

## **Simple Prime Condominium Project Questionnaire**

ι	Jnit Number:				
Dea	ar Association Representative:				
ass ass	order to offer a mortgage to your member, and also for future pusistance. Please help us by completing and returning this form a sociation or management firm may respond. Completion of this the preparer. This information is presented on behalf of the Hom	at your earl form does	iest conven not create a	ience. Any offi any legal liabilit	cer of your
ı	_egal Name of Project				
	Address				
	City, State, Zip	State		Zip Code	
	County				
	Year Built/Converted				
	Number of Buildings				
	Number of Floors				
	Number of Units				
	Number of Units Sold				
	Number of Units Conveyed				
	Owner Occupied				
	Second Home				
	nvestor				
l	Jnit's monthly HOA dues				
	Number of 30-day delinquent units	Amount			
_		<del></del>			
	pject Information	Voc	No		
1)	Is the project completed, including any commercial space?		No	- _ Turnover Yea	
2)	Have the unit owners taken control of the HOA?			_ Turnover Yea _ Conversion Y	
3) 4)	Is the project a conversion of an existing building? Is the project subject to additional phasing?		No No		ear
,	Does any entity own more than 10%?		No		
5) 6)	Does the project have commercial space > 25% of total area?				
0)	Commercial Square Footage Describe commercia				
	Describe confinercia	г зрасе			
7)	Does the project allow rentals less than 30 days or operation a	ıs a Condo	itel?	Yes	No
8)	Is the project subject to any timesharing agreement?				No
,	Title is held: Fee simple or Leasehold (l	If leasehold	d provide co		
•			_ No		umber
	Can the condominium project be reconstructed "as is" in the events of the condominium project be reconstructed to the condominium project be reconstructed			•	No
	Are there any Loan to Value financing restrictions?				No
,	·				
Leç	qal				
	HOA IRS Tax ID Number:				
,	Is the Condo project or HOA involved in any current or pending litigation?  Yes No			No	
	Description				
15)	15) Are there Judgments or Mechanics Liens filed against the project or HOA?			Yes	No

16)	If a unit is taken over by foreclosure, is the lend	der liable for more than six months of d	lelinquent HOA	\ dues?	
			Yes	No	
17)	Are there any deed or resale restrictions?		Yes	No	
,	If yes, please explain_				
18)	Are any of the units rent controlled or rent stab  If yes, how many units? Who is the			No	
Fin	ance				
19)	Are there loans outstanding to the project?		Yes	No	
,	LenderMortgage Balance_	Monthly Payment			
20)	Are there any current special budget assessment Describe		Yes	No	
21)	Does the HOA maintain a separate reserve ac	count for capital expenditures and main	ntenance?		
,	·			No	
22)	Does the HOA maintain separate hank acco		·		
22)	22) Does the HOA maintain separate bank accounts for the working account and the reserve accappropriate access controls and in which funds are deposited sends copies of the statements directly to the HOA? Yes _				
23)	) If the project is managed by a management company, does the management company maintain separat records and bank accounts for each HOA that uses its services, and the management company does not hav the authority to draw checks on, or transfer funds from, the HOA reserve account?  Yes No				
24)	Does the HOA require two members of the Bo	ard of Director's to sign any checks wri	tten on the res	erve	
	account?		Yes	No	
Ins	urance				
25)	Is there a Building Ordinance or Law Endorser	ment?	Yes	No	
If "NO", is it obtainable in the insurance market available to the association?			No		
	YES" Explain why project does not carry this end		103		
	Is there a Boiler and Machinery/Equipment Bre		Voc	No	
	YES", please provide evidence of coverage	eakdown Endorsement:	162	INU	
		laraamant.			
	NO", explain why project does not carry this end	iorsement:			
27)	Does project have central heating or cooling?		Yes	No	
Ins	urance Agency				
The	e project is managed by: Professional Agent	Unit OwnersDeveloper/Spo	nsor		
Cor	ntact				
Per	rson:	Email:			
	dress:				
	/: State:				
Pho	one Number:	Fax Number:			
Pro	eject Management				
Mar	nagement Company Name:				
Cor	ontact Person:Email:				
	dress:				
City	/:State:	Zip:			
Pho	one Number	Fax Number:			

## **Regulation Documents:**

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- Condominium Questionnaire
- Current year's operating budget and Reserves for the Association
- Complete copy of financial statements for past 2 years
- Copy of Declarations page of Master Insurance Policy evidencing sufficient hazard (property); flood, as applicable; fidelity insurance if over twenty (20 units) and employee dishonesty and liability coverage. For new projects a commercial policy may be acceptable.

hereby certify that to the best of my knowledge the above is true and correct.						
Name	Signature	Date				
Title	Telephone Number					