

Scottsdale

East

Homes, Inc.

8210 East Garfield - Scottsdale, AZ 85257

Phone: 480-945-7561 Fax: 480-423-0985

A Cooperative Housing Unit, Serving Its Members Since 1964

MEMBERSHIP APPLICATION

Unit of Interest _____ Date Applied _____

Table with columns: Applicant, Date of Birth, Social Security Number. Sub-headers: Last Name, First Name, MI.

Home Telephone () _____ Other telephone number were you can be reached during the day () _____

RESIDENT HISTORY

Form for Current Address, Reason For Leaving, and Previous Residences (1) and (2).

Marital Status: Married _____ Unmarried _____ Separated _____ Divorced _____ Widowed _____

Names and ages of others who will occupy your unit on a permanent basis: (Do not list possible guests.)

Name _____ Age _____ Relationship _____
Name _____ Age _____ Relationship _____
Name _____ Age _____ Relationship _____

EMPLOYMENT

Applicant's Employment Information:

Present Employer _____

Address _____

Contact Number (_____) Department _____

Position Held _____ How Long? _____

Monthly Income _____ Gross? _____ or Net? _____

Previous Employer _____

Address _____

Contact Number (_____) Department _____

Position Held _____ How Long? _____

Monthly Income _____ Gross? _____ or Net? _____

Spouse's Employer _____

Address _____

Contact Number (_____) Department _____

Position Held _____ How Long? _____

Monthly Income _____ Gross? _____ or Net? _____

Previous Employer _____

Address _____

Contact Number (_____) Department _____

Position Held _____ How Long? _____

Monthly Income _____ Gross? _____ or Net? _____

Credit Information

Bank _____ Branch _____

Checking _____ Savings _____ Account # _____

Are you a co-maker, endorser, or guarantor on any loan or contact? Yes _____ No _____
If "yes", for whom? _____ If "yes", for whom? _____

Are there any unsatisfied judgments against you? Yes _____ No _____
If "yes", to whom and how much owed? _____

Have you been declared bankrupt in the last 7 years? Yes _____ No _____
If "yes", where? _____

Personal References

List 5 friends, business associates, etc.(not relatives), who may be contacted to affirm your information and status.

NAME

ADDRESS

DAY TELEPHONE

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

Have you or anyone of your family to be residing in the unit ever been convicted of a felony? Yes _____ No _____

If "yes", give specifics- use reverse side of this page.

Have any of your children to be residing in the unit ever been suspended from school? Yes _____ No _____

If "yes", give specifics- use reverse side of this paper.

Have you or any other member of your household ever had a membership in a housing Cooperative? Yes _____ No _____

If so, where? _____

AUTO OWNERSHIP

A maximum of four (4) vehicles per unit may be registered and parked on Scottsdale East Homes property.

Year _____ Make _____ Model _____ License# _____

Year _____ Make _____ Model _____ License# _____

Year _____ Make _____ Model _____ License# _____

Year _____ Make _____ Model _____ License# _____

I hereby acknowledge the above information to be correct to the best of my knowledge, and I authorize Scottsdale East Homes, Inc., to contact any of the above listed person or companies to ascertain my eligibility for membership in the housing Cooperative. I understand that this Application for Membership in no way binds me to any sale of a membership within Scottsdale East Homes, Inc., should I choose to withdraw this application. And I understand that no transfer of a unit in Scottsdale East Homes, Inc., can be made to me until this application has been reviewed and I participated in a satisfactory interview with the General Manager of Scottsdale East Homes, Inc., or other agent authorized by the Co-op for such interview..

Note: The processing of this application will take 3 to 5 working days.

x _____
Signature of Applicant Date Signed

In compliance with the FAIR CREDIT REPORTING ACT this notice is to inform you that the processing of this application including, but is not limited to, making any inquiries deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from consumer credit reporting agencies and obtaining credit information reports will remain the property of the landlord.

I hereby grant the owner, its manager, representative, affiliate, or vendor, the right to process this application, obtain all of my credit and other information from all credit reporting agencies for the purpose of obtaining, and thereafter, holding, a Rental Lease Agreement with this owner/manager now, and such credit report may also be obtained at any time during my tenancy, if my tenancy is approved; owner/manager/vendor/assignee may also obtain my credit reports thereafter for collection purposes at the sole discretion of landlord whether a judgment is obtained or not. I agree that at all times during the lease should management require a new application to be filled out, I agree to fill out a new application within ten days after a written request is made, Failure to do so shall subject me to immediate termination at management's sole discretion. Additionally, I authorize all corporations, companies and law enforcement agencies; academic institutions; lending institutions; current and former employers, landlords, mortgages, and character references to release information they may have about my credit, criminal, criminal history, employment, finances. Rental/ownership history, academic history, character history or any other information needed by owner/management. Applicant hereby releases landlord, owner, owner's agents, attorneys, associates, affiliates, members, employees, vendors, stock holders; owner's management company; manager's employees, agents, attorneys, affiliates, associates, members, vendors and stock holder's; and all others performing any investigation regarding application from any liability. A photographic or faxed copy of this authorization shall be valid as the original.

Signature _____ Date _____

