

# Master Apts., Inc.

## Request to Sublet

Instructions: This request is to be completed prior to all new sublet applications only, not applications to renew current subleases. The turnaround times for review of a request to sublet is 10 days and processing of a sublet application is 3 weeks. Shareholders should initiate the process with these time frames in mind.

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

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

Dear Ms. Hasko,

I purchased my apartment in \_\_\_\_\_ (month/year).

\_\_\_ My apartment is my current primary residence.

\_\_\_ My apt was my primary residence from \_\_\_\_\_ (month/year) to \_\_\_\_\_ (month/year).

\_\_\_ Verification of primary residence.

I have attached one document from both Sections A and B, specified below.

A. First page of most recent NY State/City Income tax return, W2 form or Form 1099.

B. Driver's license or State ID.

\_\_\_ I have attached the relevant pages of my homeowner's insurance policy which documents the effective dates of the policy, the minimum liability coverage of \$300,000, and that Master Apts., Inc. and Orsid Realty Corp. are listed as additional interests.

I would like to sublet my apartment beginning \_\_\_\_\_ (month/year).

Since purchase, I have sublet my apartment \_\_\_\_\_ times.

The dates (month/year) of the sublet terms were:

\_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ to \_\_\_\_\_

My contact information is:

Day phone #: \_\_\_\_\_ e-mail: \_\_\_\_\_

Thank you,

\_\_\_\_\_  
Shareholder Signature

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

06.08.2016

Return completed form to:

Lucyna Hasko

Transfer Agent

Orsid Realty Corp.

Email: lhasko@orsidr.com

Fax: 212-586-4524