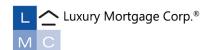


Limited Review Condominium Questionnaire

Use this form only when the project meets all 4 criteria below or is a fully detached condo. If the project doesn't meet all these criteria, please contact the Lender contact below for a correct form for the project.

1. 90% sold & closed	All units, common elements & amenities are 100% complete		3.	Not subject to additional phasing or annexation			Unit Owners control th HOA		the			
Date:	Unit #: Monthly HOA dues: \$ Attached Detached Condo					lo-Ho	tel 🗌 C	ondo-				
Borrower Name:						Coop Loan						
Project Legal Name):					Louis		TI	N #			
Address:					City			St	ate:	Z	ip:	
Is the HOA profess	ionally manage	ed? 🗌 Y	es 🗌 No	*If YES, p	orovide	Name	and Contact In	forma	ation for the	man	agemen	t co be
				ect Infor	rmati							
Project Total # of uni	ts # Retaine Develope		Total contra			Total	# of units solo ct	and	conveyed	d in th	ne	Year Built
							s applicable					
1. Are all units,							ete in the proje	ect?		[YES	□ NO
	t subject to add									1	YES	□ NO
	A control been to bject contain any						ok off Voc for	-tr	a halaw)	<u> </u>	YES	
Hotel/Motel/Resort	Registration	Maid		S or oper Mandator			hare, fractional		Short-terr	YES ☐ NO m Deed/Resale		
Services	Services	Service		Rental	segmented ownership					restriction		
		1		Pooling								
Multi-dwelling	Manufactured	Contin		Units<		ciency	Houseboat		estment		uires S	
units, with single deed	Housing units	Care F	•	400sq. ft	Kitch	nens	units		curity/ cortunity	Reg	istratior	1
5. Does the pro	piect have mand	atory me			se of r	ecreati	ı onal amenitie			П	YES	□NO
	er, builder or an			00 101 40		oo, oaa		0 0				
6. Does the HC			on-incidental	l busines	ss ope	erations	s in the projec	t? (i	e.	[YES	□NO
	pa, health club) at percentage o		d income is	derived	from	these	arrangemente	2				%
7. Is the HOA,								•		ſ	YES	
**If YES attach detai	ls and documer	tation of t	the circumst	tances s	urrou	nding li					_	
8. Does any sing		ore than ′	1 unit in the	entire pr	roject	?] YES	□NO
9. Is any part of the project used for non-residential/commercial purposes? (Does not include parking areas allocated to residential unit owners)				[YES	□NO						
**If YES, how many purposes? Complete						ed for r	non-residentia	al/cor	nmercial			units %
10. Are the com										[YES	□NO
11. Is the project						ning reg	gulations proh	ibit re	ebuilding	[YES	☐ NO
12. Is the project		ithin the	past 3 years			erted:				[YES	□NO
**If YES, was it a										-	7.7.50	
13. Is any part o				e unit's i	morta	age lie	n?			A	YES YES	NO_ S
B. Is the mor	tgage lender re	sponsible	for paying	delinque	nt cor	nmon d	charges if the	unit	was	' '	_ NO	
acquired d	lue to foreclosu	e or deed	d-in-lieu? **	If YES, I	ende	is resp	oonsible for		mos	Ь		0
				D.	☐ YE							
15. Are there any units that have delinquent hoa fees due? **If YES, how many units are 30+ 60+ Total arrears due \$					[YES	□NO					
16. Financial co						nent.						
*HOA maintains sepa											YES	∐ NO
*Appropriate access controls are in place for each account. *The bank sends copies of monthly bank statements directly to the HOA.						_ YES □ YES	□ NO					
*Two (2) HOA board members are required to sign any check written on the reserve account.						YES	□ NO					
*The Management Co. maintains separate records & bank accounts for each HOA that uses its services.					'							
*The Management Co. does not have authority to draw checks on, or transfer funds from, the reserve					[YES	☐ NO					
account of the HOA.	LINITS ONLY									<u> </u>	_ YES	∐ NO
17. Is the unit 10	UNITS ONLY:									l r	YES	□ №
18. Are all the u		t detache	ed?							ĺ	YES	□NO
19. Do the legal documents allow for individual homeowner insurance policies to be held?					[YES	□NO					



Insurance Information

Insurance Carrier:	Agent name:
Agent's Phone #:	Agent's Email:

Complete this grid if Question #8 is answered yes:

Complete for any individual or entity who owns more than one unit in the project:

Individual/Entity Name	Developer/ Sponsor Owned	# of Units Owned	Percentage Owned of total Project Units	# Leased at Market Rent	# Leased Under Rent Control
	☐ YES ☐ NO		%		
	☐ YES ☐ NO		%		
	☐ YES ☐ NO		%		
	☐ YES ☐ NO		%		

Complete this grid if Question #9 is answered yes:

Complete for commercial or non-residential units:

Type of Use	Owner or Tenant Name	# of Units	Square Footage	% Square Footage of Total Project Square Footage
				%
				%
				%
				%

Certification

The undersigned hereby certifies that to the best of my knowledge and belief, the information and statements contained on this form and any attachments are true and accurate. The undersigned further certifies that the project was created & exists in full compliance with applicable laws & regulations including all State law requirements in the jurisdiction that the project is located. The undersigned further represents I am authorized by the Homeowners Association Board of Directors to provide this information on behalf of the Association.

Prepares Signature:	Date:
Preparer's Name:	Title:
Company Name:	TIN #:
Email:	Phone #:

If HOA has a management company and they are not preparer above, complete the following Management information:

Name:	TIN:
Contact:	Title:
Phone #:	Email: