

# KYROUS REALTY GROUP INC

263 West 3S<sup>h</sup> Street • Suite 15E • New York, NY 10018

Phone: 212.302.1500 • Fax: 212.302.3855

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## **Lancaster Madison Cooperative -Purchase Application and Required Documents**

The following is a list of the items you are required to submit for the board to review your application. Please be sure to provide all the information requested. All of the required documents must be e-mailed to [carine@kyrousrealtygroup.com](mailto:carine@kyrousrealtygroup.com). DO NOT DUPLICATE HOUSE RULES. Please retain the copy included in this package for your information.

Upon receipt of a completed package and after verification of all financial data and references, the application will be submitted to the Board of Directors for review.

1. Purchase Application (enclosed)
2. Executed Contract of Sale
3. Net Worth Statement. Provide supportive documentation
4. Last two (2) year's Income tax Returns (include W-2's)
5. Signed Credit Report Release
6. Letter from current landlord/management agent verifying status of tenancy
7. Letter from current employer verifying salary, position length of employment and likelihood of continued employment.
8. Two (2) personal letters of recommendation for each person to be named on the proprietary lease.
9. Letter of financial reference
10. If financing is involved, copies of the loan application, commitment letter and three (3) original AZTECH Recognition Agreements signed by the lender. The Recognition Agreements MUST include the bank's address and telephone number of loan department for notices. (Any information not provided will hold up financing process.)
11. Copies of Checking & Savings Account Statement for past three (3) months
12. New York City: Window Guard/Lead Paint Notice

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### **Schedule of Fees-Due with Application**

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1. Move-in/Move-out /Deposit/Fee: A Five Hundred Dollar (\$500.00) refundable move in deposit and a One Hundred Dollar (\$100.00) fee must be submitted with the application. Please make check payable to Lancaster Madison Corp. All moves must be coordinated with management, 72hours, in advance of your move date.  
Move-in/out deposits will be returned after move has been completed and no damages have occurred.
2. Application Processing Fee: \$550 certified check or money order payable to Kyrous Realty Group, Inc.
3. Credit Check Fee: \$150.00 per applicant. This check is non-refundable and made payable to Kyrous Realty Group, Inc. This check must be certified check or money order.

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## Closing Fees

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- All fees must be paid by Certified Check, Money Order, or Attorney Escrow Check.
- All closings take place at the office of the Attorneys Office:

Tara Snow, Esq.  
Novitt, Sahr & Snow, LLP.  
118-35 Queens Boulevard  
15th Floor  
Forest Hills, New York 11375  
Phone (718)544-8665  
Facsimile (718) 544-5703  
TSnow@NSSESO.com

•

- Processing fee for Recognition Agreements: \$200.00 Payable to Kyrous Realty Group, Inc.

Please note that there are additional fees for messenger service, etc.

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## **IMPORTANT NOTICE**

### ***Please Read Carefully***

Kyrous Realty Group, Inc. realizes that this application contains sensitive personal information. We require the social security number for each applicant (and each other adult occupant of the apartment) on the authorization to obtain Credit Report Information (see Credit Report Release). This is the only place on the application requiring a social security number, but social security numbers may be contained on other documents that you are submitting (e.g. tax returns, contracts of sale). Before submitting these documents, please blacken out or otherwise obliterate the social security number as Kyrous Realty Group, Inc. cannot be responsible for the security of this information if it is included in these documents.

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**Applicant Information**

---

Name(s): \_\_\_\_\_

Occupants' \_\_\_\_\_

Present Address: \_\_\_\_\_  
\_\_\_\_\_

**Relationship--** -----

Years at this address: \_\_\_\_\_

Do you own your present residence?  
Yes  No

CURRENT EMPLOYER INFORMATION:

Employer: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Position: \_\_\_\_\_

Business Address: \_\_\_\_\_

Annual Salary: \$ \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

PREVIOUS EMPLOYER INFORMATION:

Employer: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Position: \_\_\_\_\_

Business Address: \_\_\_\_\_

Annual Salary: \$ \_\_\_\_\_

Length of Employment: \_\_\_\_\_

SPOUSE'S EMPLOYER INFORMATION:

Employer: \_\_\_\_\_

BROKER INFORMATION:

Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Address: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

ATTORNEY INFORMATION:

SS#: \_\_\_\_\_

Name: \_\_\_\_\_

SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Apartment to be occupied by:  
Applicant(s) •  Yes  No

Phone: \_\_\_\_\_

Are there any outstanding judgments against you? Yes  No

If yes, please **explain**: -----

Do you have any diplomatic immunity or other special status? Yes  No

If yes, please **explain**: -----

Have you ever declared bankruptcy or are involved in a bankruptcy procedure? Yes  No

If yes, please **explain**: -----

Names of all clubs and society memberships, fraternities and honorary societies to which applicant belongs:

Schools and colleges attended by husband, wife and children: \_\_\_\_\_

Names of all residents in the building known by the applicant: \_\_\_\_\_

Does applicant wish to maintain any pets in the apartment, and if so, please specify with full information:

Do you own or rent another residence, and if so, where?

**PERSONAL & BUSINESS REFERENCES**

PERSONAL REFERENCE#1:

PERSONAL REFERENCE#2:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

BUSINESS REFERENCES

Person to verify Applicant's Employment or Applicant's Supervisor

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

**Applicant Information**

FINANCIAL REFERENCES

PERSONAL ACCOUNTS: CHECKING

Bank Name: \_\_\_\_\_

Account No: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Bank Name: \_\_\_\_\_

Account No: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

PERSONAL ACCOUNTS: CHARGE CARD#1

Account Name: \_\_\_\_\_

Account No: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

PERSONAL ACCOUNTS: CHARGE CARD#2

Account Name: \_\_\_\_\_

Account No: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

PERSONAL ACCOUNTS: CHARGE CARD#3

Account Name: \_\_\_\_\_

Account No: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

PERSONAL ACCOUNTS: CHARGE CARD#4

Account Name: \_\_\_\_\_

Account No: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

BUSINESS ACCOUNTS: CHECKING/ PERSONAL ACCOUNTS: SAVINGS

Bank Name: \_\_\_\_\_

Account No: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

CLOSEST LIVING ADULT RELATIVE

*(Not intending to reside with Applicant)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

\_\_\_\_\_  
**Applicant Signature**

**Date:**-----

\_\_\_\_\_  
**Applicant Signature**

Date: \_\_\_\_\_

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EMERGENCY CONTACT INFORMATION

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APPLICANT INFORMATION:

**Person to call in the event of an emergency**

**Contact Name:** \_\_\_\_\_

**Residence Phone:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Office Phone:** \_\_\_\_\_

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The following is submitted as being a true and accurate statement of the financial condition of the undersigned on \_\_\_\_ , day of \_\_\_\_ 20\_\_

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applicant Name

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

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

\_\_\_\_\_  
Address:

\_\_\_\_\_  
Address:

**Attach additional pages if necessary**

| ASSETS   | A1111ic1mt | Co-Applicant | LIABILITIES  | Applicant | Co-Applicant |
|--|------------|--------------|--|-----------|--------------|
| Cash in banks  |            |              | Notes Payable:   |           |              |
| Money Market Funds                                   |            |              | To Banks   |           |              |
| Contract Deposit                                     |            |              | To Relatives   |           |              |
| Investments: Bonds & Stocks<br><i>(See schedule)</i> |            |              | To Others  |           |              |
| Investment in Own Business                           |            |              | Installment Accounts Payable:                                |           |              |
| Accounts and Notes Receivables                       |            |              | Automobile   |           |              |
| Real Estate Owned<br><i>(See schedule)</i>           |            |              | Other  |           |              |
| Automobiles:<br>Year:<br>Make:                       |            |              | Other Accounts Payable                                       |           |              |
| Personal Property & Furniture                        |            |              | Mortgages Payable on<br>Real Estate<br><i>(see schedule)</i> |           |              |
| Life Insurance<br>Cash Surrender Value               |            |              | Unpaid Real Estate Taxes                                     |           |              |
| Retirement Funds/IRA                                 |            |              | Unpaid Income Taxes  |           |              |
| 401K   |            |              | Chattel Mortgages  |           |              |
| KEOGH  |            |              | Outstanding Credit Card Loans                                |           |              |
| Profit Sharing/Pension Plan                          |            |              | Other Debts <i>(itemize)</i>                                 |           |              |
| Other Assets   |            |              | TOTAL LIABILITIES  |           |              |
| TOTAL ASSETS   |            |              | NET WORTH  |           |              |
| COMBINED ASSETS                                      |            |              | COMBINED NET WORTH   |           |              |

Application: Lancaster Madison Cooperative (Market Units)



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| SOURCE OF INCOME                | Applicant | Co-Applicant | CONTINGENT LIABILITIES         | Applicant  | Co-Applicant   |
|---------------------------------|-----------|--------------|--------------------------------|--|--|
| Base Salary                     |           |              | Endorser or Co-signer of Notes |  |  |
| Overtime Wages                  |           |              | Alimony Payments (Annual)      |  |  |
| \$Bonus & Commissions           |           |              | Child Support                  |  |  |
| \$Dividends and Interest Income |           |              | Defendant in any legal action? | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Other Income <i>(itemize)</i>   |           |              | Any unsatisfied judgments      | Yes <input type="checkbox"/> No <input type="checkbox"/> | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| <b>TOTAL</b>                    |           |              | Ever filed for bankruptcy      | Yes <input type="checkbox"/> No <input type="checkbox"/> |  |
| <b>COMBINED TOTAL</b>           |           |              | EXPLAIN                        |  |  |

| PROJECTED COMBINED MONTHLY EXPENSES | Applicant's |
|-------------------------------------|-------------|
| Maintenance                         |             |
| Apartment Financing                 |             |
| Other Mortgages                     |             |
| Bank Loans                          |             |
| Auto Loan                           |             |
| <b>TOTAL</b>                        |             |

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## SCHEDULE OF STOCKS AND BONDS

| Amount of Shares | Description<br>(Extended Valuation in Column) | Marketable Value | Non-Marketable Value |
|------------------|---|------------------|----------------------|
|                  |   |                  |                      |
|                  |   |                  |                      |
|                  |   |                  |                      |
|                  |   |                  |                      |
|                  |   |                  |                      |
|                  |   |                  |                      |

## SCHEDULE OF REAL ESTATE

| Description | Cost | Actual Value | Mortgage Amount | Maturity Date |
|-------------|------|--------------|-----------------|---------------|
|             |      |              |                 |               |
|             |      |              |                 |               |
|             |      |              |                 |               |
|             |      |              |                 |               |
|             |      |              |                 |               |
|             |      |              |                 |               |
|             |      |              |                 |               |
|             |      |              |                 |               |

## SCHEDULE OF NOTES PAYABLE

Specify any assets pledged as collateral, including the liabilities they secure:

| To Whom Payable | Date | Amount | Due | Interest | Pledged As Security |
|-----------------|------|--------|-----|----------|---------------------|
|                 |      |        |     |          |                     |
|                 |      |        |     |          |                     |
|                 |      |        |     |          |                     |

**The foregoing statements and details pertaining thereto, both printed and written, have been carefully read and the undersigned hereby solemnly declares and certifies that the same is a full and correct exhibit of my/our financial condition.**

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

Date: \_\_\_\_\_

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

Date: \_\_\_\_\_

Application: Lancaster Madison Cooperative (Market Units)

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CREDIT REPORT RELEASE

I (we) hereby authorize Kyrous Realty Group, Inc., on behalf of **Lancaster Madison Corp.**, to request and receive any and all information from any credit bureaus, previous employers, law enforcement agencies, and references.

I (we) will hold harmless and/or release Kyrous Realty Group, Inc, and **Lancaster Madison Corp.**, from any and all claims and liability which may arise now or in the future with regard to the obtaining or the releasing of the above stated information for the purpose of doing credit checks, and criminal activity checks.

Each Applicant and all adults who will reside in the Unit must complete Credit Report Release.

PLEASE PROVIDE THE FOLLOWING INFORMATION:

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security#: \_\_\_\_\_

Age: \_\_\_\_\_

Address: \_\_\_\_\_

Employer's Company Name  
\_\_\_\_\_

**Address:** -----

Date: \_\_\_\_\_

Applicant Signature:  
\_\_\_\_\_

•Duplicate for Additional Applicants

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Lancaster Madison Cooperative - Letter to Board of Directors

The Board of Directors  
Lancaster Madison Cooperative  
c/o Kyrous Realty Group  
263st 38<sup>th</sup> Street - suite 15E  
New York, NY 10018

Re: Lancaster Madison Cooperative  
Unit#: \_\_\_\_\_

Dear Board of Directors:

I (We) have received, read, understand and agree to abide by the House Rules for Lancaster Madison Cooperative.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

LANCASTER MADISON APARTMENT CORP.

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**SHAREHOLDER INFORMATION FORM**

Date: \_\_\_ / \_\_\_ / \_\_\_ -

Apt: \_\_\_\_\_

Name(s) of Shareholders(s)

Social Security #:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please list all other occupants residing in unit:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Relationship: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**Contact Information:**

(#1) Name: \_\_\_\_\_

(#2) Name: \_\_\_\_\_

Work Number: \_\_\_\_\_

Work Number: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

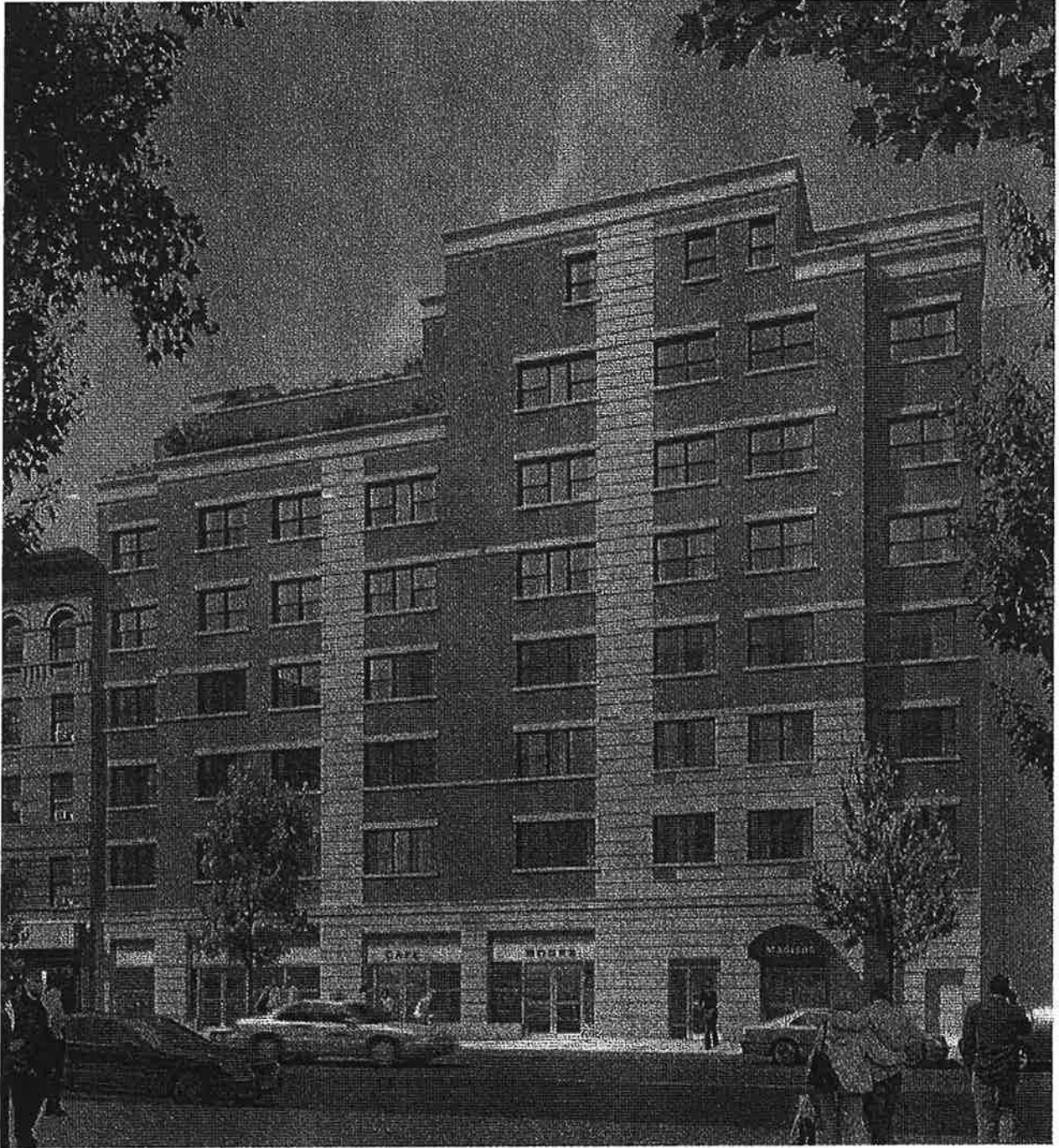
Other: \_\_\_\_\_

**Oth** \_\_\_\_\_

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1820 Madison Avenue, New York, NY 10035

**1820 MADISON AVENUE  
NEW YO'RK, NEW YO'RK 10035**



**11** LANCASTER  
m t l d i n o n

**Welcome to Your New Home at**  
**The**  
**Lancaster Madison**

Dear Shareholder,

On behalf of Kyrous Realty Group, the property managers of the **Lancaster Madison Cooperative**, we would like to warmly welcome you to your new home.

Please find a comprehensive summary of services available to you at **Lancaster Madison Cooperative** detailed on the following pages, which is a supplement to the Shareholder Information Package that you received when you closed on your home.

We hope this detailed summary of services will assist in making your transition a smooth one and that you will enjoy living in **Lancaster Madison Cooperative** for many years to come.

Please do not hesitate to contact us at (212) 302-1500 should you have any questions or concerns. We look forward to serving you. On behalf of the staff and myself, welcome!!!

Sincerely Yours,

Lynn C. Tiews, Property Manager

## Welcome Guide Table of Contents

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## **Building Staff**

### **Building Superintendent**

We are pleased to announce that Marcin Korzep is the Part - Time Superintendent of the Lancaster Madison. Marcin Korzep will be responsible for the daily operations of the building, attending to any and all emergencies that may arise and supervision of all employees (part-time porter). With his dedication to providing courteous and timely service, you will quickly come to feel at home. Marcin Korzep may be contacted at 347-573-3502 or via e-mail [CLmadisonsuper@nycmail.com](mailto:CLmadisonsuper@nycmail.com).

### **Property Manager**

Kyrous Realty Group is the Management Company for Lancaster Madison Cooperative. You may contact Lynn C. Tiews, your Property Manager, or her associate Evelyn Santiago in the following ways:

#### **Lynn C. Tiews**

Phone number: (212) 302-1500, ext. 204

Fax: (212) 302-3855

Mailing Address: 263 West 38<sup>th</sup> Street, Suite 15E, New York, NY 10018

E-mail: [Lynn@kyrousrealtygroup.com](mailto:Lynn@kyrousrealtygroup.com)

## Building Services

### PHONE AND CABLE SERVICES

### Contact Information

Time Warner Cable

{800} OK-CABLE

Customer Service

{212} 674 - 9100

[www.twcny.com](http://www.twcny.com)

Telephone service is available from both Verizon and Time Warner, as well as companies such as Packet8, Vonage, Viataalk, etc. that rely on broadband Internet connection for their Voice Over IP phone services.

Verizon Telephone/ Internet Service (888) 553-1555

[www.verizon.com](http://www.verizon.com)

### Con Edison

To open your Con Edison (**electric**) account, call {1-800-752-6633}. Con Edison Customer Service Representatives will set up your account over the telephone.

**Note - It is imperative that you contact Con Edison on the date of your closing for existing services will be terminated by date of your closing.**

To establish service at your new address we may need the following information:

- Name
- Service address
- Date that you assume responsibility
- Contact telephone number
- Date of birth
- Social security number
- If a social security number is not available, then a driver or non-driver license ID, passport, or alien ID number should be provided.
- If you are unable to provide them with the required identification, please note that a deposit will be charged to establish your account.
- Mailing address if you choose to have your bills mailed to a different address other than the service address.
- E-mail address to be added to your account
- Con Edison will need to know if you, someone in your household, or a tenant, use life-sustaining equipment such as an infant apnea monitor or electrically operated respirator.
- They will also need to know if you would like to enroll in the Direct Payment Plan. This is where your bills are automatically deducted out of a checking or savings account. If so, please be prepared to provide your bank's routing number along with your checking or savings account number.

**Note: If the electricity is not already turned on at your new premises at the time of your call, it may take one business day to turn on the meter.**

## **Exterminator**

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Suburban Pest Control - Exterminator services are scheduled for the \_\_\_\_\_ of each month between the hours \_\_\_\_\_. There will be a sign in sheet, located in the lobby on the bulletin board, for those residents that require services on the scheduled date.

## **Moving Procedures**

### **Move-in Scheduling**

Now that you have officially closed on the purchase of your apartment, you may schedule your move-in by contacting Lynn C. Tiews or Evelyn Santiago. All move-ins and furniture deliveries must be scheduled. No move-in or large delivery will be permitted without a pre-scheduled appointment. All move-ins and deliveries are scheduled on a first-come, first-serve basis for purchasers that have closed on their apartments. Scheduling is necessary to keep the building's elevator running consistently and smoothly for the use of all the residents.

All moves must be done through the front entrance of the building. Movers must obey any and all regulations regarding loading, unloading, parking, etc as required by the City of New York. It is each mover's responsibility to ascertain and abide by these requirements.

### **Moving Requirements**

Your moving company must provide a Certificate of Insurance, including Workman's Compensation to the Management Office immediately after confirming your moving appointment. Please have your moving company fax or e-mail the certificate to the attention of Lynn C. Tiews - [Lynn@kyrousrealtygroup.com](mailto:Lynn@kyrousrealtygroup.com) or 212-302-3855.

CERTIFICATE HOLDER IS: Unit Owner, building address and apartment number

The Certificate of Insurance must include as "additionally insured":

- Lancaster Madison Apartment Corp. c/o Kyrous Realty Group 263 West 38<sup>th</sup> Street, Suite 15E, New York, New York 10018
- Kyrous Realty Group, 263 West 38th Street, Suite 15E, New York, New York 10018

You are required to provide a refundable security deposit check in the amount of \$500.00 made payable to Lancaster Madison. This security deposit check is required to cover the cost to repair any damages that might occur during your move-in. This amount is fully refundable if no damages occur, or partially refundable if some damages occur. The property manager must have this security deposit check before, or at the time your movers arrive at the building and it will be returned upon completion and inspection.

### **Point of Entry**

For security, safety and maintenance purposes we ask that all owners, residents and guests refrain from holding doors open for people they do not recognize and/ or propping doors open.

### **Deliveries to the Building**

Please make arrangements for any and all deliveries after you have moved into the building through the management office.

All shareholders should direct their service personnel, cleaning personnel and delivery personnel arriving at the building to the superintendent where they will receive proper instructions on how to proceed.

Video Doorman is expected to be installed by the end of April "2012". Notification will be sent out by management of what is the procedure and protocol of deliveries of small items that are delivered to the building such as UPS packages, Fed Ex packages, dry cleaning, etc. In the meantime, please work with the building superintendent if you are expecting a special delivery. No furniture, large equipment or other bulk items will be permitted to be stored in the Package Room.

In order to ensure residents safety and security, unescorted deliveries to your residence are not permitted.

Please make arrangements for any and all deliveries after you have moved into the building through the management office.

All Unit Owners should direct their service personnel, cleaning personnel and delivery personnel arriving at the building to the concierge desk where they will receive proper instructions on how to proceed.

### **Apartment Alterations**

If you are intending to do any alteration work in your apartment, you must contact Lynn C. Tiews or Adam Holand at (212) 302-1500 at Kyrous Realty Group for requirements and approval procedures. The requirements and approval procedures include but are not limited to the submission and review of a scope of work and shop drawings if applicable.

### **Sales and Sublet Policies**

For full details on re-sale and sublet policies of the Lancaster Management, please contact Lynn C. Tiews or Evelyn Santiago at 212-302-1500.

## Local Services & Points of Interest

| <u>Local Services</u>          | <u>Located At</u>                      | <u>Contact Information</u>       |
|--------------------------------|--|----------------------------------|
| Post Office Triborough Station | 167 E 124 <sup>th</sup> Street - 10035 | (800) 275-8777<br>(212) 534-0381 |

### Fire Department

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|                             |                                   |                |
|-----------------------------|-----------------------------------|----------------|
| Engine 91                   | 242 East 111 <sup>th</sup> Street |                |
| Ladder 26                   |                                   |                |
| FDNY HEADQUARTERS           |                                   | {718} 999-2000 |
| For Emergencies please call |                                   | 911            |

### Police Precinct

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The Lancaster Madison comes under the **25<sup>th</sup> Precinct** headed by Capt. Nilda Hoffman.

The offices of the 25<sup>th</sup> Precinct are located at 120 East 119th Street, New York, NY, 10035. The 25th Precinct is a mixed area consisting of commercial, residential and both public and private housing. There are six main commercial strips in the precinct: East 166th St. from Pleasant Ave. to Madison Ave., East 125th St. from 2nd Ave. to 5th Ave., 3rd Ave. from East 115th St. to East 125th St., Lexington Ave. from East 115th St. to East 124th St. and 2nd Ave. from East 115th St. to East 124th Street.

### **Contact Information**

- Precinct: (212) 860-6511
- Community Affairs: (212) 860-6526
- Crime Prevention: (212) 860-6519
- Domestic Violence: (212) 860-1675
- Youth Officer: (212) 860-6521
- Auxiliary Coordinator: (212) 860-6432
- Detective Squad: (212) 860-6536

### Hospitals

|                          |                             |                |
|--------------------------|-----------------------------|----------------|
| Harlem Hospital Center   | 506 Lenox Avenue            | (212) 862-8564 |
| Mt. Sinai Medical center | 1190 5 <sup>th</sup> Avenue | (212) 241-6500 |

### Veterinary

|   |                                   |                |
|---|-----------------------------------|----------------|
| Cathedral Dog & Cat Veterinary Hospital | 229 West 110 <sup>th</sup> Street | (212) 864-3631 |
| Oliver's Dog & Cat Clinic               | 2232 First Avenue                 | (212) 348-7070 |
| Banfield the Pet Hospital               | 517 East 117 <sup>th</sup> Street | (212) 996-3238 |

### Parks

**Marcus Garvey Park** is located northwest of the property between 120<sup>th</sup> and 124<sup>th</sup> Streets.

**Thomas Jefferson Park** is located southeast of the property at First Avenue and 111<sup>th</sup> Street.

**Central Park North** begins at 110<sup>th</sup> Street and Fifth Avenue.

### Museums

|                                |                                  |                 |
|--------------------------------|----------------------------------|-----------------|
| Museo Del Barrio               | 1230 5 <sup>th</sup> Avenue      | (212) 831-7272  |
| Museum of the City of New York | 1220 5 <sup>th</sup> Avenue      | (212) 534-1677  |
| Studio Museum                  | 144 W 125 <sup>th</sup> Street   | (212) 864-4500  |
| Afro Arts Center               | 163 West 12 <sup>th</sup> Street | (212) 749-00827 |

### Markets

|                   |  |                |
|-------------------|--|----------------|
| Associated Market | 125 East 116 <sup>th</sup> Street                            | (212) 828-4743 |
| Associated Market | 2212 Third Avenue  | (212) 876-1500 |
| La Marqueta       | 111 <sup>th</sup> to 116 <sup>th</sup> Streets & Park Avenue |                |

|                       |                                   |                |
|-----------------------|-----------------------------------|----------------|
| Capri Bakery          | 186 East 116 <sup>th</sup> Street | (212) 410-1876 |
| La Tropezienne Bakery | 2131 First Avenue                 | (212) 860-5324 |
| Levain Bakery         | 2167 Eighth Ave                   | (646) 455-0952 |

## Restaurants

### **Joy Burger Bar**

1567 Lexington Avenue, corner of 100th Street  
212-289-6222

### **Giovanna's Restaurant and Pizzeria**

1567 Lexington Avenue at 100th Street  
212-360-6300

### **Itzocan Bistro**

1575 Lexington Avenue at 101st Street  
212-423-0255

Serves wine and beer

[www.itzocanbistro.com](http://www.itzocanbistro.com)

### **Moustache Piza**

1621 Lexington Avenue, corner of 102nd Street  
212-828-0030

Serves wine and beer

[www.moustachepitza.com](http://www.moustachepitza.com)

### **Jimmy's Classic Diner**

1634 Lexington Avenue at 103rd Street  
212-722-5422

[www.jimmysclassicdiner.com](http://www.jimmysclassicdiner.com)

### **East Harlem Cafe**

1651 Lexington Avenue at the corner of 104th Street  
212-996-2080

[www.eastharlemcafe.com](http://www.eastharlemcafe.com)

**El Paso Taqueria**  
1642 Lexington Avenue at 104th Street  
212-831-9831  
[www.elpasotaqueria.com](http://www.elpasotaqueria.com)

**Nightlife**

|                            |                                       |                |
|----------------------------|---------------------------------------|----------------|
| Lenox Lounge               | 288 Lenox Ave                         | (212) 427-0253 |
| Smoke Jazz & Supper Club   | 106 <sup>th</sup> Street and Broadway | (212) 864-6662 |
| Moca Bar & Grill           | 2210 Eighth Ave                       | (212) 665-8081 |
| Chocolat Restaurant Lounge | 2217-23 Eighth Ave                    | (212) 222-4545 |

**Art/ Entertainment**

|  |                                   |                |
|--|-----------------------------------|----------------|
| Harbor Conservatory for<br>The Performing Arts | 1 East 104 <sup>th</sup> Street   | (212) 427-2244 |
| Apollo Theater                                 | 253 West 125 <sup>th</sup> Street | (212) 531-5300 |
| Comic Strip Live                               | 1568 Second Avenue                | (212) 861-9386 |
| Dwyer Cultural Center                          | 258 Saint Nicholas Ave            | (212) 222-3060 |

**Art/ Entertainment**

|                                       |                               |                |
|---------------------------------------|-------------------------------|----------------|
| Harlem Lanes                          | 2116 Seventh Ave              | (212) 678-2695 |
| Miller Theater at Columbia University | 2960 Broadway                 | (212) 854-7799 |
| Renaissance Fine Arts                 | 2075 Adam Clayton Powell Blvd | (212) 866-1660 |





## **Building Maintenance & Operations**

### **Utilities**

#### **Gas**

Your cooking gas service will be provided by Con Edison and payment will be included in your monthly common charges.

#### **Electricity**

The electricity will be provided to your unit by Con Edison and individual accounts must be set up for each apartment prior to closing.

#### **Elevators**

There is 1 passenger elevator in the main lobby. The elevator may be accessed through the main lobby entrance. Dogs and other pets are permitted access to the passenger elevator provided that the pets are properly and securely leashed.

#### **Trash/ Rubbish Removal**

- All regular household garbage must be securely tied and deposited in the garbage chute located in the trash room on each floor.
- Please do not deposit lit cigarettes, liquids, or loose garbage in the garbage chute.
- The recommended garbage size is the typical "kitchen" garbage bag (15 gal).
- Please contact the lobby attendant/resident superintendent in order to arrange for the disposal of large or bulk items.

#### **Recycling**

- All recycling items are to be placed in the blue recycling bins on the floor of the trash chutes on your floor. Items can be placed in the bins loose or in blue recycling bags only.
- Newspapers, magazines and catalogs should be placed in the appropriate recycling bin in the trash chute closet.
- Please be sure to rinse and dry all materials before depositing.
- There is no need to remove lids or labels.
- \*If you have any questions about regular or recycling garbage, please ask the resident manager

## **Invoices and Maintenance Charges**

Payments are due on the 1st of every month, and should be mailed to the payment address that appears on your monthly statement. As a reminder, statements are distributed prior to the first of each month to all unit owners. On the 15th of each month, a late fee will be assessed if your account is not paid in full. Distribution of the statements is a courtesy and all unit owners should be aware that payments are due by the first of the month even if a statement is not received. In the event that you do not receive a statement, we recommend that you mail your payment to the Kyrour Realty Group office by the 1st to avoid incurring a late fee.

Any questions or comments regarding your account, arrears, charges or any adjustments should be directed to your property manager.

### **Make payments payable to:**

Lancaster Madison Apartment Corp.

### **Mailing address:**

Kyrour Realty Group  
263 West 38<sup>th</sup> Street, suite ISE  
New York, NY 10018

## **Homeowners Insurance**

As a Shareholder of the Lancaster Madison, your insurance needs are different from home owners. The master policy purchased by your cooperative covers your unit's building, the common areas, and the unit owners' collective liability. But that policy does not cover damage to your personal belongings or property within your unit that is caused by fire, theft, vandalism or other perils. Nor does it cover your personal liability in the event of a lawsuit. Therefore, it is imperative that you purchase homeowners insurance for your apartment to cover any additional personal losses you may incur. A policy with improvements and betterments coverage should be purchased in order to protect you for all apartment alterations.

## Emergency Procedures

### **Accidents or Incidents**

In the event of an accident or incident in the building, please notify the management immediately.

### **Apartment Lockouts**

We must remind you that lockouts are not considered emergencies, although as a courtesy, the building staff will accommodate your needs. If you lose your key(s) or get locked out of your apartment, please check with management and or building superintendent.

### **Smoke Detectors and Carbon Monoxide Detectors**

Each unit is equipped with combo units, smoke detector and carbon monoxide detector. The units are to be tested periodically and any faulty units must be replaced immediately.

### **Sprinkler Heads**

The buildings fire sprinkler system is fully operational and is required in case of a fire. In addition, each apartment has been equipped with sprinkler heads that are also fully operational. Unit Owners are not permitted to paint, or in any way tamper with or cover any sprinkler head in the unit. Painting, tampering with or covering will render the sprinkler heads inoperative and not repairable.

### **Flooding**

If your apartment has a serious water leak, such as the failure of a plumbing fixture or a leak from the ceiling, notify the superintendent immediately. Minor leaks should also be reported in a timely manner due to the cumulative effects of water damage. If there is damage to your personal items, we recommend that after notifying the superintendent, you notify your individual homeowners' insurance carrier.

### **Theft or Any Other Criminal Acts**

If there are any situations that pose a threat to your safety or the safety of others in the building, immediately call 911 for police action. Any and all criminal acts should be reported to the local police department. An incident report will be taken by the resident manager or management and appropriate follow-up action will be taken. The Local Police Dept. is the 26th Police Precinct.

***PLEASE NOTE THAT THE INFORMATION SUPPLIED IN THIS SUMMARY IS SUBJECT TO CHANGE.***

## HOUSE RULES

[NOTE: All references to "Shareholder" in these House Rules also apply to family, guests and subtenants of the Shareholder.]

- (1) The public halls and stairways of the building shall not be obstructed or used for any purpose other than as entrance to and exit from the apartments in the building.
- (2) Children shall not play in the public halls, courts, stairways, fire escapes or elevators and shall not be permitted on the roof unless accompanied by a responsible adult.
- (3) No public hall above the ground floor of the building shall be decorated or furnished by and Shareholder in any manner without the prior consent of all the Shareholders on that floor. If there is disagreement among Shareholders or a question about the decoration or furnishing of the ground floor, the Board of Directors shall decide.
- (4) No article shall be placed in the halls or on the staircase landings or fire towers, nor shall anything be hung or shaken from the doors, windows, terraces or balconies or placed upon the windowsills of the building.
- (5) No baby carriages, bicycles, scooters or similar vehicles shall be stored in a passenger elevator nor shall any of the above mentioned vehicles be allowed to stand in the public halls, passageways or courts of the building.
- (6) Awnings or window air conditioning units, washing machines, dishwashers or dryers may not be used in or about the building except as shall have been expressly approved by the Corporation. No objects shall be projected out of any window of the building without the express approval of the Corporation.
- (7) No sign, notice, advertisement or illumination shall be written or hung from window or other part of the building, except as has been approved in writing by the Corporation or its managing agent.
- (8) No radio or television antenna shall be attached to or hung from the exterior of the building without the prior written approval from the Corporation.
- (9) No Shareholder shall make or permit any disturbing noises in the building or do or permit anything to be done therein which will interfere with the rights, comfort or convenience of other Shareholders. No Shareholder shall play or allow to be played musical instruments or permit to be played a phonograph or a radio or television in a loud manner between the hours of eleven (11:00) o'clock p.m. and eight (8:00) o'clock a.m. the next morning so as to disturb or annoy other occupants of the building. No construction or repair work or other installation involving noise shall be conducted in any apartment except on weekdays (not including legal holidays) and only between the hours of 8:30 a.m. and 5:00 p.m.

- (10) If there is a garage in the building, the Shareholder will abide by all arrangements made by the Corporation with the garage operator with regard to the garage and the driveways thereto.
- (11) Garbage and refuse from the apartments shall be disposed of only at such times and in such manner as the superintendent or the managing agent of the building may direct.
- (12) Toilets and other plumbing fixtures in the building shall not be used for any purposes other than those for which they were constructed, nor shall any sweepings, rubbish, rags or any other articles be thrown into toilets. The cost of repairing any damage resulting from misuse of any toilets or other plumbing fixtures shall be paid for by the Shareholder responsible for the damage.
- (13) No Shareholder shall send any employee of the Corporation out of the building on any private business of a Shareholder.
- (14) In no event shall any bird, reptile or animal be permitted in any of the public portions of the building, unless carried or on a leash. No pigeons or other birds or animals shall be fed from the window sills or other public portions of the building or on the sidewalk or street adjacent to the building.
- (15) No vehicle belonging to a Shareholder or to a member of the family or guest, roommate, subtenant or employee of a Shareholder shall be parked in such a manner as to impede or prevent ready access to any entrance of the building by another vehicle.
- (16) The Shareholder shall use the available laundry facilities, if any, only upon such days and during such hours as the Corporation may designate.
- (17) The Corporation shall have the right from time to time to curtail or relocate any space devoted to storage or laundry purposes.
- (18) Complaints regarding the service of the building shall be made in writing to the Corporation or its managing agent.
- (19) The Corporation may revoke at any time any consent or approval which it has given under these House Rules.
- (20) Shareholder shall observe all rules about the security of the building and its residents which the Board of Directors approves and issues in writing to the Shareholders.

KYROUS REALTY GROUP INC

263 West 38<sup>th</sup> Street • Suite 15E • New York, NY 10018

Phone: 212.302.1500 • Fax: 212.302.3855

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Lancaster Madison Cooperative - Letter to Board of Directors

The Board of Directors  
Lancaster Madison Cooperative  
c/o Kyrus Realty Group  
263st 38<sup>th</sup> Street - suite 15E  
New York, NY 10018

Re: Lancaster Madison Cooperative  
Unit#: \_\_\_\_\_

Dear Board of Directors:

I (We) have received, read, understand and agree to abide by the House Rules for Lancaster Madison Cooperative.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Lancaster Madison Apartment Corp.**  
 c/o Kyrous Realty Group, Inc.  
 263 West 38<sup>th</sup> Street, Suite #15E  
 New York, NY 10018-5851

**RETURN  
THIS COPY**

**ANNUAL NOTICE**  
**PROTECT YOUR CHILD FROM LEAD POISONING AND WINDOW FALLS**

New York City law requires that tenants living in buildings with 3 or more apartments complete this form and return it to their landlord before February 15, each year. If you do not return this form, your landlord is required to visit your apartment to determine if children live in your apartment.

| <b>Peeling Lead Paint</b>  | <b>Window Guards</b>  |
|--|---|
| <p>By law, your landlord is required to inspect your apartment for peeling paint and other lead paint hazards at least once a year if a child under 6 years of age (5 years or younger) lives with you.</p> <ul style="list-style-type: none"> <li>• You must notify your landlord in writing if a child under 6 comes to live with you during the year.</li> <li>• If a child under 6 lives with you, your landlord must inspect your apartment and provide you with the results of these paint inspections.</li> <li>• <b>Always report peeling paint to your landlord. Call 311 if your landlord does not respond.</b></li> <li>• Your landlord must use safe work practices to repair all peeling paint and other lead paint hazards.</li> </ul> | <p>By law, your landlord is required to install window guards in all your windows if a child under 11 years of age (10 years or younger) lives with you, OR if you request them (even if no children live with you).</p> <ul style="list-style-type: none"> <li>• ONLY windows that open to fire escapes, and one window in each first floor apartment when there is a fire escape on the outside of the building, are legally exempt from this requirement.</li> <li>• It is against the law for you to interfere with installation, or remove window guards where they are required. Air conditioners in windows must be permanently installed.</li> <li>• Window guards must be installed so there is no space greater than 4 1/2 inches above or below the guard, on the side of the guard, or between the bars.</li> </ul> |
| <p>These requirements apply to buildings with 3 or more apartments built before 1960. They also apply to buildings to buildings built between 1960 and 1978 if the landlord knows that lead paint is present.</p>  | <p>These requirements apply to all buildings with 3 or more apartments, regardless of when they were built.</p>   |

**Fill Out and detach the bottom part of this form.**

:)<-----

Please check all boxes that apply

DA child age under 6 years of age (5 years or younger) lives in my apartment.

DA child under 11 years of age (10 years or younger) lives in my apartment and:

D Window guards are installed in all windows as required.

D Window guards need repair.

D Window guards are NOT installed in all windows as required.

D No child under 11 years of age (10 years or younger) lives in my apartment:

I want window guards installed anyway.

D I have window guards, but they need repair.

|                |            |                  |       |          |
|----------------|------------|------------------|-------|----------|
| Last Name      | First Name | Middle Initial   |       |          |
| Street Address | Apt. #     | City             | State | Zip Code |
| Signature      | Date       | Telephone Number |       |          |

**Deadline for return: February 15, 2014**

**Return form to: Name and address of landlord or managing agent. Call 311 for more information on preventing lead poisoning and window falls.**

**DOHMH-approved: October 16, 2013**



**Lancaster Madison Apartment Corp.**  
 c/o Kyrus Realty Group, Inc.  
 263 West 38<sup>th</sup> Street, Suite #15E  
 New York, NY 10018-5851

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| <p>These requirements apply to buildings with 3 or more apartments built before 1960. They also apply to buildings built between 1960 and 1978 if the landlord knows that lead paint is present.</p>  | <p>These requirements apply to all buildings with 3 or more apartments, regardless of when they were built.</p>  |

**Fill out and detach the bottom part of this form and return it to your landlord.**

-----x-----

Please check **all** boxes that apply

DA child age under 6 years of age (5 years or younger) lives in my apartment.

A child under 11 years of age (10 years or younger) lives in my apartment and:

Window guards are installed in all windows as required.

Window guards need repair.

Window guards are NOT installed in all windows as required.

No child under 11 years of age (10 years or younger) lives in my apartment:

I want window guards installed anyway.

I have window guards, but they need repair.

|                |            |                  |       |          |
|----------------|------------|------------------|-------|----------|
| Last Name      | First Name | Middle Initial   |       |          |
| Street Address | Apt. #     | City             | State | Zip Code |
| Signature      | Date       | Telephone Number |       |          |

**Deadline for return: February 15, 2015**

Return form to: Name and address of landlord or managing agent. Call 311 for more information on preventing lead poisoning and window falls.

**DOHMH-approved: October 16, 2014**

# NEW YORK CITY Residential Recycling Guide

Full recycling is back in America's largest city! Here are some simple pointers on what to recycle and how.

THE EARTH'S Bur DEFENSE

## Paper & Cardboard

### YES

#### Newspapers, magazines & catalogs

#### White or colored paper

All mail (even envelopes with plastic windows), wrapping paper, etc.

#### Smooth cardboard

Cereal and other dry-food boxes, etc.

#### Paper bags

#### Flattened cardboard

Place paper and cardboard recyclables in a clear bag or green-labeled container. Note that paper milk and juice cartons (rinsed) should be placed in the container with metal, glass and plastic.

### NO

#### Plastic or wax coated paper

Candy wrappers, take-out containers, etc.

#### Carbon paper

#### Heavily soiled paper or cardboard

#### Hardcover books

## Metal, Glass & Plastic

### YES

#### Metal cans

Food, aerosol (empty), etc.

#### Foil wrap & trays

#### Plastic bottles & jugs

For detergent, soda, milk, juice, water, etc.  
• any bottle where the neck is smaller than the body

#### Glass bottles & jars

#### Milk and other beverage cartons

#### Household metal including:

- Wire hangers
- All metal appliances (from washing machines and stoves to toasters and irons)
- All indoor and outdoor metal furniture, including cabinets and window screens
- Metal pots and pans, cutlery and utensils

• call 311 before discarding appliances that contain CFC gas, such as refrigerators and air conditioners.

### NO

#### Motor oil or chemical containers

#### Styrofoam

Cups, egg cartons, etc.

#### Food containers

For yogurt, margarine, take-out, salad bar, etc.

#### Plastic bags, wrap or film

Sandwich wrap, grocery or dry cleaning bags, etc.

#### Plastic trays or tubs

For microwave, etc.

#### Plastic utensils, plates, cups, bowls

#### Plastic appliances, toys, furniture

#### Lightbulbs

#### Pane glass

#### Pump spray nozzles

#### Caps or lids

#### Household batteries

Rinse metal, glass and plastic items and place them in a clear bag or blue-labeled container. Throw away caps and lids with your regular trash. To collect the 5-cent deposit on beverage containers such as beer and soda bottles and cans, redeem them at a neighborhood store instead of putting them in with your recycling.

For more information, call the city information line at 311 or visit the New York City Recycles website at [www.ci.nyc.ny.us/html/dos/html/bw\\_home/index.html](http://www.ci.nyc.ny.us/html/dos/html/bw_home/index.html)

To find this guide online, go to [www.nrdc.org/cities/recycling/](http://www.nrdc.org/cities/recycling/)

Natural Resources Defense Council  
40 West 20th Street, New York, NY 10011 | 212 727-2700  
[www.nrdc.org](http://www.nrdc.org)