## **DOCUMENTS NEEDED TO PROCESS A NEW MEMBERSHIP APPLICATION**

Welcome to Consolidated Cooperatives of Scottsdale East, Inc., (Co-op). Please fill out the membership application completely and return the application with the required documentation and a nonrefundable check for \$35.00 per member 18 years of age and older to the above location. We must have the following documentation to start the review process.

- 1. Please complete your employment and salary/income information with employment references.

  \*Income should be at least three times the monthly maintenance fee per month amount.
- 2. Please provide two months of pay stub copies.
- 3. Please send in a copy of your driver's license or photo ID for identification per member or occupant18 years of age and older.
- 4. If you are unemployed, retired or on disability; please provide proof of income.
- 5. Please provide copies of the last two years' tax returns. (Only if retired, on disability or self-employed)
- 6. Please provide copies of current bank statement(s), stock statements, SSI income statements, or other source of income.(Only if retired, on disability or self-employed)
- 7. Do you own a pet? If yes, pets must be registered and vaccinated.
  - a. Please provide a photo and a copy of the license and current vaccinations.
  - b. There is a \$200 non-refundable pet fee due at closing for each pet or \$100.00 if neuter or spayed.
  - c. Damage done to the unit by your pet will be your responsibility.
- 8. The enclosed non-refundable check of \$35.00 will be used to run credit/background checks.
  - a. A resident score of 675 and above is required for consideration of application for membership.
  - b. Any criminal activity will result in possible rejection of this application.
  - c. Falsifying any information on this application will result in automatic rejection of this application.

Furnishing the above information does not guaranty approval of membership. The processing of this application may take two to six weeks. The applicant <u>must</u> provide the above documents before the review process can begin; there are no exceptions. Please review our rules and regulations on the Co-op's website: <a href="http://consolidatedcooperatives.com/">http://consolidatedcooperatives.com/</a>.

Membership Application:	Page -1-	
		Initial and Date

Interested Unit Number:	Sale Price:	Number of bedro	ooms: Date:	
*First, Middle, and Last Name	·			
*Date of Birth:		*SS#		
*Home Phone		*Cell		
Work Phone		*e-mail		
*First, Middle, and Last Name	:			
*Date of Birth:	:	*SS#		
ΨΤΤ T01		*C 11		
*Home Phone Work Phone		*e-mail		
		(	cannot be same as ab	oove)
*Will this be your permanent r				
<ol> <li>Have you reviewed Coabout a co-operative? Yes</li> <li>Number of dependents expected to provide for are otherwise away from the service of the service away from the service are otherwise away from the service of th</li></ol>	Yes No under the age of 1 the supervision arm home. en's permanent re- ember use or sell il	8 years of age living in a control of any minor sidence? Yes No llegal controlled substates.	n the unit: r children while you o nnces? Yes N	You are are at work or
*Current Address		City	State	Zip
How Long at this address				
Landlord's phone and email _				
Previous Address		City	State	Zip
How Long at this address	If renting, La	andlords' name		
Landlord's phone and email				
*Has any household member	ever been evicted			

Initial and Date

Name and ages of others who will occupy the unit with you on a permanent basis (do not list guest). You <u>must</u> be residing in your unit at all times when others are present. Anyone 18 years or older will need to submit a copy of ID or Driver's license and completed application with signature. (We do not need employment for anyone listed below) **Renting this unit is prohibited.** 

Name	Age	Relationship
Name	Age	Relationship
	APPLICAN	T'S EMPLOYMENT
*Present Employer		Address
Contact Phone		Department
Monthly Income	How long?	Position
Previous Employer		Address
Contact Phone		Department
Monthly Income	How long?	Position
Present Employer		THER'S EMPLOYMENT Address
Contact Phone		Department
Monthly Income	How long?	Position
Previous Employer		Address
Contact Phone		Department
Monthly Income	How long?	Position
	lorser or guarantor on ar	ny loan or contract? Yes No If yes for
		? Yes No If yes please explain to whom and
• • • • • • • • • • • • • • • • • • • •	rupt in the last 10 years	YesNoIf yes, what year
	Membership Ap	plication: Page -3-  Initial and Date

felony explai		No	If yes, plea	rase
P			Prospective	Membership Summary of Policies
•	Member is th	ne owner	and holder of o	nying the Membership specifies "Member Occupied". This means the one (1) and only one Membership in the Corporation as evidenced by reside in their unit whenever the unit is occupied.
•				d Thursday of the month. Members are encouraged to make inputs on rum held at the end of the Board Meeting.
		r pipes, s		24-hour basis. Bona fide emergency calls include no heating or cooling, tripped electrical breaker switches and matters of a true health and
•	For health and studio apart one bedroom two bedroom two bedroom three be	ment m apartm m apartm m townh	ient ient ouse	mber of people residing in a Unit will be limited to the following:  1-2 people  1-2 people  1-4 people  1-6 people
	does not cove	er person	al property in t	sessions damaged by fire, flood, or acts of God. The Co-op insurance the Unit. Members should carry condo insurance on the contents of a set of keys to their Unit to allow entrance in case of emergency.
		of the Ur	nit's plumbing ir	aintenance of building, exterior grounds, pools, repair, and nside the walls, water heater and the Unit's heating and cooling
•	The Corporat	ion is not	responsible for	or any appliances.
	or replace an	y electric	al, gas, mechan	ration approval to erect, install, enlarge, alter, repair, remove, convert, nical or plumbing of your Unit. The Corporation requires your request

Monthly Co-op Carrying Charges are due the **first of the month**. Carrying Charges are to be paid by the Member of Record unless the Manager has approved other arrangements. Payments received by the 15th day will be considered current. The Late Penalty on the Carrying Charge will be applied on the 16th day of the month. Billing statements will be generated around the 16th of the month for all outstanding balances

Vehicle permits are issued to each Member upon moving into the Co-op, allowing for one assigned covered parking space to each Unit. There will be a maximum of two permits per Unit if more than one driver resides in a Unit, but only one of those may be used in the designated space and the other must park in a non-covered space. The annual fee is due every January and costs are \$50 for a covered and \$25

for uncovered. Covered parking fees must be paid whether you will use it or not.

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Initial and Date

Corporation may require you to hire a licensed and bonded contractor.

due.

d. Please provide a photo e. There is a \$200 non-re f. Damage done to the ur g. Two pet limit, and the	and a copy of the license fundable pet fee due at clouit by your pet will be you pet(s) need to be within the AUTO OWNERSE	nust be registered and vaccinated. and current vaccinations. osing for each pet. r responsibility. ne breed and weight restrictions.
Year Make	Model	License Plate #
Year Make	Model	License Plate #
Consolidated Cooperatives of Sto ascertain my eligibility for mediated I understand that this application Consolidated Cooperatives of Stould I choose to withdraw the until this application has been mediated. Membership Commits I certify that all of the information accurate and complete to the best I understand that if any information application or terminate my occur authorize the Co-Op and its authorize the Co-Op and its authorize the determining my eligibility and authorize the pertinent to determining my eligibility and authorize the I understand that renting this understand that renting this understand that renting this understand unit.	scottsdale East, Inc., to contembership. In for membership in no was cottsdale East, Inc. Is application, I understant eviewed and I have particuted or other agents authorized on household est of my knowledge. It is false expancy agreement. Inthorized employees and a release of any information gibility for membership and has been given above). It is against the Co-op rule lead to termination and for reside in the unit at all times.	ntact any of the above listed persons or companies to the best of my knowledge, and I authorize intact any of the above listed persons or companies and binds me to any sale of a membership within that no transfer of a unit can be made to me ipated in a satisfactory interview with the General ized by the Co-Op for such interview. It composition, income, and family assets is for not complete, the Co-op may deny my agents to obtain information which is pertinent to in (including documents and other materials and residence in the Co-Op. I give permission to design and the Co-op rules of the State of Arizona. Orced sale of the Members' rights and vacating the mes (no exceptions). Additional occupants are

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Initial and Date

1.

2.

3.

4.

5.

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8.

- 9. I understand that there is a \$400.00 transfer fee (split 50/50 between buyer and seller) and \$300.00 one-time membership deposit due on the day of transfer of Membership ownership.
- 10. I understand that non-payment of the monthly fee; illegal substances in the unit, renting the unit, having unregistered pets or any Co-op rule violations may result in foreclosure procedures and can lead to termination and forced sale of the members' rights and vacating the dwelling unit.
- 10. By signing this you are giving consolidated Co-Op of Scottsdale East permission to run the signature's credit and criminal history.

Please Si	Please Sign and Date:				
*Signature of Applicant		Date	·		
*Signature of Applicant		Date			
National Association of Housing Cooperatives	` ,				
1444 I Street, NW, Suite 700	Fax: (202) 216-9646				
Washington, DC 20005-6542	Email: info@nahc.coop				

The National Association of Housing Cooperatives is a 501(c)(3) nonprofit national federation of housing cooperatives, mutual housing associations, other resident-owned or controlled housing, professionals, organizations, and individuals interested in promoting the interests of cooperative housing communities. Incorporated in 1960, NAHC is the only national cooperative housing organization

All cooperative housing corporations which were originally organized with HUD/FHA model Occupancy Agreements have language restricting renting or subleasing without consent of the corporation. Violations of this provision can lead to termination and forced sale of the Members' rights and vacating the dwelling unit.

Members of housing cooperatives own a share or shares of stock or a membership, with their rights and responsibilities spelled out in their occupancy agreement or proprietary lease. So members cannot rent or sublease their home without getting specific written approval from their cooperative corporation. They have only an ongoing right to live in their home as their residence.

## http://consolidatedcooperatives.com/.

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