

The Waring Hall Condominium
610 Waring Avenue, Bronx, New York 10467

Sublet Application

Dear Applicant,

Please read your application form and all materials pertaining to this property before answering the questions. All sections must be answered. If a question does not pertain to you, simply write N/A in the space provided.

Please submit all required documentation to prevent any delays with process. Kindly submit 3 additional copies to submit to the Board.

1. Applicant Profile
2. Completed application form.
3. A copy of your latest Federal Income Tax Return; Form 1040 with W-2 Forms.
4. Copy of Lease Agreement (fully executed)
5. Three (3) reference letters.
6. Application Processing Fee - \$400.00 payable to Anker Management Corp.
7. Background Check Fee - \$175 (per person) payable to Anker Management Corp.
8. Criminal Check Fee - \$175.00 (per person) payable to Anker Management Corp.
9. Move out deposit (Seller) - \$250.00 payable to The Waring Hall Condominium.
10. Move in deposit (Buyer) - \$250.00 payable to The Waring Hall Condominium.
11. Executed acknowledgement of receipt of House Rules.

Only certified, bank or attorney check will be accepted.

Sincerely,
Board of Managers for
The Waring Hall Condominium

RETURN THIS APPLICATION TO: The Waring Hall Condominium c/o Anker Management Corp.
440 Mamaroneck Ave Suite S-512, Harrison, NY 10528
Office: (914)288-0200 F. (914) 461-2910

The Waring Hall Condominium
610 Waring Avenue, Bronx, New York 10467

APPLICANT'S PROFILE

Board of Managers
The Waring Hall Condominium
c/o Anker Management Corp.
440 Mamaroneck Ave Suite S512
Harrison, NY 10528

RE: Unit No. _____
610 Waring Avenue
Bronx, NY 10467

I/We understand that certain information is required, and therefore make the following available to the best of my knowledge.

Name(s) of Applicant(s):

_____	SSN: _____
_____	SSN: _____
_____	SSN: _____

How many people will occupy the premises? _____

Please list names, ages, relationship:

Telephone:	Home:	_____
	Work:	_____
	Mobile:	_____

RETURN THIS APPLICATION TO: The Waring Hall Condominium c/o Anker Management Corp.
440 Mamaroneck Ave Suite S-512, Harrison, NY 10528
Office: (914)288-0200 F. (914) 461-2910

The Waring Hall Condominium
610 Waring Avenue, Bronx, New York 10467

Employment:

Company: _____

Address: _____

Position: _____

Length of
employment: _____

Supervisor: _____

Phone: _____

Present Address: _____

Length of time at present address: _____ Do you Own? ____ Rent? ____

If you rent, please provide:

Landlord's Name: _____

Landlord's Address: _____

Landlord's Phone #: _____

Previous Address: _____

Length of time at previous address: _____ Did you Own? ____ Rent? ____

If rented, please provide:

Landlord's Name: _____

Landlord's Address: _____

Landlord's Phone #: _____

RETURN THIS APPLICATION TO: The Waring Hall Condominium c/o Anker Management Corp.
440 Mamaroneck Ave Suite S-512, Harrison, NY 10528
Office: (914)288-0200 F. (914) 461-2910

The Waring Hall Condominium
610 Waring Avenue, Bronx, New York 10467

MOVE IN/OUT FORM
Rules and Regulations Form #36

The Board of Managers of The Waring Hall Condominium, at a regularly scheduled meeting, voted to adopt a revised RULES AND REGULATIONS #36. It has been in effect since January 1, 2002. Unit Owners, including owners that rent their unit, are responsible to that RULES AND REGULATIONS #36 is followed.

RULES AND REGULATIONS #36 has been adopted to:

- 1- Prevent damage to the common areas,
- 2- Diminish the inconvenience to the residents of The Waring Hall Condominium, and
- 3- To deactivate the ACS keys allotted to the unit, if necessary.

PLEASE COMPLETE THE FOLLOWING AND SIGN BELOW

MOVE OUT

UNIT # _____ NAME OF PARTY MOVING _____

DATE OF MOVE _____ EST. TIME OF MOVE _____

NAME OF MOVERS _____

MOVE IN

UNIT # _____ NAME OF PARTY MOVING _____

DATE OF MOVE _____ EST. TIME OF MOVE _____

NAME OF MOVERS _____

Please have a certificate of insurance completed by the moving company. The company should name both the Condominium and Management as certificate holder and additionally insured.

SIGNED,

Owner (sign)

Applicant (sign)

Owner (sign)

Applicant (print)

Date

Date

RETURN THIS APPLICATION TO:

The Waring Hall Condominium c/o Anker Management Corp.
440 Mamaroneck Ave Suite S-512, Harrison, NY 10528
Office: (914)288-0200 F. (914) 461-2910

The Waring Hall Condominium
610 Waring Avenue, Bronx, New York 10467

OWNER/INVESTOR FORM
Rules and Regulations Form #38

This form is to be completed by Unit Owner ONLY if the unit is rented.

This FORM is based on NEW YORK SESSIONS LAW, CHAPTER 594, LAWS 1991, SECTION 352-e (2-d) subsections (b), (c) and (e). The pertinent sections of the LAW are printed below.

Subdivision (b) states that the unit owner must inform each renter of the unit the provisions of this law.

Subdivision (c) states that in case of arrears in the payment of COMMON CHARGES by the Unit Owner to the condominium, the tenant must pay the rent to the condominium Board when requested by the Board to do so. The payments are to continue until the arrears are exhausted.

Subdivision (e) states that payment of rent by the tenant to the condominium Board relieves the tenant of the obligation to pay to the Unit Owner during that time.

PLEASE COMPLETE THE FOLLOWING AND SIGN BELOW

I, _____, the Owner of Unit, _____, have explained the New York Sessions Law, Chapter 594, Laws 1991, Sections 352-e (2-d), Subsections (a), (b), (c), and (e) to the tenant and the tenant agreed to abide by it.

SIGNED,

Tenant (sign)

Unit Owner (sign)

Tenant (sign)

Unit Owner (print)

Date

Date

RETURN THIS APPLICATION TO:

The Waring Hall Condominium c/o Anker Management Corp.
440 Mamaroneck Ave Suite S-512, Harrison, NY 10528
Office: (914)288-0200 F. (914) 461-2910

The Waring Hall Condominium
610 Waring Avenue, Bronx, New York 10467

RULES AND REGULATIONS ACKNOWLEDGEMENT

I, _____, of unit # _____ have provided the buyer of my unit with
The Waring Hall Condominium's Rules and Regulations.

I, _____, have been provided with The Waring Hall Condominium's
Rules and Regulations. I agree to abide by all of the Condominium's rules and regulations.

SIGNED,

Owner (sign)

Applicant (sign)

Owner (sign)

Applicant (print)

Date

Date

RETURN THIS APPLICATION TO:

The Waring Hall Condominium c/o Anker Management Corp.
440 Mamaroneck Ave Suite S-512, Harrison, NY 10528
Office: (914)288-0200 F. (914) 461-2910



Ankel Management Corp.
440 Mamaroneck Avenue Suite S-512
Harrison NY 10528
914-288-0200

RELEASE OF INFORMATION AUTHORIZATION

I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR INSTITUTION TO
RELEASE TO ANKER MANAGEMENT CORP.

AND/OR ITS REPRESENTATIVE ANY AND ALL INFORMATION THAT THEY HAVE
CONCERNING ANY CREDIT 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.

NAME (PRINT) _____ -
DATE OF BIRTH _____ -
ADDRESS _____ -
CITY _____ STATE _____ ZIP _____ -
SOCIAL SECURITY NUMBER _____ -
SIGNATURE _____ -
DATE _____ -



Anker Management Corp.
440 Mamaroneck Avenue Suite S-512
Harrison NY 10528
914-288-0200

CRIMINAL AUTHORIZATION FORM
RELEASE OF INFORMATION AUTHORIZATION

I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR INSTITUTION TO
RELEASE TO ANKER MANAGEMENT CORP.

AND/OR ITS REPRESENTATIVE TO OBTAIN A CRIMINAL BACKGROUND

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.

NAME (PRINT) _____

DATE OF BIRTH _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

SOCIAL SECURITY NUMBER _____

SIGNATURE _____

DATE _____