

Please submit 1 original with checks and 4 additional copies of the complete application package. DO NOT STAPLE PAGES

20% down required

30% DTI

**Stewart Heights Corp.**

**25-35 Stewart Place**

**Mount Kisco, NY 10549**

## **Purchase Application**

**C/O STILLMAN MANAGEMENT**

**440 MAMARONECK AVENUE SUITE**

**S-512**

**ATTENTION RITA PITA**

## FINANCIAL GUIDELINES FOR STEWART HEIGHTS OWNERS CORP.

20% minimum down payment is required for all purchases.

This corporation requires that a prospective purchaser's annual housing costs at Stewart Heights Owners Corp. (maintenance, mortgage, etc.) together with other debt service and obligations that they may have (car loans, credit card payments, support payments, etc.) should not exceed 30% of his/her annual gross income.

Please take these guidelines into account prior to submitting an application on behalf of a prospective purchaser. In the event that the prospect does not qualify financially, the application will be denied without further action.

STILLMAN MANAGEMENT, INC.  
440 MAMARONECK AVENUE, SUITE S-512  
HARRISON NY 10528

**IMPORTANT INFORMATION REGARDING YOUR SOCIAL SECURITY NUMBER**

**PROTECTING YOUR PRIVACY**

**IN ORDER TO PROTECT YOUR PRIVACY PLEASE REMOVE/BLACK OUT YOUR SOCIAL SECURITY NUMBER FROM EACH FINANCIAL INSTITUTION DOCUMENT INSERTED INTO THE APPLICATION.**

**FINANCIAL CONDITION ( NET WORTH)**

**TAX RETURNS**

**PERSONAL LOANS**

**BANK STATEMENTS**

**IRA STATEMENTS**

**CD'S**

**SAVINGS, ETC.**

**THE CREDIT AGENCY AUTHORIZATION FORM AND THE AUTHORIZATION FORM FOR A BACKGROUND CHECK ARE THE ONLY FORMS THAT REQUIRE THE SOCIAL SECURITY NUMBER. ONLY SEND ONE EACH OF THESE FORMS. ONCE THE REQUIRED FORMS ARE OBTAINED THE AUTHORIZATION FORMS WILL BE SHREDDED AND YOUR SOCIAL SECURITY NUMBER ON THE DOCUMENTS OBTAINED WILL BE BLACKED OUT.**

Please be advised that if you do not comply with the above to protect your identity, we will not be held responsible. It is up to you to black out the relevant information as we will not do it for you.

**IF YOU HAVE ANY QUESTIONS, PLEASE DO NOT HESITATE TO CONTACT THE SALES AND LEASING DEPARTMENT AT STILLMAN MANAGEMENT.**



141 Halstead Avenue,  
Mamaroneck, NY 10543

T: 914.813.1900  
F: 914.813.1919

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



October 27, 2010

Shareholders  
Stewart Heights Corp.  
25/35 Stewart Place  
Mt. Kisco, NY 10549

Dear Shareholder:

Effective immediately, the Board of Directors approved a resolution that any moves into or out of the building will be charged a fee. Specifically, \$300 will be charged for moves into the building, and \$300 will be charged for moves out of the building.

The Board hopes that these charges will help defray the cost of normal wear and tear that occurs with the moves.

As always, should damage result from something other than normal wear and tear, the shareholder will be charged accordingly.

Sincerely,

The Board of Directors  
Stewart Heights

**STEWART HEIGHTS CORP.**  
25 & 35 STEWART PLACE  
MOUNT KISCO, NEW YORK 10549

**PURCHASE APPLICATION PROCEDURE.**

1. Complete all items on the attached Purchase Application. Approximately 45 days is required for review of all applications. The Board of Directors reserves the right to require additional evidence of financial responsibility.

- |   |  |
|---|--|
| ■ Purchase Application (attached)         | Copy of most current W-2 form  |
| ■ Purchase Affidavit (attached)           | Copy of most current Federal Tax Return  |
| ■ Carpet Affidavit (attached)             | Proof of Liquid Assets (i.e., check, savings and/or money market account statements) |
| ■ Credit Report Authorization (attached)  | Two Business Reference Letters   |
| ■ Lead Based Paint Affidavit & Disclosure | Two Personal Reference Letters   |
| ■ Signed Contract of Sale                 | All fees as set forth below in separate  |
| ■ Mortgage Commitment Letter              |  |
| ■ Recent pay stub                         |  |

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The following fees must be submitted along with the Purchase Application and accompanying documents:

- a) A non-refundable **\$350.00** application fee payable to Stillman Management.
- b) A non-refundable **\$200.00** credit/criminal/background/sex offender inquiry fee **PER PURCHASER** payable to Stillman Management.
- c) A non-refundable **\$100.00** criminal/background/sex offender inquiry fee **per individual** (18 and older) living in the unit payable to Stillman Management.
- d) \$20 Directory Nameplate Fee (from Purchaser) payable to Stewart Heights Corp.

**NOTE:** All fees must be paid by SEPARATE CHECKS.

- e) The following Moving Deposits must be submitted along with the Purchase Application and accompanying documents:  
**\$300 NON Refundable Move-Out fee** (from Seller) payable to Stewart Heights Corp.  
**\$300 NON Refundable Move-In fee** (from Purchaser) payable to Stewart Heights Corp.  
**NOTE:** Moving Deposits will be returned if inspection of the common areas reveals no damage directly related to the moves in or out and all Rules and Regulations pertaining to the moves have been followed.
- f) Completed Purchase Application and accompanying documents and fees should be submitted to Stillman Management, Inc., 440 Mamaroneck Ave, Suite S-512, Harrison, New York, 10528
- g) After your Purchase Application package is received and a credit report run, it is forwarded to the Admissions Committee or Board of Directors, as the case may be. You will be contacted when an interview has been scheduled. All prospective occupants of the apartment **MUST** attend the interview. Following the interview, you will be advised of the Committee's and/or Board's decision. No one is allowed to move into an apartment without Board approval. The Committee/Board is not to be contacted by the Seller, the Purchaser or their respective Real Estate Brokers or Attorneys, as this will only delay the process.

20% down payment is required for purchase.

## STEWART HEIGHTS CORP.

25 & 35 Stewart Place, Mt. Kisco, New York 10549

### CLOSING PROCEDURES

(A copy of this form should be given to attorneys for both parties)

1. Upon approval by the Admissions Committee/Board of Directors, attorneys for both parties must contact Donna L. Moccio, LA at Banks Shapiro Gettinger Waldinger & Brennan, LLP, Transfer Agent for the Corporation, at 914-666-8033. It is essential that at least 5 business days advance notice be given notice be given to schedule a closing.
2. All closings will be held at the office of the Corporation's Transfer Agent, Banks Shapiro Gettinger Waldinger & Brennan, LLP, 118 North Bedford Road, Suite 300, Mt. Kisco, New York. If an alternate location is necessary, attorneys must make prior arrangements with the Transfer Agent.
3. At closing, it is necessary for ALL PARTIES to the transaction be present. For example, if the Stock is being purchased or sold by a husband and wife, both must attend the closing. If a party will be represented by an attorney in fact at closing, a copy of the Power of Attorney must be delivered to the Transfer Agent before the closing is scheduled.
4. At closing, the Transfer Agent will prepare and deliver the following documents:
  - a. Original Consent of the Corporation
  - b. New Stock Certificate Issued to Purchaser
  - c. Assignment of Proprietary Lease Issue to Purchaser
  - d. Acceptance and Assumption of Proprietary Lease
  - e. Evidence of Cooperative Insurance
  - f. Monthly Maintenance Status/Estoppel Letter
  - g. Recognition Agreement (if financing)
5. It is the responsibility of Seller to deliver the following documents at Closing:
  - a. Original Stock Certificate Issued to Seller
  - b. Original Proprietary Lease Issued to Seller

Note: If Seller is an Estate, or if Seller cannot locate items a. and/or b. above, then Seller must contact the Transfer Agent prior to closing for special instructions regarding the extra documentation which will be required. If Seller financing his/her purchase through a lending institution, the lender must be notified of the sale. A representative from the bank must attend the closing and deliver the Seller's Stock Certificate and Proprietary Lease. THE TRANSACTION WILL NOT CLOSE UNLESS THESE DOCUMENTS ARE SURRENDERED AT CLOSING.

6. The following fees will be due at closing:
  - a. From Seller:
    - Transfer Agent Fee of \$550 payable to Banks Shapiro Gettinger Waldinger & Brennan, LLP
    - Coop Transfer fee of \$300 payable to Stewart Heights Corp.
    - If Lost Stock Certificate or Lease \$150 payable to Banks Shapiro Gettinger Waldinger & Brennan, LLP
    - If Seller is an Estate, \$150 payable to Banks Shapiro Gettinger Waldinger & Brennan, LLP
    - If closing is adjourned after documents have been prepared, adjourned fee of \$150 payable to Banks Shapiro Gettinger Waldinger & Brennan, LLP
  - b. From Purchaser:
    - Travel Fee of \$150 to Banks Shapiro Gettinger Waldinger & Brennan, LLP if closing is held outside of Transfer Agent's office
    - Fee of \$150 to review Recognition Agreement payable to Banks Shapiro Gettinger Waldinger & Brennan, LLP

**NOTE: ALL PAYMENTS ARE TO BE BY SEPARATE CERTIFIED, BANK OR ATTORNEY ESCROW CHECKS**

**STEWART HEIGHTS CORP.**  
25 & 35 STEWART PLACE  
MOUNT KISCO, NEW YORK 10549

**PURCHASE APPLICATION**  
**TERMS AND CONDITIONS ON SALES OF COOPERATIVE APARTMENTS**

Seller shall furnish (i) to Stillman Management, Inc., on delivery of Application a duly executed copy of the Purchase Contract and (ii) to the prospective Purchaser before executive Purchase Contract and the Seller's expense, copies of the Proprietary Lease, Offering Plan (Prospectus), By-Laws, House Rules and annual Audited Statement for the prior years, if same is requested by the Purchaser's attorney.

Prospective Purchaser/Applicant acknowledges receipt from the Seller of the documents enumerated in (ii) above.

Stillman Management, Inc. and the owning Corporation cannot and do not make any representations with respect to the value of the building or stock representing individual apartments involved nor make any recommendations to the Purchaser with respect to the advisability of the purchase thereof.

The Purchaser of a cooperative apartment takes, subject to provisions of the Proprietary Lease, House Rules and Corporate By-Laws, and assumes all the Seller's obligations there over and is obligated to sign such documents to accomplish such purpose as the owning Corporation may require.

This application is subject to the approval of the Seller and the owning Corporation. Approximately 45 days is required for review of the Application and notification to the parties by the owning corporation.

Stillman Management, Inc. and the owning Corporation, and/or any party connected with this business organization shall in no event be liable as respects to any matter concerning this Application or concerning any act of the Seller or failure to act on the part of the Seller in connection with this Application or in connection with any sale or lease contemplated herein.

No representations or agreements by salespersons, brokers or others are to be binding on the owning Corporation or Stillman Management, Inc. unless included in the written Proprietary Lease proposed to be executed.

I/we acknowledge that I/we have read, understand and accept the foregoing terms and conditions. I/we have had access to a copy of the Proprietary Lease, By-Laws and House Rules and I/we accept them as obligations of ownership and residence.

I/we have read and fully executed the accompanying Lead-Based Paint Affidavit and Disclosure Form and the Purchase Affidavit.

All information set forth in this Application is deemed to be a true representation of facts made for the purpose of obtaining approval from the Board of Directors of my/our Application for a Proprietary Lease. I/we fully understand that I/we will be fully liable for any false statements made in connection with this Application.

Applicant \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant \_\_\_\_\_ Date \_\_\_\_\_

For shares allocated to Apartment # \_\_\_\_\_ at \_\_\_\_\_ Address \_\_\_\_\_



440 Mamaroneck Avenue, Suite S 512  
Harrison, NY 10528

T: 914.813.1900  
F: 914.813.1919

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



Please provide the following information with your application in order to send the information for closing:

**Seller's Attorney**

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

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

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Buyer's Attorney**

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

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

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_



# APPLICANT TENANT DATA VERIFICATION

Building \_\_\_\_\_ Rent/Purchase \_\_\_\_\_  
 Address of Building \_\_\_\_\_  
 Lease begins \_\_\_\_\_ Lease Expires \_\_\_\_\_ Apartment # \_\_\_\_\_  
 Name of Applicant \_\_\_\_\_ Tel.# \_\_\_\_\_  
 Present Address \_\_\_\_\_ State \_\_\_\_\_  
(include zip code)

How long at above address \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Date of Birth \_\_\_\_\_  
 Present Landlord \_\_\_\_\_ Address \_\_\_\_\_  
 Telephone # \_\_\_\_\_ Lease Expires \_\_\_\_\_

If less than one year please list previous address \_\_\_\_\_

Previous Landlord \_\_\_\_\_ Tel.# \_\_\_\_\_  
 Address \_\_\_\_\_ Date Vacated \_\_\_\_\_

Applicant employed by \_\_\_\_\_ Position \_\_\_\_\_  
 Address \_\_\_\_\_ Telephone \_\_\_\_\_  
 How Long \_\_\_\_\_ Salary \_\_\_\_\_ Contact Person \_\_\_\_\_

If present employer is less than one year  
 Previous employer \_\_\_\_\_ Position \_\_\_\_\_  
 Address \_\_\_\_\_ Telephone \_\_\_\_\_  
 How Long \_\_\_\_\_ Date Left \_\_\_\_\_ Salary \_\_\_\_\_ Contact Person \_\_\_\_\_

Other sources of Income \_\_\_\_\_ Tel. # \_\_\_\_\_  
 Contact person \_\_\_\_\_

Bank Reference:  
 Name of Bank \_\_\_\_\_ Type of Acct. \_\_\_\_\_ Acct # \_\_\_\_\_  
 \_\_\_\_\_ Type of Acct. \_\_\_\_\_ Acct # \_\_\_\_\_  
 \_\_\_\_\_ Type of Acct. \_\_\_\_\_ Acct # \_\_\_\_\_

Accountant \_\_\_\_\_ Address \_\_\_\_\_  
 Tel. # \_\_\_\_\_

Do you have Credit Cards \_\_\_\_\_

Name of Persons not on the Lease to occupy the Apartment \_\_\_\_\_

Name	Age	Relationship

In Case of Emergency Notify \_\_\_\_\_ Telephone# \_\_\_\_\_  
 Address \_\_\_\_\_

In connection with my application for this apartment, I authorize all banks, corporations, companies, Credit agencies, accountants, persons and employers, to release any information that they have about me to Tenant Data Verification Co. Inc., or its agency and I release them from any and all liability or responsibility from doing so. Further I authorize the procurement of an investigative consumer report and understand that such a report may contain information about my background, character and personal reputation. I understand this notice will also apply to future update reports that may be requested. I understand that any misrepresentation by me may be the cause of rejection by the landlord.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Agent \_\_\_\_\_

**APPLICANT**

AUTHORIZATION TO OBTAIN A CREDIT BACKGROUND

IN ORDER TO COMPLY WITH THE PROVISIONS OF SECTION 6.06  
(A) OF THE FEDERAL FAIR CREDIT REPORTING ACT, I  
AUTHORIZE YOU TO RETAIN A CREDIT REPORTING AGENCY,  
WHICH AGENCY MAY OBTAIN, PREPARE, FURNISH AND USE  
INFORMATION ON MY CHARACTER AND GENERAL  
REPUTATION, AS WELL AS INFORMATION REGARDING  
EMPLOYMENT, INCOME, CREDIT HISTORY, ACCOUNTANTS,  
BANKING INFORMATION, FINANCIAL BROKER AND LANDLORD.

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

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

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

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

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

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

**APPLICANT**

**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...

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

CO APPLICANT

TENANT DATA VERIFICATION

Building \_\_\_\_\_ Rent/Purchase \_\_\_\_\_

Address of Building \_\_\_\_\_

Lease begins \_\_\_\_\_ Lease Expires \_\_\_\_\_ Apartment # \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Tel.# \_\_\_\_\_

Present Address \_\_\_\_\_ State \_\_\_\_\_

(include zip code)

How long at above address \_\_\_\_\_ Social Security # \_\_\_\_\_

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

Present Landlord \_\_\_\_\_ Address \_\_\_\_\_

Telephone # \_\_\_\_\_ Lease Expires \_\_\_\_\_

If less than one year please list previous address \_\_\_\_\_

Previous Landlord \_\_\_\_\_ Tel.# \_\_\_\_\_

Address \_\_\_\_\_ Date Vacated \_\_\_\_\_

Applicant employed by \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

How Long \_\_\_\_\_ Salary \_\_\_\_\_ Contact Person \_\_\_\_\_

If present employer is less than one year

Previous employer \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

How Long \_\_\_\_\_ Date Left \_\_\_\_\_ Salary \_\_\_\_\_ Contact Person \_\_\_\_\_

Other sources of Income \_\_\_\_\_

Contact person \_\_\_\_\_ Tel. # \_\_\_\_\_

Bank Reference:

Name of Bank \_\_\_\_\_ Type of Acct. \_\_\_\_\_ Acct # \_\_\_\_\_

\_\_\_\_\_ Type of Acct. \_\_\_\_\_ Acct # \_\_\_\_\_

\_\_\_\_\_ Type of Acct. \_\_\_\_\_ Acct # \_\_\_\_\_

Accountant \_\_\_\_\_ Address \_\_\_\_\_

Tel. # \_\_\_\_\_

Do you have Credit Cards \_\_\_\_\_

Name of Persons not on the Lease to occupy the Apartment

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In Case of Emergency Notify \_\_\_\_\_ Telephone# \_\_\_\_\_

Address \_\_\_\_\_

In connection with my application for this apartment, I authorize all banks, corporations, companies, Credit agencies, accountants, persons and employers, to release any information that they have about me to Tenant Data Verification Co. Inc., or its agency and I release them from any and all liability or responsibility from doing so. Further I authorize the procurement of an investigative consumer report and understand that such a report may contain information about my background, character and personal reputation. I understand this notice will also apply to future update reports that may be requested. I understand that any misrepresentation by me may be the cause of rejection by the landlord.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Agent \_\_\_\_\_

**CO APPLICANT**

**AUTHORIZATION TO OBTAIN A CREDIT BACKGROUND**

IN ORDER TO COMPLY WITH THE PROVISIONS OF SECTION 6.06  
(A) OF THE FEDERAL FAIR CREDIT REPORTING ACT, I  
AUTHORIZE YOU TO RETAIN A CREDIT REPORTING AGENCY,  
WHICH AGENCY MAY OBTAIN, PREPARE, FURNISH AND USE  
INFORMATION ON MY CHARACTER AND GENERAL  
REPUTATION, AS WELL AS INFORMATION REGARDING  
EMPLOYMENT, INCOME, CREDIT HISTORY, ACCOUNTANTS,  
BANKING INFORMATION, FINANCIAL BROKER AND LANDLORD.

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

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

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

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

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

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

CO APPLICANT

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...

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

OCCUPANT #1 (OVER 18)

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...

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

OCCUPANT #2 (OVER 18)

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...

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



OCCUPANT #3 (OVER 18)

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...

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

**STEWART HEIGHTS CORP.**

**APPLICATION FOR STOCK PURCHASE APPROVAL**

**PAGE 1**

Date: \_\_\_\_\_ Mortgage Amount: \_\_\_\_\_  
Apartment: \_\_\_\_\_ Mortgage Term: \_\_\_\_\_  
Shares: \_\_\_\_\_ Interest Rate: \_\_\_\_\_  
Monthly Maintenance: \_\_\_\_\_ Monthly Mortgage Payment: \_\_\_\_\_  
Purchase Price: \_\_\_\_\_ Bank: \_\_\_\_\_  
Down Payment: \_\_\_\_\_

**SELLING STOCKHOLDER(S)**

SELLING STOCKHOLDER(S): \_\_\_\_\_  
Broker: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Representative: \_\_\_\_\_  
Selling Stockholder's Attorney: \_\_\_\_\_  
Attorney's Address: \_\_\_\_\_  
Attorney's Telephone: \_\_\_\_\_

**APPLICANT**

APPLICANT: \_\_\_\_\_ Social Security # \_\_\_\_\_  
Present Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
\_\_\_\_\_ Years There: \_\_\_\_\_  
Business/Position: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Years There: \_\_\_\_\_

If less than 2 years with present employer, give name and address of previous employer and previous title:

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

**CO-APPLICANT**

CO-APPLICANT: \_\_\_\_\_ Social Security # \_\_\_\_\_  
Present Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
\_\_\_\_\_ Years There: \_\_\_\_\_  
Business/Position: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Years There: \_\_\_\_\_

If less than 2 years with present employer, give name and address of previous employer and previous title:

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

**STEWART HEIGHTS CORP.  
APPLICATION FOR STOCK PURCHASE APPROVAL**

**PAGE 2**

Will the Applicant(s) reside in the apartment? Yes \_\_\_\_\_ No \_\_\_\_\_

Names of immediate family members to reside with Applicant(s)

Relationship

Age

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

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

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

Names of non-related occupants to reside with Applicant(s)

Relationship

Age

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

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

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

Applicant

Co-Applicant

Have you ever filed for bankruptcy? Yes \_\_\_ No \_\_\_ Yes \_\_\_ No \_\_\_

If Applicant or Co-Applicant answer yes, please provide information as to when and where \_\_\_\_\_

\_\_\_\_\_

Have you any outstanding judgment? Yes \_\_\_ No \_\_\_ Yes \_\_\_ No \_\_\_

If Applicant or Co-Applicant answer yes, an explanation must be provided: \_\_\_\_\_

\_\_\_\_\_

Are you a party in a lawsuit? Yes \_\_\_ No \_\_\_ Yes \_\_\_ No \_\_\_

If Applicant or Co-Applicant answer yes, an explanation must be provided: \_\_\_\_\_

\_\_\_\_\_

Applicant(s)'s Attorney: \_\_\_\_\_

Attorney's Address: \_\_\_\_\_

Attorney's Telephone: \_\_\_\_\_

**REFERENCES**

If two Applicants, please indicate for whom reference is for.

Present Landlord: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

**FINANCIAL**

Bank/Checking: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

Bank/Savings: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

**BUSINESS**

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

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

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

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

**PERSONAL**

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

Address: \_\_\_\_\_ Position/Occupation: \_\_\_\_\_

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

Address: \_\_\_\_\_ Position/Occupation: \_\_\_\_\_

**STEWART HEIGHTS CORP.  
APPLICATION FOR STOCK PURCHASE APPROVAL**

**PAGE 4**

**PERSONAL FINANCIAL STATEMENTS**

**INCOME & EXPENSES**

	<u>Applicant</u>	<u>Co-Applicant</u>
<b><u>GROSS INCOME</u></b>		
Yearly Salary	\$ _____	\$ _____
Other Income	\$ _____	\$ _____
Total Income	\$ _____	\$ _____
Sources of Other Income: _____		
_____		

Net Monthly Income after Taxes	\$ _____	(A)	\$ _____	(A)
--------------------------------	----------	-----	----------	-----

**MONTHLY EXPENSES**

Payables	\$ _____		\$ _____	
Credit Cards	\$ _____		\$ _____	
Installment Debt	\$ _____		\$ _____	
Co-op Mortgage (this purchase)	\$ _____		\$ _____	
Co-op Maintenance (this purchase)	\$ _____		\$ _____	
Other Mortgages	\$ _____		\$ _____	
Alimony/Child Support	\$ _____		\$ _____	
Other Monthly Payments	\$ _____		\$ _____	
Total Monthly Payments	\$ _____	(B)	\$ _____	(B)
Monthly Excess cash or (deficit) [(A) minus (B)]	\$ _____		\$ _____	

ALL APPLICANTS MUST PROVIDE DOCUMENTATION/STATEMENTS OF ALL ASSETS AND LIABILITIES CLAIMED ON THIS PAGE.

**STEWART HEIGHTS CORP.**  
**APPLICATION FOR STOCK PURCHASE APPROVAL**

**PERSONAL FINANCIAL STATEMENTS (Cont'd.)**

**BALANCE SHEET**

<b><u>ASSETS</u></b>	<b><u>Applicant</u></b>		<b><u>Co-Applicant</u></b>	
Cash Deposit (this transaction)	\$ _____		\$ _____	
Checking Accounts (attach latest Statement)	\$ _____		\$ _____	
Savings Accounts (attach latest statement)	\$ _____		\$ _____	
Money Market Accounts (attach latest statement)	\$ _____		\$ _____	
Securities (attach latest statement)	\$ _____		\$ _____	
Real Estate (this transaction)	\$ _____		\$ _____	
Other Real Estate (Describe)	\$ _____		\$ _____	
_____	\$ _____		\$ _____	
Other Assets (Describe)	\$ _____		\$ _____	
_____	\$ _____		\$ _____	
<b>Total Assets</b>	\$ _____	(C)	\$ _____	(C)

<b><u>LIABILITIES &amp; NET WORTH</u></b>	<b><u>Applicant</u></b>		<b><u>Co-Applicant</u></b>	
Accounts Payable	\$ _____		\$ _____	
Credit Cards Payable (describe)	\$ _____		\$ _____	
Other Installment Debt (describe)	\$ _____		\$ _____	
_____	\$ _____		\$ _____	
Co-op Mortgage (this purchase)	\$ _____		\$ _____	
Other Mortgages (describe)	\$ _____		\$ _____	
_____	\$ _____		\$ _____	
Other Liabilities (describe)	\$ _____		\$ _____	
_____	\$ _____		\$ _____	
<b>Total Liabilities</b>	\$ _____	(D)	\$ _____	(D)
Net Worth [(C) minus (D)]	\$ _____		\$ _____	
Total Liabilities and Net Worth	\$ _____		\$ _____	

ALL APPLICANTS MUST PROVIDE DOCUMENTATION/STATEMENTS OF ALL ASSETS AND LIABILITIES CLAIMED ON THIS PAGE.

Stewart Heights Corp.  
PURCHASE AFFIDAVIT

STATE OF NEW YORK        )  
                                  ) ss:  
COUNTY OF WESTCHESTER )

I/We \_\_\_\_\_, proposed Purchaser of the Cooperative Apartment known as \_\_\_\_\_, at the property known as Stewart Heights Corp, hereby acknowledge that I/We are aware and understand the Board policy regarding pets and represent and covenant to the Board of Directors that I/We do not own a pet nor will I/we obtain a pet while residing at Stewart Heights Corp.

I/We hereby acknowledge that I/we are aware and understand the Board Policy prohibiting the installation of washing machine and represent and covenant to the Board of Directors that I/we do not own a washing machine new will I/we install a washing machine while residing at Stewart heights Corp.

I/ We make these representations and covenants in order to induce Stewart Heights Corp. to approve my/our purchase and I/we understand the Board of Directors has justifiable relied on these representations and covenants in granting the approval to rent. In the event these representations and covenants are untrue or violated, I/we understand this will constitute a default and grounds for eviction.

Please be advised that I/We intend to move into Stewart Heights Corp. on or about \_\_\_\_\_ 20\_\_\_\_.

I/We understand that both the Managing Agent and Superintendent must be notified at least 48 hours in advance of any intended move into or out of the building. The Cooperative Corporation will NOT permit any more without such advance notice.

I/We understand that any move must be conducted during normal business hours, 8:00 A.M to 6:00 P.M, Monday through Friday ONLY. NO ONE WILL BE ALLOWED TO MOVE ON WEEKENDS OR HOLIDAYS. If a moving van arrives at the premises, due to extraordinary circumstances beyond my/our control, at an hour that makes it impossible to complete operations by the 6:00 P.M. limitation, it is understood that financial penalties may be imposed. Every effort will be made to avoid such circumstances.

Agreed to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Purchaser

\_\_\_\_\_  
Date

\_\_\_\_\_  
Purchaser

\_\_\_\_\_  
Date

Stewart Heights Corp.

CARPET AFFIDAVIT

I/We, \_\_\_\_\_, hereby agree to comply with HOUSE RULE #18 of the Stewart Heights Corp. Proprietary Lease which states as follows:

- (18) Unless expressly authorized by the Board of Directors in each case, the floors of each apartment must be covered with rugs or carpeting or equally effective noise reducing material to the extent of at least 90% of the floor area of each room excepting only kitchens, bathrooms and closets.**

This requirement is necessary to help assure that all shareholders above, below and adjacent to my/our apartment have the quiet enjoyment of their apartment as provided for in the Proprietary Lease.

I/We further recognize that complaints regarding noise generated by daily living activities in a multiple dwelling are the most commonly occurring and also the most difficult to resolve.

I/We understand that Stewart Heights Corp. does not represent that the buildings are constructed so as to render individual apartments sound proof.

I/We make this representation that I/We will comply with the aforesaid House Rules as a condition of the Board's granting approval of my/our purchase/occupancy at Stewart heights Corp. Failure to comply with the House Rules shall be grounds for rescission of the Cooperative's approval.

I/We as the tenant(s) hereby agree that should the Cooperative be required to incur any legal expenses to enforce my/our compliance with the House Rule #18 that I/We as tenant(s) will be responsible for all such costs. Any legal and related expenses incurred by the Corporation will be charged as "additional rent" and paid pursuant to the terms of the Proprietary Lease.

\_\_\_\_\_  
Tenant Date

\_\_\_\_\_  
Tenant Date



**STEWART HEIGHTS CORP  
25-35 STEWART PLACE  
MT. KISCO, NY 10543**

**HOUSE RULES ACKNOWLEDGEMENT**

**I/We, the undersigned, have read and understand the House Rules for Stewart Heights Corp., located at 25-35 Stewart Place, Mount Kisco, NY 10549, and agree to abide by these House Rules and any Amendments made to these House Rules, while a resident in Apartment # \_\_\_\_\_ at Stewart Heights Corp.**

**SHAREHOLDER/APPLICANT ACKNOWLEDGEMENT:**

\_\_\_\_\_  
Shareholder/Applicant Signature

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Shareholder/Applicant Signature

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Date

# HOUSE RULES

## PREAMBLE

The House Rules have been designed to promote and maintain a quality of life that honors and respects our neighbors and the cooperative, as well as to promote safety in our community. The cooperation and implementation of the house rules by all residents is necessary to ensure the proper operation of the facility, and harmony within the community. The house rules are strictly enforced and may be amended, expanded, or repealed at any time by action of the Board of Directors. Continual violation of these rules may result in action being taken by the cooperative to terminate the proprietary lease.

### 1. HALLS, LOBBIES, STAIRWAYS, BALCONY SAFETY

The public halls, lobbies, and stairways of the buildings shall not be obstructed in any way or used for any purpose other than entering and leaving apartments in the buildings, including storage of velocipedes and other items. This is particularly important in case of an emergency. No items should be hanging on the outside of balcony railings, nor from the underside of balconies. Birdfeeders are not permitted as they can attract unintended pests.

#### a. PLANTINGS

No Lessee shall install any plantings on a balcony without the prior written approval of the Lessor. Plantings shall be contained in material impervious to dampness with appropriate drainage and standing on supports at least two inches from the balcony surface, and three inches from any walls. The containers and drainage must remain in good working condition.

### 2. STORAGE

The storage area located in building 25 is for the use of all tenants, and should be shared accordingly. It can be easily accessed through the staff's key between the hours of 7:00am and 4:00pm. All stored items should be in bins. Empty boxes and combustible items are not permitted in the storage area. Arrangements for accessing the area can outside or regular hours can be made in advance with the superintendent.

### 3. NOISE

a. For the convenience of all residents, noise is to be restricted between the hours of 10:00pm and 8:00am. Noises shall be restricted on all areas of the property, both indoors (i.e. apartments, lobbies, hallways) and out (ie. garage, courtyard area, balconies). No loud vocal noises, car horns, or those from electronic devices or musical instruments shall be permitted that are disturbing to our residents.

b. To decrease the amount of noise from floors above, the floors of each apartment that exists on the third floor and above, must be covered to reduce sound to residents below. Materials used to cover floors may include padded carpeting and rugs, or equally effective noise-reducing material, of at least 90%. Covered areas include all rooms except for kitchens, closets, bathrooms and foyers.

c. Construction is permitted between the hours of Monday through Friday from 9:00am to 5:00pm only.

#### 4. DECORATIONS/APPEARANCE

For the building to remain as uniform as possible, public halls shall not be decorated or furnished by any resident without prior consent of the Board. It is the responsibility of each resident to maintain neat and tidy common areas.

- a. A single door decoration as well as a door mat only is permitted.
- b. Outdoor furniture is permitted on balconies as well as plants within the confines of the railings. Flags and pendants may be hung for one week during the holidays only and must not hang over the balcony railing or from the bottom of a balcony. Balconies and hallways are not to be used for storage.
- c. Windows must be kept clean. In the case of refusal or neglect of the Lessee during ten days' notice in writing from the Lessor or Managing Agent to comply, the Lessor or staff may allow entry into the apartment of a cleaner, the cost of which will be the responsibility of the Lessee. Windowsills should remain clear of clutter.
- d. No awnings, permanent shades, screens, or window air conditioning units, antennas, or satellite dishes are permitted on the exterior of the building.

#### 5. CONSTRUCTION

Construction involving structural, electrical, and/or plumbing changes must be approved in advance by the Board. Contractors must be licensed and insured and must be verified by the Property Manager. Prior to the starting of any work you must obtain:

- a. Appropriate permits from the Town of Mount Kisco
- b. Renovation guidelines from the management company. All requested information must be submitted in writing to the management company, and approved by the management company prior to start of construction.
- c. Proper permits from the Town of Mount Kisco must be posted on or next to the door of the premises.
- d. Construction is permitted between the hours of 9:00am -5:00pm, Monday through Friday only. No construction is permitted on Saturday or Sunday so please keep this in mind when choosing contractors.
- e. Upon completion of the construction and a certificate of occupancy is issued by the Town of Mount Kisco, a copy must be provided to the management company.

#### 6. SIGNS

No signs, notices or advertisement shall be displayed in windows, balconies, doors, or common areas without the prior approval of the Board. Solicitation is prohibited and not permitted under any circumstances.

#### 7. GARBAGE/REFUSE/RECYCLING

Garbage is to be deposited in the compactor shoot on each floor. Recycling is to be deposited in the allocated bins on each floor and should follow the recycling guidelines set forth by the Town of Mount Kisco. Larger items are to be placed by the dumpsters. Refuse and materials because of construction must be removed by the contractor and are not to be placed in the dumpster.

8. WATER/PLUMBING

Bathtubs, sinks and toilets should only be used for their intended purpose. Do not attempt to flush sweepings, rubbish, rags, or any other articles that may cause a clog, flooding or damage to the plumbing. The cost of repairing any damages resulting from misuse or neglect shall fall upon the Lessee, including damages to other units.

9. STAFF

The staff shall remain on the premises and be available from Monday through Friday between 9:00am and 5:00pm. The superintendent is available for any emergencies twenty-four hours a day. No private work may be completed by a staff member during regular business hours, nor for any jobs requiring a licensed professional, or construction permit.

10. PETS

NO pets are allowed at Stewart Heights, neither to occupy nor visit the premises.

11. VEHICLES

Please see the attached policy regarding parking and vehicles.

12. LAUNDRY ROOMS

Residents may use the laundry facilities between the hours of 8:00am and 10:00pm only. Laundry rooms are to be used by residents only. Any laundry remaining in a machine that has stopped running may be removed to not impede other resident's ability to use the facilities. If a machine is not working, please contact the building staff immediately. In each lobby, there are Hercules machines for which you can add monies to your Hercules laundry card.

13. TOURS/EXHIBITIONS OR AUCTIONS

No group tours, exhibitions, "open house", or any auction sale or its contents may be conducted. This rule applies to shareholders and realtors who are showing the apartment for sale. Apartments can be shown by appointment only.

14. ENTRY INTO APARTMENTS

Any contractor or workman or building staff authorized by the Property Manager, Managing Agent, or Board of Directors may enter any apartment at any reasonable hour of the day to:

- a. Perform necessary services or repairs that have been neglected after ten days written notice of the Managing Agent.
- b. Inspection of such apartment to ascertain whether measures are necessary to control or exterminate any pests, and to take such measures.
- c. Inspection of heat and water related plumbing or to shut off such plumbing in an emergency to prevent damage to the building.
- d. Compliance with fire codes including checking for working smoke alarms and carbon monoxide detectors.
- e. Compliance with building insurance terms and House Rules.

15. SMOKING

Smoking is prohibited in the common areas including the lobbies, hallways, elevators, stairways, laundry rooms, entries and exits of the buildings.

16. COMPLAINTS

Complaints, issues and concerns regarding all matters shall be made in writing to the Managing Agent. They will be actioned by the Managing Agent.

17. DOOR LOCKS

No Lessee shall add any lock to the apartment door without notifying the Managing Agent and providing a duplicate key to the superintendent. Personal dead bolt locks are prohibited. If emergency entry is not available, any damages incurred by forced entry to the property are the financial responsibility of the Lessee.

18. INSURANCE

All shareholders must purchase home owner's insurance. Upon request, proof of insurance must be provided to the Managing Agent within one week. Failure to provide proof of insurance will incur a violation fee as outlined in the House Rules.

19. SUBLETTING/RENTING

Subletting or renting of any unit is strictly prohibited. Violation of this rule will be subject to eviction.

20. FAMILY

Any immediate family member not listed on the shares that will reside in the unit after the unit is purchased, must meet the Board of Directors and be subject to an interview before the member is permitted to reside in the unit.

21. MOVING/DELIVERIES

Moving and deliveries are permitted during weekdays, Monday through Friday from 9:00am to 5:00pm. The staff must be notified in advance to place protective moving pads in the elevator. Any failure of notification or damage to the property will be the financial responsibility of the shareholder and may impose a fine.

- a. Moving in or out is prohibited on weekends or holidays. A deposit of \$350 must be paid prior to moving in, and if no damage has been incurred, may be refundable. A non-refundable move out fee of \$350 is applicable.
- b. With prior notice in writing to the Managing Agent, deliveries are permitted on the second Saturday of every month between the hours of 9:00am and 5:00pm. The written notice must identify the company, the approximate time of arrival, and a brief description of the items to be delivered. A one-time fee for damage will be added to the Shareholder's maintenance.
- c. Any further exceptions for Saturday deliveries can be reviewed on a case by case basis.

## 22. VIOLATIONS/CHARGES/FEES

Unless a charge is specifically set forth in the Proprietary Lease, By-Laws, or House Rules, the following circumstances shall apply to the Lessee who commits a violation or permits a violation to occur under the Proprietary Lease, By-Laws, or House Rules, and are in addition to any other remedy available to the Lessor under the Proprietary Lease, By-Laws, and applicable law.

- a. A warning notice of violation will be issued by the Managing Agent allowing a defined time frame in which to remedy and prove compliance. If the violation has been neglected by the defined time frame, the first offense amount of \$100.00 will be automatically added to the Shareholder's monthly maintenance charge.
- b. Charges are to be increased only for a repeat violation within a three-year period, of the same provision of the Proprietary Lease, By-Laws, or House Rules and are \$200.00. It will be automatically added to the Shareholder's monthly maintenance charge.
- c. If the Lessee prefers a different method of payment, such arrangements may be made with the Managing Agent.

**LEAD BASED PAINT AFFIDAVIT**

**STEWART HEIGHTS CORP.**

**Lead Warning Statement**

Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of an interest in residential real property is required to provide the buyer with any information on lead-based hazards from risk assessments or inspections in the seller's possession and notify the buyer any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

I/We acknowledge receiving copies of the following:

- EPA and HUD Real Statement Notification and Disclosure Rule
- EPA Pamphlet "Protect Your Family from Lead In Your Home"
- Lead Based Paint Disclosure Form

I/We are advised that the cooperative corporation has not conducted an inspection and therefore has no records pertaining to lead-based paint and/or lead-based hazards in the housing

I/We will execute as necessary and provide to Cooperative Corporation a copy of the EPA Lead-Based Paint Disclosure form as included with this affidavit.

\_\_\_\_\_  
Seller

\_\_\_\_\_  
Seller

\_\_\_\_\_  
Purchaser

\_\_\_\_\_  
Purchaser

\_\_\_\_\_  
Apt./Unit being Purchased

**Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards Lead Warning Statement:**  
 Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

**Sellers Disclosure (Initial)**

- a) Presence of lead-based paint and/or lead-based paint hazards (check one below):  
 Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).  
 \_\_\_\_\_
- b) Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.  
 Records and reports available to the seller (check one below):
- Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).  
 \_\_\_\_\_
- Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

**Cooperative Corporation's Disclosure (Initial)**

- c) Presence of lead-based paint and/or lead-based paint hazards (check one below):  
 Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).  
 \_\_\_\_\_
- d) Co-op has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.  
 Records and reports available to Co-op (check one below):
- Co-op has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).  
 \_\_\_\_\_
- Co-op has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

**Purchaser's Acknowledgment (Initial)**

- e) Purchaser has received copies of all information listed above or acknowledges that there is none.
- f) Purchaser has received the pamphlet Protect Your Family from Lead in Your Home.
- g) Purchaser has (check one below):
- Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or
- Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

**Agent's Acknowledgment (Initial)**

- h) Agent has informed the seller of the seller's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

**Certification of Accuracy:** The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

_____ Seller	_____ Date	_____ Seller	_____ Date
_____ Agent	_____ Date	_____ Agent	_____ Date
_____ Purchaser	_____ Date	_____ Purchaser	_____ Date
_____ Cooperative Corporation	_____ Date		





# FACT SHEET

## EPA and HUD Move to Protect Children from Lead-Based Paint Poisoning; Disclosure of Lead-Based Paint Hazards in Housing

### SUMMARY

The Environmental Protection Agency (EPA) and the Department of Housing and Urban Development (HUD) are announcing efforts to ensure that the public receives the information necessary to prevent lead poisoning in homes that may contain lead-based paint hazards. Beginning this fall, most home buyers and renters will receive known information on lead-based paint and lead-based paint hazards during sales and rentals of housing built before 1978. Buyers and renters will receive specific information on lead-based paint in the housing as well as a Federal pamphlet with practical, low-cost tips on identifying and controlling lead-based paint hazards. Sellers, landlords, and their agents will be responsible for providing this information to the buyer or renter before sale or lease.

### LEAD-BASED PAINT IN HOUSING

Approximately three-quarters of the nation's housing stock built before 1978 (approximately 64 million dwellings) contains some lead-based paint. When properly maintained and managed, this paint poses little risk. However, 1.7 million children have blood-lead levels above safe limits, mostly due to exposure to lead-based paint hazards.

### EFFECTS OF LEAD POISONING

Lead poisoning can cause permanent damage to the brain and many other organs and causes reduced intelligence and behavioral problems. Lead can also cause abnormal fetal development in pregnant women.

### BACKGROUND

To protect families from exposure to lead from paint, dust, and soil, Congress passed the Residential Lead-Based Paint Hazard Reduction Act of 1992, also

known as Title X. Section 1018 of this law directed HUD and EPA to require the disclosure of known information on lead-based paint and lead-based paint hazards before the sale or lease of most housing built before 1978.

### WHAT IS REQUIRED

Before ratification of a contract for housing sale or lease:

- Sellers and landlords must disclose known lead-based paint and lead-based paint hazards and provide available reports to buyers or renters.
- Sellers and landlords must give buyers and renters the pamphlet, developed by EPA, HUD, and the Consumer Product Safety Commission (CPSC), titled *Protect Your Family from Lead in Your Home*.
- Home buyers will get a 10-day period to conduct a lead-based paint inspection or risk assessment at their own expense. The rule gives the two parties flexibility to negotiate key terms of the evaluation.
- Sales contracts and leasing agreements must include certain notification and disclosure language.
- Sellers, lessors, and real estate agents share responsibility for ensuring compliance.



## WHAT IS NOT REQUIRED

- This rule does not require any testing or removal of lead-based paint by sellers or landlords.
- This rule does not invalidate leasing and sales contracts.

## TYPE OF HOUSING COVERED

Most private housing, public housing, Federally owned housing, and housing receiving Federal assistance are affected by this rule.

## TYPE OF HOUSING NOT COVERED

- Housing built after 1977 (Congress chose not to cover post-1977 housing because the CPSC banned the use of lead-based paint for residential use in 1978).
- Zero-bedroom units, such as efficiencies, lofts, and dormitories.
- Leases for less than 100 days, such as vacation houses or short-term rentals.
- Housing for the elderly (unless children live there).
- Housing for the handicapped (unless children live there).

- Rental housing that has been inspected by a certified inspector and found to be free of lead-based paint.
- Foreclosure sales.

## EFFECTIVE DATES

- For owners of more than 4 dwelling units, the effective date is September 6, 1996.
- For owners of 4 or fewer dwelling units, the effective date is December 6, 1996.

## THOSE AFFECTED

The rule will help inform about 9 million renters and 3 million home buyers each year. The estimated cost associated with learning about the requirements, obtaining the pamphlet and other materials, and conducting disclosure activities is about \$6 per transaction.

## EFFECT ON STATES AND LOCAL GOVERNMENTS

This rule should not impose additional burdens on states since it is a Federally administered and enforced requirement. Some state laws and regulations require the disclosure of lead hazards in housing. The Federal regulations will act as a complement to existing state requirements.

### FOR MORE INFORMATION

- For a copy of *Protect Your Family from Lead in Your Home* (in English or Spanish), the sample disclosure forms, or the rule, call the National Lead Information Clearinghouse (NLIC) at (800) 424-LEAD, or TDD (800) 526-5456 for the hearing impaired. You may also send your request by fax to (202) 659-1192 or by Internet E-mail to [ehc@cais.com](mailto:ehc@cais.com). Visit the NLIC on the Internet at <http://www.nsc.org/nsc/ehc/ehc.html>.
- Bulk copies of the pamphlet are available from the Government Printing Office (GPO) at (202) 512-1800. Refer to the complete title or GPO stock number 055-000-00507-9. The price is \$26.00 for a pack of 50 copies. Alternatively, persons may reproduce the pamphlet, for use or distribution, if the text and graphics are reproduced in full. Camera-ready copies of the pamphlet are available from the National Lead Information Clearinghouse.
- For specific questions about lead-based paint and lead-based paint hazards, call the National Lead Information Clearinghouse at (800) 424-LEAD, or TDD (800) 526-5456 for the hearing impaired.
- The EPA pamphlet and rule are available electronically and may be accessed through the Internet.

#### Electronic Access:

**Gopher:** [gopher.epa.gov:70/11/Offices/PestPreventToxic/Toxic/lead\\_pm](http://gopher.epa.gov:70/11/Offices/PestPreventToxic/Toxic/lead_pm)

**WWW:** <http://www.epa.gov/opptintr/lead/index.html>  
<http://www.hud.gov>

**Dial up:** (919) 558-0335

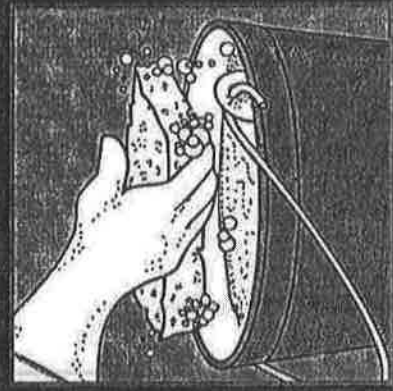
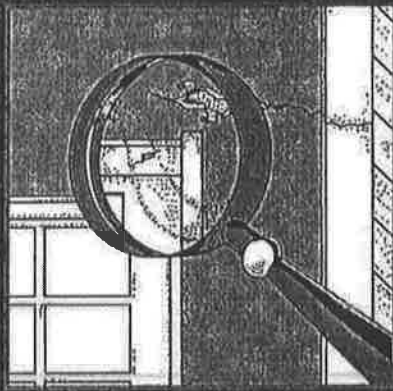
**FTP:** [ftp.epa.gov](ftp://ftp.epa.gov) (To login, type "anonymous." Your password is your Internet E-mail address.)

## Simple Steps To Protect Your Family From Lead Hazards

### If you think your home has high levels of lead:

- ◆ Get your young children tested for lead, even if they seem healthy.
- ◆ Wash children's hands, bottles, pacifiers, and toys often.
- ◆ Make sure children eat healthy, low-fat foods.
- ◆ Get your home checked for lead hazards.
- ◆ Regularly clean floors, window sills, and other surfaces.
- ◆ Wipe soil off shoes before entering house.
- ◆ Talk to your landlord about fixing surfaces with peeling or chipping paint.
- ◆ Take precautions to avoid exposure to lead dust when remodeling or renovating (call 1-800-424-LEAD for guidelines).
- ◆ Don't use a belt-sander, propane torch, high temperature heat gun, scraper, or sandpaper on painted surfaces that may contain lead.
- ◆ Don't try to remove lead-based paint yourself.

# Protect Your Family From Lead In Your Home



**EPA** United States Environmental Protection Agency

United States Consumer Product Safety Commission

United States Department of Housing and Urban Development

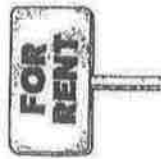
## Are You Planning To Buy, Rent, or Renovate a Home Built Before 1978?

**M**any houses and apartments built before 1978 have paint that contains high levels of lead (called lead-based paint). Lead from paint, chips, and dust can pose serious health hazards if not taken care of properly.



**OWNERS, BUYERS, and RENTERS** are encouraged to check for lead (see page 6) before renting, buying or renovating pre-1978 housing.

**F**ederal law requires that individuals receive certain information before renting, buying, or renovating pre-1978 housing:



**LANDLORDS** have to disclose known information on lead-based paint and lead-based paint hazards before leases take effect. Leases must include a disclosure about lead-based paint.



**SELLERS** have to disclose known information on lead-based paint and lead-based paint hazards before selling a house. Sales contracts must include a disclosure about lead-based paint. Buyers have up to 10 days to check for lead.



**RENOVATORS** disturbing more than 2 square feet of painted surfaces have to give you this pamphlet before starting work.

## CPSC Regional Offices

Your Regional CPSC Office can provide further information regarding regulations and consumer product safety.

**Eastern Regional Center**  
Consumer Product Safety Commission  
201 Varick Street, Room 903  
New York, NY 10014  
(212) 620-4120

**Western Regional Center**  
Consumer Product Safety Commission  
1301 Clay Street, Suite 610-N  
Oakland, CA 94612  
(510) 637-4050

**Central Regional Center**  
Consumer Product Safety Commission  
230 South Dearborn Street, Room 2944  
Chicago, IL 60604  
(312) 353-8260

## HUD Lead Office

Please contact HUD's Office of Healthy Homes and Lead Hazard Control for information on lead regulations, outreach efforts, and lead hazard control and research grant programs.

**U.S. Department of Housing and Urban Development**  
Office of Healthy Homes and Lead Hazard Control  
451 Seventh Street, SW, P-3206  
Washington, DC 20410  
(202) 755-1785

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U.S. EPA Washington DC 20460  
U.S. CPSC Washington DC 20207  
U.S. HUD Washington DC 20410

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June 2003

## EPA Regional Offices

Your Regional EPA Office can provide further information regarding regulations and lead protection programs.

### EPA Regional Offices

**Region 1** (Connecticut, Massachusetts, Maine, New Hampshire, Rhode Island, Vermont)

Regional Lead Contact  
U.S. EPA Region 1  
Suite 1100 (CPT)  
One Congress Street  
Boston, MA 02114-2023  
1 (888) 372-7341

**Region 6** (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)

Regional Lead Contact  
U.S. EPA Region 6  
445 Ross Avenue, 12th Floor  
Dallas, TX 75202-2733  
(214) 665-7577

**Region 2** (New Jersey, New York, Puerto Rico, Virgin Islands)

Regional Lead Contact  
U.S. EPA Region 2  
2890 Woodbridge Avenue  
Building 209, Mail Stop 225  
Edison, NJ 08837-3679  
(732) 321-6671

**Region 7** (Iowa, Kansas, Missouri, Nebraska)

Regional Lead Contact  
U.S. EPA Region 7  
(ARTD-RAJI)  
901 N. 5th Street  
Kansas City, KS 66101  
(913) 551-7020

**Region 3** (Delaware, Maryland, Pennsylvania, Virginia, Washington DC, West Virginia)

Regional Lead Contact  
U.S. EPA Region 3 (3WC33)  
1650 Arch Street  
Philadelphia, PA 19103  
(215) 814-5000

**Region 8** (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)

Regional Lead Contact  
U.S. EPA Region 8  
999 18th Street, Suite 500  
Denver, CO 80202-2466  
(303) 312-6021

**Region 4** (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)

Regional Lead Contact  
U.S. EPA Region 4  
61 Forsyth Street, SW  
Atlanta, GA 30303  
(404) 562-8998

**Region 9** (Arizona, California, Hawaii, Nevada)

Regional Lead Contact  
U.S. Region 9  
75 Hawthorne Street  
San Francisco, CA 94105  
(415) 947-4164

**Region 5** (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)

Regional Lead Contact  
U.S. EPA Region 5 (DT-81)  
77 West Jackson Boulevard  
Chicago, IL 60604-3666  
(312) 886-6003

**Region 10** (Alaska, Idaho, Oregon, Washington)

Regional Lead Contact  
U.S. EPA Region 10  
Toxics Section WCM-128  
1700 Sixth Avenue  
Seattle, WA 98101-1128  
(206) 553-1985

# IMPORTANT!

## Lead from Paint, Dust, and Soil Can Be Dangerous If Not Managed Properly

**FACT:** Lead exposure can harm young children and babies even before they are born.

**FACT:** Even children who seem healthy can have high levels of lead in their bodies.

**FACT:** People can get lead in their bodies by breathing or swallowing lead dust, or by eating soil or paint chips containing lead.

**FACT:** People have many options for reducing lead hazards. In most cases, lead-based paint that is in good condition is not a hazard.

**FACT:** Removing lead-based paint improperly can increase the danger to your family.

If you think your home might have lead hazards, read this pamphlet to learn some simple steps to protect your family.

## Lead Gets in the Body in Many Ways

### Childhood lead poisoning remains a major environmental health problem in the U.S.

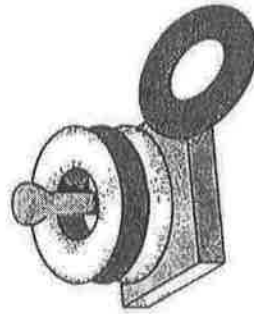
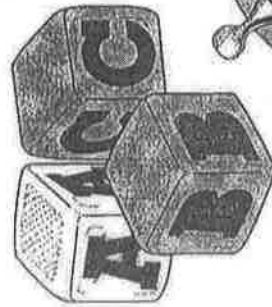
- ◆ People can get lead in their body if they:
  - ◆ Breathe in lead dust (especially during renovations that disturb painted surfaces).
  - ◆ Put their hands or other objects covered with lead dust in their mouths.
  - ◆ Eat paint chips or soil that contains lead.

### Lead is even more dangerous to children under the age of 6:

- ◆ At this age children's brains and nervous systems are more sensitive to the damaging effects of lead.
- ◆ Children's growing bodies absorb more lead.
- ◆ Babies and young children often put their hands and other objects in their mouths. These objects can have lead dust on them.

### Lead is also dangerous to women of childbearing age:

- ◆ Women with a high lead level in their system prior to pregnancy would expose a fetus to lead through the placenta during fetal development.



## For More Information

### The National Lead Information Center

Call **1-800-424-LEAD (424-5323)** to learn how to protect children from lead poisoning and for other information on lead hazards. To access lead information via the web, visit [www.epa.gov/lead](http://www.epa.gov/lead) and [www.hud.gov/offices/lead/](http://www.hud.gov/offices/lead/).

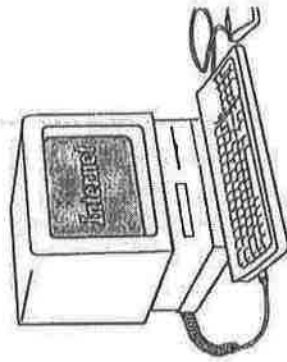


### EPA's Safe Drinking Water Hotline

Call **1-800-426-4791** for information about lead in drinking water.

### Consumer Product Safety Commission (CPSC) Hotline

To request information on lead in consumer products, or to report an unsafe consumer product or a product-related injury call **1-800-638-2772**, or visit CPSC's Web site at: [www.cpsc.gov](http://www.cpsc.gov).

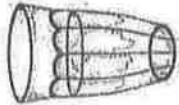


### Health and Environmental Agencies

Some cities, states, and tribes have their own rules for lead-based paint activities. Check with your local agency to see which laws apply to you. Most agencies can also provide information on finding a lead abatement firm in your area, and on possible sources of financial aid for reducing lead hazards. Receive up-to-date address and phone information for your local contacts on the Internet at [www.epa.gov/lead](http://www.epa.gov/lead) or contact the National Lead Information Center at **1-800-424-LEAD**.

For the hearing impaired, call the Federal Information Relay Service at **1-800-877-8339** to access any of the phone numbers in this brochure.

## Other Sources of Lead



- ◆ **Drinking water.** Your home might have plumbing with lead or lead solder. Call your local health department or water supplier to find out about testing your water. You cannot see, smell, or taste lead, and boiling your water will not get rid of lead. If you think your plumbing might have lead in it:

- Use only cold water for drinking and cooking.
- Run water for 15 to 30 seconds before drinking it, especially if you have not used your water for a few hours.

**While paint, dust, and soil are the most common sources of lead, other lead sources also exist.**

- ◆ **The job.** If you work with lead, you could bring it home on your hands or clothes. Shower and change clothes before coming home. Launder your work clothes separately from the rest of your family's clothes.



- ◆ Old painted toys and furniture.
- ◆ Food and liquids stored in lead crystal or lead-glazed pottery or porcelain.
- ◆ Lead smelters or other industries that release lead into the air.

- ◆ Hobbies that use lead, such as making pottery or stained glass, or refinishing furniture.

- ◆ Folk remedies that contain lead, such as "greta" and "azarcon" used to treat an upset stomach.



## Lead's Effects

It is important to know that even exposure to low levels of lead can severely harm children.

### In children, lead can cause:

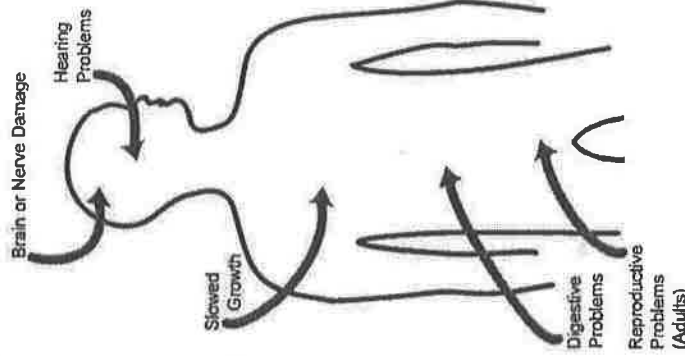
- ◆ Nervous system and kidney damage.
- ◆ Learning disabilities, attention deficit disorder, and decreased intelligence.
- ◆ Speech, language, and behavior problems.
- ◆ Poor muscle coordination.
- ◆ Decreased muscle and bone growth.
- ◆ Hearing damage.

While low-lead exposure is most common, exposure to high levels of lead can have devastating effects on children, including seizures, unconsciousness, and, in some cases, death.

Although children are especially susceptible to lead exposure, lead can be dangerous for adults too.

### In adults, lead can cause:

- ◆ Increased chance of illness during pregnancy.
- ◆ Harm to a fetus, including brain damage or death.
- ◆ Fertility problems (in men and women).
- ◆ High blood pressure.
- ◆ Digestive problems.
- ◆ Nerve disorders.
- ◆ Memory and concentration problems.
- ◆ Muscle and joint pain.



**Lead affects the body in many ways.**



## Where Lead-Based Paint Is Found

**In general, the older your home, the more likely it has lead-based paint.**

- Many homes built before 1978 have lead-based paint.** The federal government banned lead-based paint from housing in 1978. Some states stopped its use even earlier. Lead can be found:
- ◆ In homes in the city, country, or suburbs.
  - ◆ In apartments, single-family homes, and both private and public housing.
  - ◆ Inside and outside of the house.
  - ◆ In soil around a home. (Soil can pick up lead from exterior paint or other sources such as past use of leaded gas in cars.)

## Checking Your Family for Lead

**Get your children and home tested if you think your home has high levels of lead.**

- To reduce your child's exposure to lead, get your child checked, have your home tested (especially if your home has paint in poor condition and was built before 1978), and fix any hazards you may have.** Children's blood lead levels tend to increase rapidly from 6 to 12 months of age, and tend to peak at 18 to 24 months of age. Consult your doctor for advice on testing your children. A simple blood test can detect high levels of lead. Blood tests are usually recommended for:
- ◆ Children at ages 1 and 2.
  - ◆ Children or other family members who have been exposed to high levels of lead.
  - ◆ Children who should be tested under your state or local health screening plan.
- Your doctor can explain what the test results mean and if more testing will be needed.

## Remodeling or Renovating a Home With Lead-Based Paint

Take precautions before your contractor or you begin remodeling or renovating anything that disturbs painted surfaces (such as scraping off paint or tearing out walls):

- ◆ **Have the area tested for lead-based paint.**
- ◆ **Do not use a belt-sander, propane torch, high temperature heat gun, dry scraper, or dry sandpaper** to remove lead-based paint. These actions create large amounts of lead dust and fumes. Lead dust can remain in your home long after the work is done.
- ◆ **Temporarily move your family** (especially children and pregnant women) out of the apartment or house until the work is done and the area is properly cleaned. If you can't move your family, at least completely seal off the work area.



**If not conducted properly, certain types of renovations can release lead from paint and dust into the air.**

- ◆ **Follow other safety measures to reduce lead hazards.** You can find out about other safety measures by calling 1-800-424-LEAD. Ask for the brochure "Reducing Lead Hazards When Remodeling Your Home." This brochure explains what to do before, during, and after renovations.

If you have already completed renovations or remodeling that could have released lead-based paint or dust, get your young children tested and follow the steps outlined on page 7 of this brochure.





## Reducing Lead Hazards In The Home

In addition to day-to-day cleaning and good nutrition:

- ◆ You can **temporarily** reduce lead hazards by taking actions such as repairing damaged painted surfaces and planting grass to cover soil with high lead levels. These actions (called "interim controls") are not permanent solutions and will need ongoing attention.
- ◆ To **permanently** remove lead hazards, you should hire a certified lead "abatement" contractor. Abatement (or permanent hazard elimination) methods include removing, sealing, or enclosing lead-based paint with special materials. Just painting over the hazard with regular paint is not permanent removal.

Always hire a person with special training for correcting lead problems—someone who knows how to do this work safely and has the proper equipment to clean up thoroughly. Certified contractors will employ qualified workers and follow strict safety rules as set by their state or by the federal government.

Once the work is completed, dust cleanup activities must be repeated until testing indicates that lead dust levels are below the following:

- ◆ 40 micrograms per square foot ( $\mu\text{g}/\text{ft}^2$ ) for floors, including carpeted floors;
- ◆ 250  $\mu\text{g}/\text{ft}^2$  for interior windows sills; and
- ◆ 400  $\mu\text{g}/\text{ft}^2$  for window troughs.

Call your state or local agency (see bottom of page 11) for help in locating certified professionals in your area and to see if financial assistance is available.

**Removing lead improperly can increase the hazard to your family by spreading even more lead dust around the house.**

**Always use a professional who is trained to remove lead hazards safely.**



## Identifying Lead Hazards

**Lead-based paint** is usually not a hazard if it is in good condition, and it is not on an impact or friction surface, like a window. It is defined by the federal government as paint with lead levels greater than or equal to 1.0 milligram per square centimeter, or more than 0.5% by weight.

**Deteriorating lead-based paint (peeling, chipping, chalking, cracking or damaged)** is a hazard and needs immediate attention. It may also be a hazard when found on surfaces that children can chew or that get a lot of wear-and-tear, such as:

- ◆ Windows and window sills.
- ◆ Doors and door frames.
- ◆ Stairs, railings, banisters, and porches.

**Lead dust** can form when lead-based paint is scraped, sanded, or heated. Dust also forms when painted surfaces bump or rub together. Lead chips and dust can get on surfaces and objects that people touch. Settled lead dust can re-enter the air when people vacuum, sweep, or walk through it. The following two federal standards have been set for lead hazards in dust:

- ◆  $\leq 40$  micrograms per square foot ( $\mu\text{g}/\text{ft}^2$ ) and higher for floors, including carpeted floors.
- ◆ 250  $\mu\text{g}/\text{ft}^2$  and higher for interior window sills.

**Lead in soil** can be a hazard when children play in bare soil or when people bring soil into the house on their shoes. The following two federal standards have been set for lead hazards in residential soil:

- ◆ 400 parts per million (ppm) and higher in play areas of bare soil.
- ◆ 1,200 ppm (average) and higher in bare soil in the remainder of the yard.

The only way to find out if paint, dust and soil lead hazards exist is to test for them. The next page describes the most common methods used.

**Lead from paint chips, which you can see, and lead dust, which you can't always see, can both be serious hazards.**

## Checking Your Home for Lead

You can get your home tested for lead in several different ways:

- ◆ A **paint inspection** tells you whether your home has lead-based paint and where it is located. It won't tell you whether or not your home currently has lead hazards.
- ◆ A **risk assessment** tells you if your home currently has any lead hazards from lead in paint, dust, or soil. It also tells you what actions to take to address any hazards.
- ◆ A combination risk assessment and inspection tells you if your home has any lead hazards and if your home has any lead-based paint, and where the lead-based paint is located.

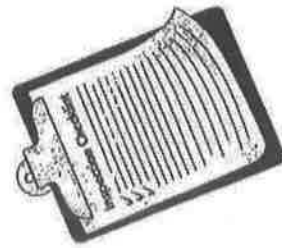
Hire a trained and certified testing professional who will use a range of reliable methods when testing your home.

- ◆ Visual inspection of paint condition and location.
- ◆ A portable x-ray fluorescence (XRF) machine.
- ◆ Lab tests of paint, dust, and soil samples.

There are state and federal programs in place to ensure that testing is done safely, reliably, and effectively. Contact your state or local agency (see bottom of page 11) for more information, or call **1-800-424-LEAD (5323)** for a list of contacts in your area.

**Home test kits for lead are available, but may not always be accurate.** Consumers should not rely on these kits before doing renovations or to assure safety.

**Just knowing that a home has lead-based paint may not tell you if there is a hazard.**



## What You Can Do Now To Protect Your Family

If you suspect that your house has lead hazards, you can take some immediate steps to reduce your family's risk:

- ◆ If you rent, notify your landlord of peeling or chipping paint.
- ◆ Clean up paint chips immediately.
- ◆ Clean floors, window frames, window sills, and other surfaces weekly. Use a mop or sponge with warm water and a general all-purpose cleaner or a cleaner made specifically for lead. **REMEMBER: NEVER MIX AMMONIA AND BLEACH PRODUCTS TOGETHER SINCE THEY CAN FORM A DANGEROUS GAS.**
- ◆ Thoroughly rinse sponges and mop heads after cleaning dirty or dusty areas.
- ◆ Wash children's hands often, especially before they eat and before nap time and bed time.
- ◆ Keep play areas clean. Wash bottles, pacifiers, toys, and stuffed animals regularly.
- ◆ Keep children from chewing window sills or other painted surfaces.
- ◆ Clean or remove shoes before entering your home to avoid tracking in lead from soil.
- ◆ Make sure children eat nutritious, low-fat meals high in iron and calcium, such as spinach and dairy products. Children with good diets absorb less lead.

