

MEMBERSHIP APPLICATION

Do Not Write Below  
- For Office Use Only -

UNIT TYPE DESIRED: \_\_\_\_\_  
 APPLICATION DATE: \_\_\_\_\_  
 APPLICANT'S NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY-STATE-ZIP: \_\_\_\_\_  
 AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 SOCIAL SECURITY NUMBER: \_\_\_\_\_  
 SPOUSE'S NAME: \_\_\_\_\_  
 AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
 SOCIAL SECURITY NUMBER: \_\_\_\_\_  
 HOME PHONE: \_\_\_\_\_ BUS. PHONE \_\_\_\_\_

Application # \_\_\_\_\_ Approved  /  
 Rejected  Reason \_\_\_\_\_  
 Applicant Notified  Date: \_\_\_\_\_  
 Application Cancelled  Date: \_\_\_\_\_  
 Signed: \_\_\_\_\_

APPLICANT'S MARITAL STATUS: Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_  
 (If divorced please give date, child support data and ages of children)

DRIVER'S LICENSE #: MR. \_\_\_\_\_ MRS. \_\_\_\_\_

Names of Family Members (or others) who will be living with you  
 NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_


PREVIOUS RESIDENCE (Give Five Year History)

Landlord or Mortgage Co. Address	PHONE	MO. PMT.	DATE FROM	Date To
5.				
4.				
3.				
2.				
1.				

EMPLOYMENT HISTORY (Give Five Year History)

Applicant's Present Employer Address	Phone	Date Employment Began
5.		
4.		
3.		
2.		
1.		

  

Spouse's Present Employer Address	Phone	Date Employment Began
5.		
4.		
3.		
2.		
1.		

INCOME

Applicant's Income This Year: \_\_\_\_\_ Applicant's Income Last Year: \_\_\_\_\_  
 Spouse's Income This Year: \_\_\_\_\_ Spouse's Income Last Year: \_\_\_\_\_  
 Other Income: \_\_\_\_\_ Source of Other Income: \_\_\_\_\_

AUTOMOBILES OWNED

MAKE	YEAR	FINANCED BY	ADDRESS	AMT. OWED	MO. PMT.	IN NAME OF
1.						
2.						
3.						

BANKING INSTITUTIONS

BANK NAME \_\_\_\_\_ BRANCH OR ADDRESS \_\_\_\_\_ LOAN ACCOUNT NUMBER (S) \_\_\_\_\_  
 Checking: \_\_\_\_\_  
 Savings: \_\_\_\_\_

(Please Complete Reverse Side)

MANAGED BY: MARCUS MANAGEMENT, INC.

**TRADE REFERENCES**

(List all open and recently closed account.....give complete and correct address and account numbers.....attach sheet if necessary)

<u>Name of Creditor</u>	<u>Address</u>	<u>Acc't. #</u>	<u>Total Owed</u>	<u>Monthly Payment</u>

**PERSONAL REFERENCES (Not relatives)**

<u>Name</u>	<u>Address</u>	<u>Occupation</u>	<u>Known Since</u>	<u>Phone</u>

DO YOU OWN A PET?  Yes  No

**PET AGREEMENT (If Applicable)**

I/We understand that any new, four-legged, fur-bearing animals. Therefore:

Cooperative does not allow

I/We, by signing hereon, agree not to bring any four-legged, fur-bearing animals into \_\_\_\_\_ Cooperative.

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

Spouse's Signature \_\_\_\_\_

Date \_\_\_\_\_

Have you ever previously lived in a Cooperative?  Yes  No  
If yes, where \_\_\_\_\_

Cooperative Name \_\_\_\_\_

Location \_\_\_\_\_

**WARNING:** Section 1010 of Title 18, U.S.C., "Federal Housing Administration transactions, provides, "Whoever, for the purpose of.....influencing in any way the action of such Administration....makes, passes, utters, or publishes any statement, knowing the same to be false.....shall be fined not more than \$5000.00 or imprisoned not more than two years, or both."

I/We certify that the preceding information is accurate and complete and I/We acknowledge that inaccuracies and/or omissions may be the basis for immediate cancellation of our application by the Cooperative. I/We also authorize the Cooperative to make a thorough investigation of our credit.

DATE: \_\_\_\_\_ x \_\_\_\_\_ x  
Signature of Applicant Signature of Spouse

For Cooperative's Use: - do not write below -

Date Application Was Received: \_\_\_\_\_

Credit Processing Fee Enclosed: \$ \_\_\_\_\_

Signed: \_\_\_\_\_

On Behalf of the Cooperative