

CLAIM FORM

THE DEADLINE TO SUBMIT THIS CLAIM FORM IS DECEMBER 23, 2015

This is the official claim form you must use to make a claim in Andrew Snyder et al. v. Tim Schaeffer Development Corp., Lonaconing, LLC, Daystar Construction, Inc., and Schaeffer Family Homes, LLC, Docket No. CAM-L-864-14, Superior Court of New Jersey Camden County, New Jersey. Please read this form carefully before filling it out. In order to qualify for relief under the settlement, you must be both the current owner and the original purchaser (from Lonaconing, LLC) of the townhome property that you identify in Section 2 of this Claim Form, which must be a residence located in the “Townhomes at Lonaconing” development located in Berlin, Camden County, New Jersey with a partial or full stucco front facade. To be eligible for benefits under the settlement, you must complete this Claim Form in its entirety. Each owner must sign the Claim Form and submit it and the required documentation as set forth in Section 3 in a timely manner. The information you provide on this Claim Form and the documents you are required to submit are designed to see if you qualify for a payment. If you qualify, you will be eligible to receive money from the Settlement Fund. Only one payment will be made per townhome regardless of the number of co-owners.

If you have any questions please contact the Claims Administrator, Lori A. Clarke-Ratliff at 856-873-5507 or via email at clarkerratliff@ballardspahr.com or by contacting Class counsel at 856-797-9951, or via email at sdenittis@denittislaw.com.

**THIS COMPLETED CLAIM FORM AND THE REQUIRED DOCUMENTATION
MUST BE POSTMARKED,
E-MAILED, OR FAXED NO LATER THAN December 23, 2015.**

1. PERSONAL INFORMATION OF THE CLAIMANT:

State your full name, present address, and either a phone number or e-mail address at which you may be contacted by the claims administrator if necessary. Any payment that you may be entitled to will be mailed to this address:

First Name

Last Name

Address

City

State

Zip Code

(____) _____
Phone Number

E-Mail Address

2. PROPERTY INFORMATION:

List the address of the property in the "Townhomes at Lonaconing" development for which you are the current owner and original purchaser and the date of the closing with Schaeffer Development.

Name(s) of original purchaser(s): _____

Names(s) of current owner(s): _____

Property Address: _____

Date of Settlement (Purchase Closing Date): _____

3. DOCUMENTATION REQUIRED:

TO BE ELIGIBLE FOR BENEFITS UNDER THE SETTLEMENT, IN ADDITION TO COMPLETING THIS CLAIM FORM BY PROVIDING RESPONSES TO ALL QUESTIONS ON IT, SIGNING THE CLAIM FORM AND RETURNING IT FULLY EXECUTED TO THE ADDRESS SET FORTH BELOW NO LATER THAN THE CLAIM DEADLINE. THE FOLLOWING DOCUMENTATION MUST BE PROVIDED NO LATER THAN THE CLAIM DEADLINE: 1) A COPY OF EITHER YOUR FINAL HUD-1 SETTLEMENT STATEMENT OR YOUR DEED FROM LONACONING, LLC (OR ANOTHER DEFENDANT IN THE LAWSUIT) SHOWING THAT YOU WERE THE ORIGINAL PURCHASER OF THE PROPERTY IDENTIFIED IN SECTION 2 OF THIS CLAIM FORM; AND 2) A COPY OF EITHER YOUR A MORTGAGE STATEMENT, TAX BILL OR RECENT UTILITY BILL DATED WITHIN THE LAST TWO (2) MONTHS FOR THE PROPERTY IDENTIFIED IN SECTION 2 SHOWING THAT YOU ARE THE CURRENT OWNER OF THE PROPERTY IDENTIFIED IN SECTION 2 OF THIS CLAIM FORM. YOU MAY BE REQUIRED TO PROVIDE ADDITIONAL DOCUMENTS OR OTHER PROOF TO ESTABLISH THAT YOU ARE BOTH THE CURRENT OWNER AND ORIGINAL PURCHASER OF THE PROPERTY THAT YOU IDENTIFY IN SECTION 2 OF THIS CLAIM FORM. IF YOUR MAILING ADDRESS LISTED IN SECTION 1 IS DIFFERENT THAN THE ADDRESS LISTED IN SECTION 2, THEN YOU MUST ALSO SUBMIT A COPY OF YOUR CURRENT DRIVERS LICENSE.

DECLARATION:

4. I DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION I HAVE PROVIDED IN THIS CLAIM FORM AND ALL OTHER INFORMATION THAT I HAVE SUBMITTED IN SUPPORT OF MY CLAIM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I FURTHER DECLARE UNDER PENALTY OF PERJURY THAT I AM THE CURRENT OWNER AND ALSO THE ORIGINAL PURCHASER OF THE PROPERTY IDENTIFIED IN SECTION 2 OF THIS CLAIM FORM THAT IS LOCATED IN THE "TOWNHOMES AT LONACONING".

By: _____
Owner

By: _____
Co-owner, if applicable

Print Name: _____
Owner

Print Name: _____
Co-owner, if applicable

Return the completed claim form and required documentation to:

Ballard Spahr LLP
"TOWNHOMES AT LONACONING" STUCCO CLASS SETTLEMENT
ATTN: Lori A. Clarke-Ratliff
Woodland Falls Corporate Park
210 Lake Drive East, Suite 200
Cherry Hill, NJ 08002
E-Mail: clarkeratliff@ballardspahr.com
Fax No.: 856-761-1020

***** REMEMBER TO INCLUDE THE DOCUMENTS REQUIRED IN SECTION 3 OF THIS
CLAIM FORM -- FAILURE TO PROVIDE WILL RESULT IN YOUR CLAIM BEING
DENIED*****