

KENDAL[®] at Hanover

Together, transforming the experience of aging.[®]

80 Lyme Road, Hanover, NH 03755

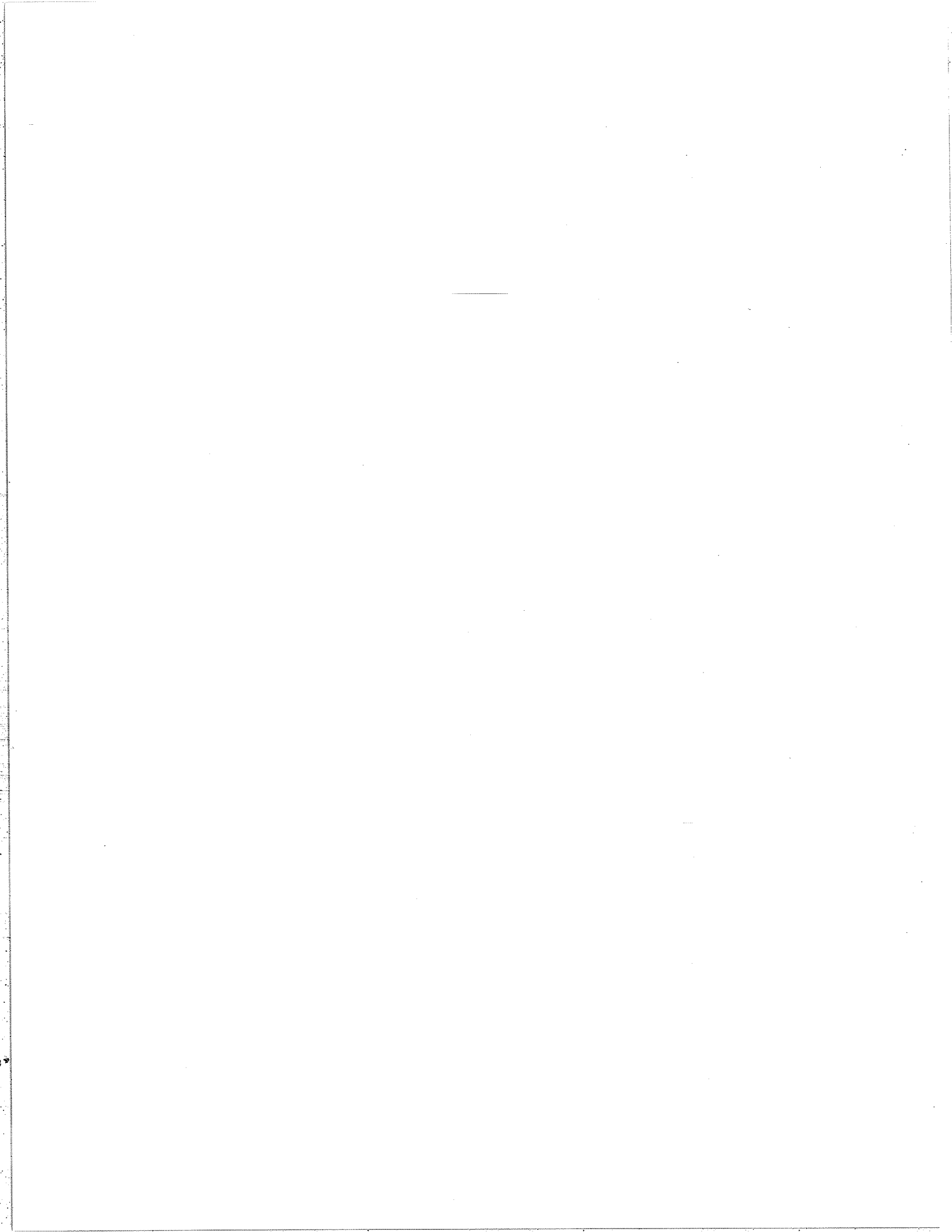
(603) 643-8900

KAH.Kendal.org

FINANCIAL STATEMENT (Two-person Application)

The staff and Board of Directors of Kendal at Hanover respect the privacy of every applicant and treat the information provided to us, herein this application, with complete confidentiality. And while we do not wish to invade an applicant's privacy surrounding their personal financial circumstances, we do need this financial assurance in order to avoid any false expectations by either party. This disclosure verifies that adequate resources are available to meet the obligations necessary for residing at Kendal at Hanover.





Applicant Information

First Applicant's Name: _____
Last First Middle

Second Applicant's Name: _____
Last First Middle

Address: _____
P.O. Box/Street City/Town State Zip Code

Telephone: _____ Email: _____

Desired Apartment Type: _____

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Desired Agreement Type (please check applicable box):

Residence & Care Agreement

Under this agreement, the Entry Fee amortizes by 2%/per month, over a period of 50 months. At the end of this period, the Entry Fee is fully amortized and there is no refundability remaining.

Residence & Care Agreement for a 50% Return of Entry Fee

Under this agreement, the Entry Fee is inflated (roughly 35%), in order to guarantee that half of the Entry Fee is refunded to the estate, upon the resident's death.

Residence & Care Agreement with Long-Term Care Insurance

Under this agreement, there is an applicable credit to the Entry Fee, for retention of a LTC policy. Additionally, when/if future Long-Term Nursing Care is required; the benefits of the policy are applied to the cost of care.

Agreement for Admission to Assisted Living

Under this agreement, there is no applicable Entry Fee, however, Monthly Fees are considerably higher and increase, as the level of care changes. Please note: this is considered a "direct admission" contract, which rarely occurs and is based solely on our census in the Health Center.

(If you don't make a selection, we'll run your analysis, based on our standard Residence & Care Agreement. Also, a definitive agreement selection doesn't need to be made until much closer to admission, when an apartment has been accepted.)

First Applicant's Information:

Date of Birth: _____ Gender: Male Female

Social Security #: _____

Medicare #: _____

I am enrolled in Medicare Part B: Yes No

List additional medical insurance coverage and type of policy: _____

Assets—Current/Market Valuation:

Please only list those assets, which can be liquidated, if necessary. Additionally, please provide documentation to support the figures below; a summary page is sufficient.

Check if Joint

Primary Real Estate (Residence): _____

Additional Real Estate (2nd Residence, land, etc.): _____

Savings/Certificates of Deposit: _____

Stocks/Equity Funds: _____

Bonds/Bond Funds: _____

Mutual Funds: _____

Trusts: _____

IRAs/401(k): _____

Personal Property (Auto, furnishings, jewelry, etc.): _____

Life Insurance: Face Amount: _____ Cash Value: _____

Beneficiary: _____

Additional Assets: _____

Total Asset Valuation: \$ _____

Is the Second Applicant named as the beneficiary for those assets not listed as "joint," in the event of your death? Yes No

If no, please explain: _____

Liabilities and Outstanding Debt:

Check
if Joint

Home Mortgages: _____

Equity Loans: _____

Personal/Auto Loans: _____

Credit Cards: _____

Other Liabilities and Outstanding Debt: _____

Total Liabilities and Outstanding Debt: \$ _____

Projected Annual Income (when entering Kendal):

Please list income separately for each applicant, under Second Applicant's Information section, as the income may change when one applicant predeceases the other. Additionally, please include pages 1 & 2 of last year's tax return.

Social Security: _____

Pension: _____

Inflation Adjusted: Yes No

Survivor % to Second Applicant: _____ %

Interest/Dividends from Stock/Equity Funds: _____

Interest/Dividends from Bonds/Bond Funds: _____

Income from Mutual Funds: _____

Income derived from Trusts: _____

Annuities: _____

Survivor % to Second Applicant: _____ %

IRAs/401(k): _____

Survivor % to Second Applicant: _____ %

Roth IRAs: _____

Survivor % to Second Applicant: _____ %

*Other income (rental property, alimony, etc.): _____

Total Projected Annual Income (when entering Kendal): \$ _____

*If you are still employed, please only list your salary here if you intend to keep working after entering Kendal.

Projected Annual Expenses (when entering Kendal):

Please project future expenses during residency at Kendal, excluding Kendal's monthly fee. For example, if you listed Real Estate under Assets, which you plan on selling after entering Kendal, you should not list taxes associated with that Real Estate, as they will not be an expense going forward. (Please refer to the attached 'Cost Comparison Worksheet' to evaluate current living expenses as compared to future expenses of living at Kendal.)

Check
if Joint

- Mortgage/Rent: _____
- Loan Payments: _____
- Primary Real Estate Taxes: _____
- Additional Real Estate Taxes: _____
- Groceries: _____
- Clothing/Dry Cleaning: _____
- Medical & Personal Care: _____
- Utilities (Telephone, Upgraded Cable Service, etc.): _____
- Insurance (Renter's, Auto, Life, Medical, Other): _____
- Travel, Recreational, Entertainment: _____
- Other Expenses: _____

Total Projected Annual Expenses (when entering Kendal): \$ _____

The undersigned certifies that the above statement, and any attachments, is a true and correct statement of my financial situation. I understand that Kendal at Hanover reserves the right to request and obtain additional information regarding my financial status. I also agree to report any major changes in my financial status prior to admission. I will not, during residence at Kendal, transfer or reduce assets needed to carry out commitments for Kendal at Hanover. Lastly, I acknowledge that my acceptance as a resident at Kendal at Hanover is conditional upon the accuracy of the above representations and that this information becomes part of the Residence & Care Agreement upon my acceptance of an accommodation at Kendal at Hanover.

First Applicant's Signature

Date

Second Applicant's Information:

Date of Birth: _____ Gender: Male Female

Social Security #: _____

Medicare #: _____

I am enrolled in Medicare Part B: Yes No

List additional medical insurance coverage and type of policy: _____

Assets—Current/Market Valuation:

Please only list those assets, which can/will be liquidated. Also, please do not list any financial information already listed by First Applicant as "joint." Additionally, please provide documentation to support the figures below. A summary page is sufficient.

Primary Real Estate (Residence): _____

Additional Real Estate (2nd Residence, land, etc.): _____

Savings/Certificates of Deposit: _____

Stocks/Equity Funds: _____

Bonds/Bond Funds: _____

Mutual Funds: _____

Trusts: _____

IRAs/401(k): _____

Personal Property (Auto, furnishings, jewelry, etc.): _____

Life Insurance: Face Amount: _____ Cash Value: _____

Beneficiary: _____

Additional Assets: _____

Total Asset Valuation: \$ _____

Is the First Applicant named as the beneficiary for those assets listed above in the event of your death? Yes No

If no, please explain: _____

Liabilities and Outstanding Debt:

Home Mortgages: _____

Equity Loans: _____

Personal/Auto Loans: _____

Credit Cards: _____

Other Liabilities and Outstanding Debt: _____

Total Liabilities and Outstanding Debt: \$ _____

Projected Annual Income (when entering Kendal):

Please list income separately for each applicant, under First Applicant's Information section, as the income may change when one applicant predeceases the other. Additionally, please include pages 1 & 2 of last year's tax return.

Social Security: _____

Pension: _____

Inflation Adjusted: Yes No

Survivor % to First Applicant: _____ %

Interest/Dividends from Stock/Equity Funds: _____

Interest/Dividends from Bonds/Bond Funds: _____

Income from Mutual Funds: _____

Income derived from Trusts: _____

Annuities: _____

Survivor % to First Applicant: _____ %

IRAs/401(k): _____

Survivor % to First Applicant: _____ %

Roth IRAs: _____

Survivor % to First Applicant: _____ %

*Other income (rental property, alimony, etc.): _____

Total Projected Annual Income (when entering Kendal): \$ _____

*If you are still employed, please only list your salary here if you intend to keep working after entering Kendal.

Projected Annual Expenses (when entering Kendal):

Please project future expenses during residency at Kendal, excluding Kendal's monthly fee. For example, if you listed Real Estate under Assets, which you plan on selling after entering Kendal, you should not list taxes associated with that Real Estate, as they will not be an expense going forward. (Please refer to the attached 'Cost Comparison Worksheet' to evaluate current living expenses as compared to future expenses of living at Kendal.)

Mortgage/Rent: _____

Loan Payments: _____

Primary Real Estate Taxes: _____

Additional Real Estate Taxes: _____

Groceries: _____

Clothing/Dry Cleaning: _____

Medical & Personal Care: _____

Utilities (Telephone, Upgraded Cable Service, etc.): _____

Insurance (Renter's, Auto, Life, Medical, Other): _____

Travel, Recreational, Entertainment: _____

Other Expenses: _____

Total Projected Annual Expenses (when entering Kendal): \$ _____

The undersigned certifies that the above statement, and any attachments, is a true and correct statement of my financial situation. I understand that Kendal at Hanover reserves the right to request and obtain additional information regarding my financial status. I also agree to report any major changes in my financial status prior to admission. I will not, during residence at Kendal, transfer or reduce assets needed to carry out commitments for Kendal at Hanover. Lastly, I acknowledge that my acceptance as a resident at Kendal at Hanover is conditional upon the accuracy of the above representations and that this information becomes part of the Residence & Care Agreement upon my acceptance of an accommodation at Kendal at Hanover.

Second Applicant's Signature

Date

Kendal At Hanover Cost Comparison Worksheet

Present Monthly Expenses vs. Estimated Expenses at Kendal at Hanover

The following comparison worksheet can be useful to evaluate some of your current living expenses, in your present situation, as compared to future expenses of living at Kendal at Hanover.

Categories of Cost of Living Expenses	Present	Kendal at Hanover
HOUSING COSTS & RESIDENTIAL SERVICES		
Regular monthly fee	N/A	
Rent/Mortgage Payment		INCLUDED
Building Insurance		INCLUDED
Tenant's Insurance-personal belongings, etc.		
UTILITIES		
Heat and Electricity		INCLUDED
Water and Sewer		INCLUDED
Telephone		
Basic Cable		INCLUDED
Internet Service		INCLUDED
HOME MAINTENANCE		
General Maintenance and Servicing		INCLUDED
Major Repairs and Replacement		INCLUDED
Trash, Recycling, and Snow Removal		INCLUDED
Landscaping/Yard Care		INCLUDED
Housekeeping and Linens		INCLUDED
SECURITY SERVICE (24-hour emergency response system)		INCLUDED
TAXES		
Real Estate		INCLUDED
Other		
FOOD		
One Meal per Day		INCLUDED
Extra Meals		
MEDICAL CARE & INSURANCE		
Medicare Premium		
Supplemental Medical Insurance Premium		
Medicare A deductibles		
Medicare B deductibles		INCLUDED
Dentistry, podiatry, eye glasses, etc.		
Prescription drugs		
Non-prescription drugs		
Individualized care/wellness/activities program		INCLUDED
Assisted Living		INCLUDED
Short/Long-term Skilled Nursing Care		INCLUDED
Medicare and insurance processing		INCLUDED
TRANSPORTATION		
Car (gas, maintenance, repairs, insurance, replacement)		
Public Transportation*		
ENTERTAINMENT & RECREATION*		
DRY CLEANING/PROFESSIONAL LAUNDRY SERVICES*		
OTHER PERSONAL EXPENSES*		
TOTAL		

* These costs might be reduced considerably, since many services, benefits, and activities are provided on-site. Additionally, some off-site transportation is provided by Kendal at Hanover.