

Condominium Questionnaire

Project Name:

HOA Tax ID #:

Address:

Property Type

TRUE FALSE

The property is fee simple		
The property is leasehold <i>*If leasehold, provide recorded lease and all amendments</i>		
The project is NOT any of the following:		
<i>condominium hotel</i>		
<i>common interest apartment</i>		
<i>timeshare, fragmented/segmented ownership</i>		
<i>houseboat</i>		
<i>manufactured home</i>		
The project does not have weekly rentals, housekeeping		
The project has not experienced financial distress in the last 36 months		

Construction Type

TRUE FALSE

Existing with all legal phases & common areas completed w/in 12 months or more		
Full Gut Conversion		
NON Gut Conversion, If true:		
<i>all of the rehabilitation work and repairs have been completed</i>		
<i>an engineering or architectural inspection, dated within 12 months, evidencing all rehabilitation work/repairs have been completed</i>		
<i>a CO or its equivalent has been issued</i>		
New Construction, if true:		
all units and common area are complete and Certificate of Occupancy has been issued for the units in the legal phase		

Legal Restriction on Conveyance

TRUE FALSE

The project does not have affordable housing or rent restricted units		
The project does not have affordable housing or rent restricted units.		
Common/Recreational areas are NOT held in a recreational lease/easement. <i>*If true, provide recorded lease docs and all recorded amendments</i>		
The project is subject to Private Transfer Fees <i>*If true, provide Private Transfer Fee docs</i>		

Completion/Phasing

TRUE FALSE

Entire Project is 100% complete including all units & common areas & not subject to additional phasing		
Subject Phase is 100% complete including all units and common areas in phase		

Subject Phase	
# of units in phase	
# of units completed	
# of units sold/conveyed	
# of owner occupied	
# of investor/rentals	

Entire Project	
Total # of Legal Phases	
Total # of units	
# of units completed	
# of units sold/conveyed	
# of owner occupied	
# of investor/rentals	

	TRUE	FALSE
No unit owners own more than 1 unit in project		
If there is, provide the # of units owned by each owner: <i>i.e. owner 1 owns 2 units; owner 2 owns 6 units, etc.</i>		
Association maintains separate accounts for operating and reserve funds		
A reserve study has been prepared within the last 36 months		
Date prepared		
The project has special assessments currently or within the last 12 months		
<i>*If true, provide the following:</i>		
<ul style="list-style-type: none"> ✓ Explanation for the Special assessments ✓ Total amount of Special Assessment ✓ Amount still owed to HOA from Unit Owners, if any ✓ Payment options offered to unit owners ✓ Confirmation that all repairs have been completed or if not completed the schedule of repairs an estimate of completion per repair 		
The project does not contain commercial/non-residential space		
<i>*If true, provide the following:</i>		
Total square footage of commercial/non residential space		
Total square footage of residential space		
The Home Owner's Association is named as a defendant in litigation other than for foreclosure or past due HOA dues.		
<i>*If false, provide the information below:</i>		
<ul style="list-style-type: none"> ✓ Copy of the filed complaint ✓ Signed and dated letter from the HOA, HOA's management company or HOA's attorney and includes the following information: <ul style="list-style-type: none"> ○ Reason for litigation ○ Risk of the litigation ○ Anticipated settlement/judgement date ○ Sufficient insurance to cover any payout settlement/judgement ○ Impact of the litigation on the HOA financial wellbeing 		

Contracts

TRUE FALSE

There are existing contracts entered into by the builder/prior to transfer of control		
The existing contracts require no more than 90 days' notice to terminate		

I hereby certify the information represented in this document above is true and accurate to the best of my knowledge and that there is a current Managing Agent Agreement in effect. Please attach a copy of the Management Agreement. This form CANNOT be completed by an interested party.

Signature of Association or Management Co. Representative

Title

Printed Name

Contact Phone Number

Contact Email

Name of Management Company

Address