67 OWNERS, LIMITED

POLICY ON RENTING AND SUBLETTING

IT IS THE POLICY OF 67 OWNERS, LTD., TO DISALLOW RENTING AND SUBLETTING IN OUR BUILDING (PASSED AT THE JUNE 6th, 1984, BOARD OF DIRECTORS MEETING; AMENDED AT THE AUGUST 31ST, 2015, BOARD OF DIRECTORS MEETING). THE BOARD’S INTENTION IS THAT THE BUILDING SHOULD NOT BECOME A VEHICLE FOR SHAREHOLDERS TO ACT AS LANDLORDS OR HOTELIERS. THOSE WHO WISH TO BE LANDLORDS OR HOTELIERS SHOULD CHOOSE OWNERSHIP IN A CONDOMINIUM OR A HOUSE.

SHORT-TERM AND MONTH-TO-MONTH RENTALS ARE NEVER ALLOWED. IN EXTREME HARDSHIP CIRCUMSTANCES, THE BOARD WILL CONSIDER ALLOWING A SUBLET SUBJECT TO THE CONDITIONS SET FORTH BELOW.

THE SHAREHOLDER MUST APPLY IN WRITING TO THE BOARD OF DIRECTORS AS FAR IN ADVANCE AS POSSIBLE AND STATE THE EXACT CIRCUMSTANCES SURROUNDING THEIR NEED TO TEMPORARILY LEAVE THE CITY FOR BUSINESS, HEALTH OR OTHER PERSONAL REASONS. THE REQUEST WILL BE REVIEWED AT THE NEXT BOARD MEETING. IF THE SUBLET IS APPROVED, IT IS SUBJECT TO THE FOLLOWING TERMS:

• ONE-YEAR, RENEWABLE SUBLET. MAXIMUM 2 YEARS FOR RESIDENTIAL, 3 FOR COMMERCIAL. RENEWAL SUBJECT TO BOARD APPROVAL.

• SHAREHOLDER MUST PAY 3 MONTHS MAINTENANCE IN ADVANCE AS SECURITY TO BE HELD IN AN INTEREST-BEARING ESCROW ACCOUNT.

• 25% OF MAINTENANCE FEE PER MONTH LEVIED AGAINST THE SHAREHOLDER AS A SUBLET FEE TO THE CORPORATION.

• SUBLET TENANT SUBJECT TO PROVIDING THE SAME FINANCIAL INFORMATION AND PERSONAL REFERENCES AS A PROSPECTIVE PURCHASER AND TO PASSING A BOARD INTERVIEW.

• SUBLET TENANT WILL BE GOVERNED BY ALL HOUSE RULES LISTED IN THE PROPRIETARY LEASE FOR SHAREHOLDERS.

• SHAREHOLDER MUST LEAVE THEIR OUT-OF-TOWN ADDRESS, E-MAIL ADDRESS AND TELEPHONE NUMBER WITH THE MANAGING AGENT.

BOARD OF DIRECTORS, 67 OWNERS, LTD.
Cooperative Sublease Application

67 Owners, LTD.
67 Park Avenue
New York N.Y. 10016

PLEASE COMPLETE THE SUBLEASE REQUIREMENTS AND SUBMIT ONE (1) ORIGINAL SET AND EIGHT (8) COLLATED COPIES TO MAXWELL-KATES, INC AT 9 East 38th Street New York, N.Y. 10016 6th floor att: Transfer Department (The Board of Directors and/or its managing agent reserves the right to request any additional information at anytime during the review and interview process).

REQUIREMENTS:

1. Letter from shareholder outlining their reason for the sublet.
2. If there is any type of financing tied to the shares of the apartment, written consent from the lending institution is required.
3. Sublease Application filled out in its entirety.
4. Sublease agreement filled out in its entirety.
5. Three (3) Personal Letters of Reference.
7. Employer letter stating salary, position and length of employment.
9. Copy of the last two (2) year's Income Tax Returns (1040 Form) in their entirety and signed.

THE FOLLOWING FEES MUST BE SUBMITTED WITH SUBLEASE PACKAGE:

SUBTENANT'S FEES:

1) PROCESSING FEE - A check made payable to Maxwell-Kates, Inc. for $250.00 (NON-REFUNDABLE) which must be submitted with the Board Package.
2) CREDIT CHECK FEE - A check in the amount of $130.00 (NON-REFUNDABLE) per individual payable to Maxwell-Kates, Inc. to be submitted with the Board package.
3) Move-in fee (non-refundable) of $250.00 made payable to 67 Owners, LTD.

SHAREHOLDER'S FEES:

1) Move-out fee (non-refundable) of $250.00 made payable to 67 Owners, LTD.
2) Security Deposit (refundable at end of lease term) of 3 month's maintenance in escrow.
MAXWELL - KATES, INC.

IMPORTANT NOTES:

A) The shareholder will also be charged a fee of 25% of their monthly maintenance each month during the term of the sublease as a sublet fee.
B) All adult persons named in this application and all those that will reside at 67 Park Avenue must be available for an interview to be scheduled by the Admissions Committee of the Board.
MAXWELL-KATES, INC.

APPLICANT'S RELEASE

Re: 67 Owners, LTD.
67 Park Avenue
New York, N.Y. 10016

Apt. #: __________

The undersigned applicant(s) is (are) submitting an application to Sublease the above referenced apartment.

Applicant(s) has submitted payment for certain fees including but not limited to fees to check applicants' credit/criminal and to process this application.

Applicant(s) acknowledges that the application to Sublease the apartment may or may not be approved by the Board of Directors of the Cooperative Corporation owning the building in its sole discretion and that if the applicant is not approved, no reason for the disapproval needs to be given. Whether the application is approved or not approved certain costs and expenses will be incurred and the fees described above will not be refunded to the applicant(s).

The applicant(s) releases both the Cooperative Corporation and the managing agent from any liability for the return of these funds incurred in processing the application, and agrees that in the event the applicant seeks recovery of such fees, the applicant shall be liable for all cost and expenses (including attorney's fees) incurred by the Cooperative and/or managing agent.

Applicant Signature

Applicant Signature
Statement by Applicant
Submitted as part of the Application

Re: 67 Owners, Ltd.
Apartment #__________

You are hereby authorized to submit to the Board of Directors of 67 Owners, Ltd. (the “Corporation”) this Application together with the following information concerning the undersigned:

1. The undersigned and Shareholder-Tenant have previously executed a binding lease concerning the above-indicated Apartment;
2. In applying for consent to this proposed Sublease, the undersigned understands that such consent is required by the terms of the Proprietary Lease;
3. The undersigned acknowledges that neither the Corporation nor its managing agent is obligated to make any repairs or decorations to the Apartment;
4. Shareholder-Tenant and Subtenant acknowledge that the premises to be subleased are located in a cooperative apartment building owned by the Corporation and that Shareholder-Tenant is a tenant shareholder in the Corporation and that the Corporation’s form of proprietary lease is paramount to the proposed Sublease;
5. Applicant agrees to be bound by the provisions of said proprietary Lease and the House Rules contained therein, by the rules, regulations and by-laws of the Corporation, by resolutions duly passed by the Board of Directors and by instructions issued by the managing agent;
6. Applicant understands that the information submitted to the Corporation is essential and hence must be completed in its entirety. The Corporation reserves the right to verify the information submitted and the right to impose such other terms and conditions as the Board of Directors, in its sole judgment and discretion, shall deem necessary under the circumstances presented by this particular Sublease Application.

______________________________
Signature of Applicant

______________________________
Signature of Applicant

______________________________
Typed Name of Applicant

______________________________
Typed Name of Applicant

Dated:

______________________________
Dated:
Maintenance Payments Acknowledgement

The undersigned agrees to and acknowledges the following:

1. Shareholder-Tenant, as Lessee under the Proprietary Lease with the Corporation, shall remain liable for any of its obligations, including the payment of maintenance, additional maintenance and special assessments.

2. If Shareholder-Tenant defaults in the payment of maintenance, additional maintenance or special assessments, the Corporation may, at its option, so long as such default shall continue, demand and receive from Subtenant the rent due or becoming due from such Subtenant to Shareholder-Tenant and apply the amount to pay the amount due from Shareholder-Tenant to the Corporation. Any payment by Subtenant to Shareholder-Tenant shall constitute a discharge of the obligation of such Subtenant to Shareholder-Tenant to the extent of the amount paid.

3. Shareholder-Tenant herewith submits a copy of the lease, if any, as executed between Shareholder-Tenant and Subtenant, or agrees to submit a copy of the executed lease between such parties when available.

Signature of Shareholder-Tenant: ____________________________

Type Name: ____________________________________________

Alternate Contact Information: _____________________________
Daytime Phone Number _____________________________

Alternate Phone Number _____________________________

9 East 38th Street, 6th Floor, New York, NY 10016
Tel. 212.684.8282  Fax: 212.684.8077  www.maxwellkatesinc.com
SHAREHOLDER(S) INFORMATION

Date_________________20__

Apartment # ________ Original Date of Purchase____________

Purchase Price: ________________________

Has this apartment ever been subleased to anyone else prior to the current applicant?_____ 
If so, please indicate dates________________________________________________________________

Current Sublease Request Information:

Lease Term: From:_____________________________To:_____________________________

Rent: Monthly: $______________ Yearly: $______________

Shareholder(s): ________________________________________________________________

Forwarding Address:________________________________________________________________

Home Phone #: __________________________ Business Phone #:________________________

Broker’s Name: #1.________________________ #2.__________________________

Broker’s Firm: #1. __________________________ #2. ____________________________

Broker’s Phone #:1. _______________________ #2. ____________________________
MAXWELL-KATES, INC.

TENANT(S) GENERAL INFORMATION

PERSONAL INFORMATION

Applicant Full Name:____________________________________________________

Date of Birth:____________ Social Security #:________________________

Citizenship: _______________________

Co-Applicant Name:____________________________________________________

Date of Birth:____________ Social Security #:________________________

Citizenship: _______________________

Educational and Professional Background:

Applicant: __________________________________________________________

__________________________________________________________

Co-Applicant: ______________________________________________________

__________________________________________________________

RESIDENCY HISTORY:

PRESENT ADDRESS:________________________________ Amount of Mo. Rent $____________________

Present Phone #:____________________________________________________

Length of Time at Present Address:______________________________

Present Landlord or Mortgage Holder:________________________________

Reason for Moving:________________________________________________

PREVIOUS ADDRESS:________________________________________________

Length of Time at Previous Address:______________________________

Previous Landlord or Mortgage Holder:________________________________

Amount of Mo. Rent $__________ Reason for Moving:___________________

9 East 38th Street, 6th Floor, New York, NY 10016
Tel: 212.684.8282  Fax: 212.684.8077  www.maxwellkatesinc.com
MAXWELL-KATES, INC.

EMPLOYMENT INFORMATION

Applicant:

Employed by:__________________________________________________________

Period Employed:_________________________ Phone #:____________________

Employer's Address:____________________________________________________________________

Position Held:_________________________ Supervisor:____________________

Co-Applicant:

Employed by:__________________________________________________________

Period Employed:_________________________ Phone #:____________________

Employer's Address:____________________________________________________________________

Position Held:_________________________ Supervisor:____________________

If your employer has changed in the last (2) two years indicate on the back of this page, name, address and dates of prior employment.

In case of a personal emergency, Notify:

Name:____________________________________________________________________

Address:____________________________________________________________________

Relationship:____________________________________________________________________

Applicant Signature:_________________________________________ Date __________

Co-Applicant Signature:_________________________________________ Date __________
BALANCE SHEET

ASSETS

Cash
Checking Accounts (Note 1)
Savings Accounts (Note 1)
Marketable Securities
Life Insurance Net Cash Value
Non-Marketable Securities (Note 2)
Real Estate Owned (Note 3)
Automobiles/Pleasure Craft Owned
Vested Interest in Retirement Fund
Net Worth of Business Owned (Note 5)
Furniture and Personal Property
Notes Receivable
Other Assets

TOTAL ASSETS

LIABILITY

Installment Debt Payable (Note 6)
Other Unsecured Loans (Note 6)
Mortgage Loans (Note 6)
Automobiles/Pleasure Craft Loans
Other Secured Loans (Note 6)
Other Liabilities (Note 7)
Income Tax Payable

TOTAL LIABILITY
Net Worth

TOTAL LIABILITIES AND NET WORTH

(The Notes on the attached page are part of this Balance Sheet and must be completed.)
Please indicate below any lease commitments (autos, pleasure crafts, etc. to which you are obligated.)

TENANT(S) SIGNATURE:

1. __________________________  2. __________________________
### NOTES TO BALANCE SHEET

#### Note 1
<table>
<thead>
<tr>
<th>Account #</th>
<th>Name and Address of Banking Institution</th>
<th>Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Note 2
<table>
<thead>
<tr>
<th>No.</th>
<th>Type</th>
<th>Shares</th>
<th>Issuer</th>
<th>Security</th>
<th>Market Value</th>
<th>Monthly Dividend &amp; Interest</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Please submit brokerage statement or other report)

#### Note 3
<table>
<thead>
<tr>
<th>Address of Property</th>
<th>Type of Property</th>
<th>Cost of Property</th>
<th>Market Value</th>
<th>Amt. of Mort. &amp; other Loans</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Note 4
Make and Year of Vehicle:

__________________________________________________________

#### Note 5
Briefly Describe Other Assets:

__________________________________________________________

#### Note 6
Please provide the following for all Debt:

<table>
<thead>
<tr>
<th>Creditor's Name and Address</th>
<th>Acct. No.</th>
<th>Monthly Payments</th>
<th>Months Left</th>
<th>Unpaid Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Briefly describe any other liabilities:
# ANNUAL INCOME STATEMENT

<table>
<thead>
<tr>
<th>Income</th>
<th>Applicant Annual</th>
<th>Co-Applicant Annual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bonus</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commission</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dividend/Interest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alimony/Child Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rental Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sale of Capital</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Other (Itemize Separately)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL INCOME</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

# ANNUAL HOUSING EXPENSES

<table>
<thead>
<tr>
<th>Expense</th>
<th>Current</th>
<th>Projected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintenance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mortgage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Financing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Real Estate Taxes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loans</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>ANNUAL HOUSING EXP:</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Housing/Income Ratio: ___________
I (WE) ACKNOWLEDGE HEREBY MY UNDERSTANDING OF THE HOUSE RULES AND ALL TERMS OF THE PROPRIETARY LEASE STATED HEREIN. I (WE) RECOGNIZE THAT BY ACTING TO THE CONTRARY ON ANY TERMS OF THE PROPRIETARY LEASE AND THE HOUSE RULES I (WE) SHALL BE IN VIOLATION OF TERMS AND CONDITIONS OF THE PROPRIETARY LEASE AND ITS SUPPLEMENTS. I (WE) ALSO STATE THAT I (WE) HAVE READ THE HOUSE RULES OF THE APARTMENT CORPORATION AND GIVE MY (OUR) ASSURANCE THAT ALL MEMBERS OF MY HOUSEHOLD AND GUESTS WILL CONFORM TO THEM.

_________________________________________
APPLICANT SIGNATURE

_________________________________________
APPLICANT SIGNATURE
MAXWELL-KATES, INC.

CREDIT REPORT AUTHORIZATION

In order for you to comply with the provisions of Section 606 of the Fair Credit Reporting Act, I authorize you to retain a Credit Reporting Agency, which agency may obtain, prepare and furnish credit reports concerning me.

I understand that upon request I am entitled to a disclosure of the nature and scope of the Investigation to be requested by you of said Credit Reporting Agency.

----------------------------------------  ----------------------------------------  ----------------------------------------
Applicant's Signature                   Social Security #                          Date of Birth

----------------------------------------  ----------------------------------------
Applicant's Signature                   Social Security #                          Date Of Birth

----------------------------------------
Date

9 East 38th Street, 6th Floor, New York, NY 10016
Tel: 212.684.8282  Fax: 212.684.8077  www.maxwellkatesinc.com
DEPARTMENT OF HEALTH
THE CITY OF NEW YORK
NOTICE TO TENANT OR OCCUPANT

You are required by law to have window guards installed in all windows* if a child 10 years of age or younger lives in your apartment.

Your landlord is required by law to install window guards in your apartment if a child 10 years of age or younger lives in your apartment, OR

if you ask him to install window guards at any time (you need not give a reason).

It is a violation of law to refuse, interfere with installation, or remove window guards where required, or to fail to complete and return this form to your landlord. If this form is not returned promptly, an inspection by the landlord will follow.

CHECK WHICHEVER APPLY:

[ ] CHILDREN 10 YEARS OF AGE OR YOUNGER LIVE IN MY APARTMENT

[ ] WINDOW GUARDS ARE INSTALLED IN ALL WINDOWS*

[ ] NO CHILDREN 10 YEARS OF AGE OR YOUNGER LIVE IN MY APARTMENT.

[ ] WINDOW GUARDS ARE NOT INSTALLED IN ALL WINDOWS*

[ ] I WANT WINDOW GUARDS EVEN THOUGH I HAVE NO CHILDREN 10 YEARS OF AGE OR YOUNGER

[ ] WINDOW GUARDS NEED MAINTENANCE OR REPAIR

[ ] WINDOW GUARDS DO NOT NEED MAINTENANCE OR REPAIR

Tenant’s Name: ____________________________
(Print)
(Address/Apt. No.)

Tenant’s Name: ____________________________
(Signature)
(Date)

RETURN THIS FORM TO:
MAXWELL-KATES, INC.
6TH FLOOR
9 EAST 38TH STREET
NEW YORK, NY 10016

For Further Information Call:
Windows Falls Prevention (212) 788-4269/4270

*Except windows giving access to fire escapes or a window on the first floor that is required means of egress from the dwelling unit.
Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

Lead Warning Statement

Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention.

Lessor's Disclosure
(a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):
   (i) ______ Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

   (ii) ______ Lessor has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

(b) Records and reports available to the lessee (check (i) or (ii) below):

   (i) ______ Lessor has provided the lessee with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).
   (ii) ______ Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Lessee's Acknowledgment (initial)
(c) ______ Lessee has received copies of all information listed above.
(d) ______ Lessee has received the pamphlet Protect Your Family from Lead in Your Home.

Agent's Acknowledgment (initial)
(e) ______ Agent has informed the lessor of the lessor'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.

Lessor ___________________________ Date ___________________________ Lessor ___________________________ Date ___________________________

Lessee ___________________________ Date ___________________________ Lessee ___________________________ Date ___________________________

Agent ___________________________ Date ___________________________ Agent ___________________________ Date ___________________________
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.
Are You Planning To Buy, Rent, or Renovate a Home Built Before 1978?

Many 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.

Federal 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.
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.
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.
Where Lead-Based Paint Is Found

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

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.
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:

◆ 40 micrograms per square foot (\(\mu g/ft^2\)) and higher for floors, including carpeted floors.
◆ 250 \(\mu g/ft^2\) 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.
Checking Your Home for Lead

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

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.
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 bedtime.
◆ 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.
Reducing Lead Hazards In The Home

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.

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 (µg/ft²) for floors, including carpeted floors;
◆ 250 µg/ft² for interior windowsills; and
◆ 400 µg/ft² 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.
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.

◆ 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.
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.

- **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.
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 and
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 prod-
uct-related injury call 1-800-638-
2772, or visit CPSC's Web site at:
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 con-
tacts on the Internet at 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.
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
(617) 566-0300

Region 2 (New Jersey, New York, Puerto Rico, Virgin Islands)
Regional Lead Contact
U.S. EPA Region 2
7650 Woodbridge Avenue
Building 209, Mail Stop 225
Edison, NJ 08837-3679
(732) 212-5000

Region 3 (Delaware, Maryland, Pennsylvania, Virginia, Washington DC, West Virginia)
Regional Lead Contact
U.S. EPA Region 3 (GWC33)
1650 Arch Street
Philadelphia, PA 19103
(215) 814-5000

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 5 (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)
Regional Lead Contact
U.S. EPA Region 5 (DT-8)
77 West Jackson Boulevard
Chicago, IL 60604-3066
(312) 886-6003

Region 6 (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)
Regional Lead Contact
U.S. EPA Region 6
1445 Ross Avenue, 12th Floor
Dallas, TX 75202-2733
(214) 665-7577

Region 7 (Iowa, Kansas, Missouri, Nebraska)
Regional Lead Contact
U.S. EPA Region 7
901 N. 5th Street
Kansas City, KS 66101
(913) 551-7070

Region 8 (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)
Regional Lead Contact
U.S. EPA Region 8
599 18th Street, Suite 500
Denver, CO 80202-2466
(303) 312-6021

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

Region 10 (Alaska, Idaho, Oregon, Washington)
Regional Lead Contact
U.S. EPA Region 10
Todco Section WCM-12B
1200 56th Avenue
Seattle, WA 98101-1128
(206) 553-1948
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-3205
Washington, DC 20410
(202) 755-1785

This document is in the public domain. It may be reproduced by an individual or organization without permission. Information provided in this booklet is based upon current scientific and technical understanding of the issues presented and is reflective of the jurisdictional boundaries established by the statutes governing the co-authoring agencies. Following the advice given will not necessarily provide complete protection in all situations or against all health hazards that can be caused by lead exposure.

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

EPA747-K-99-001
June 2003
SUBLEASE AGREEMENT

The parties agree as follows:

Date of this Sublease: 19

Parties to this Sublease:

Overtenant:
Address for notices:
You, the Undertenant:
Address for notices:

If there are more than one Overtenant or Undertenant, the words "Overtenant" and "Undertenant" used in this Sublease includes them.

Information from Over-Lease:

Landlord:
Address for notices:

Overtenant:
Address for notices:

Date of Over-Lease: 19

Term: from: 19 to: 19
A copy of the Over-Lease is attached as an important part of the Sublease.

Term: 1. years: 19 months: Beginning: 19
ending: 19

Premises rented: 2.

Use of premises: 3. The premises may be used for
only.

Rent: 4. The yearly rent is $ . You, the Undertenant, will pay this yearly rent to the Over-tenant in twelve equal monthly payments of $ . Payments shall be paid in advance
on the first day of each month during the Term.

Security: 5. The security for the Undertenant's performance is $ . Overtenant states that Over-tenant has received it. Overtenant shall hold the security in accordance with Paragraph of the Over-Lease.

Agreement to lease and pay rent: 6. Overtenant sublets the premises to you, the Undertenant, for the Term. Overtenant states that it has the authority to do so. You, the Undertenant, agree to pay the Rent and other charges as required in the Sublease. You, the Undertenant, agree to do everything required of you in the Sublease.

Notices: 7. All notices in the Sublease shall be sent by certified mail, "return receipt requested".

Subject to: 8. The Sublease is subject to the Over-Lease. It is also subject to any agreement to which the Over-Lease is subject. You, the Undertenant, state that you have read and initialed the Over-Lease and will not violate it in any way.

Overtenant's duties: 9. The Over-Lease describes the Landlord's duties. The Overtenant is not obligated to perform the Landlord's duties. If the Landlord fails to perform, you, the Undertenant, must send the Overtenant a notice. Upon receipt of the notice, the Overtenant shall then promptly notify the Landlord and demand that the Over-Lease agreements be carried out. The Overtenant shall continue the demands until the Landlord performs.

Consent: 10. If the Landlord's consent to the Sublease is required, this consent must be received within days from the date of this Sublease. If the Landlord's consent is not received within this time, the Sublease will be void. In such event all parties are automatically released and all payments shall be refunded to you, the Undertenant.
12. You, the Undertenant, have no authority to contact or make any agreement with the Landlord about the premises or the Over-Lease. You, the Undertenant, may not pay rent or other charges to the Landlord, but only to the Overtenant.

13. Unless otherwise stated, the Sublease is binding on all parties who lawfully succeed to the rights or take the place of the Overtenant or you, the Undertenant. Examples are an assign, heir, or a legal representative such as an executor of your will or administrator of your estate.

14. This sublease can be changed only by an agreement in writing signed by the parties to the Sublease.

OVERTENANT:

[Signature]

You, the UNDERTENANT:

[Signature]

Witness:

[Signature]

STATE OF COUNTY OF

On 19 before me personally appeared

[Signature]

[Signature]

To me known and known to me to be the individual(s) described in and who executed the foregoing Sublease, and duly acknowledged to me that he executed the same.

GUARANTY OF PAYMENT WHICH IS PART OF THE SUBLEASE

Date of Guaranty: 19

Guarantor and address:

Reason for Guaranty:

Guaranty:

1. I know that the Overtenant would not rent the premises to the Undertenant unless I guarantee Undertenant's performance. I have also requested the Overtenant to enter into the Sublease with the Undertenant. I have a substantial interest in making sure that the Overtenant rents the premises to the Undertenant.

2. The following is my Guaranty:

   I guarantee the full performance of the Sublease by the Undertenant. This Guaranty is absolute and without any condition. It includes, but is not limited to, the payment of rent and other money charges.

3. In addition, I agree to these other terms:

   This Guaranty will not be affected by any change in the Sublease, whatsoever. This includes, but is not limited to, any extension of time or renewals. The Guaranty will be binding even if I am not a party to the Sublease.