



Garthchester Realty Associates

440 Mamaroneck Ave, S-512

Harrison, New York 10528

T: (914)725-3600/ (914)813-1900/ (914)288-0200

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Garthchester Realty

www.GarthchesterRealty.com

440 Mamaroneck Ave, Suite S512
Harrison, NY 10528
(914) 725-3600 F: (914) 725-6453

98-20 Metropolitan Ave. Suite 1
Forest Hills, New York 11375
(718) 544-0800

RENTAL PACKAGE FOR THE CLASSIC CONDOMINIUM

Unit owners and Brokers are to present **Betsy Klampert** at the Classic Office a copy of the signed lease rental package for approval at least five business days before the lease begins. The rental package should include:

1. Signed lease rental
2. a copy of the rental insurance (RENTER)
3. a check in the amount of \$500.00 annual fee (OWNER)
4. a check in the amount of \$500.00 non-refundable move- in fee (RENTER)
5. a check in the amount of \$500.00 **refundable** security deposit (RENTER)

The checks should be written to **The Classic Condominium**. The check for reserving the elevator is returned once the elevator is inspected and no damage is observed after the move in occurs.

The Board will only issue one (1) waiver of the right of first refusal for any unit one time during any twelve (12) month period. Any request for a waiver of the right of first refusal submitted sooner than the expiration of the twelve (12) month period will be considered incomplete until the twelve (12) months have expired.

Times for move-in/out are **Monday – Friday, 8:00am to 4:00pm**. Required payment and all required signed documents must be submitted at the same time before the lease can be approved.

Renters are to inform their moving company they must email the Certificate of Insurance (COI) form to **Betsy Klampert**, bklampert@garthchester.com **before** the move-in/out date. A copy of the sample COI form is included in this package.



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When your mover arrives at the property, they are to inform the front desk they arrived. The front desk will inform a staff member to meet the mover by the garage and lead them to the elevator. Only the large, padded elevator can be used for deliveries. Movers are required to put down **Masonite Board** from the elevator entrance to the resident's unit door. If you have any questions, please contact Betsy Klampert via email at bklampert@garthchester.com or via phone at 914-949-0018.

Unit Owners Signature _____ Date: _____

Renters Signature _____ Date: _____





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RESIDENT INFORMATION FORM

Unit Owner: (Y/N) _____

Renter: (Y/N) _____

Unit #: _____

OCCUPANT #1

Email address: _____

Cell #: _____

Vehicle License Plate #: _____ Permit#: _____ State: _____

Garage Space # _____ LP _____ LL _____ Bin# _____

Make _____ Year _____ Model _____ Color _____

OCCUPANT #2

Email address: _____

Cell phone: _____

Vehicle License Plate #: _____ Permit # _____ State _____

Garage Space # _____ LP _____ LL _____ Bin# _____

Make _____ Year _____ Model _____ Color _____





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MOVE-IN/MOVE-OUT POLICY

1. **DENIAL OF ENTRY:** The Property Manager or managing agent has the right to deny entry to any worker who appears to be ill or cancel the move (as determined in their discretion).
2. **MOVES TO BE SCHEDULED AHEAD OF TIME:** All moves into or out of a unit must be scheduled and coordinated with the Property Manager at least fourteen (14) days prior to the move.
3. **DAYS AND TIMES:** Moves must be conducted **Monday - Friday, 8:00am to 4:00pm** except for legal or building holidays. Any extension must be approved by the Property Manager.
4. **EXCEPTIONS:** The Property Manager will determine how long movers may remain in the building depending upon the circumstances.
5. **MAXIMUM OF THREE MOVERS:** No more than three (3) movers may be in the building at any time.
6. **SERVICE ENTRY ONLY:** All moves must be conducted using the service entrance and the elevator designated by management. Use of the main lobby entrance, the stairs or any other elevator is strictly prohibited.
7. **NO ENTRANCE TO OTHER AREAS OF BUILDING:** Movers are strictly prohibited from entering any portion of the building, not along the direct path of the move from the outside of the building to the unit in which the move is taking place.
8. **LEGAL CONSIDERATIONS:** The unit owner shall comply with all applicable provisions of law and shall require its moving company to also do so. In the event any fine, violation, penalty or fee is assessed against the building, its Board members, officers, employees, unit owners, residents, or managing agent, the unit owner shall pay the same or reimburse the party against whom it is imposed.
9. **FEES:** All fees, reimbursement of expenses, security deposits, insurance, indemnities and/or releases typically required for moves into or out of the building





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shall continue to apply.

10. **NON-COMPLIANCE:** The Property Manager may require movers who do not comply with this policy to leave the building or may take other steps deemed necessary to protect the safety and health of its residents and employees.
11. **DISINFECTING:** Immediately following any move, the physical areas along the direct path of the move, including the building's service entry, service elevator and hallway shall be disinfected by a professional cleaning company hired by the building or its managing agent. The move to a new apartment owner shall be responsible for all costs and expenses associated with this cleaning.
12. **CHECKS TO BE PROVIDED:** At least **five (5) days prior** to any move in-out or move to another unit, the person moving shall provide the Property Manager with (2) checks **payable to The Classic Condominium:**
 - Refundable security deposit: \$500.00
 - Non-refundable move fee: \$500.00

Resident: _____ Date: _____

Moving Company: _____ Date: _____





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REQUEST FOR MOVE-IN/MOVE-OUT

WHEN MOVES WILL BE ALLOWED: MOVES WILL ONLY BE ALLOWED BETWEEN THE HOURS OF 8:00AM TO 4:00PM, MONDAY TO FRIDAY. RULES FOR MOVES WILL BE STRICTLY ENFORCED. PLEASE NOTE THAT ANY MOVE THAT EXTENDS BEYOND THE PERMITTED TIME WILL CAUSE YOU TO FORFEIT YOUR REFUNDABLE DEPOSIT.

FEES: There is a **\$500.00 refundable security deposit** required for any possible damages. The refundable check should be made payable to **The Classic Condominium**. The Classic will not be held responsible for unforeseen delays or circumstances beyond the building's control, such as elevator out of service, weather-related delays, etc. *If the move is not completed by 4:00pm, you will lose your \$500.00 refundable security deposit.*

There is an **additional \$500.00 non-refundable move fee required** for moving in or moving out. The check should be made payable to **The Classic Condominium**.

CERTIFICATE OF LIABILITY INSURANCE (COI) REQUIRED PRIOR TO MOVE: Please advise your moving company that it needs to provide a Certificate of Liability Insurance (COI) that includes workers' compensation, naming The Classic Condominium and its managing agent as additional insured. The COI should be emailed to bklampert@garthchester.com. If the certificate is not provided prior to the move date, be advised that the move will not be permitted to take place.

Signature required: _____

Resident Name _____ Unit # _____

Cell Number _____ Move-in date _____ Move-out date _____



FOR MOVE-OUTS: A forwarding address is required. Please note that if no damage occurs, your damage deposit will be destroyed unless otherwise directed.

Street Address _____ State: ____ Zip Code _____

Refundable Security Deposit - \$500.00 – Payable to THE CLASSIC CONDOMINIUM

Check Received by _____ Date _____

Inspection/Date _____ Time _____ Performed by _____

NOTE: IF A MOVE REQUIRES THE USE OF A HAND TRUCK OR A DOLLY, THE MOVING COMPANY MUST PROTECT THE CLASSIC'S CARPETING WITH MASONITE BOARDS. MOVING COMPANIES ARE REQUIRED TO ARRIVE AT THE BUILDING PREPARED WITH THEIR OWN HAND TRUCKS AND MASONITE BOARDS. UNIT OWNERS/RESIDENTS ARE REQUIRED TO INFORM THEIR VENDORS TO COME PREPARED. **UNIT OWNERS WILL INCUR A FEE OF \$100.00 IF THE CLASSIC CONDOMINIUM HAS TO SUPPLY THE MASONITE BOARDS. THE \$100.00 FEE WILL BE CHARGED TO THE UNIT OWNER'S ACCOUNT.**

Signature Required _____ Date: _____

Damage Report: - Location and items damaged:

Moving company notified: ___yes ___no

Contractor notified: ___yes ___no

Resident notified: ___yes ___no

Security check deposit returned (date) _____

On the date of the move, the driver should go to the front desk to check in and the front desk personnel will direct him where to park the truck.



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***COI MUST BE WRITTEN AS FOLLOWS:**

DESCRIPTION of OPERATIONS/ADDITIONAL INSURED:

1. Name of Resident, Address & Apt. #
2. **Classic Condominium**
3. GARTHCHESTER REALTY

CERTIFICATE HOLDER:

Classic Condominium

c/o GARTHCHESTER REALTY

440 Mamaroneck Ave., S-512

Harrison, NY 10528

Please send completed COI to:

Betsy Klampert, Property Manager,

bklampert@garthchester.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURERS(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy (ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Insurance Agency Name Insurance Agency Address	CONTACT NAME: FULL NAME OF CONTACT
	PHONE (A/C, No, Ext): PHONE OF CONTACT FAX (A/C, No): FAX OF CONTACT
	E-MAIL ADDRESS: EMAIL ADDRESS OF CONTACT
	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A : CARRIER 1 - AM BEST (A-) OR BETTER NAIC REQ
INSURED NAMED OF INSURED (MUST MATCH SIGNED CONTRACT) FULL CURRENT ADDRESS OF CONTACT	INSURER B :
	INSURER C :
	INSURER D :
	INSURER E :
	INSURER E :

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INS LT R	TYPE OF INSURANCE	ADD L INS R	SU BR WV D	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Blanket Contractual Liability GEN AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC	X	X	\$1,000,000 / \$2,000,000 MINIMUM	CURRENT	CURRENT	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea Occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS-COMP/OP AGG \$2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	X	X	\$1,000,000 MINIMUM	CURRENT	CURRENT	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per Person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	X	X	SEE AGREEMENT	CURRENT	CURRENT	EACH OCCURRENCE See agreement AGGREGATE See agreement
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	X	\$1,000,000 MINIMUM NEW YORK STATE DISABILITY - Statutory	CURRENT	CURRENT	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER STATUTORY LIMITS E.L. EACH ACCIDENT \$1,000,000 E.L. EACH ACCIDENT - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

<<Unit Owner >>, <<Condominium >>, and <<Managing Agent >> are named as additional insureds (policy form CG201011/85 or equivalent) for ALL operations by Contractor or by any of its subcontractors or agents. Liability policies include a Primary/Non-Contributory endorsement and a waiver of subrogation endorsement in favor of the Additional Insureds, their agents and employees. Liability policies shall have NO limitations or exclusions for injuries to employees, subcontractor employees, location or type of work performed.

Loc. <<unit address>>

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CERTIFICATE HOLDER:

Classic Condominium c/o GARTHCHESIER REALTY 440 Mamaroneck Ave., S-512 Harrison, NY 10528	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE MUST BE SIGNED
--	---

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REQUEST FOR DELIVERIES

WHEN DELIVERIES ARE ALLOWED: *DELIVERIES WILL ONLY BE ALLOWED BETWEEN THE HOURS OF 8:00AM TO 4:00PM, MONDAY TO FRIDAY.* RULES FOR DELIVERIES WILL BE STRICTLY ENFORCED. PLEASE NOTE THAT FOR ANY DELIVERY THAT EXTENDS BEYOND THE PERMITTED TIME, YOU WILL FORFEIT YOUR REFUNDABLE DEPOSIT.

REFUNDABLE SECURITY DEPOSIT: There is a **\$500.00 refundable security deposit** required for any possible damages. The refundable check should be made payable to **The Classic Condominium**. The Classic will not be held responsible for unforeseen delays or circumstances beyond the building's control, such as elevator out of service, weather-related delays, etc. If the delivery is not completed by **4:00pm**, you will lose your \$500.00 refundable security deposit.

CERTIFICATE OF LIABILITY INSURANCE (COI) NEEDED PRIOR TO DELIVERY: Please advise your delivery company that they need to provide a Certificate of Liability Insurance (COI) to include workers' compensation, naming the Classic Condominium and its managing agent as additional insured. *The COI should be emailed to bklampert@garthchester.com.* If the certificate is not provided prior to the delivery date, be advised that the delivery will not be permitted to take place.

Signature required: _____

Resident Name _____ Unit # _____

Cell Number _____ Delivery date _____

**Refundable Security Deposit - \$500.00 – Payable to THE CLASSIC
CONDOMINIUM**

Check Received by _____ Date _____

Inspection/Date _____ Time _____ Performed by _____

NOTE: IF A DELIVERY REQUIRES THE USE OF A HAND TRUCK OR A DOLLY, THE DELIVERY COMPANY MUST PROTECT THE CLASSIC'S CARPETING WITH MASONITE BOARDS. DELIVERY COMPANIES ARE REQUIRED TO ARRIVE AT THE BUILDING PREPARED WITH THEIR OWN HAND TRUCKS AND MASONITE BOARDS. UNIT OWNERS/RESIDENTS ARE REQUIRED TO INFORM THEIR VENDORS TO COME PREPARED. **UNIT OWNERS WILL INCUR A FEE OF \$100.00 IF THE CLASSIC CONDOMINIUM HAS TO SUPPLY THE MASONITE BOARDS.** THE \$100.00 FEE WILL BE CHARGED TO THE UNIT OWNER'S ACCOUNT.

Signature Required _____

Date: _____

Damage Report: - Location and items damaged:

Delivery company notified: ___yes ___no

Contractor notified: ___yes ___no

Resident notified: ___yes ___no

Security check deposit returned (date) _____

On the date of the delivery, the driver should go to the front desk to check in and the front desk personnel will direct him where to park the truck.



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PET APPLICATION INFORMATION FORM

Unit #: _____ Date: _____

Name of Current Owner/Renter: _____

Pet's Name: _____

Type of Pet/Breed: _____ Weight: _____ Gender(M/F): _____

Has your pet ever bitten anyone? Yes ___ No ___

Is your pet aggressive? Yes ___ No ___

Is your pet neutered? Yes ___ No ___

Please provide a description of your pet's behavior:

Please sign below indicating that the information you have provided is accurate.

Current Owner

Date

Current Renter

Date



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RULES & REGULATIONS ~ DOGS AND OTHER PETS

(A) All pets shall be on a leash at all times while in the public areas, in the shrubbery, driveways, or other public areas of the Classic. Should any accidents occur, owners are responsible to clean up after their pets. All pets shall be on a leash no more than 6 feet at all times while in the public areas, in the shrubbery, driveways, or other public areas of the Classic.

(B) No pet shall be curbed on walkways, driveways, parking areas, close to buildings, or other public areas of the Classic.

(C) Owners bringing in pets shall assume full responsibility for any damages by pets to personal property and common elements of the Classic.

(D) Guests and visitors of apartment occupants shall not be permitted to bring any pet on the premises of the Classic.

(E) Animals may not be kept on the Property other than dogs, cats, and other typical household pets not exceeding two (2) per Residential unit. Said pets may not be kept for any commercial purpose.

(F) No pet shall be allowed to create or cause any disturbance or nuisance of any kind. The pet owner may be required to permanently remove the pet from the condominium property if the disturbance or nuisance is not corrected.

(G) Types of Dogs that are **prohibited** at the Classic are as follows:

Pit bull types
Rottweilers
Dobermans

German Shepherds
Husky types
Chow Chows



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(H) Residents with pets already living at the building that may be aggressive towards people or other pets must take the following precautions:

- The dog must be kept on a leash no longer than 4 feet
- The dog must be muzzled when in common areas of the building
- The garages must be used to enter or exit the building with the dog

Carry liability insurance at a minimum of \$50,000.00

(I) New pets being brought to the building must be described in an application completed by their owner which includes questions concerning the pet's behavior. Pets with known aggressive or otherwise undesirable behaviors may be excluded from residing at or visiting the Classic. All pets over 50 lbs. will be denied permission to reside at or visit the Classic unless approved by the Board of Managers on an exception basis. This also applies to puppies of breeds and/or mixed breeds in which the dog will grow and weigh over the permitted weight.



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***NEW REGULATIONS ~ FOR DOGS & OTHER PETS**

As a result of suggestions from some residents, the Board has reviewed the current rules and regulations pertaining to dogs, especially the size of dogs that are permitted at the Classic.

After careful review and discussion, the Board has decided to include the following new regulation to the rules under the section Dogs and Other Pets:

- **(I) Before being permitted to reside at the Classic, new pets being brought to the building must be described in an application completed by their owner which includes questions concerning the pet's behavior. Pets with known aggressive or otherwise undesirable behaviors may be excluded from residing at or visiting the Classic. All pets over 50lbs. will be denied permission to reside at or visit the Classic unless approved by the Board of Managers on an exception basis. This also applies to puppies of breeds and/or mixed breeds in which the dog is normally expected to grow and weigh over the permitted weight.**

Any dog or other pet that currently resides at the Classic will not be affected by the new regulation. A pet application will be required to be completed and approved for owners or tenants bringing a new pet to reside at or visit the Classic, regardless of size, for a description of their pet and its behavior. Prospective and existing owners and/or tenants wishing to bring a new pet over 50 pounds or a puppy that is normally expected to grow and weigh over this amount to reside at the Classic will be required to submit an application and will be required to meet with the Board with their pet for approval or rejection. Any application later determined to be incomplete or inaccurate may result in fines or further actions including but not limited to eviction of the pet. Residents are not permitted to walk their dogs through the front entrance of the building. Residents must exit with their dogs



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through the LL and LP garage, and you may re-enter the building through the front entrance.

Please include this new regulation* with your copy of the rules and regulations for the Classic. Please contact the Classic office with any questions you may have.



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RULES AND REGULATIONS REQUEST

Dear Prospective Renter,

It is the responsibility of the prospective renter to request a copy of the Classic's Rules and Regulations. A copy can be obtained through the on-site Management Office. Please contact Betsy Klampert via email at bklampert@garthchester.com or call Betsy at 914-949-0018.

By signing this form, I have received and read the building's regulations and agree to abide by all Rules and Regulations of the Classic Condominium.

Unit # _____

Renters' name _____

Signature _____

Renters' name _____

Signature _____

Date _____





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GARAGE HEIGHT RESTRICTIONS

Garage levels LL and LP have a fire protection system installed within the ceilings of the garages. As a result of this fire protection system there are certain height restrictions for vehicles in effect for both garage levels. Listed below are the height restrictions for both levels. If your vehicle exceeds these height restrictions, you cannot use our garages under any circumstances, and you must make your own arrangements for parking offsite.

LL Garage Level – 6' 3"

LP Garage Level – 6' 2"

Anything placed on the roof of your vehicle, bicycles, luggage, must be removed prior to entering the garages, and added only after exiting. It is imperative that residents comply with these height restrictions as the repair costs, damage, to the building's fire sprinkler system could be an enormous expense for the building or the resident that causes the damages. You will be held responsible for damages caused by your vehicle due to failure to comply with these height restrictions.





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LEASE ADDENDUM

Between Unit owner _____

and Renter _____

Beginning _____

Ending _____

Page 58 15.1 Condominium Offering Plan

The lease is subject to the provisions of the Declaration of the Condominium

Page 188 5.2 Condominium Offering Plan.

The Condominium Board, acting in the name of the lessor, may (with notice to the Institutional Mortgagee, Company) terminate the lease and/or bring summary proceedings to evict the lessee hereunder, in the event of a default by such lessee under the term of this lease.

Lessee Signature _____ Date _____

Lessee Signature _____ Date _____

