DUNWOODY VILLAGE

3500 West Chester Pike • Newtown Square, PA 19073 610-359-4400 • Hearing Impaired 1-800-654-5984

Marketing Department: 610-359-4425 • marketing@dunwoody.org

PRIORITY LIST AGREEMENT						
Name Applicant 1 Name Applicant 2 Address	□ Mr □ Mr □ Mr □ Mr □ Mr	s.			Date of Birth// Date of Birth//	
City, State, Zip Home Phone Cell Phone	Applica	nt 1		Applicant 2		
Email	Applicant 1			Applicant 2		
		Style of Unit(s) [Desired (li	mit 3):		
Apar StudioJuniorANY 1Bedroom (or select specific styles below)1 BR (standard)1 BR (custom)1 BR "J"1 BR "J"/ sunroom		ment ANY 2BR (or select specific styles below) 2 BR (standard) 2 BR (custom) 2 BR custom/den	Country House West (1BR/1BA) West (2BR/2BA) East (2BR/2BA/Den)		Penrose Single Story Brandywine Longwood Two Story Fairmount Winterthur	
Approximate Timeframe of Desired Residence at Dunwoody Village:						
	erred	1-3 years by a Dunwoody resident, ges that you have reviewed	please tel			
Signature: Applicant 1			Signature: Applicant 2			
Date			 Date			

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PRIORITY WAITING LIST TERMS AND CONDITIONS

- 1. To become a member of the Dunwoody Village Priority List, please sign this Agreement on page 1 and return to the Dunwoody Village Marketing Department along with the following:
 - The completed two-page Financial Statement, together with the first two pages of your most recent tax return and summary pages of investment accounts (see Item 6 of the Financial Statement)
 - Payment of the Priority Fee:
 - \$1,300 for an individual, of which \$300 is a non-refundable Processing Fee, or
 - \$1,400 for two persons, of which \$400 is a non-refundable Processing Fee.
- 2. Upon approval by the Chief Financial Officer, applicants will be added to the Priority List based on the date of the application.
- 3. Priority List Members are offered available units as such units become available, based upon their selected styles and in the order of their becoming Priority List members.
- 4. Upon acceptance of a residence, updated financial information will be reviewed by the Chief Financial Officer, and the applicant will undergo a medical approval process consisting of the administration of a MoCA cognitive assessment and a review of a year's worth of medical records from the applicant's primary care physician.
- 5. Dunwoody does not pay interest on Priority List Deposits.
- 6. Priority Fees will be refunded within 30 days of receipt of a written request by Applicant or their legally appointed designee. A refund requested will be made payable to Applicant, or upon death to the Estate of the Applicant. The Applicant forfeits their priority list position when removed from the priority list.
- 7. Except as provided in item 4, regarding refunds, an Applicant's rights under this Agreement are personal to him/her, may not be assigned, and shall not pass to his/her heirs or personal representative. If application is made by two prospective residents, both are deemed to be included in the word "Applicant" as used in this Agreement, and payment of a Priority Fee shall cover both.
- 8. Notice of an available unit can be given to an Applicant via telephone, email, and/or U.S. mail, as such contact information is provided herein or is updated, in writing, directed to the Dunwoody Village Marketing Department.
- 9. This Agreement does not commit Dunwoody to admit the Applicant. The decision whether to admit an Applicant is made by Dunwoody in the exercise of its sole direction. If the decision of Dunwoody is to *not* admit an Applicant, the Applicant agrees to accept such decision as binding and final in all respects.
- 10. This Agreement shall supersede any Priority List Agreement previously signed by the Applicant.
- 11. The Applicant acknowledges receipt of the most recent Dunwoody Village Annual Report/Disclosure Statement available at the time of this application.

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FINANCIAL STATEMENT

[If two people are applying and maintain separate finances, please complete separate Financial Statements.]

The Board of Trustees of Dunwoody Village, a Pennsylvania not-for-profit corporation, respects the privacy of every applicant and does not wish to intrude into any applicant's personal financial circumstances other than to have assurance that the applicant has adequate financial resources to live comfortably at Dunwoody Village. The Board is not interested in total estate, but rather only sufficient assets to cover admission costs, monthly charges for life, and personal needs and obligations. This information will be kept confidential.

Name:				
applicant #1				
applicant #2				
Type(s) of residential home desired:				
ype(s) of residential nome desired.				
SECTION 1: REAL ESTATE ASSETS				
Real Estate #1	Real Estate #2			
Address:	Address:			
-				
Value:	Value:			
SECTION 2: NON-REAL ESTATE ASSETS	S (Attach schedule if more sna	ce is needed.)		
Securities \$	o (riculon sonounio n more spu	Notes/Comments		
Savings. \$				
RA/401k \$				
Other \$				
TOTAL \$				
SECTION 3: GROSS INCOME: (Do not inc	clude IRA/401K Distributions)		
Social Security \$ monthly	\$ yearly	Notes/Comments		
Pensions \$ monthly	\$ yearly			
Annuities \$ monthly	\$ yearly			
Γrust \$ monthly	\$ yearly			
Rental Income \$ monthly	\$ yearly			
Dividends	\$ yearly			
Interest Income	\$ yearly			
Other (describe)	\$ yearly			
TOTAL \$				
Page 1				

SECTION 4 : Excluding the Dunwood personal expenses after you become a re	y monthly fee, please provide an estimate of your anticipated monthly esident: Monthly Amount \$
SECTION 5: Do any of the following death of one spouse? Pensions	items increase, and if so, on what basis? Will there be a change with the Notes/Comments:
Annuity	
Trust	
Rental	
SECTION 6: Please include the follow	ving documents with this Financial Statement:
• Pages 1 & 2 of your most recen	t IRS tax return (if you itemize, please include Schedules A-E)
Most recent investment account	t statements (summary page showing total balance is acceptable)
• Other relevant information (i.e.	savings and checking account statements, personal worksheets, etc.)
SECTION 7: Please list any liabilities s	such as mortgages, loans and any other long-term debt you currently carry.
Description	Amount
	\$
	\$
	\$
SECTION 8: The following is contact in	information for my/our advisors and their firms, whom you may consult
regarding my/our application for admiss	sion to Dunwoody.
Banker/Trust Officer	
Investment Advisor	
	FOR OFFICE USE ONLY:
Unit Type:	
Approved by	Date: