

PARKWAY TOWERS OWNERS CORPORATION
219 Bronx River Road
Yonkers, New York 10704

To: Shareholder _____ Apt # _____

Dear Shareholder:

In response to your request to SELL your cooperative shares, please be advised that the following requirements and procedures are to be followed:

REQUIREMENTS:

- 1) It is a requirement of the Apartment Corporation that all arrears on the apartment be paid in full **BEFORE** application for sale will be considered. Maintenance and repair charges **MUST** also be paid, in full, throughout the period of processing sale and until shares are actually sold.
- 2) A move-out application and deposit of \$250.00 is also required from the shareholder. Deposit will be returned to shareholder provided no damage to the premises has been incurred during the moving process.

IMPORTANT:

Processing of sale/purchase applications require a **minimum of 4 weeks** from the date the committee receives this package to final decision. Please be realistic in your closing dates.

PROCEDURES:

- A) Sale Package: Items # 1 - 9 listed on page 2 must be completed and obtained
- B) Fee Payments.
- C) Shareholder forwards completed package to Gramatan Management.
- D) Interview Committee schedules mutually convenient appointment to meet with purchase applicant (s).
- E) Decision

Procedures A - E are explained in detail herein:

A) **SALE PACKAGE:** Applications/back-up documentation. The following forms must be completed and submitted to Gramatan Management.

- 1) **Move-Out Application** - to be completed by shareholder.
- 2) **Parkway Towers Application for Purchase of Cooperative Shares** - to be completed by applicant(s). If more than one person is intended to be the owner occupant (shareholder) of the apartment - each owner must complete an application and follow procedures below.

Credit Check Form – to be completed by applicant.
- 4) **Employer Verification Letter:** Applicant(s) should receive from their current employer a letter stating date of hire, position, current salary and if applicant receives bonuses or overtime payments. This should be an original letter on company letterhead. Each applicant must provide a letter.
- 5) **Bank Statements:** Applicant(s) must provide copy of most recent and previous 2 months (total of 3 statements).
- 6) **Tax Forms:** Applicant(s) must provide copies of Federal tax forms with all schedules for past 2 years.
- 7) **W-2's :** Applicant(s) must provide copies of W-2's for past 2 years.
- 8) **Copy of Contract of Sale, w/riders, if any.**
- 9) **Copy of Bank Commitment Letter / Loan applications, if applicable**

ALL THE ABOVE REQUIRED DOCUMENTATION ALONG WITH THE APPLICATION MUST BE SUBMITTED IN 5 COMPLETE SETS.

IT IS THE SHAREHOLDERS RESPONSIBILITY TO ENSURE THAT THE ABOVE INFORMATION IS RECEIVED AND FULLY COMPLETED BEFORE SUBMISSION TO Gramatan Management. YOUR COOPERATION IN THIS MATTER WILL EXPEDITE PROCESSING OF APPLICATION. As stated, assuming all information is received, and in order, expected length of processing time is 4 weeks - missing information will only delay and extend this processing time period.

B) **Fee Payments:** The following fees must be paid by the applicant and/or shareholder and are payable by MONEY ORDER ONLY. Please include these money orders with the Sale Package.

- 1) Credit Verification Fee (per applicant/married couple): \$125.00
- 2) Application Processing Fee (**Payable by Purchaser**) \$300.00
- 3) Move-In Deposit (**Payable by Purchaser**) \$250.00
- 4) Move-Out Deposit (**Payable by Seller**) \$250.00
- 5) Co-op Sales Fee (**Payable by Seller**) \$500.00
- 6) At closing the **Seller** will be required to pay **\$575 transfer fee** payable to: Gramatan Management, Inc.
- 7) At closing the **Purchaser** will be required to pay the equivalent of two month's maintenance as a **capital contribution** to the Co-op.
 - **Credit Verification Fee** made payable to Consumer Credit Service.
 - **Application Processing fee** payable to Gramatan Management, Inc.
 - **Co-op Sales Fee** payable to Parkway Towers Owners CorporationMove-Out / Move-In Deposits payable to: Parkway Towers Owners Corporation. **Move-Out / Move-In Deposits are refundable only if no damage occurs. \$250.00 of the \$500.00 Sales Fee is only refundable if the application is denied. \$250.00 Application Processing fee is entirely non-refundable.**

C) **SALE PACKAGE TO INTERVIEW COMMITTEE:** When the "Requirements" section and "Procedures" sections above have been met by the shareholder, the shareholder should forward all of the above to Bram Fierstein, Property Manager, Gramatan Management, 2 Hamilton Avenue, Suite 217, New Rochelle, NY 10801.

D) **INTERVIEW:** Gramatan Management will forward the sale package to the Parkway Towers Interview Committee. The Committee will schedule a mutually convenient appointment to meet with the purchase applicant(s). ALL PERSONS intending to reside in the apartment must appear for this interview (children included).

E) **DECISION:** The Interview committee will advise Gramatan Management of their decision via verbal acknowledgement within 7 – 10 days of the interview. Gramatan Management will relay this decision to the shareholder via letter and / or verbal acknowledgement. **APPLICANTS ARE NOT PERMITTED TO MOVE IN BEFORE ACKNOWLEDGEMENT HAS BEEN RECEIVED.** If the decision is favorable, the applicant may only move in on or after the transfer of ownership. We ask that you do not contact Gramatan Management or the Board of Directors for the decision.

We hope this package will answer any questions you may have regarding the selling procedures. If you have any further questions, please do not hesitate to contact Bram Fierstein at Gramatan Management, (914) 654-1414 or email him at Bfierstein@gramatanmanagement.com.

Sincerely,
Parkway Towers Owners Corporation, Board of Directors

**PARKWAY TOWERS OWNERS CORPORATION
219 BRONX RIVER ROAD
YONKERS, NEW YORK 10704**

**APPLICATION FOR PURCHASE
OF COOPERATIVE SHARES**

I _____ hereby offer to purchase _____ shares of
the capital stock of Parkway Towers Owners Corporation and the accompanying proprietary
lease for apartment _____ in the premises located at 219 Bronx River Road, Yonkers, New
York on the following terms:

Purchase Price: \$ _____

Financing: Yes _____ NO _____ Amt _____

Bank Name / Address _____

Terms: Length of Mortgage _____ Monthly Payment: _____

Expected date of Occupancy: _____

Special Conditions, if any: _____

Seller's Name: _____

Current Address: _____

Telephone Number: _____

Seller's Attorney: _____

Attorney's Address: _____

Attorney's Tele No: _____



**PARKWAY TOWERS OWNERS CORPORATION
219 BRONX RIVER ROAD
YONKERS, NEW YORK 10704**

**APPLICATION FOR PURCHASE
OF COOPERATIVE SHARES
APARTMENT # _____**

SECTION I: APPLICANT PERSONAL & EMPLOYMENT

Applicant

Name: _____ **SS#** _____

Current
Address: _____

Tele #: _____ **# of years at this address:** _____ **Mo. Rent:** _____

Landlord Name, Address & Telephone Number: _____

Previous

Address: _____

of years at this address: _____ **Mo. Rent:** _____

Landlord Name, Address & Telephone Number: _____

Previous

Address: _____

of years at this address: _____ **Mo. Rent:** _____

Landlord Name, Address & Telephone Number: _____

Current Employer: _____ **Tele #** _____

Employer
Address _____

Position: _____ **# Yrs Empl** _____ **Salary:** _____

**Previous
Employer:** _____ **Tele:#** _____

Employer
Address _____

Position: _____ **# Yrs Empl** _____ **Salary:** _____

SECTION 2: APPLICANT ASSETS

Please include all accounts such as Savings, Checking, IRA's, Money Market Rate Accounts, CD's, X-Mas Club, Credit Union, etc. If more space is needed, please complete at bottom or back of form.

Bank Name	Bank Address/ Telephone #	Type of Account	Account Number	Balance	Name(s) on Account

OTHER SOURCES OF INCOME: _____

Is there any other information regarding your assets or additional income that you would like us to know?

SECTION 3: Applicant Liabilities

Please include all credit cards, auto loans, mortgages, leases, financial company loans, credit union loans or any other monthly obligations or debts owed by you. If more space is needed, please complete at bottom or back of form

Creditor	Creditor Address/Tele #	Type of Account	Account Number	Total Balance	Monthly Payment

Is there any other information regarding your liabilities or monies owed that you would like us to know?

Can verification documentation of the above assets, liabilities be provided if necessary?

Yes _____ No _____ If no, why? _____

SECTION 4: MISCELLANEOUS

Have you any outstanding judgements? _____

In the past 7 years, have you declared bankruptcy? _____

Have you had property foreclosed upon or given title or deed in lieu thereof? _____

Are you a co-maker or endorser of a note? _____

Is any part of your down-payment or payment borrowed? _____

Are you a party in a law uit? _____

Names of all clubs, society memberships, fraternities and honorary society to which applicant belongs:

Address of any additional residences owned or leased: _____

How were you referred to Parkway Towers? _____

Do you plan on residing at Parkway Towers or is this purchase for investment purposes?

Other than yourself, please list names, relationship of others who will occupy apartment:

Purchaser's Attorney Name, Address, Telephone number:

Is there any other information regarding your application for purchase which you would like us to know?

The undersigned hereby affirms that the information contained in this application is true, accurate and complete. The undersigned authorizes Parkway Towers Owners Corporation to conduct a thorough and complete investigation, from any source named in this application to verify information contained herein.

In applying for consent to this proposed sale, the undersigned understands that such consent is required by the terms of the proprietary lease and that this application is subject to the approval of both the proposed seller and the cooperative apartment corporation. The undersigned also understands that the information outlined herein is essential to this application because this is a cooperative apartment building

in which stockholder-lessees reside. If it is desired to inspect the undersigned's place of residence, arrangements may be made to do so. The undersigned also agrees to meet in person with representatives of the cooperative apartment corporation. ALL APPLICATION FEES ARE NON-REFUNDABLE

Applicant Signature

Date

**PARKWAY TOWERS OWNERS CORPORATION
219 BRONX RIVER ROAD
YONKERS, NEW YORK 10704**

RIDER # 1

The undersigned applicant for purchase of apartment _____ at 219 Bronx River Road, Yonkers, New York 10704 represents that I/we do not own or possess any pets and will not possess any, without Board of Directors approval, in the future, in regard to my/our sublease of the above apartment. This representation is made knowing that the apartment corporation is relying upon this statement and will consider the approval of sublease of the aforementioned apartment based upon this representation. I/we have been advised of the House Rule regarding pets.

The undersigned further represent that they are aware that any breach of this statement is a material misrepresentation.

APPLICANT SIGNATURE

DATE

CO-APPLICANT SIGNATURE

DATE



**PARKWAY TOWERS OWNERS CORPORATION
219 BRONX RIVER ROAD
YONKERS, NEW YORK 10704**

**APPLICATION FOR PURCHASE
OF COOPERATIVE SHARES
APARTMENT # _____**

SECTION I: CO - APPLICANT PERSONAL & EMPLOYMENT

Applicant

Name: _____ **SS#** _____

Current
Address: _____

Tele #: _____ **# of years at this address:** _____ **Mo. Rent:** _____

Landlord Name, Address & Telephone Number: _____

Previous

Address: _____

of years at this address: _____ **Mo. Rent:** _____

Landlord Name, Address & Telephone Number: _____

Previous

Address: _____

of years at this address: _____ **Mo. Rent:** _____

Landlord Name, Address & Telephone Number: _____

Current Employer: _____ **Tele #** _____

**Employer
Address** _____

Position: _____ **# Yrs Empl** _____ **Salary:** _____

Previous

Employer: _____ **Tele:#** _____

**Employer
Address** _____

Position: _____ **# Yrs Empl** _____ **Salary:** _____

SECTION 4: MISCELLANEOUS

Have you any outstanding judgements? _____

In the past 7 years, have you declared bankruptcy? _____

Have you had property foreclosed upon or given title or deed in lieu thereof? _____

Are you a co-maker or endorser of a note? _____

Is any part of your down-payment or payment borrowed? _____

Are you a party in a law suit? _____

Names of all clubs, society memberships, fraternities and honorary society to which applicant belongs:

Address of any additional residences owned or leased: _____

How were you referred to Parkway Towers? _____

Do you plan on residing at Parkway Towers or is this purchase for investment purposes?

Other than yourself, please list names, relationship of others who will occupy apartment:

Purchaser's Attorney Name, Address, Telephone number:

Is there any other information regarding your application for purchase which you would like us to know?

The undersigned hereby affirms that the information contained in this application is true, accurate and complete. The undersigned authorizes Parkway Towers Owners Corporation to conduct a thorough and complete investigation, from any source named in this application to verify information contained herein.

In applying for consent to this proposed sale, the undersigned understands that such consent is required by the terms of the proprietary lease and that this application is subject to the approval of both the proposed seller and the cooperative apartment corporation. The undersigned also understands that the information outlined herein is essential to this application because this is a cooperative apartment building

in which stockholder-lessees reside. If it is desired to inspect the undersigned's place of residence, arrangements may be made to do so. The undersigned also agrees to meet in person with representatives of the cooperative apartment corporation. ALL APPLICATION FEES ARE NON-REFUNDABLE

Co - Applicant Signature

Date

PARKWAY TOWERS OWNERS CORPORATION
219 Bronx River Road
Yonkers, New York 10704

The undersigned applicant for purchase of apartment _____ at 219 Bronx River Road, Yonkers, NY 10704 represents that He/She/They have read and will abide by the House Rules and Proprietary Lease and have been notified specifically of the following:

1. No Pet Rule
2. Maintaining Cooperative Apartment Insurance
3. No Washing Machines/Dryer Rule
4. Move-in, Move-Out Application and Deposit.

This representation is made knowing that the apartment corporation is relying upon this statement and will consider the approval of purchase of the aforementioned apartment based upon this representation.

The undersigned further represent that they are aware that any breach of this statement is a material misrepresentation.

APPLICANT SIGNATURE

DATE

CO-APPLICANT SIGNATURE

DATE



*** ANTHONY SOUZA ***

C- CONDO

C- COOPERATIVE - INVESTIGATION SERVICE

C- COMMERCIAL

***** CREDIT REPORT APPLICATION *****

Name Of Applicant (s)

Present Home Address:

Home Telephone: How Long:

Present Landlord: Telephone:

Social Security Number: (Applicant)

Wife Social Security Number:

Date Of Birth, Husband: Wife:

Prior Home Address:

Husband's Employer: Length:

Employers Address: Telephone:

Wife's Employer: Length:

Employers Address: Telephone:

Annual Salary Husband: Wife:

Bank Accounts: Branch: Acct No. Type:

Vehicle You Own: Lic. Plate No: Make: State:

Any Other Income:

Others Who Will Occupy Apartment With You:

Name: Relationship: Age:

Name: Relationship: Age:

Credit Cards In Your Name:

Acct Name: Acct. Number: Type:

Were You Ever Convicted Of A Crime: Yes: No:

Yes, Explain: State: County: Year:

Brief Details:

Self-Employed Give Details Of: Business Bank Accounts. Acct. Number:

State Incorporated: State: County:

Parkway Towers Owners Corp.
219 Bronx River Road
Yonkers, NY 10704

HOUSE RULES
Document D

- (1) The public halls and stairways of the building shall not be obstructed or used for any purpose other than ingress to and egress from the apartments in the building; and the fire towers shall not be obstructed in any way.
- (2) No patient of any doctor who has offices in the building shall be permitted to wait in the lobby.
- (3) No public hall above the ground floor of the building shall be decorated or furnished by any lessee in any manner without the prior consent of all of the Lessees to whose apartments such hall serves as a means of ingress and egress; in the event of disagreement among such Lessees, the Board of Directors shall decide.
- (4) No lessee shall make or permit any disturbing noises in the building or do or permit anything to be done therein which will interfere with the rights, comfort or convenience of other Lessees. No Lessee shall play upon or suffer to be played upon any musical instrument or permit to be operated a phonograph or a radio or television loud speaker in such Lessee's apartment between the hours of eleven o'clock p.m. and the following eight o'clock a.m. if the same shall disturb or annoy other occupants of the building. No construction or repair work or other installation involving noise shall be conducted in any apartment except on weekdays (not including legal holidays) and only between the hours of 8:30 a.m. and 5:00 p.m.
- (5) No awnings shall be used in or about the building except such as shall have been expressly approved by the Lessor or the managing agent, nor shall anything be projected out of any window of the building without similar approval.
- (6) No sign, notice, advertisement or illumination shall be inscribed or exposed on or at any window or other part of the building, except such as shall have been approved in writing by the Lessor or the managing agent.
- (7) No article shall be placed in the halls or on the staircase landings or fire towers, nor shall anything be hung or shaken from the doors, windows, terraces or balconies or placed upon the window sills of the building.
- (8) No bicycles, scooters or similar vehicles shall be allowed in a passenger elevator and baby carriages and the above-mentioned vehicles shall not be allowed to stand in the public halls, passageways, areas or courts of the building.
- (9) Garbage and refuse from the apartments shall be disposed of only at such times and in such manner as the superintendent or the managing agent of the building may direct.

(10) Water closets and other waste apparatus in the building shall not be used for any purposes other than those for which they were constructed, nor shall any sweepings, rubbish, rags or any other article be thrown into the water closets. The cost of repairing any damage resulting from misuse of any water closets or other apparatus shall be paid for by the Lessee in whose apartment it shall have been caused.

(11) No animal shall be kept or harbored in the building unless the same in each instance be expressly permitted in writing by the Lessor; such permission shall be revocable by the Lessor. Sponsor may give original purchaser consent to harbor animals, which consent may not be revoked by Lessor. In no event shall dogs be permitted on elevators or in any of the public portions of the building unless carried or on a leash. No pigeons or other birds or animals shall be fed from the window sills, terraces, and balconies or in the yard, court spaces or other public portions of the building, or on the sidewalk or street adjacent to the building.

(12) No radio or television aerial shall be attached to or hung from the exterior of the building without the prior written approval of the Lessor or the managing agent.

(13) The Lessor shall have the right from time to time to curtail or relocate any space devoted to storage or laundry purposes.

(14) No group tour or exhibition of any apartment or its contents shall be conducted, nor shall any auction sale be held in any apartment without the consent of the Lessor or its managing agent.

(15) Any consent or approval given under these House Rules by the Lessor shall be revocable at any time.

(16) No Lessee shall install any plantings on the terrace, balcony or roof without the prior written approval of the Lessor.

(17) The agents of the Lessor, and any contractor or workman authorized by the Lessor, may enter any apartment at any reasonable hour of the day for the purpose of inspecting such apartment to ascertain whether measures are necessary or desirable to control or exterminate any vermin, insects or other pests and for the purpose of taking such measures as may be necessary to control or exterminate any such vermin, insects or other pests. If the Lessor takes measures to control or exterminate carpet beetles, the cost thereof shall be payable by the Lessee, as additional rent.

(18) These House Rules may be added to, amended or repealed at any time by resolution of the Board of Directors of the Lessor.

PARKWAY TOWERS OWNERS CORPORATION
219 Bronx River Road
Yonkers, New York 10704

**MOVE - IN, MOVE-OUT AND DELIVERIES
APPLICATION**

Guidelines:

1. Move Ins / Move Outs and Deliveries will only be scheduled between the hours of 9:00 a.m. and 4:00 p.m. Monday through Friday.
2. You must contact the Superintendent, Jorge Hernandez at (914) 776-2813 to schedule a move in/out or delivery date.
3. A deposit of \$250.00 is required in addition to this application for security against damages and/or breaches in our safety requirements.

NAME: _____ APT #: _____

Home Telephone #: _____ Work Telephone #: _____

Forwarding Address: _____

Move-In Date: _____ Move-Out Date: _____ Delivery Date: _____

Deposit \$250.00 received by: _____ Date: _____

Damage Inspection
Completed by: _____ Date: _____ Time: _____

Damaged Items	Description of Damage	Cost

Total Deposit: _____ Total Damage: _____

Deposit Amount Returned: _____ Date Returned: _____