

Conventional Homeowners' Association Questionnaire for Limited Review

Project Name: _____

Property Street Address: _____

City: _____ State: _____

1. Total # of legal phases is project: _____ Subject property located in legal phase #: _____
 Total # of units in project _____ Total # of units in subject legal phase _____
(If greater than two phases complete phasing addendum at the end of this document)
2. # of units sold and conveyed in project _____ # of units sold and conveyed in subject phase _____
3. Are all units, common elements and amenities complete in subject project? Yes No
 Are all units, common elements and amenities completed in subject legal phase? Yes No
 If NO, what is incomplete? _____
 Number of units complete: _____
 What Common Elements & Amenities are incomplete? _____
4. Is the project subject to any additional phasing or annexation? Yes No
5. Has the Homeowners' Association been turned over to the unit owners? Yes No
 If YES, provide date control of Homeowners' Association turned over to unit owners Date: _____
6. Does any investor own more than 10% of the total project? Yes No
7. Are there any monthly assessments delinquent more than 30 days? Yes No
 If YES: \$ _____ # _____
8. Is any part of the project used for commercial purposes? Yes No
 If YES, what percentage of square footage is used for commercial purposes % _____ / # _____
9. Is there any pending litigation involving the Homeowners' Association? Yes No
 If YES, provide details and documentation of the circumstances surrounding litigation _____
 Was the project created and exists in full compliance with applicable laws and regulations including all State law requirements in the jurisdiction that the project is located? Yes No
10. Do the legal documents of the Homeowners' Association contain language that protects the first mortgagee rights? Yes No
11. Is day, night or short-term rentals permitted? Yes No
12. Does project have on-site registration or check-in desk? Yes No
13. Does project have housekeeping/maid service? Yes No
14. Does project have a phone system? Yes No
15. Does project have room service? Yes No

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.

Signature of Association Representative or Preparer

Name and Title of Assn. Representative or Preparer

Representative or Preparer's Company Name

Address

Date of Completion

Telephone Number