

# The Berkeley

*Berkeley Apartments*

*35-25 77<sup>th</sup> Street*

*Berkeley Hall*

*77-12 35<sup>th</sup> Avenue*

*Berkeley Gardens*

*35-24 78<sup>th</sup> Street*

*Jackson Heights, New York 11372*

## SUBLET RENEWAL APPLICATION

If you are renewing a lease with an existing sub tenant, you may use the simple form on the following page.

- Please email the completed form to Joe Doren at [jdoren@metromanagementdev.com](mailto:jdoren@metromanagementdev.com)
- CC Arlene Degraff at [adegraff@metromanagementdev.com](mailto:adegraff@metromanagementdev.com)
- CC the co-op board at [berkboard@gmail.com](mailto:berkboard@gmail.com)
- Mail the **2 month** maintenance sublet fee to Arlene Degraff at:
  - Arlene Degraff  
Metro Management Development, Inc.  
1981 Marcus Avenue, Suite C-131  
Lake Success, NY 11042

**BERKOWNERS INC. SUBLEASE RENEWAL REQUEST**

**SHAREHOLDERS MAY BE PERMITTED TO SUBLET THEIR APARTMENT FOR UP TO A  
MAXIMUM FOUR YEARS IN A FIVE-YEAR PERIOD SUBJECT TO BOARD APPROVAL.  
SUBLEASE TERMS ARE FOR 1 YEAR AT A TIME.**

***\*If this is not the original subtenant please submit a full and complete sublet application\****

**Shareholders wishing to renew their sublets must request permission to do so ninety  
days before the expiration date. Please submit this form to Joe Doren, Property Manager  
at [jdoren@metromanagementdev.com](mailto:jdoren@metromanagementdev.com)**

**Date your subtenant moved in \_\_\_\_\_**

APARTMENT ADDRESS/UNIT NO:

SHAREHOLDER NAME \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

SUBTENANT NAME \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

CURRENT SUBLEASE LEASE BEGAN \_\_\_\_\_

As the above sublease agreement will expire on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ the  
undersigned hereby request the term be extended for one (1) year a one-year period ending  
on \_\_\_\_\_.

**SHAREHOLDER(S):**

_____ SIGNATURE	_____ PRINT NAME	_____ DATE
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_____ SIGNATURE	_____ PRINT NAME	_____ DATE
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**SUBTENANT:**

_____ SIGNATURE	_____ PRINT NAME	_____ DATE
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_____ SIGNATURE	_____ PRINT NAME	_____ DATE
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**APPROVED BY:**

**BERKOWNERS, INC.**

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