Years with Firm	_____ Position _____
Address	_____ _____
Supervisor	_____ Phone _____
Previous Employer	_____
Years with Firm	_____ Position _____
Address	_____ _____
Supervisor	_____ Phone _____

In Case of Personal Emergency, Please Notify:

Name	_____	Relationship	_____
Phone	_____		
Address	_____		

Attorneys

For Seller	
Name _____	Phone _____
Firm _____	
Address _____	
E-Mail _____	
For Buyer	
Name _____	Phone _____
Firm _____	
Address _____	
E-Mail _____	

Financing

Cash Amount _____
Mortgage Amount _____
Bank Providing Financing _____
Address _____

Required Attachments

- **Move-out Security Deposit:** \$500 payable to The Atlantic Condominium
- **Move-in Security Deposit:** \$500 payable to The Atlantic Condominium
- Mortgage application and letter of commitment
- **Application fee of \$300** payable to Goldin Management, Inc.

Authorizations

<p>I (we) hereby make an application for the purchase of the above mentioned apartment and certify that the information presented in this application and the accompanying attachments is truthful. I (we) authorized you to verify any information presented in the application and to perform a credit search on me (us). We authorize you to release this information to the committee evaluating our application.</p> <p>I (we) hereby confirm that I (we) have read the proprietary lease, house rules and by-laws relating to the cooperative, that I (we) fully understand them, and that I (we) agree to abide by their provisions.</p>	
Applicant 1 _____	Date _____
Applicant 2 _____	Date _____