

63-61 99th Street Owners Corp.
63-61 99 St., Rego Park, NY 11374

STRICT STANDARDS FOR REFINANCING

ON ALL REFINANCES BOARD APPROVAL WILL BE REQUIRED IF:

The new mortgage total (the new mortgage loan and existing mortgage that is not being refinanced) is GREATER THAN 80% of the current market value of the apartment.

Please submit Four (4) complete collated sets of the following:

Option A:

If the new monthly payment is the SAME or LOWER than the current monthly payment; AND the mortgage amount has not been increased by more than 5%, you must submit all applicable fees and (one) 1 copy of the following: Commitment Letter, three (3) ORIGINAL unaltered Aztech Recognition forms and a recent mortgage statement for the current mortgage.

Option B:

If the new monthly payment is HIGHER than the current monthly payment, or the face amount of the new loan is more than 5% higher than the existing loan, you must complete and submit the Short form application (page 2) IN ITS ENTIRETY, including all required fees.

ON ALL REFINANCES, BOARD APPROVAL WILL NOT BE REQUIRED IF:

The new mortgage total (the new mortgage loan AND any existing mortgage that is not being refinanced) is LESS THAN 80% of the current market value of the apartment. In this case, please submit your Aztech Recognition agreements (three original documents), ALONG WITH a copy of your loan application, commitment letter, and most recent mortgage statement to this office. Please include the refinance fee in the amount \$200.00, made payable to Kaled Management Corp.

All necessary documentation should be submitted to:

Susan Rubin
Kaled Management Corp.
7001 Brush Hollow Road Suite 200
Westbury, N.Y. 11590
516-876-4800 x 313 Fax 516-780-8331
email: Susan@kaled.com

The submission of the above documents in complete sets of copies will expedite the processing of your request.



CORPORATE OFFICE
7001 BRUSH HOLLOW ROAD
SUITE 200
WESTBURY, NY 11590
TEL: (516) 876-4800
FAX: (516) 876-6812
WWW.KALED.COM

ASSET MANAGEMENT
757 THIRD AVENUE
SUITE 2028
NEW YORK, NY 10017
TEL: (212) 376-5508
EMAIL: INFO@KALED.COM

**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 AND Criminal Background Check Forms in the application are the only form that requires your Social Security number. These two forms containing your Social Security number will be shredded in our office as soon as we submit the information to the Agency used to obtain your reports.

If you have any questions please contact the Management Office.

**ALL SOCIAL SECURITY NUMBERS SHOULD BE REMOVED/BLOCKED
OUT FROM TAX RETURNS AND ANY OTHER DOCUMENTS.**

63-61 99TH STREET OWNERS CORP.

SHORT FORM APPLICATION FOR REFINANCING

(Option B)

Please refer to STRICT STANDARDS FOR REFINANCING to ensure the proper use of this form.

Please **fill out the attached application**, enclose the following items and return to our office **four (4) complete, collated sets of all forms included in this package** plus the following:

1. Federal and State Tax Returns for past two(2) years, two (2) years W2 forms, and most recent pay stubs (3 consecutive weeks) for all individuals who will be contributing to the purchase, maintenance and/or rental of the shares/apartment.
2. Copies of Bank Statements from the last three (3) months.
3. Copy of the Loan Application
4. Copy of the Commitment Letter
5. Copy of Bank Appraisal Report
6. Aztech Recognition Agreements. Please make sure to include **three (3) originals**.

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

- a. Non-refundable processing fee, in the amount of \$450.00 payable to Kaled Management Corp. and Recognition Agreement fee in the amount \$200.00 payable to Kaled Management Corp. To be paid by applicant
- b. Recognition Agreement fee in the amount \$200.00 payable to Kaled Management Corp. (Option A)

REFINANCE/HOME EQUITY APPLICATION

Application is herewith submitted for the refinance of _____ shares of common stock and for the right of residency in apartment # _____.

Owners Name(s): _____

Telephone Numbers - Home: () _____ Work: () _____

Employer's Name: _____

Address: _____

Occupation: _____

Length of Employment: _____

Present Amount Mortgage: _____

Length of Residency: _____

I declare that I have examined this application and to the best of my knowledge, it is true, correct and complete.

Signature of Owner: _____ Date: _____

Signature of Owner: _____ Date: _____

FINANCIAL STATEMENT

Name (s) _____

Address _____

The following is submitted as being a true and accurate statement of the financial condition of the undersigned on the _____ day of _____ 20____.

ASSETS		LIABILITIES	
	Applicant	Co-Applicant	
Cash in banks			Notes Payable:
Money markets Funds			To Banks
Contract Deposit			To Relative
Investments: Bonds & Stocks -see schedule			To Others
Investment In Own Business			Installment Accounts Payable:
Accounts and Notes Receivable			Automobile
Real Estate Owned - see schedule			Other
Year Make			Other Accounts Payable
Automobiles:			Mortgages Payable on Real
Personal Property & Furniture			Estate - see schedule
Life Insurance			Unpaid Real Estate Taxes
Cash Surrender Value			Unpaid Income Taxes
Retirement Funds/IRA			Chattel Mortgages
401K			Loans on Life Insurance Policies
KEOGH			(Include Premium Advances)
Profit Sharing/Pension Plan			Outstanding Credit Card Loans
Other Assets			Other Debts - Itemize
TOTAL ASSETS			TOTAL LIABILITIES
COMBINED ASSETS			NET WORTH
SOURCE OF INCOME			
	Applicant	Co-Applicant	COMBINED
Base Salary			CONTINGENT LIABILITIES
Overtime Wages			As Endorser or Co-maker on Notes \$
Bonus & Commissions			Alimony Payments (Annual) \$
Dividends and Interest Income			Child Support \$
Real Estate Income (Net)			Are you defendant in any legal action?
Other Income - itemize			Are there any unsatisfied judgments?
TOTAL			Have you ever taken bankruptcy? Explain:
GENERAL INFORMATION			
	Applicant	Co-Applicant	PROJECTED EXPENSES / MONTHLY
Personal Bank Accounts at			Maintenance
Savings & Loans Accounts at			Apartment Financing
Purpose of Loan			Other Mortgages
			Bank Loans
			Auto Loan
			TOTAL

SCHEDULE OF BONDS AND STOCKS

Amount of Shares	Description (Extended Valuation in Column)	Marketable Value	Non-Marketable Value

SCHEDULE OF REAL ESTATE

Description and Location	Cost	Actual Value	Mortgage Amount	Maturity Date

SCHEDULE OF NOTES PAYABLE

Specify any assets pledged as collateral, including the liabilities they secure:

To Whom Payable	Date	Amount	Due	Interest	Pledged as Security

The foregoing financial statement has been carefully prepared, and the undersigned hereby solemnly declare(s) and certify(s) that all the information contained herein is true and correct.

Date _____ 20__

Signature _____

Date _____ 20__

Signature _____

CREDIT CHECK AUTHORIZATION

NAME: _____

DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER: _____

HOME ADDRESS:
(LAST SEVEN YEARS): _____

In connection with my transfer/ purchase/sublet of property, I authorize the procurement of a credit report on myself. I further authorize all credit agencies, banks, lending institutions and persons to release information they may have about me and release them from any liability and responsibility doing so. This authorization, in original or copy form, shall be valid for this and any future reports that may be requested. Further information may be available upon written request within a reasonable period of time.

Signature

Dated

Release of Information Authorization

Authorization to obtain Criminal, Credit/Litigation Report

In order to comply with the provision of Section 6.06 (A) of the Federal Fair Credit Reporting Act, I hereby authorize any individual, company or institution to release to Kaled Management Corp. and/or its representative any and all information that they have concerning any Criminal/Litigation activity.

I hereby release the individual, company or institution and all individuals connected therewith from all liability for any damage what-so-ever incurred in furnishing such information.

Print Name: _____

Date of Birth: _____

Signature: _____

Social Security #: _____

Print Name: _____

Date of Birth: _____

Signature: _____

Social Security #: _____

Address: _____

City: _____

State: _____ Zip Code: _____