



CRESTWOOD VILLAGE CO-OP FOUR, INC.

15E MOCCASIN DRIVE

WHITING, NJ 08759

PHONE (732) 350-0230 - FAX (732) 350-6930

APPLICATION FOR OCCUPANCY ONLY

THE UNDERSIGNED IS SUBMITTING THIS APPLICATION TO THE BOARD OF TRUSTEES OF CRESTWOOD VILLAGE CO-OP FOUR, INC. FOR THE SOLE PURPOSE OF OBTAINING THEIR APPROVAL TO ALLOW A NON-CERTIFICATE HOLDER TO CO-OCCUPY A UNIT ALONG WITH THE CERTIFICATE HOLDER ON RECORD.

BY SIGNING THIS DOCUMENT, THE PROSPECTIVE RESIDENT AGREES TO EACH OF THE FOLLOWING:

- The certificate holder must reside in the unit at all times.
- Approval to reside in one of our units does not grant voting rights or mean the applicant can remain in the unit without a certificate holder present.
- If the certificate holder vacates the unit for any reason, board approval to reside in the unit is immediately rescinded. Remaining residents have 14 days to vacate the premises (per proprietary lease, article II section 1: *any person may be permitted occupancy for a period of not more than fourteen (14) days.*)
- No more than three (3) persons are allowed to occupy a dwelling unit.
- No one under 19 will be considered.
- The unit is to be used for residential purposes only – no commercial business is to be conducted from the unit. No commercial lettered vehicles are allowed at any time. Units are not to be used for storage.
- The resident expressly agrees to be subject to and abide by the rules & regulations, by-laws, and any terms or conditions the board of trustees may adopt which are applicable to occupancy either now or in the future.
- Any violation of these rules and regulations will constitute a default on the part of the certificate holder and subject to fines and/or eviction of the certificate holder and all residents of the unit.
- Residents shall not permit anything to be done or kept on the premises which shall increase the rate of insurance on the unit or any other building; shall not obstruct or interfere with the rights of other occupants or annoy them by unreasonable noise or otherwise.
- The resident shall not commit or permit any nuisance on the premises, or any immoral or illegal acts, and shall comply with all of the requirements of the board of health with respect to the premises.
- No overnight (midnight to 6am) street parking is permitted, as is no parking on the grass or in guest spots. All vehicles must be kept in good working order and be registered and insured. If parking is not adequate, a space can be rented from the clubhouse if available. Any vehicle found on the street overnight will be towed at the resident's expense.
- By signing this application, the prospective resident consents and acknowledges that Crestwood Village Co-Op Four, Inc. has the right to obtain a background report from a background reporting agency acceptable to Crestwood Village Co-Op Four, Inc., at the expense of the prospective resident.
- The decision of the board of trustees is final.

PLEASE SUBMIT A \$75.00 NON-REFUNDABLE FEE, PAYABLE BY MONEY ORDER OR CERTIFIED CHECK ONLY, ALONG WITH A LEGIBLE COPY OF YOUR DRIVER'S LICENSE.

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Date of application: _____

Address of Unit: _____

Name of Prospective Resident: _____

Phone Number: _____ Email Address: _____

Social Security No: _____ Birth Date: _____

Name of Certificate Holder(s): _____

Excluding yourself, how many people currently reside in this unit? _____

If Applicable, how long have you resided in the unit? _____

Please answer the following questions:

Yes

No

1. Have you ever been charged with or convicted of an indictable criminal offense?

2. Do you have an outstanding civil judgment pending against you?

3. Do you currently have an outstanding warrant for your arrest?

4. Do you currently have any Civil claims pending against you?

5. Do you have any children under age 19?

6. What brings you to Village Four? _____

7. Is there sufficient parking for your vehicle at this location?

8. If not, do you have other arrangements for parking?

Certificate Holders Approval:

I, _____ hereby consent to the above Applicant becoming a resident of my unit.

(Certificate Holder's Signature)

(Date)

(Certificate Holder's Signature)

(Date)

This certificate is attached to a 4 page document entitled Application for Occupancy and dated _____.
of pages

JURAT/AFFIDAVIT CERTIFICATE

STATE OF _____

COUNTY OF _____

On this _____ day of _____, 20 _____,

Before me, the undersigned notary public, personally appeared _____
Certificate Holder's Name

Proved to me through satisfactory evidence of identification, which was

Type of Identification

To be the person whose name is signed on the preceding or attached document who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his/her knowledge and belief.

(seal)

Signature of Notary Public

Commission Expiration Date of Notary Public

AUTHORIZATION AND CERTIFICATION FOR APPLICATION FOR OCCUPANCY

By signing this Application for Occupancy Form I recognize that Crestwood Village Co-Op Four, Inc. and/or its agents or representatives may investigate the information supplied by me and I hereby authorize all persons to give full disclosure of pertinent facts to Crestwood Village Co-Op Four, and/or its assigned agents or representatives. I hereby consent to an investigation being made of me relative to my character, general disposition, personal characteristics, and mode of living as applicable. I hereby understand that it is the intent of Crestwood Village Co-Op Four, Inc to evaluate my character for the purpose of occupying a dwelling unit situated in and subject to the Proprietary Lease and the governing documents of Crestwood Village Co-Op Four, Inc.

I hereby certify and agree that if I am authorized to occupy any dwelling unit in Crestwood Village Co-Op Four, Inc. I shall be subject to the terms and conditions of the Crestwood Village Co-Op Four, Inc. Amended Certificate of Incorporation Bylaws, applicable Proprietary Lease, and Rules and Regulations.

I hereby certify that all of the statements made in the above Application For Occupancy Form are true and accurate to the best of my knowledge and if they are ultimately determined to be willfully false I may be subject to punishment, including but not limited to voiding my approval for occupancy from Crestwood Village Co-Op Four, Inc. and/or otherwise revoke the right to occupy any dwelling unit subject to same.

I, _____, the undersigned, hereby authorize all persons or companies to release without liability, the information contained herein for the purpose of verifying information on my application for occupancy.

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for and continued participation as a qualified resident.

Prospective Resident

(Signature)

(Print Name)

(Date)

Submit this completed application to the Crestwood Village Co-op Four, Inc. Clubhouse located at 15 E Moccasin Drive, Whiting, New Jersey 08759. Please respond to all questions and fill in all blanks. If a question is not answered or left blank, this application may be returned, not processed and/or not approved.