

City of Philadelphia Department of Licenses & Inspections P.O. Box 53310 Philadelphia, Pa. 19105 OCCUPATIONAL LICENSEE ONLY

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1 1/2" SQUARE

#### **DISPLAY PROMINENTLY**

If required by law

BEY MANAGEMENT 2114 S 72ND ST PHILADELPHIA PA 19142

3202 HOUSING INSPECTION (3202) BEY MANAGEMENT 01518 S PATTON ST 0000000 1 UNIT(S)

THIS LICENSE IS GRANTED TO THE PERSON AND LOCATION FOR THE PURPOSE STATED ABOVE. IT IS SUBJECT TO IMMEDIATE CANCELLATION BY THIS DEPARTMENT FOR VIOLATIONS OF CITY ORDINANCES AND REGULATIONS. INQUIRIES 311 (215-686-8686).

:	ENSE CODE	LICENSE NO.	BUSINESS PRIVILEGE NO.	EXPIRES LAST DAY OF	PAID THIS AMOUNT	ON DATE
:	3202	492950	492949	2/2011	50.00	02/01/10
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				<u></u>		<u> </u>

**LICENSE** 

THIS IS A LEGALLY BINDING LEASE THAT WILL BECOME FINAL WITHIN THREE BUSINESS DAYS. DURING THIS PERIOD YOU MAY CHOOSE TO CONSULT AN ATTORNEY WHO CAN REVIEW AND CANCEL THE LEASE. SEE SECTION ON ATTORNEY REVIEW FOR DETAILS.\*

### **HOUSE LEASE**

The Landlord and the Tenant agree to lease the House for the Term and at the Rent stated, as follows:

The words Landlord and Tenant include all landlords and all tenants under this Lease.

Landlord MA+Hen 1-Bay	Tenant NICHOLAS HAM MOND				
Address to Company to Strange MS ST Phillips	n NATHAN HAMMOND				
House (including grounds on which it is located)	KATEN Houck				
19147 247 971 11 4 2 Addies	1518 PA+tON S+ 19146				
Date of Lease 5-95- 00.8	Rent for the Term is 5 225 60				
Term 1 Year at \$ 5.25 per Month	The Rent is payable in advance on the first day of each month.  at follows: A #25.00 Late fee will inco- if rental indebtedness is not				
Beginning & 5- 7068	if rental indebtedness is not				
Ending 4 - 5 20091	cleared by the 5th day of the				
	Month.				
Security \$	Tees paid to a Lawver for eviction				
Name and address of bank, sayings and lean association or insusances company (	will be considered as rent.				
	(Arefor to item (3 on Longe)				
Broker. The Landlord and the Tenant recognize	i de la companya de l				
	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \				
as the Broker who brought about this Lease. The	\[\frac{1}{2}				
shall pay the Droker's commission.					
Additional agreements NIChOLAS HAMMOND PA	K-N-POLISH 215-790-0906				
	LALOS				
Nothan HAMMOND PA	16-N-POLISH 215-190-0906				
da	PO, S. BrOAD ST				
Karen Hovek	19/02				
Sucar Ground	19102 2926 Gerri H54				
	***************************************				
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#### 1. Possession and Use

The Landlord shall give possession of the House to the Tenant for the Term. The Tenant shall take possession of and use the House only as a private residence. Only a Tenant signing this Lease and the children of that Tenant may live in the House. The Tenant shall not use the House for any business, professional, unlawful or hazardous purpose. The Tenant must not allow the House to be vacant for extended periods.

#### 2. Rent

The Tenant shall pay the Rent to the Landlord at the Landlord's address.

#### 3. Additional Rent

If the Tenant fails to comply with any agreement in this Lease, the Landlord may do so on behalf of the Tenant. The Landlord may charge the cost to comply to the Tenant as

<sup>\*</sup>Instructions to preparer: If you are not a real estate broker or salespersan licensed by the New Jersey Real Estate Commission, you may delete this language.

## DURABLE GENERAL POWER OF ATTORNEY (NEW YORK STATUTORY SHORT FORM)

THE POWERS YOU GRANT BELOW MAY CONTINUE TO BE EFFECTIVE SHOULD YOU BECOME DISABLED OR INCOMPETENT.

CAUTION: THIS IS AN IMPORTANT DOCUMENT. IT GIVES THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY DURING YOUR LIFETIME, WHICH MAY INCLUDE POWERS TO MORTGAGE, SELL, OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED, OR INCOMPETENT. THESE POWERS ARE EXPLAINED MORE FULLY IN NEW YORK GENERAL OBLIGATIONS LAW, ARTICLE 5, TITLE 15, SECTONS 5-1502a THROUGH 5-1503, WHICH EXPRESSLY PERMIT THE USE OF ANY OTHER OR DIFFERENT FORM OF POWER OF ATTORNEY.

THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS. YOU MAY EXECUTE A HEALTH CARE PROXY TO DO THIS.

IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.

THIS IS INTENDED TO CONSTITUTE A GENERAL POWER OF ATTORNEY PURSUANT TO ARTICLE 5, TITLE 15 OF THE NEW YORK GENERAL OBLIGATIONS LAW:

We, the below listed partners of Bey Management:

Each agent may SEPARATELY act. All agents must act TOGETHER.

Arline Parks 607 East 139th Street in the county of the Bronx state of New York
 Tanya Bey 350 East 137th Street in the county of the Bronx state of New York
 Jerome Bey 649 Arnow Avenue in the county of the Bronx state of New York
 Matheno Bey 2114 S. 72nd Street in the city of Philadelphia state of Pennsylvania
 Matheno Bey of 2114 S. 72nd Street, Philadelphia . PA 19142
 Our attorney(s)-in-fact- TO ACT
 (If more than one agent is designated, CHOOSE ONE of the following two choices by putting your initials in ONE of the blank spaces to the left of your choice:)

TO INDUCE ANY THIRD PART TO ACT HEREUNDER, WE HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND WE FOR OURSELVES AND FOR OUR HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

THIS DURABLE POWER OF ATTORNEY MAY BE REVOKED BY ANY ONE OF THE PARTNERS OF THE PARTNERSHIP AT ANY TIME.

PARTNERS OF THE PARTNERSHIP AT ANY TIME.
In Witness Whereof We have hereunto signed our names this day of February,
Culin Parker
Arline Parks
Tanya Bey
Jerome Bey
STATE of New York
County of Bronx
On February , 2010 before me, PONYA BEY and personally appeared, APLING PORES, TONYA BEY and personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.  WITNESS my hand and official scal.
Signature
My commission expires: $1 - [8 - 20]$
(Seal)
RICARDO DEL VALLE Notary Public, State of N.Y. No. 01DE502785 Qualified in New York County Commission Expires Jan. 19, 20

# NOTICE TO TERMINATE LEASE

To: NATHAN HAMMOND & KATEN HOUCE	
1518 PATTON Stree	<u>:                                    </u>
2/11/1 PA. 1914/6	
THIS NOTICE is in reference to the following described lease:	
Please be advised that as of JAN 20+H - 2009	, you have been in BREACH OF LEASE for the following reasons:
You were previously notified of this breach in the NOTICE TO PAY	RENT OR VACATE dated TAN 20+4 2009. At that
time you were given 20 days to correct the breach of the lease	and you have not complied.
THEREFORE, YOU ARE HEREBY GIVEN NOTICE: 4	7349 714 60
<del></del> ,	<del></del>
Fuller $\frac{10-74}{2009}$ . If you fail to deliver the property	ed to deliver possession of the property to the Landlord on or before yellow by this date, legal action to evict you from the property will be
taken. Be also advised that any legal costs involved in obtaining pos	
allowed by law. Regardless of your deliverance of the property, you	are still responsible for all rent due under the lease. This notice is
made under all applicable laws of this state. All of our rights are res	served under this notice.
THIS IS NOT AN EVICTION NOTICE.	
THIS IS NOT AN EXICTION NOTICE.	
Dated: FVB-A 2011 2009	
Well A.	Mallada Zail
Simborn of Londland	Name of Landlord
Signature of Landlord	Name of Langiord
2114 5721854	Ph. LA PA 19142
Address of Landlord	City, State, Zip Code of Landlord
PROOF OF SERVICE	
I, the undersigned, being of legal age, declare under penalty of perju	ry that I served the above Notice to Terminate Lease on the above-
I, the undersigned, being of legal age, declare under penalty of perju- named tenant by mailing an exact copy to the tenant by certified mai	I on 2- 2009
MIL B	
Signed on:	
W-1/ 1	MIII
By:	Name of Person Mailing Nortce
Signature of retroit tituling reduced	transe of recool maning trighter