



CONDOMINIUM PROJECT QUESTIONNAIRE

Project/Phase Name: _____

Phase (circle all that apply) – Entire Project, #1, #2, #3, #4, #5, #6, other _____

Number of Units in Entire Project: _____ Date Offering Plan Effective: _____

Address: _____

City, State, Zip: _____ Style (circle one): Detached, Row/Townhouse, Garden, Mid-rise, High-rise.

1. Is the project a condominium hotel, timeshare or a segmented ownership project, or a houseboat project ?

Yes

No
2. Is the project a multi-dwelling unit condominium (in which ownership of multi units is evidence by a single deed and mortgage)?

Yes

No
3. Does the condominium represent a legal, but nonconforming use of the land (if zoning regulations prohibit rebuilding to current density in the event of destruction)?

Yes

No
4. Is the project a planned unit development (PUD)?

Yes

No
5. Is the project subject of current litigation in which the homeowners association or developer, if the project has not been turned over to the HOA, is named as a party to the litigation? You may also answer NO if the litigation is minor and covered by the project's liability insurance.

Yes

No
6. Are there any mechanics liens? _____Yes _____No (If yes, explain_____)
7. Does the project contain any commercial space? You may answer NO if: (1) the commercial space comprises no more than 20% of the total space, AND (2) the commercial use is compatible with the residential nature of the property.

Yes

No
8. Are there any leased recreational facilities or any common area leases? (If yes, provide a copy of the lease.)

Yes

No
9. Is the project a conversion that is not a gut rehabilitation? (Gut rehabilitation refers to the renovation of a property down to the shell with replacement of all HVAC and electronic components.)

Yes

No
10. Is the project a gut rehabilitation conversation?

Yes

No
11. Is the property built on a leasehold estate?

Yes

No

	SUBJECT PHASE	ENTIRE PROJECT
Number of Phases		
Number of Units		
Number of Units for Sale		
Number of Units Sold		
Number of Units Rented (Investor)		
Number of Owner Occupied Units (Principal Residence and Second Homes)		

12. In what year was the project built?
13. Does any single entity own more than 10% of the total units in the entire project? (If the project has fewer than 10 units, does any single entities own more than 1 unit?

Yes

No
14. Are you aware of any sale/financing structure in excess of FNMA's eligibility policies for mortgage loans? These excessive structures could include builder/developer contributions, sales concession, homeowner association or principal and interest payment abatements and/or undisclosed contributions?

Yes

No
15. Are more that 15% of the total units in a project 30 days or more past due on their HOA fee payments?

Yes

No
16. Are all units associated with the entire project (or subject phase if this certification is for a phase only) complete?

Yes

No
17. Are common areas and recreational facilities associated with the entire project (or subject phase if this certification is for a phase only) complete OR, if not, do you have a bond letter or completion assurance for the incomplete common areas or recreational facilities? **Note:** The unit owners must have the sole ownership interest in, and rights to the use of, the project's facilities, common elements, and limited common elements once control is turned over to the unit owners.

Yes

No
18. Is the projected budget adequate (I.e., in clued allocations for line items pertinent to the type of condominium), including providing for the funding of replacement reserves for capital expenditures and deferred maintenance (at least 10% of the budget) and adequate funding for insurance deductible amounts?

Yes

No
19. Is hazard insurance in place to cover 100% of the insurable replacement cost of the project improvements including the individual units? (The deductible amount must not exceed 5% of the policy's face amount.)

Yes

No
20. Is liability insurance in place providing at least \$1 million of coverage for bodily injury and property damage per occurrence?

Yes

No
21. Is flood insurance (if required) in place providing coverage at least equal to the lesser of 100% of the insurable value of each building, including all common elements and property or the maximum coverage available under the National Flood Insurance Program? (Answer Yes if not in a flood zone)

Yes

No
22. If the project has 21 or more units, is fidelity insurance in place covering the maximum amount of funds that will be in the custody of the owner's association or management company at any time? If the project has 20 or fewer units, fidelity insurance is not required and you may answer yes to this question.

Yes

No

PLEASE SUBMIT A COPY OF THE OFFERING PLAN AND MASTER INSURANCE DECLARATION PAGE.

I, the undersigned, certify that to the best of my knowledge and belief, the information and statements contained on this form and the attachments are true and correct.

Title of Association Representative or Preparer

Address of Association

Printed Name of Association Representative or Preparer

TownStateZip Code

Signature of Association Representative or Preparer

()Telephone NumberDate



CERTIFICATION OF SALES, OCCUPANCY AND CONSTRUCTION
(To be completed for a project that is not fully constructed and sold)

Project Name: _____ Unit # _____
Address: _____ Phase # _____
City, State: _____

Section I – Sales status Information

Phase #	# of Units	# Closed	+	# Under Contract	=	Total # Sold	Date Marketing Began
			+		=		
			+		=		
			+		=		
			+		=		

Section II – Occupancy Status Information
(This section must total the number sold and under contract shown above)

Phase #	# Owner Occupied	+	# Second Home	+	\$ Investor/rental*	=	Total # Sold
		+		+		=	
		+		+		=	
		+		+		=	
		+		+		=	

*How many of the owners purchased more that one unit?_____ For each owner who purchased more than one (1) unit, please list below the owner's name and the corresponding number of units purchased:

Section III – Construction Status – Units

Phase #	# Units Complete	# Under Construction	# Units Not Started	Anticipated Completion Date

If additional Phases, attach list.

Section IV – Construction Status – Recreational Facilities

Phase	Description of Facility	Percentage Completed	Anticipated Completion Date

If the project contains a “Master” Association with facilities, please indicate the construction status of the facilities below with the anticipated completion date for each facility if presently not complete.

Certification

I, the undersigned, certify that to the best of my knowledge and belief, the information and statements contained on this form and attachments are true and correct.

Signature of Association Representative or Preparer	() _____ Telephone Number	_____ Date
Printed Name of Association Representative or Preparer	_____ Title	
Preparer's Company Name	_____ Preparer's Address	