

**UNITED VETERANS MUTUAL HOUSING COMPANY, INC.
BELL PARK MANOR – TERRACE**

TELEPHONE: 718-465-6070
FAX: 718-468-7556

221-22 MANOR ROAD
BELLEROSSE MANOR, NY 11427

**United Veterans Mutual Housing Company, Incorporated
A/K/A Bell Park Manor-Terrace**

Sales Package

Upon obtaining a purchaser for the apartment, the purchaser or his/her agent must furnish the Screening Committee of the Board of Directors with all of the following. The processing of your application will take approximately 3-4 weeks exclusive of any additional information deemed to be required.

Please submit one (1) complete original package of the following forms & documentation. We do not accept Incomplete Packages. ANY forms or DOCUMENTATION from #1 –29 not submitted, will be returned.

NO EXCEPTIONS.

1. A bank check or money order for the processing fee to purchase the shares of United Veterans Mutual Housing Company, Inc. in the amount of \$250.00 . from the purchaser payable to **United Veterans Mutual Housing Co., Inc.** **This fee is non-refundable.**
2. A bank check or money order for background check fee to purchase the shares of United Veterans Mutual Housing Company, Inc. in the amount of \$55.00 per applicant appearing on the Contract of Sale (note: only two (2) applicants are allowed on the Contract of Sale) made payable to **United Veterans Mutual Housing Co., Inc.**
Also, a bank check or money order in the amount of \$33.00 made payable to **United Veterans Mutual Housing Co., Inc.** must be submitted for each person, not appearing on the Contract of Sale, who will be residing in the apartment over the age of seventeen (17) for background check.
The fees to run background checks are non-refundable.
3. A signed copy of the contract between the selling shareholder and the prospective purchaser that they have entered into written agreement concerning the sale of stock.

United Veterans Mutual Housing Co., Inc.

**221-22 Manor Road / Bellerose Manor, NY 11427
718-465-6070**

4. Copies of the following for each prospective purchaser and all others who are expected to occupy the apartment:
 - A. Photo Identification (e.g. Driver's License, Passport)
 - B. Proof of Social Security Identification
 - C. Documentation confirming citizenship or permanent residency in the United States (e.g. Birth certificate, passport, green card)
5. A completed and signed **Application for Approval of Sale of Cooperative Apartment.**
6. Completed & signed "Uniform Residential Application".
7. (a) A completed and signed authorization form to run background check to purchase the shares of United Veterans Mutual Housing Company, Inc.
(b) If a person over seventeen (17) will reside in the apartment, a completed and signed authorization form to run a background check.
8. Cooperative loan/ Mortgage commitment letter. (PRE-APPROVAL/CONDITONAL NOT ACCEPTED).
PLEASE NOTE: ALL PURCHASERS ON THE CONTRACT OF SALE MUST ALSO APPEAR ON THE MORTGAGE. NO EXCEPTIONS.

There is \$75.00 fee to complete Co-Op Questionnaire from bank. Please make check payable to United Veterans Mutual Housing Company Inc.
9. Signed Employment Letter
Letter from employer with employment start date and annual salary.
PLEASE NOTE: IN CALCULATING ANNUAL SALARY, OVERTIME AND BONUSES WILL NOT BE FACTORED IN.
10. **Four (4)** most recent payroll stubs
11. If you are **retired or disabled**, please submit social security and/or pension information. (i.e. Social Security Benefits Letter)
12. **Bank balance letter signed by bank.**
These forms must be submitted to us from your bank for verification of the data entered on the application.
13. **Six (6)** months **most recent complete** bank statements.
Please note: Explanation and documentation of any large deposits must accompany bank statements.
14. (a) Copies of the last two years **Complete Signed Income Tax** forms, with **all schedules** and **W2's**.
(b) Completed & Signed Form 4506. **Fill out 1a – 5 only**

15. Residence Verification Form (attached)
16. Six (6) months most recent cancelled rent checks or rent receipts
17. Two (2) different, current utility bills indicating current residence.
18. If you own your own home, coop or condo, you must be in contract to sell this residence before you can purchase in this Co-op. A signed contract of sale is required.
19. Two (2) character reference letters for purchaser.
20. Signed and Notarized Acceptance of House Rules.
Please remove House Rules from Package. Keep for your information.
RETURN SIGNED FORM ONLY.
21. Signed and Notarized Agreement of "Occupancy Standards".
22. Signed and Notarized "Prohibition of Subletting" Agreement
23. Signed and Notarized "No Pet Policy".
24. Signed and Notarized "Carbon Monoxide Form".
25. Signed "Smoking Policy".
26. Signed "Insurance Notification".
27. Signed "Lead Paint Notification".
28. Signed and Notarized "Alterations to Apartment" Notification.
29. If seller is deceased and an estate is involved:
 - A. Death certificate
 - B. Letter of Administration/Testamentary dated within the last six (6) months

Please contact the Management Office at (718) 465-6070 if you have any questions. We ask your indulgence if the form(s) seem somewhat lengthy. Please consider that a cooperative, unlike a rental building, requires cooperation and voluntary effort by the residents. Therefore, a congenial group of residents is far more important to us than would be the case in a rental building. You should also remember that purchasers of apartments will be living with us for an indefinite period. The cooperative is entering into a relationship which may continue for a long time. Bearing this in mind, you will understand the precautions which are designed for the benefit of all present and future lessees.

NOTE: ALL COMMUNICATION DURING THIS PROCESS MUST BE THROUGH THE MANAGEMENT OFFICE ONLY, YOU MAY NOT CONTACT INDIVIDUAL BOARD MEMBERS.

A) The Corporation's current minimum financial requirement for prospective purchasers are as follows:

For 3 ½ rooms, 4 ½ rooms, 5 rooms, duplexes and 6 rooms:

1. Annual income must be at least **seven (7)** times the total of the **annual** maintenance charges plus **two (2)** times your **annual** mortgage payments, if any. **Prospective purchaser must qualify on income only.**
2. Income must be verifiable by Form 1040 Federal and State/City IT-201 income tax returns for the past two years for each applicant. (Employer W-2 wage forms required).
3. Cooperative loan financing is limited to a maximum of eighty (80 %) percent of the purchase price.
4. **Down payment must be purchaser's funds and must be in purchaser's bank account for a minimum of six (6) months.**
5. **For ALL GIFTS, funds must be in purchaser's bank account for a minimum of six (6) months.**
6. Work history must be verifiable and show stability for each applicant. A credit and background search may be obtained for each applicant and a background search may be obtained for anyone who will reside in the apartment over the age of seventeen (17).
7. The Board of Directors reserves the right to review other assets such as bank accounts, certificates of deposit, stock certificates, etc. and perform a bankruptcy check, credit check and a criminal background check.

B) The number of people residing in the apartment may not exceed the following standards:

One (1) bedroom – One or two adults living together as husband and wife, or domestic and financial partners who are not related.

Two (2) bedroom – No more than four persons as follows: Two adults and two dependent minor children, in the absence of children, the family may consist of two adults with one parent of either spouse, making a total of three.

Three (3) bedroom – No more than six persons as follows: Two adults and four dependent minor children, adult children and parents of either spouse shall be eligible.

C) The prospective purchaser must be informed of the following restrictions:

- 1. PETS ARE NOT ALLOWED.**
- 2. A shareholder is not allowed to conduct a business from his/her apartment.**
- 3. No bankruptcy within the past seven (7) years.**
- 4. SUBLETTING STRICTLY PROHIBITED..**
- 5. ONLY TWO SHAREHOLDERS ARE PERMITTED ON THE STOCK CERTIFICATE AND PROPRIETARY LEASE.**
- 6. CO-SIGNORS ARE STRICTLY PROHIBITED. THIS MUST BE THE PRIMARY RESIDENCE OF ANY PERSON(S) PURCHASING.**
- 7. Alterations to the apartment require the approval of the Board of Directors.**

D) Closing Fees:

Purchaser:

- 1. Only if Contract of Sale calls for financing provisions, \$450.00 fee made payable to Hankin & Mazel, PLLC.**
- 2. A one (1) time non-refundable contribution equal to three months maintenance made payable to United Veterans Mutual Housing Co., Inc.**

Seller:

- 1. \$850.00 fee payable to Hankin & Mazel, PLLC for corporate representation.**
- 2. Transfer Fee (Flip Tax) – This fee is twenty five percent (25%) of the profit or three percent (3%) of the purchase price, whichever is greater, not to exceed \$250.00 per share.**
- 3. \$1,500.00 check made payable to United Veterans Mutual Housing Co., Inc., to be held in escrow & returned approximately 45 - 60 days after closing.**

**United Veterans Mutual Housing Company, Inc.
A/K/A Bell Park Manor-Terrace**

Application for Approval of Sale of Cooperative Apartment

Name: _____

Address: _____

Unit #: _____

Date: _____

Note: The Corporation reserves the right to verify all information supplied herein with credit agencies, landlords, employers, banks, references, etc. By your signature, you authorize verification of all information supplied. **A personal interview shall be required of all purchasers and any individuals who intend to occupy the apartment.**

The information supplied should cover each purchaser when there is more than one person involved.

1. Name(s) of Purchaser(s): _____

2. Address: _____

3. City: _____ State: _____ Zip Code: _____

4. Telephone No.: Home _____ Business _____

Other _____

5. Date of Birth: _____ Marital Status: _____

Date of Birth: _____ Marital Status: _____

6. Social Security Number: _____

Social Security Number: _____

7. Who does the Purchaser(s) anticipate will reside in the apartment? (List name, age, and relationship to Purchaser(s))

8. Previous addresses (last seven (7) years)

Address	Period of Residence	Name & Address of Landlord / Owner
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

9. Employment experience of Purchaser(s) (last seven (7) years) (Indicate whether position was full-time or temporary).

(a) Name & Address of Employer or Business:

Date from:

 Date To:

Supervisors Name:

Phone No.:

 Fax No.:

Title Duties:

Annual Salary:

*If more space is required, please attach additional page

(b) Name & Address of Employer or Business: _____

Date from: _____ Date To: _____

Supervisors Name: _____

Phone No.: _____ Fax No.: _____

Title Duties: _____

Annual Salary: _____

* If more space is required, please attach additional page

10. Estimated annual income of Purchaser(s)

\$ _____

\$ _____

Submit a breakdown of annual income, indicating sources of each item:

\$ _____ Source _____

\$ _____ Source _____

\$ _____ Source _____

\$ _____ Source _____

Total \$: _____

11. Submit statement of Purchaser's assets and liabilities.

* If more space is required, please attach additional page

12. Please list as personal references two (2) persons other than relatives, who have known the purchaser at least two (2) years:

1) Name: _____

Address: _____

Telephone No.: _____

2) Name: _____

Address: _____

Telephone No.: _____

13. A) Have you ever been arrested. Yes _____ No _____ If yes please explain.

* If more space is required, please attach additional page

B) Have you ever been charged with any type of criminal activity? Yes _____
No _____ If yes, please explain.

* If more space is required, please attach additional page

14. A) State whether purchaser(s) has (have) been convicted of a crime. If so,
please explain.

B) Has anyone who will be living in this apartment ever been convicted of a crime?

* If more space is required, please attach additional page

15. List all debts of Purchaser(s) indicating amount, creditor, due date,
schedule of payment:

* If more space is required, please attach additional page

16. Are there any unsatisfied judgments against purchaser(s)? If so explain.

17. Has/Have Purchaser(s) ever filed a petition in bankruptcy or had any petition been filed against purchaser(s)? If so, give full particulars including date petition was filed, court and disposition. If discharge was denied, give full particulars:

18. Please provide bank references (indicate name and address of bank and account numbers for Purchaser(s)).

Name & Address of Bank _____

Phone No.: _____ Fax No.: _____

Account Number _____

Name & Address of Bank _____

Phone No.: _____ Fax No.: _____

Account Number _____

Name & Address of Bank _____

Phone No.: _____ Fax No.: _____

Account Number _____

19. Address of any additional residence owned or leased by Purchaser.

20. When does Purchaser plan to take possession of the Apartment?

21. Purchaser's attorney

Name: _____

Address: _____

Telephone No.: _____ Fax No.: _____

22. Name, address and telephone number of Seller's broker, (if any):

23. Purchase price of apartment: \$ _____

If part of the purchase price is being financed, indicate:

Amount to be financed: \$ _____

Duration of Loan: _____

Estimated monthly payment: _____

Lender's name & address: _____

If there are any other facts the Purchaser would like to bring to the attention of the Board with regard to this application, please set forth on a separate sheet of paper and attach to this application.

Applicants Signature:

Date:

Co-Applicants Signature: _____

Date:

TENANT DATA VERIFICATION

AUTHORIZATION TO OBTAIN A CREDIT REPORT

BUILDING ADDRESS _____

APARTMENT # _____

I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR
INSTITUTION TO RELEASE TO _____ AND
OR ITS REPRESENTATIVE ANY AND ALL INFORMATION THAT
THEY HAVE CONCERNING CREDIT REPORT

I HEREBY RELEASE THE INDIVIDUAL, COMPANY, OR
INSTITUTION AND ALL INDIVIDUALS CONNECTED THEREWITH
FROM ALL LIABILITY FOR ANY DAMAGE WHATSOEVER
INCURRED IN FURNISHING SUCH INFORMATION...

Print Name: _____

Signature: _____

Social Security # _____

Date of Birth _____
Month/date/year

Address: _____

City

State

Zip Code

Date: _____

TENANT DATA VERIFICATION

AUTHORIZATION TO OBTAIN A CREDIT REPORT

BUILDING ADDRESS _____

APARTMENT # _____

I HERE BY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR
INSTITUTION TO RELEASE TO _____ AND
OR ITS REPRESENTATIVE ANY AND ALL INFORMATION THAT
THEY HAVE CONCERNING CREDIT REPORT

I HEREBY RELEASE THE INDIVIDUAL, COMPANY, OR
INSTITUTION AND ALL INDIVIDUALS CONNECTED THEREWITH
FROM ALL LIABILITY FOR ANY DAMAGE WHATSOEVER
INCURRED IN FURNISHING SUCH INFORMATION...

Print Name: _____

Signature: _____

Social Security # _____

Date of Birth _____

Month/date/year

Address: _____

City

State

Zip Code

Date: _____

United Veterans Mutual Housing Co., Inc.
Bell Park Manor-Terrace

221-22 Manor Road
Bellerose Manor, NY 11427

I hereby authorize United Veterans Mutual Housing Co., Inc. to conduct a background check for the purchase of shares in United Veterans Mutual Housing Company, Inc. or whatever it deems necessary to process my application for residency. I agree to hold landlord and any affiliated organizations harmless for any claims that may arise as a result of this investigation.

Applicant's Name:

(Print)

Date: _____

Applicant's Name:

(Signature)

Date: _____

Co-Applicant's Name:

(Print)

Date: _____

Co-Applicant's Name:

(Signature)

Date: _____

RELEASE OF INFORMATION AUTHORIZATION

AUTHORIZATION TO OBTAIN A CRIMINAL REPORT

I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR
INSTITUTION TO RELEASE TO _____
AND/OR ITS REPRESENTATIVE ANY AND ALL INFORMATION
THAT THEY HAVE CONCERNING ANY CRIMINAL ACTIVITY AND
SEX OFFENDER HISTORY...

I HEREBY RELEASE THE INDIVIDUAL, COMPANY, OR
INSTITUTION AND ALL INDIVIDUALS CONNECTED THEREWITH
FROM ALL LIABILITY FOR ANY DAMAGE WHATSOEVER
INCURRED IN FURNISHING SUCH INFORMATION...

Print Name: _____ Date Of Birth _____

Signature: _____

Address: _____

City : _____

State : _____ Zip Code _____

Social Security #: _____

RELEASE OF INFORMATION AUTHORIZATION

AUTHORIZATION TO OBTAIN A CRIMINAL REPORT

I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR
INSTITUTION TO RELEASE TO _____
AND/OR ITS REPRESENTATIVE ANY AND ALL INFORMATION
THAT THEY HAVE CONCERNING ANY CRIMINAL ACTIVITY AND
SEX OFFENDER HISTORY...

I HEREBY RELEASE THE INDIVIDUAL, COMPANY, OR
INSTITUTION AND ALL INDIVIDUALS CONNECTED THEREWITH
FROM ALL LIABILITY FOR ANY DAMAGE WHATSOEVER
INCURRED IN FURNISHING SUCH INFORMATION...

Print Name: _____ Date Of Birth _____

Signature: _____

Address: _____

City : _____

State : _____ Zip Code _____

Social Security #: _____

United Veterans Mutual Housing Co., Inc.
Bell Park Manor-Terrace

I hereby authorize United Veterans Mutual Housing Co., Inc. to conduct a background check. I agree to hold landlord and any affiliated organizations harmless for any claims that may arise as a result of this investigation. **(For every person who will reside in the apartment over the age of seventeen (17) This form must be completed and signed).**

Residents Name: _____ Date: _____
(Print)

Address: _____

D.O.B: _____ SSN #: _____

Residents Name: _____ Date: _____
(Signature)

Residents Name: _____ Date: _____
(Print)

Address: _____

D.O.B: _____ SSN #: _____

Residents Name: _____ Date: _____
(Signature)

United Veterans Mutual Housing Co., Inc.
aka/ Bell Park Manor-Terrace

221-22 Manor Road, Bellerose Manor, NY 11427 Phone (718)465-6070 Fax (718)468-7556

Uniform Residential Application

This application is designed to be completed by one applicant. In the spirit of U.S. Policy for the achievement of equal housing opportunity, there are no barriers to obtaining housing because of race, color, sexual orientation, national origin, handicap, or familial status. Approval is based on an applicant's ability to prove employment, income, residency, credit and financial history as described in detail below. All information supplied will be verified for its accuracy. All sections must be complete before submitting for approval.

~This Application Must Be Printed and Legible~

Applicant

First Name		Middle Initial	Last Name	
Sex: M F	Social Security Number		Date of Birth	
Day Phone #: :		Evening Phone #:		

Current Residency

Address		Apt#	City	State	Zip Code
Daytime Phone #			Evening Phone #		
Name of Landlord, Mgmt Co.		Phone #		Contact Name	
How long have you lived at this address?	Monthly Rent/Mortgage \$		Own Rent <input type="checkbox"/>		

Prior Residency Must be filled in if you lived at the current address for less than 2 years

Address		Apt#	City	State	Zip Code
Name of Landlord, Mgmt Co.		Phone #		Contact Name	
How long did you live at this address?	Monthly Rent/Mortgage \$		Own Rent <input type="checkbox"/>		

Current Employment <i>Primary source of income</i>			
Name of Employer		Your Position/Title/Type of Business	
Address		City	State Zip Code
Contact Name	Phone #	Dates of Employment (from-to)	

Annual Salary				
Gross Amount	Overtime	Bonuses	Commissions	Total

Prior Employment <i>Must be filled in if current employment is less than 2 years</i>			
Name of Employer		Your Position/Title/Type of Business	
Address		City	State Zip Code
Contact Name	Phone #	Dates (from-to)	

Annual Salary				
Gross Amount	Overtime	Bonuses	Commissions	Total

Asset Accounts			
Checking Savings <input type="checkbox"/> Money Market Stock Investment <input type="checkbox"/> Other _____ Individual Account Joint Account <input type="checkbox"/> (Supply Spouse Name & SS #) Corporate Account (Supply Tax ID #) Is this a Borrowing Account? No <input type="checkbox"/> Yes			
Name of Bank or Institution	Branch Address	Account #	
Name(s) Exactly as They Appear on this Account		Branch Phone #	Contact Name

Asset Accounts			
Checking Savings <input type="checkbox"/> Money Market Stock Investment <input type="checkbox"/> Other _____ Individual Account Joint Account <input type="checkbox"/> (Supply Spouse Name & SS #) Corporate Account (Supply Tax ID #) Is this a Borrowing Account? No <input type="checkbox"/> Yes			
Name of Bank or Institution	Branch Address	Account #	
Name(s) Exactly as They Appear on this Account		Branch Phone #	Contact Name

<i>Department of Motor Vehicles Identification Must be Completed if Registered Motorist</i>					
Motorist License ID #	State of License	Primary Vehicle License Plate	Manufacturer	Year	Model

<i>References Other Than Family Members</i>		
Name	Phone #	Relationship to You
Name	Phone #	Relationship to You

Applicants Signature: _____

Date: _____

United Veterans Mutual Housing Co., Inc.
aka/ Bell Park Manor-Terrace

221-22 Manor Road, Bellerose Manor, NY 11427 Phone (718)465-6070 Fax (718)468-7556

Uniform Residential Application

This application is designed to be completed by one applicant. In the spirit of U.S. Policy for the achievement of equal housing opportunity, there are no barriers to obtaining housing because of race, color, sexual orientation, national origin, handicap, or familial status. Approval is based on an applicant's ability to prove employment, income, residency, credit and financial history as described in detail below. All information supplied will be verified for its accuracy. All sections must be complete before submitting for approval.

~This Application Must Be Printed and Legible~

Co - Applicant

First Name		Middle Initial	Last Name
Sex: M F	Social Security Number		Date of Birth
Day Phone #. :		Evening Phone #:	

Current Residency

Address	Apt#	City	State	Zip Code
Daytime Phone #		Evening Phone #		
Name of Landlord, Mgmt Co.		Phone #	Contact Name	
How long have you lived at this address?	Monthly Rent/Mortgage \$		Own Rent <input type="checkbox"/>	

Prior Residency Must be filled in if you lived at the current address for less than 2 years

Address	Apt#	City	State	Zip Code
Name of Landlord, Mgmt Co.		Phone #	Contact Name	
How long did you live at this address?	Monthly Rent/Mortgage \$		Own Rent <input type="checkbox"/>	

Current Employment				Primary source of income	
Name of Employer		Your Position/Title/Type of Business			
Address		City	State	Zip Code	
Contact Name	Phone #		Dates of Employment (from-to)		

Annual Salary				
Gross Amount	Overtime	Bonuses	Commissions	Total

Prior Employment				Must be filled in if current employment is less than 2 years	
Name of Employer		Your Position/Title/Type of Business			
Address		City	State	Zip Code	
Contact Name	Phone #		Dates (from-to)		

Annual Salary				
Gross Amount	Overtime	Bonuses	Commissions	Total

Asset Accounts			
Checking Savings <input type="checkbox"/> Money Market Stock Investment <input type="checkbox"/> Other _____ Individual Account Joint Account <input type="checkbox"/> (Supply Spouse Name & SS #) Corporate Account (Supply Tax ID #) Is this a Borrowing Account? No <input type="checkbox"/> Yes			
Name of Bank or Institution	Branch Address		Account #
Name(s) Exactly as They Appear on this Account		Branch Phone #	Contact Name

Asset Accounts			
Checking Savings <input type="checkbox"/> Money Market Stock Investment <input type="checkbox"/> Other _____ Individual Account Joint Account <input type="checkbox"/> (Supply Spouse Name & SS #) Corporate Account (Supply Tax ID #) Is this a Borrowing Account? No <input type="checkbox"/> Yes			
Name of Bank or Institution	Branch Address		Account #
Name(s) Exactly as They Appear on this Account		Branch Phone #	Contact Name

<i>Department of Motor Vehicles Identification Must be Completed if Registered Motorist</i>					
Motorist License ID #	State of License	Primary Vehicle License Plate	Manufacturer	Year	Model

<i>References Other Than Family Members</i>		
Name	Phone #	Relationship to You
Name	Phone #	Relationship to You

Co - Applicants Signature: _____

Date: _____

United Veterans Mutual Housing Co., Inc.
Occupancy Standards Agreement

a) **One Bedroom Apartments** -- One or two adults living together as husband & wife, or domestic and financial partners who are not related.

b) **Two Bedroom Apartments** -- No more than four persons as follows: Two adults and two dependent children, in the absence of children, the family may consist of two adults with one parent of either spouse, making a total of three.

c) **Three Bedroom Apartments** -- No more than six persons as follows: Two adults and four dependent minor children, adult children and parents of either spouse shall be eligible.

II. In all instances, occupancy of the same bedroom by children of opposite sex shall be permitted only if the older child has not attained his or her 11th birthday, and the other child has not attained his or her 7th birthday, and the other child has not attained his or her 7th birthday at the time of moving into the apartment.

III. The Board of Directors may, upon written application, waive these standards on a case by case basis only for good cause shown, and then only provided the housing company is experiencing financial difficulties because of a slowed market and an unreasonable number of vacancies.

I / We have read, understand and will abide by United Veterans Mutual Housing Co.'s Occupancy Standards.

I / We will have _____ adults and _____ children residing in my / our _____ room apartment located at _____

Signature(s): _____ Date: _____

State of _____
County of _____

Subscribed and sworn to me this _____
Day of _____

Lead Paint
Disclosure

Please note that all buildings were initially occupied in 1951 and were decorated with lead paint.

In many instances, this lead paint has been scraped away, but there may still be traces of lead paint in the apartment.

If you have children under 10 occupying the apartment, please be aware that it is dangerous for them to eat lead paint chips.

COPY OF THIS
DISCLOSURE WAS RECEIVED:

Signature(s): _____

Date: _____

Prohibition of Subletting

I / we understand that subletting is prohibited and considered to be a material and substantial breach of the terms and conditions of the Proprietary Lease.

If I am caught subletting, I will be subject to immediate legal action and a \$1,500.00 monthly administrative charge until the illegal sublet is vacated. Legal fees will also be imposed.

Signature(s): _____

Date:

State of
County of

Subscribed and sworn to me this
Day of

Insurance Notification

“Insurance is required for all Shareholders in the amount of \$25,000.00 for personal/property damage and \$100,000.00 for liability. This insurance must remain in force at all times”.

If a Shareholder does not have the required insurance an administrative fee may be placed on their maintenance account in the amount of \$250.00 for the first month and \$100.00 a month thereafter until proof of insurance is submitted to the Management Office.

Signature(s): _____

Date:

United Veterans Mutual Housing Co., Inc.

221-22 Manor Road / Bellerose Manor, NY 11427
718-465-6070

No Pet Policy

I / we understand that harboring a cat or dog is strictly prohibited and is a violation of the terms and conditions of the Proprietary Lease and House Rules.

Signature(s): _____

Date:

State of
County of

Subscribed and sworn to me this
Day of

Carbon Monoxide Form

The undersigned, being duly sworn, deposes and says under the penalty of perjury that:

- I am the purchaser of the cooperative shares in United Veterans Mutual Housing Co. Inc. located at _____, New York (the "Premises").
- The Premises is a cooperative apartment used as a residence.
- Installed in the Premises is an approved and operational carbon monoxide detecting device in compliance with the law.
- These statements are made with the knowledge that a willfully false representation is unlawful and are punishable as a crime.

(Print Name)

(Sign Name)

Sworn to before me this
Day of _____, 20

Notary Public

SMOKING POLICY

In recognizing the dangers of secondhand smoke exposure to the health and wellbeing of United Veterans' residents, and acknowledging United Veterans' Bylaws, proprietary lease and house rules restriction against the creation of nuisances, the following rules shall be implemented on United Veterans Mutual Housing Co., Inc. Property:

1. Smoking is prohibited as described below:

Smoking is prohibited in all common areas and areas within 15 feet of entrances, windows and doors. Common areas includes common hallways, United Veterans Management Office, United Veterans Maintenance Office, laundry rooms, storage rooms, garages, and any other enclosed area under the direct control of United Veterans Mutual Housing Co., Inc.

2. Definition of "Smoking":

"Smoking" means inhaling, exhaling, burning or carrying any lighted cigar, cigarette, pipe or any form of lighted object or device that contains tobacco.

3. Smoke Migrating from a United Veterans Apartment:

Smoke migrating from an apartment into an adjacent apartment shall be recognized by the Board of Directors as a nuisance, and thus a violation of the United Veterans Mutual Housing Co., Inc. Bylaws; proprietary lease and house rules. Once the Board of Directors is provided detailed notice of this nuisance, a mandatory mediation will be required between the Complainant and the offending Shareholder in order to mitigate the nuisance. Failure to participate in the mediation or failure to take reasonable steps required to mitigate the nuisance will be deemed a material violation of the United Veterans Mutual Housing Co., Inc. Bylaws; proprietary lease and house rules, and shall constitute grounds for fines; termination of the stock and proprietary lease, or any other remedy available to United Veterans Mutual Housing Co., Inc. under the Law. All remedies hereunder shall be cumulative.

4. Applicability

These rules apply to shareholders, residents, and any other persons on the premises, including guests and servicepersons. Shareholders are responsible for their residents and guests while located on United Veterans Mutual Housing Co. Inc. property (*See House Rule #1.*).

5. Enforcement

Violation of these rules shall be deemed a violation of the United Veterans' bylaws, and may constitute grounds for fines or eviction, or any other remedy available to United Veterans' under the Law.

I /we have read, understand and agree to abide by the above.

Signature (s) _____

Print Name (s) _____

United Veterans Mutual Housing Co., Inc.

221-22 Manor Road / Bellerose Manor, N.Y. 11427
718-465-6070 www.bellparkmanorterrace.com

Acceptance of House Rules

I (we) have read, understand and agree to abide by all House Rules.

Signature(s): _____

Date:

State of
County of

Subscribed and sworn to me this
Day of

United Veterans Mutual Housing Co., Inc.

221-22 Manor Road / Bellerose Manor, N.Y. 11427
718-465-6070 www.bellparkmanorterrace.com

ALTERATIONS TO APARTMENTS

In accordance with the Proprietary Lease, Shareholders are cautioned that their right to make any additions, changes or alterations to the interior or exterior of the building requires written permission from the Board of Directors. Shareholders must submit an alteration agreement to Management for Board approval. No work may be commenced until such time that the Board gives written approval. Violation of this rule shall result in a fine of up to \$5,000.00 and/or legal action.

I (we) have read, understand and agree to abide by the above.

Signature(s)

Print Name(s)

Date:

State of
County of

Subscribed and sworn to me this

United Veterans Mutual Housing Co., Inc.

221-22 Manor Road / Bellerose Manor, N.Y. 11427
718-465-6070 www.bellparkmanorterrace.com

Residency Verification Form

Applicant: Please complete the TOP PORTION ONLY.

Date: _____

Name of Landlord: _____

Phone: _____ Fax: _____ Email: _____

Are you current with your rent? Yes _____ No _____

To Whom This May Concern:

_____, residing at _____
has applied for residency at our property. We would appreciate the following information to expedite the application

I, _____ authorize you to release any and all of the information requested below regarding my past/current rental history.

Applicant: Please have this portion completed by the LANDLORD OR MANAGING AGENT

Lease Dates: from _____ to _____

Rental Rates: \$ _____ per month

Number of occupants: _____

Is (was) current on rent: _____

Ever been late? _____ How late? _____ How often? _____

Have you ever begun eviction proceedings for non-payment? _____

Was full security deposit refunded? _____

Does applicant permit persons other than those on the lease to live in the unit? _____

Any complaints or non-compliance issues? _____ If yes please provide details:

Would you re-rent to this resident? _____

Has resident given notice of intent to vacate? _____

Thank you for your assistance.

Name (Print): _____ Date: _____

Name (sign): _____ Title: _____

(November 2020)

Department of the Treasury
Internal Revenue Service**Request for Copy of Tax Return**

- Do not sign this form unless all applicable lines have been completed.
 ► Request may be rejected if the form is incomplete or illegible.
 ► For more information about Form 4506, visit www.irs.gov/form4506.

OMB No. 1545-0429

Tip. You may be able to get your tax return or return information from other sources. If you had your tax return completed by a paid preparer, they should be able to provide you a copy of the return. The IRS can provide a Tax Return Transcript for many returns free of charge. The transcript provides most of the line entries from the original tax return and usually contains the information that a third party (such as a mortgage company) requires. See Form 4506-T, Request for Transcript of Tax Return, or you can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." or call 1-800-908-9946.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	
5 If the tax return is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

Caution: If the tax return is being sent to the third party, ensure that lines 5 through 7 are completed before signing. (see instructions).

- 6** Tax return requested. Form 1040, 1120, 941, etc. and all attachments as originally submitted to the IRS, including Form(s) W-2, schedules, or amended returns. Copies of Forms 1040, 1040A, and 1040EZ are generally available for 7 years from filing before they are destroyed by law. Other returns may be available for a longer period of time. Enter only one return number. If you need more than one type of return, you must complete another Form 4506. ► _____

Note: If the copies must be certified for court or administrative proceedings, check here ☐

- 7** Year or period requested. Enter the ending date of the tax year or period using the mm/dd/yyyy format (see instructions).
 ____/____/____ ____/____/____ ____/____/____ ____/____/____
 ____/____/____ ____/____/____ ____/____/____ ____/____/____

- | | |
|---|----------|
| 8 Fee. There is a \$43 fee for each return requested. Full payment must be included with your request or it will be rejected. Make your check or money order payable to "United States Treasury." Enter your SSN, ITIN, or EIN and "Form 4506 request" on your check or money order. | |
| a Cost for each return | \$ _____ |
| b Number of returns requested on line 7 | _____ |
| c Total cost. Multiply line 8a by line 8b | \$ _____ |

- 9** If we cannot find the tax return, we will refund the fee. If the refund should go to the third party listed on line 5, check here ☐

Caution: Do not sign this form unless all applicable lines have been completed.

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax return requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506 on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

- ☐ **Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506. See instructions.**

Phone number of taxpayer on line 1a or 2a _____

Sign Here

Signature (see instructions)	Date
Print/Type name	Title (if line 1a above is a corporation, partnership, estate, or trust)
Spouse's signature	Date
Print/Type name	

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506 and its instructions, go to www.irs.gov/form4506.

General Instructions

Caution: Do not sign this form unless all applicable lines, including lines 5 through 7, have been completed.

Designated Recipient Notification. Internal Revenue Code, Section 6103(c), limits disclosure and use of return information received pursuant to the taxpayer's consent and holds the recipient subject to penalties for any unauthorized access, other use, or redisclosure without the taxpayer's express permission or request.

Taxpayer Notification. Internal Revenue Code, Section 6103(c), limits disclosure and use of return information provided pursuant to your consent and holds the recipient subject to penalties, brought by private right of action, for any unauthorized access, other use, or redisclosure without your express permission or request.

Purpose of form. Use Form 4506 to request a copy of your tax return. You can also designate (on line 5) a third party to receive the tax return.

How long will it take? It may take up to 75 calendar days for us to process your request.

Where to file. Attach payment and mail Form 4506 to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual returns (Form 1040 series) and one for all other returns.

If you are requesting a return for more than one year or period and the chart below shows two different addresses, send your request based on the address of your most recent return.

Chart for individual returns (Form 1040 series)

If you filed an individual return and lived in:

Mail to:

Florida, Louisiana, Mississippi, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service
RAIVS Team
Stop 6716 AUSC
Austin, TX 73301

Alabama, Arkansas, Delaware, Georgia, Illinois, Indiana, Iowa, Kentucky, Maine, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, North Carolina, Oklahoma, South Carolina, Tennessee, Vermont, Virginia, Wisconsin

Internal Revenue Service
RAIVS Team
Stop 6705 S-2
Kansas City, MO 64999

Alaska, Arizona, California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kansas, Maryland, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Dakota, Utah, Washington, West Virginia, Wyoming

Internal Revenue Service
RAIVS Team
P.O. Box 9941
Mail Stop 6734
Ogden, UT 84409

Chart for all other returns

For returns not in Form 1040 series, if the address on the return was in:

Mail to:

Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin

Internal Revenue Service
RAIVS Team
Stop 6705 S-2
Kansas City, MO 64999

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service
RAIVS Team
P.O. Box 9941
Mail Stop 6734
Ogden, UT 84409

Specific Instructions

Line 1b. Enter the social security number (SSN) or individual taxpayer identification number (ITIN) for the individual listed on line 1a, or enter the employer identification number (EIN) for the business listed on line 1a. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 3. Enter your current address. If you use a P.O. box, please include it on this line 3.

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note. If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address, or Form 8822-B, Change of Address or Responsible Party — Business, with Form 4506.

Line 7. Enter the end date of the tax year or period requested in mm/dd/yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12/31/2018 for a calendar year 2018 Form 1040 return, or 03/31/2017 for a first quarter Form 941 return.

Signature and date. Form 4506 must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506 within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines, including lines 5 through 7, are completed before signing.



CAUTION You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

Individuals. Copies of jointly filed tax returns may be furnished to other spouse. Only one signature is required. Sign Form 4506 exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506 can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506 but must provide documentation to support the requester's right to receive the information.

Partnerships. Generally, Form 4506 can be signed by any person who was a member of the partnership during any part of the tax period requested on line 7.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506 for a taxpayer only if this authority has been specifically delegated to the representative on Form 2848, line 5a. Form 2848 showing the delegation must be attached to Form 4506.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested return(s) under the Internal Revenue Code. We need this information to properly identify the return(s) and respond to your request. If you request a copy of a tax return, sections 6103 and 6109 require you to provide this information, including your SSN or EIN, to process your request. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506 will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 10 min.; Preparing the form, 16 min.; and Copying, assembling, and sending the form to the IRS, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506 simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Forms and Publications Division
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224.

Do not send the form to this address. Instead, see *Where to file* on this page.

Bell Park Manor Terrace

United Veterans Mutual Housing Co., Inc

REVISED HOUSE RULES 2025



www.bellparkmanorterrace.com

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In the event the terms and conditions of these House Rules conflict with the terms and conditions of the By Laws or Proprietary Lease, the terms of the By Laws and Proprietary Lease shall prevail.

1. Use of Common Areas

- Residents and their guests shall not play in the common hallways, stairways, garages, in trees or on roofs. Lawns shall not be used as playgrounds or for any other purpose that may impair the appearance or increase the cost of maintenance.
- Shareholders will be held responsible for the actions of their children and guests and will be held responsible for any damages.
- Lawns and gardens are deemed common property. Any items placed on lawns must be in agreement by both lower and upper residents. Should neighbors not agree then it would be decided upon by the Board of Directors.
- Kiddie pools may be utilized in season provided that the water is emptied daily by 8:00 P.M. and the pool is placed upright at the side or back of the building in order to preserve the grass.
- Kiddie pools should be supervised at all times when being used.
- **Smoking is prohibited in the common hallways.**

Note – 1st violation – warning letter, 2nd violation - \$50.00 fine, 3rd violation - \$100.00, and 4th violation - \$150.00 fine.

2. Use of Playgrounds

- All residents must abide by the Rules and Regulations” regarding use of the playgrounds as indicated on the signs posted in the playgrounds (Rules and Regulations behind House Rules).

Note – 1st violation - \$100.00 fine, 2nd violation - \$150.00 fine.

3. Obstruction of Common Areas

- The entrances, vestibules, sidewalks, and driveways shall not be obstructed or used for any purpose other than to enter and exit from apartments.
- You may not drape, chain, or tie any items to railings, trees, ramps etc. anywhere on the property.

Note – 1st violation – warning letter, 2nd violation - \$50.00 fine, 3rd violation- \$100.00, and 4th violation - \$150.00 fine.

4. Smoking Policy

In recognizing the dangers of secondhand smoke exposure to the health and wellbeing of United Veterans Residents, and acknowledging United Veterans Bylaws, proprietary lease and house rules restrictions against the creation of nuisances, the following rules shall be implemented on United Veterans Mutual Housing Co., Inc. Property:

- 1. Smoking is prohibited as described below:

Smoking is prohibited in all common areas within 15 feet of entrances, windows, and doors. Common areas include common hallways, United Veterans Management Office, United Veterans Maintenance Office,

Laundry rooms, storage rooms, garages, and any other enclosed area under the direct control of United Veterans Mutual Housing Co., Inc.

- 2. Definition of "Smoking"

"Smoking" means inhaling, exhaling, burning, or carrying any lighted cigar, cigarette, pipe or any form of lighted object or device that contains but not limited to tobacco, marijuana, etc.

- 3. Smoke Migrating from United Veterans Apartments:

Smoke migrating from an apartment into an adjacent apartment shall be recognized by the Board of Directors as a nuisance, and thus a violation of the United Veterans By Laws, Proprietary Lease, and House Rules. This is deemed a material violation of the grounds for fines: termination of the Stock and Proprietary Lease, or any other remedy available to the United Veterans under the Law. All remedies hereunder shall be cumulative.

- 4. Applicability

These rules apply to shareholders, residents and any other person on the premises, including guests and service persons. Shareholders are responsible for their residents and guests while located on United Veterans property (See House Rule #1).

- 5. Enforcement

Violation of these rules shall be deemed a violation of the United Veterans bylaws, and may constitute grounds for fines or eviction, or any other remedy available to United Veterans under the Law.

Note- 1st violation – warning letter, 2nd violation- \$250.00, 3rd violation- \$300.00 and 4th violation- \$400.00

5. Garbage

- All garbage must be brought to the garbage rooms and placed inside the proper bins. Please be sure to tie your garbage bags. Garbage must not be placed on the outside of or on the floor of the garbage room. Green bins are for household garbage, white bins are for papers, blue pails are for recyclables, and brown pails are for composting.
- Bulk furniture must be placed inside the garbage rooms.
- Contractors, who have been hired by residents to do renovations in their apartment, may not dispose of any debris in the garbage rooms.
- It is the Shareholders responsibility to fully encase, within a sealed bag, all mattresses and/or box springs being discarded. Bags may be purchased at the Maintenance Department.

Note – 1st violation- warning letter, 2nd violation- \$250.00, 3rd violation- \$300.00 and 4th violation \$400.00.

6. Placement and Disposal of Articles

- It is forbidden to hang, shake, drape, or sweep any articles, including laundry, from windows or doors or into hallways or on the outside areas in any manner.
- No cigarettes, matches, trash or articles of any kind are to be thrown from windows or disposed of in anything other than the proper container.

Note – 1st violation – warning letter, 2nd violation -\$50.00, 3rd violation -\$100.00 and 4th violation-\$150.00.

7. Planting and Removal of Flowers, Etc.

- The Board of Directors may direct the resident to remove all foliage from common areas that may be deemed unsightly.
- **No gardens of vegetables, fruits, spices, etc. are permitted on Bell Park Manor Terrace property.**

Note – 1st violation -warning letter, 2nd violation -\$50.00, 3rd violation -\$100.00 and 4th violation -\$150.00

8. Alteration to Apartments

- In accordance with the Proprietary Lease, Shareholders are cautioned that their right to make additions, changes or alterations to the interior or exterior of the building requires written permission from the Board of Directors. Shareholders must submit an alteration agreement to Management for Board approval. **No work may commence until such time that the Board gives written approval.** Violation of this rule shall result in a fine of up to **\$5,000.00** (see note below). For more information regarding alterations please pick up an Alteration Agreement in the Management Office or contact the Maintenance Department.
- Shareholders are responsible for the maintenance and upkeep of all alterations made to their apartment, whether alterations were done by them or the previous owner(s).

*Note – Violation -fine of \$2,500.00 for work being done or completed without approval under the minor alteration agreement and \$5,000.00 for work being done or completed without approval under the major alteration agreement. Also, full restoration to apartment's original state may be required. ***Any subsequent violation of continuing to do work without any approved alteration agreement will result in an additional fine of up to \$5,000.00.*

9. Fences

- Any resident wishing to erect a fence must first obtain written consent from the Board of Directors. Pick up an Alteration Agreement in the Management Office for guidelines.

Note – Violation -fine of \$2,500.00 for work being done or completed without approval under the minor alteration agreement and \$5,000.00 for work being done or completed without approval under the major alteration agreement.

10. Signs, Antennas and/or Advertisements

- No sign, signal, aerial, antenna, advertisement, or illumination shall be placed on any window, on any part of the building, or anywhere on the property.
- Nothing shall be placed on any outside windowsills or ledges.

Note – 1st violation -warning letter, 2nd violation -\$50.00, 3rd violation -\$100 and 4th violation -\$150.00

11. Political Displays

- All political displays including but not limited to political signage and flags are prohibited anywhere on Bell Park property.

Note – 1st violation -warning letter, 2nd violation -\$50.00, 3rd violation -\$100 and 4th violation -\$150.00

12. Yard Sales

- Yard Sales and auctions are **Strictly Prohibited** on Bell Park Manor Terrace property.

Note - 1st violation warning letter and \$500.00 fine, 2nd violation -\$750.00 fine

13. Noise

- No person shall make or permit any disturbing noises in the buildings or do or permit anything to be done therein, which will interfere with the rights, comforts, or conveniences of the other residents.
- No person shall permit the excessive use of any musical instruments or permit the operation of a stereo, radio, television, exercise equipment or any other appliance in lessees' apartment between the hours of **10:00 P.M. and the following 8:00 A.M.** To the extent that it shall disturb or annoy other occupants of the buildings.
- Construction, repairs work or other installation involving loud noise may be conducted in any apartment between the hours of **8:00 A.M. and 6:00 P.M. Monday through Friday and between the hours of 10:00 A.M. and 3:00 P.M. on Saturdays.** Work **may not** be performed on Sundays and Holidays. **NO EXCEPTIONS.**

Note – 1st violation -warning letter and \$100.00 fine, 2nd violation - \$200.00 fine, 3rd violation -\$300.00 fine

14. Move In / Move Out

- Move in/Move out times are between Sundays – Saturdays, 8:00 A.M. – 8:00 P.M.
- Moving trucks are not permitted to park in driveways, in the back of the apartments, on lawns, sidewalks, or courtyard grounds. **NO EXCEPTIONS.**

Note – Fine of \$250.00 plus an additional fine that will be assessed according to the damage caused.

15. Odors

- No resident shall allow unreasonable cooking, cleaning, smoking, or **other** odors to escape into the building. All units must have proper ventilation (open windows, window fans, and/or exhaust fans) to prevent said odors from annoying nearby residents.

Note – 1st violation -warning letter, 2nd violation -\$25.00, 3rd violation -\$50.00 and 4th violation \$75.00.

16. Use and Installation of Appliances

- Any installation of a washing machine, electronic dryer or dishwasher must meet the specifications set forth by the appliance manufacturer.
- The installation of new or relocated washing machines requires an approved alteration agreement.
- When installing a washing machine or dishwasher it is mandatory that check valves be installed on the water supply of the appliance.
- Dryers must be properly vented and **must be electric. Gas dryers are strictly prohibited.**
- To prevent dryer fires, it is important to clean the dryer lint filter every time you run your dryer and regularly clean the lint from the dryer vent.

Note – Violation -fine of \$2,500.00 for work being done or completed without approval under the minor alteration agreement and \$5,000.00 for work being done or completed without approval under the major alteration agreement.

17. Personal Property on Lawns, Steps and Public Areas

- Temporary storage of seasonal items must not appear unsightly.
- All unattended personal property, including toys, must be removed, or stored neatly away and out of sight after sundown.
- Storage Chest placed on the outside of the property must have Board approval in the form of an Alteration Agreement.
- The Corporation will not be responsible for any damages or loss to residents' property.
- Outdoor holiday decorations must be removed no later than 30 days after the holiday.
- Outdoor patio furniture must be removed at the end of the season.

Note – 1st violation -warning letter, 2nd violation -\$50.00, 3rd violation- \$75.00, and 4th violation -\$100.00.

18. Exterior Doors

- All common doors should be closed and locked at all times, unless otherwise agreed to by both lower and upper residents.

Note – 1st violation -warning letter, 2nd violation -\$25.00, 3rd violation -\$50.00 and 4th violation \$75.00

19. Emergency Access

- Employees of the Corporation, Management or Maintenance may enter an apartment in case of an emergency. In addition, they may also enter the apartment for an inspection or for the performance of work that may be reasonably required.
- As well as for the inspection of Carpet/ Cork Floors.

20. Insect Extermination

- Bell Park offers the services of an exterminator. Employees of the Corporation and any contractor or workers authorized by the Corporation may enter any apartment or garage upon reasonable notice for the purpose of inspecting to ascertain whether measures are necessary or desirable to control or exterminate any vermin insects or other pests.
- If the Corporation must take measures legal or other to control an infestation, the cost of such measure shall be payable by the shareholder.

21. Garages

A SHAREHOLDER IS ALLOWED TO RENT 1 GARAGE AND/OR 1 PARKING SPACE. HOWEVER, THE SHAREHOLDER MUST HAVE A CURRENTLY REGISTERED AND INSURED CAR IN THE SAID SHAREHOLDERS NAME FOR EACH SPACE THAT IS RENTED. ANY SHAREHOLDER THAT HAS ONLY 1 CAR REGISTERED AND INSURED IN THEIR NAME, HAVING BOTH A GARAGE AND PARKING SPACE WILL BE GIVEN THE OPTION TO CHOOSE WHICH ONE THEY WOULD LIKE TO KEEP AND RELINQUISH THE OTHER.

SHAREHOLDERS WHO HABITUALLY PAY LATE ARE AUTOMATICALLY REMOVED FROM GARAGE AND OUTDOOR PARKING SPACE WAITING LISTS.

- Garages are to be used for the storage of currently registered and insured passenger vehicles and for no other purpose. Dead storage of vehicles is strictly prohibited. Gasoline or any other combustible material shall not be stored in garages.
- Garages may not be sublet.
- Any resident who rents a garage located under an apartment is required to park head in and **idling is prohibited.**
- Use of garage for the purpose of storage is **strictly forbidden.**
- Garages are not to be used for any commercial purpose.
- Garages will not be issued to any non-four-wheel vehicles such as motorcycles, scooters, mopeds, etc.
- All vehicles must park nose in. You **cannot back your vehicle** into your garage.
- A Garage Lease may be cancelled upon five (5) days' notice at the discretion of the Board of Directors for violations of the Lease.
- All four (4) items: (1) Car Registration; (2) Driver's License; (3) Current Car Insurance Coverage; and (4) Current Homeowner Insurance Coverage **MUST HAVE A BELL PARK MANOR TERRACE ADDRESS. NO EXCEPTIONS!**

The electric outlet located in your garage above head is for the purpose of installation of an electric garage door opener ONLY. You may not use these electric sources for any other purpose, i.e., refrigerator, freezers, vacuums, power tools, charging any type of equipment, or for any other reason. If a resident uses the outlet in the garage for any other purpose other than an electric garage door opener, they are subject to an immediate termination of his/her garage lease. NO EXCEPTIONS!

Any resident whose maintenance account is in arrears of three (3) months or more within a twelve (12) month period and rents a garage and/or parking space will be subject to automatic termination of their garage lease and/or parking space lease.

22. Outdoor Designated Parking Spaces

A SHAREHOLDER IS ALLOWED TO RENT 1 GARAGE AND/OR 1 PARKING SPACE. HOWEVER, THE SHAREHOLDER MUST HAVE A CURRENTLY REGISTERED AND INSURED CAR IN THE SAID SHAREHOLDERS NAME FOR EACH SPACE THAT IS RENTED. ANY SHAREHOLDER THAT HAS ONLY 1 CAR REGISTERED AND INSURED IN THEIR NAME, HAVING BOTH A GARAGE AND PARKING SPACE WILL BE GIVEN THE OPTION TO CHOOSE WHICH ONE THEY WOULD LIKE TO KEEP AND RELINQUISH THE OTHER.

SHAREHOLDERS WHO HABITUALLY PAY LATE ARE AUTOMATICALLY REMOVED FROM GARAGE AND OUTDOOR PARKING SPACE WAITING LISTS.

- Solely current licensed passenger vehicles owned or leased by residents of Bell Park shall use designated parking areas. Dead storage of vehicles is strictly prohibited. Working on cars in parking spot is strictly prohibited.
- All vehicles parked in designated parking areas must have a current valid Bell Park permit.
- All vehicles must park nose in. You **cannot back your vehicle** in your designated space.
- Parking of commercial vehicles is prohibited unless written approval from the Board of Directors is given.
- The Corporation is not responsible for any theft of, or damage incurred to any vehicle while parked on premises or being removed from premises.
- Parking Spaces will not be issued to any non-four-wheel vehicles such as motorcycles, scooters, mopeds, etc.
- All four (4) items: (1) Car Registration; (2) Driver's License; (3) Current Car Insurance Coverage; and (4) Current Homeowner Insurance Coverage **MUST HAVE A BELL PARK MANOR TERRACE ADDRESS. NO EXCEPTIONS!**

The Corporation reserves the right to remove any vehicles (at Lessee's expense) if in violation of the above regulations and/or the parking permit, or of which may constitute a hazard or menace.

Note – Violation of these terms may result in the confiscation of your parking spot.

Any resident whose maintenance account is in arrears of three (3) months or more within a twelve (12) month period and rents a garage and/or parking space will be subject to automatic termination of their garage lease and/or parking space lease.

23. Driveways

- The use of driveways as a play area for automobiles is strictly prohibited (this includes racing and practice driving). A maximum of ten (10) miles per hour must be observed in all driveways.
- Ball playing in the driveways is strictly prohibited.
- Barbecuing is not allowed in the driveways.
- Washing cars near driveway entrances/exits is strictly prohibited. Violators will be subject to a **\$75.00 fine.**

Note – 1st violation -warning letter, 2nd violation -\$50.00 and 4th violation -\$75.00

24. Illegally parked vehicles

Vehicles parked on Bell Park property that are not in compliance with the rules and regulations of the Co-Op may be stickered and/or towed at the vehicle owner's expense.

Examples of illegally parked vehicles:

- Vehicles that block or are parked in driveways.
- Vehicles that block garages, parked cars, and dumpsters
- Vehicles that are parked in "No parking" designated areas.
- Vehicles that occupy more than one parking space.
- Vehicles parked in parking spots they are not assigned to.
- Vehicles parked in a designated parking space without a valid parking sticker.
- Vehicles that do not have a current or valid registration or inspection sticker.
- Vehicles are used for commercial purposes.

25. Pets

- No cats, dogs, or other pets except fish and caged birds, shall be kept, harbored or permitted on demised premises. Cooperators who have visitors with dogs/cats shall not permit such dogs/cats to be kept overnight, unless the Board of Directors gives written permission. This rule is a substantial and material obligation of the tenancy, and any breach shall be considered a material and substantial violation under the Proprietary Lease.
- The feeding of squirrels, birds and stray animals on the property is prohibited. Residents who are feeding animals on Bell Park property will be fined \$350.00.
- Shareholders who have visitors with pets are responsible for any property damage and/or injury that the pet may cause or inflict anywhere within Bell Park Manor Terrace.
- Visitors with pets are prohibited from staying on BPMT property overnight without written consent of all surrounding neighbors and submitted to Management.

26. Gas, Charcoal and Electric Barbecue Grills

- **Propane gas grills are prohibited on decks or balconies but are permitted on the ground level outside the structure if located at least 10 feet away from any one building.**
- **Charcoal grills are prohibited on decks or balconies and are permitted on the ground level but must be no less than 25 feet from the nearest building.**
- There must be a garden type hose attached to a water supply, or a sixteen (16) quart pail of water available.
- Charcoal and charcoal ashes must be cold before being disposed of and then should be placed in a metal container, mixed with water, and covered with a tight fitted lid and disposed of in the proper container in the garbage room.
- No more than (2) 20-pound propane tanks may be used.
- Hot grills should never be left unattended.
- Barbecue grills should be used on large flat surfaces that can't burn.
- Propane tanks must be shut off from the valve on the tank after you have finished barbecuing.

- Propane tanks **must be empty** for seasonal storage of the grill. At the end of the summer season, barbecues should be neatly covered and placed out of sight or removed and stored.
- Propane cylinders must not be stored indoors (garages) or near any heat source.
- After use, barbecues must be covered and neatly stored out of sight.
- Unattended candles/open flames on steps, sidewalks and lawns constitute a serious fire hazard and are strictly prohibited.

Note – Violators will be subject to a Fine of \$500.00

27. Uses & Repairs of Toilets, Sinks, Dishwashers, Washing Machines, etc.

- The shareholders who have caused damage to another apartment or common area due to the misuse of the aforementioned appliances, shall be responsible for paying the cost of damages, repairs, and any associated administrative costs.

28. Sewer Backups

- It is imperative that you **do not flush** anything but toilet paper down the toilets, including but not limited to any of the following items:
Feminine products, cooking grease/oil, food, any type of wipes or cleaning pads, diapers, kitty litter, plastic including Band-Aids, Q-tips or dental floss.
- Do not pour any cooking grease/oil down any drains.
- If it is determined by a professional sewer company which resident(s) is/are flushing down the toilet or putting down the sink any of the above items or anything that may cause a sewer back-up, **the resident will be fined \$250.00 and be responsible for the cost of the repair.**

29. Window Coverings

- Inappropriate items, such as bedspreads, sheets, shower curtains, cardboard, etc. may not be used as window coverings.

Note – 1st violation -warning letter, 2nd violation -\$25.00, 3rd violation -\$50.00 and 4th violation -\$75.00

30. Carpeting

- All apartments are required to have wall-to-wall carpeting with **heavy** padding including stairways, exclusive of the bathroom, kitchen, and dining room. Alternative sound proofing materials such as cork flooring may also be used.
- If you are installing flooring other than carpeting, you must contact the maintenance department to find out what type of alternative flooring and underlayment may be installed. You must submit the appropriate Alteration Agreement for approval before installing. Also, maintenance must inspect the underlayment once it is installed and before the top layer of the floor is stalled. If the shareholder fails to have the underlayment inspected by maintenance, he/she will be required to remove the top layer of the flooring so that the underlayment can be inspected. If the shareholder fails to install the underlayment that was approved by maintenance, the shareholder will be required to remove the underlayment that they installed, at the shareholder's expense.

Note – Failure, after 30 days to install carpeting or approved alternative flooring will result in a monthly reoccurring administrative fee of \$250.00 until carpeting/alternative flooring is installed.

31. Commercial Use of Apartment

- Commercial use of an apartment is strictly prohibited.
- Running any type of business out of your apartment is forbidden.

Note - The fine is \$500.00 per month and immediate termination of the Proprietary Lease.

32. Late Maintenance Payments

- Maintenance payments are due by the first (1st) of every month. Checks or other methods of payment must be clear by the tenth (10th) of every month. Otherwise, you will be subject to a late charge.

Any resident who is late in paying their maintenance three times in any twelve-month period will incur an administrative fee if \$350.00.

33. Co-Op Employees

- No employee of the Co-Op may be used or employed by any Lessee for any personal purpose during the employee's regular working hours.
- Management must first approve all private work done by United Veterans Mutual Housing Company, Inc. employees.

34. Mandatory Insurance

- Homeowners insurance is required for all shareholders in the amount of \$25,000.00 for personal/property damage and a minimum of \$100,000.00 for liability. This insurance must remain enforced at all times.

Note – administrative fee in the amount of \$250.00 for the first month and \$100.00 a month thereafter until proof of insurance is submitted to the Management Office.

35. Prohibition against Subletting

- Subletting is strictly prohibited and considered to be a material and substantial breach of the terms and conditions of the Proprietary Lease.

Immediate legal action and a \$1,500.00 monthly administrative fee will be placed on shareholders' maintenance account until such time that the illegal sublet is vacated.

36. Use of Premises

- Shareholders must notify the Management Office in writing if anyone moves into their apartment with them. All new residents must have a background check, be screened and approved by the Screening Committee.

37. Lithium-ion Battery Powered Transportation Devices

- Lithium-ion powered e-bikes, e-scooters, e-skateboards, e-unicycles, hoverboards, etc., which are used as modes of transportation are banned from all Bell Park Manor Terrace property. This includes apartments, garages, storage spaces and **MAY NOT BE USED** on the corporation's property.

Note – Violators will receive a fine of \$5,000.00

38. Charging of Electrical Vehicles

- Electric Vehicles are banned from charging out of any outlets on Bell Park Manor Terrace property. This includes but is not limited to the outlets in your garage, your apartment, or any outdoor outlets.

Note – Violators will receive a fine of \$5,000.00

39. NYC Leash Law

- The NYC Leash Law requires dogs to be on leashes **NO LONGER** than **6-FEET** in public places. Dogs must be leashed at all times except in designated off-leash areas and dog runs in parks (which do not exist at BPMT).

Note – Violators will receive a fine of \$350.00

40. Playground Smoking Ban

- **NO SMOKING** is allowed in our playgrounds! If you smoke, you must be a **minimum of 15 feet** away from the playground area. Let's protect our children!

Note – Violators will receive a fine of \$350.00

41. Private Security Camera Rules

- Shareholders may install private security cameras, such as Ring, etc. However, they must be battery operated. **HARDWIRED CAMERAS ARE NOT PERMITTED.**
- Security Cameras are allowed to face the outside from inside of your window(s).
- **FOR PRIVACY REASONS, NO CAMERAS ARE ALLOWED INSIDE VESTIBULES!**
- Approved Minor Alteration Agreement is **NEEDED** Before Installation.

Note – Violators are subject to a fine of up to \$2,500.00

The House Rules may be added to, amended, or repealed at any time by resolution of the Board of Directors.

www.bellparkmanorterrace.com

A Code of Conduct for Cooperative Shareholders Toward Management and Building Employees establishes guidelines for respectful and responsible interactions. Here's an example framework:

Code of Conduct for Cooperative Shareholder's Toward Management and Building Employees

1. Respect and Courtesy

- Treat all management and building employees with dignity and respect, regardless of their role or responsibilities.
- Avoid using offensive, discriminatory, or abusive language in any interaction.
- Maintain a professional and polite tone in both verbal and written communication.

2. Clear and Respectful Communication

- Provide clear, concise instructions or requests to management and building employees.
- Address concerns or requests in a calm and respectful manner, allowing reasonable time for a response.
- Avoid giving conflicting or excessive instructions to employees.

3. No Harassment or Abuse

- Harassment, verbal abuse, or threats against employees are strictly prohibited.
- Refrain from making unreasonable demands or exerting undue pressure on employees.
- Report any grievances about building services or employees through the proper channels, such as building management, rather than directly confronting employees.

4. Privacy and Boundaries

- Respect the personal space and privacy of management and building employees.
- Do not request personal favors or services that fall outside the scope of the employee's duties.
- Avoid unnecessary intrusion into employee work areas or private conversations.

5. Adherence to Building Rules

- Follow all house rules and regulations regarding employee interactions.
- Avoid impeding employees in their tasks or creating unsafe conditions by obstructing hallways or work areas.
- Report issues through appropriate channels rather than attempting to resolve them independently.

6. Gratuities and Gifts

- Follow the building's policy regarding gratuities and gifts to employees. Ensure that gifts are appropriate and given voluntarily, without expectation of preferential treatment.
- Do not offer bribes or incentives to employees to bypass building rules or policies.

7. Problem Resolution

- If an issue arises with an employee, address it calmly through management or the appropriate authority.
- Avoid escalating conflicts directly with employees and refrain from retaliatory actions.
- Participate in any investigations or conflict resolution processes initiated by building management.

8. Professionalism and Integrity

- Conduct yourself with professionalism when interacting with building employees, remembering that they are there to provide a service to all residents.
- Set a positive example for other residents in how you interact with employees.

***** Depending on severity, legal remedies are reserved and shall be paid by the violator.**

1st violation \$100.00, 2nd violation \$200.00. All violations thereafter are subject to Board discretion. ***

MANAGEMENT OFFICE

221-22 Manor Road (718) 465-6070 fax (718) 468-7556

(Monday – Friday, 8:00 a.m. – 5: 00 p.m.)

From Memorial Day – Labor Day – 2:00 p.m. closing on Friday's.

MAINTENANCE DEPARTMENT

Bldg. # 8 225-02 Manor Road (718) 465-7550 (Mon. – Fri., 8:00 a.m. – 5:00 p.m.)

Emergency # - (718) 747-3373

(5:00 p.m. – 8:00 a.m., Monday – Friday)

All day Saturday and Sunday including Holidays

LAUNDRY ROOM LOCATIONS

In the basement of buildings

Bldg. #7 -	Back of 82-50 229 th Street
Bldg. #11 -	Back of 221-32 Manor Road
Bldg. # 18 -	Back of 220-02 Stronghurst Avenue
Bldg. # 20 -	Back of 224-24 Stronghurst Avenue
Bldg. # 26 -	Back of 226-01 Manor Road
Bldg. # 38 -	Back of 225-04 88 th Avenue
Bldg. # 45 -	Back of 229-11 87 th Avenue

GARBAGE ROOMS

Garbage Room #8 -	Next to Maintenance Office – Near Bldg. #8
Garbage Room #11 -	Behind Bldg. #11
Garbage Room #15 -	Behind Bldg. #15
Garbage Room #18 -	Behind Bldg. #19
Garbage Room #24 -	Behind Bldg. #24
Garbage Room #28 -	Behind Bldg. #30
Garbage Room #32 -	Behind Bldg. #32
Garbage Room #38 -	Behind Bldg. #39
Garbage Room #43 -	Behind Bldg. #42
Garbage Room #50 -	Behind Bldg. #45

STORAGE ROOMS

For rental information contact the Management Office (718) 465-6070

Located in the basement of buildings

Bldg. #3 -	225-01 Hillside Avenue - Building A
Bldg. #18 -	86-25 Springfield Blvd. - Building B
Bldg. #22 -	223-01 Manor Road - Building C
Bldg. #25 -	224-15 Manor Road - Building D
Bldg. #41 -	225-05 88 th Avenue - Building E
Bldg. #47 -	227-02 Hillside Avenue - Building F

Fenced in Playground

Behind Bldg. #11 – 221-22 Manor Road

Behind Bldg. #32 – 221-11 Braddock Avenue

Rules and Regulations for use of the Playgrounds

- Playgrounds open to Bell Park Residents only.
- The following is **PROHIBITED**:

Running – Rough Playing – Smoking – Food and Drink- Ball Playing – Bare Feet – Bicycles – Skates – Skateboards – Scooters – Littering – Climbing the fence – Running up the slide.

- Not responsible for personal property left unattended.
- Parental supervision required.
- Use all equipment in the prescribed manner.
- Do not use equipment when wet.
- Playground to be used at your own risk.
- Pets are Not allowed **IN THE PLAYGROUND**.

Playground Rules Prohibit Adults except while in the company of Children.

UNITED VETERANS MUTUAL HOUSING COMPANY, INC.
BELL PARK MANOR – TERRACE

TELEPHONE: 718-465-6070
FAX: 718-468-7556

221 22 MANOR ROAD
BELLEROSÉ MANOR, NY 11427

Contracts signed as of January 1st, 2025, must reflect a Minimum Sales Prices of:

Size	Price
3.5 Room (1 bedroom)	\$ 162,000.00
4.5 Room (2 bedroom)	\$ 250,000.00
5.0 Room (2 bedroom)	\$ 270,000.00
5.0 Room (duplex)	\$ 340,000.00
6.0 Room (3 bedroom)	\$ 320,000.00