

CONDOMINIUM HOA LIMITED REVIEW QUESTIONNAIRE

Borrower Name: _____

Project Legal Name: _____

Master Association (if applicable): _____

Project Address: _____

Yes

No

If the answer to any question 1-10 is Yes, please stop and complete a FULL REVIEW QUESTIONNAIRE.

1. Is the project both new and are the units attached?
2. Does the project operate like a resort condominium, condotel, leasehold, live-work, or have a rental desk?
3. Is the HOA under control of the Developer?
4. Is the project subject to any additional phasing or add-ons?
5. Does any single entity, individual, or group: a) if project is 5-20 units, own more than two units; or b) if project is more than 20 units, own more than 20% of the total units?
6. Is there any pending litigation or arbitration with HOA?
7. Is there any commercial space in the complex?
If Yes, is it greater than 25% of the complex?
8. Is the property a conversion?
If Yes, date of conversion: _____
9. Are there any special assessments?
If Yes, provide documents detailing use.
10. Are any units 60 days or more past due in the payment of each special assessment?
If Yes, is it greater than 15% of the complex?
11. Are any unit owners more than 60 days delinquent on HOA Dues?
If Yes, how many? _____
12. HOA Tax Identification Number (TIN or EIN) (required): _____

If the answer to any question 13-14 is No, please stop and complete a FULL REVIEW QUESTIONNAIRE.

13. Are the units, common areas, and recreational facilities of the project 100% complete with no additional phases to be built?
14. Do unit owners, through HOA, have sole ownership interest in and full rights to use the project's facilities and common areas?

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Hazard Insurance (required): If policy shows Co-Insurance, an Agreed Amount Endorsement is required.

15. Please provide Hazard Insurance Declaration/Loss Payee page.	Attached	NA
16. Please provide HO6 Declaration/Loss Payee page.	Attached	NA

SOURCE OF INFORMATION: Acceptable sources of information include an officer of the condominium association or a qualified employee of the association's management company..

Source Name

Source Title

Source Signature

Date Completed

Source Email Address

Source Phone Number

Association Website Address: _____
