

HARTELY HOUSE OWNERS CORP

QUESTIONNAIRE FOR APARTMENT PURCHASE / RENTAL

(Please print clearly. All information *must* be provided)

FOR INTERNAL USE ONLY:	
Filing Number:	
Status:	
Date:	/ / 201__

Purchase / Rental APT NUMBER: _____ Contact Number: (_____) _____

Purchase Price		Down Payment		Monthly Rent	
Applicant Name				Income	
Social Security #			Legal Status	<input type="checkbox"/> U.S. Citizen / <input type="checkbox"/> Visa _____ <input type="checkbox"/> U.S. Permanent Resident	
Job Title & Years			Marital Status	Married / Single	
Co-Applicant Name				Income	
Social Security #			Legal Status	<input type="checkbox"/> U.S. Citizen / <input type="checkbox"/> Visa _____ <input type="checkbox"/> U.S. Permanent Resident	
Job Title & Years			Marital Status	Married / Single	
Outstanding Liable Balances	Credit Cards:	Loans:	Mortgage:		
Monthly Payment	C/C: \$	Auto: \$	Mortgage: \$		
Name of the people will be living			Relationship		
Has anyone listed above filed bankruptcy before? If so, please list name(s) and the year it was filed	<input type="checkbox"/> Yes <input type="checkbox"/> No Initial _____		Please list any collection history if there's any:		
Has anyone listed above committed of a felony of a misdemeanor for a violent crime?	<input type="checkbox"/> Yes <input type="checkbox"/> No Initial _____		If so, please list name(s) and the reason and year		
Applicants acknowledge that they were advised of <u>NO PETS POLICY</u>			<input type="checkbox"/> Yes <input type="checkbox"/> No Initial _____		
Do you authorize this cooperative to perform a criminal & credit background check?			<input type="checkbox"/> Yes <input type="checkbox"/> No Initial _____		



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NEW YORK, NY 10017
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**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.**