

**C O N F I D E N T I A L**  
**FOREST LAKE COUNTRY CLUB OF SYLVAN LAKE, INC.**

*(A cooperative of seasonal recreational residences)*

8 Hibiscus Circle, Hopewell Junction, NY 12533

**APPLICATION TO PURCHASE CO-OP SHARES**

**TO BE COMPLETED BY SELLER:**

Unit # \_\_\_\_\_  
Seller: \_\_\_\_\_  
Sales Price: \$ \_\_\_\_\_ Deposit: \$ \_\_\_\_\_  
# of Shares: \_\_\_\_\_ Carrying Charges: \_\_\_\_\_  
Anticipated Occupancy Date: \_\_\_\_\_

**TO BE COMPLETED BY PURCHASER:**

Name of Applicant(s): \_\_\_\_\_  
Social Security Number (s): \_\_\_\_\_  
Present Address: \_\_\_\_\_  
( )Rent ( )Own ( )House ( )Co-op ( )Condo  
If Renting, please supply current information:  
Current Rent: \_\_\_\_\_ Number of years in current apartment: \_\_\_\_\_  
Landlord/contact Information: \_\_\_\_\_  
Home Phone(s): \_\_\_\_\_ Work Phone (s): \_\_\_\_\_

Name of Applicant(s): \_\_\_\_\_  
Social Security Number (s): \_\_\_\_\_  
Present Address: \_\_\_\_\_  
( )Rent ( )Own ( )House ( )Co-op ( )Condo  
If Renting, please supply current information:  
Current Rent: \_\_\_\_\_ Number of years in current apartment: \_\_\_\_\_  
Home Phone(s): \_\_\_\_\_ Work Phone (s): \_\_\_\_\_  
**Children?** How Many: \_\_\_\_\_  
Names/ Ages/ M/F: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other Persons to Occupy Unit:**

Names/Relationship: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any Animals in Household? ( ) Yes ( ) No TYPE: \_\_\_\_\_

Does any Occupant Smoke? ( ) Yes ( ) No If, Yes, please name individual(s).  
\_\_\_\_\_

**Employer/Business Affiliation of Applicant(s):**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Years of Employment: \_\_\_\_\_ Position: \_\_\_\_\_

Supervisor/Contact information: \_\_\_\_\_

**Employer/Business Affiliation of Applicant(s):**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Years of Employment: \_\_\_\_\_ Position: \_\_\_\_\_

Supervisor/Contact information: \_\_\_\_\_

**REFERENCES: (Either A or B)**

**A. Forest Lake Reference(s) (Name/Address/Phone):**

\_\_\_\_\_  
\_\_\_\_\_

**B. Personal and Professional Reference:** Please attach one (1) reference each from a person who has known you personally for five (5) years or longer, who is not a relative **AND** one (1) professional reference from a person who you have a business relationship for five (5) years or longer. Each letter must have contact information. *Attach references to the application.*

**INCOME:**

Applicant(s) Annual Income (Wages): \_\_\_\_\_

Other Sources: \_\_\_\_\_

Total Household Income: \$ \_\_\_\_\_

**BANK REFERENCES (Including Money Funds):**

Account Number: \_\_\_\_\_ Bank: \_\_\_\_\_

Contact: \_\_\_\_\_

Account Number: \_\_\_\_\_ Bank: \_\_\_\_\_

Contact: \_\_\_\_\_

Account Number: \_\_\_\_\_ Bank: \_\_\_\_\_

Contact: \_\_\_\_\_

Account Number: \_\_\_\_\_ Bank: \_\_\_\_\_

Contact: \_\_\_\_\_

CREDITORS:            Agency:            Contact/Address:            Amount Owed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATEMENT OF APPLICANT(S)

The applicant(s) represent(s):

(a) that the above statements are true and may be verified by the Corporation or its Representatives; (b) that s/he is prepared to furnish additional information upon request of the Corporation; (c) that this application is subject to the approval of the Corporation and if accepted as a purchaser, the applicant will abide by the Bylaws and Rules and Regulations of the Corporations

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

AUTHORIZATION TO RELEASE INFORMATION

I/WE \_\_\_\_\_ HEREBY AUTHORIZE my/our employer(s) to release any and all information regarding my/our employment and wages and also all banks and other financial institutions/stockbrokers to release any and all financial data about accounts I/we have to Forest Lake Country Club of Sylvan Lake, Inc (the cooperative), at 8 Hibiscus Circle, Hopewell Junction, New York 12533 in connection with my/our application to purchase stock in the Cooperative.

(A photocopy of this authorization shall be valid as if it were the original.)

SIGNATURES:

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date: \_\_\_\_\_

For Board Use Only:

Interview Date: \_\_\_\_\_ Committee Approval: Yes \_\_\_\_\_ No \_\_\_\_\_

Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_

**Forest Lake Country Club of Sylvan Lake, Inc**  
**8 Hibiscus Circle**  
**Hopewell Junction, New York 12533**

CONSUMER CREDIT REPORT RELEASE FORM

PLEASE READ CAREFULLY

**BY MY SIGNATURE BELOW I AUTHORIZE,**

Forest Lake Country Club of Sylvan Lake, Inc. to obtain a Consumer Credit Report on me. This authorization is valid for purposes of verifying information given pursuant to employment, leasing, rental business negotiations, or any other lawful purpose covered under the Fair Credit Reporting Act (FCRA). By my signature below, I hereby authorize all corporations, former employers and credit agencies and persons to release all information they may have about me. This authorization shall be valid in original or copy form

Fee for credit report of \$50.00 to be paid by prospective buyer.

Please make your check payable to **LIDA** and mail with this original four page completed application form to: Brian Scally, Garthchester Realty, 440 Mamaroneck Ave, Harrison NY 10528

Applicant's Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Current Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_