116 Walton LLC

APPLICATION of INTEREST AND CREDIT AUTHORIZATION

- 1) Applications can be typed or printed in INK. <u>Application must be returned & postmarked no later</u> <u>than 12/13/2016.</u>
- 2) Mail only one (1) original application per household. You will be disqualified if more than one application per household is received.
- 3) Applications postmarked after <u>12/13/2016</u> will be set aside for possible future consideration.

SUBMISSION OF AN APPLICATION WILL NOT GUARANTEE PURCHASE. No fee should be given to anyone in connection with the preparation or filing of this application.

When completed, <u>return application by regular mail only (no oversized, priority, certified,</u> registered, express or overnight mail will be accepted) to:

116 Walton LLC – P.O. BOX #219008, Brooklyn, NY 11221

1. Applicant

Last Name	First Name			
	Apt.#			
		State Zip		
Years at Address:	_ Do you currently own this res	sidence? 🗆 Yes 🗆 No		
Current Rent Amount \$ Email:	Current	t Mortgage Amount \$		
Home Phone	Cell	Work		
	Ai	re you Self-Employed:		
Address of Employer		Yrs on Job		
		Other Income: \$		
Source(s) of Other Income:_	Total Income:\$	<u> </u>		
Co-Applicant				
		First Name		
		Apt.#		
•		State Zip		
Years at Address:	_ Do you currently own this residence? \Box Yes \Box No			
Current Rent Amount \$ Email:	Current	t Mortgage Amount \$		
Home Phone	Cell	Work		
	Are you Self-Employed:			



2.

HOMEOWNERSHIP APPLICATION

Position			
Address of Employer		Yrs on Job:	
Annual Salary \$	Overtime Income:\$	Other Income: \$	
	—		

Source(s) of Other Income:_____Total Income:\$_____

3. Total number (#) of persons in household (including applicant, co-applicant, dependants):

4. List **ALL** Household Members (other than the Applicant and Co-Applicant), including age & annual income, if any, that will be living with you in the residence:

Name \$	Date	of	Birth:	Income
Name \$	Date	of	Birth:	Income
Name \$	Date	of	Birth:	Income
Name \$	Date	of	Birth:	Income

- 5. Do you currently or have you previously owned any real property/COOP(s)?
 Yes No
 - a. If yes, is this your current primary residence? \Box Yes \Box No
 - b. Do you hold any real property/COOP(s) as investment property?
 Yes No
 - c. If you answered yes to Questions 5. 5a or 5b above, please list the address(es) of the real property(ies)/COOP(s) below. Be sure to include the street address, city, state and zip. Also list the year that you purchased the property/COOP and if it was sold, the year that it was sold.
 1 Address:

///////////////////////////////////////		
\overline{C} urrently Own: \Box Sold:	Date Purchased:	Date Sold:
2. Address:		
\overline{C} urrently Own: \Box Sold:	Date Purchased:	Date Sold:
<u>3.</u> Address:		
\overline{C} urrently Own: \Box Sold:	Date Purchased:	Date Sold:
4. Address:		
\overline{C} urrently Own: \Box Sold:	Date Purchased:	Date Sold:

- d. Do you currently or have ever held a mortgage on the above property/ies/COOP(s)? □Yes
 □No
- 6. Total amount of money available to cover down payment and closing costs.



HOMEOWNERSHIP APPLICATION

- 7. Are you or any member of your household disabled?

 Yes
 No
 Check "X" only if Applicable: Visually / Hearing Impaired Household Member______
 Mobility Impaired Household Member
- 8. Are you or the co-applicant an employee of the City of New York, the NYC Housing Development Corp., The NYC Economic Development Corp., the NYC Housing Authority, or the NYC Health and Hospitals Corp?
 Yes No (If Yes, please identify the agency/entity at which you are employed?)
- 9. If you answered "yes" to Question 7, have you personally had any role or involvement in any process, decision, or approval regarding this housing development? □ Yes □ No

NOTE: <u>If you answered 'Yes' to Question 7</u> above, you <u>may</u> be required to submit a statement from your employer that your application does not create a conflict of interest. <u>If you answered 'Yes' to Question 8 above</u>, you <u>will</u> be required to submit a statement from your employer that your application does not create a conflict of interest. Such statement would not be required until later in the application process, after you have been selected through the lottery, when you will also be required to provide other documents to verify your income and eligibility.

<u>CREDIT/CRIMINAL HISTORY CHECK AUTHORIZATION:</u> I/we authorize you to obtain a credit/criminal history report on the Applicant name(s) listed above. (If married less than two years or if known by another name or have a designation at the end of your name such as Jr. or II, please indicate). A credit check fee will be requested at the time of eligibility interview, only. If I/we meet the Program's eligibility requirements and selected to purchase a new home, I/we understand that I/we will need to apply separately for a mortgage loan if I/we need such funds to purchase shares.

I/WE DECLARE THAT STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY/OUR KNOWLEDGE. I/WE have not withheld, falsified or otherwise misrepresented any information. I/WE fully understand that any and all information I/WE provide during this application process is subject to review by The New York City Department of Investigation (DOI), a fully empowered law enforcement agency which investigates potential fraud in City-sponsored programs. I/WE understand that the consequences for providing false or knowingly incomplete information in an attempt to qualify for this program may include the disqualification of my application, the termination of MY/OUR lease (if discovery is made after the fact), and referral to the appropriate authorities for potential criminal prosecution.

I/WE DECLARE THAT NEITHER I/WE, NOR ANY MEMBER OF MY/OUR IMMEDIATE FAMILY ARE EMPLOYED BY THE BUILDING OWNER OR ITS PRINCIPALS.



HOMEOWNERSHIP APPLICATION

Date:	Applicant Signature:		
Date:		Co-Applicant	Signature:

