

**PROJECT LEGAL NAME:** \_\_\_\_\_

**CITY AND STATE:** \_\_\_\_\_

1. Are there short-term rentals? _____ Yes _____ No	If yes, what is the minimum rental period? _____
2. Does the project have any of the items listed below? Please mark all which apply.	_____ Yes _____ No
<input type="checkbox"/> Hotel Services <input type="checkbox"/> Licensed as a hotel, motel, resort or hospitality entity <input type="checkbox"/> Rentals handled through the management company <input type="checkbox"/> Occupancy limits or blackout dates <input type="checkbox"/> Legal documents require owners to share profits from rentals of units with HOA, Management Co. or resort/Hotel rental company <input type="checkbox"/> Project contains non-incidentual business operations (restaurant, spa, etc.) <input type="checkbox"/> Project is listed as an investment security with the SEC	<input type="checkbox"/> Hotel or Resort ratings through hotel booking websites or agencies <input type="checkbox"/> Managed by a hotel/resort management company <input type="checkbox"/> Rental pooling <input type="checkbox"/> Interior decorating or furnishing restrictions <input type="checkbox"/> Project is a common interest apartment or community apartment <input type="checkbox"/> Multi-dwelling Unit (more than one unit on deed and/or mortgage) <input type="checkbox"/> Timeshares <input type="checkbox"/> Owned or Operated as a Continuing Care Facility
3. Total number of units in the project.	_____
4. Total number of units sold and closed.	_____
5. Total number of units owned by the Developer. How many of the Developer owned units rented?	_____ _____
6. Largest number of units owned by a single person/entity. <b>(The lowest number would be at least 1.)</b>	_____
7. Is there any additional phasing or annexation?	_____ Yes _____ No
8. Are units owned fee simple (FS) or leasehold (LH)?	_____ FS _____ LH
9. Are all units, common areas, and amenities completed?	_____ Yes _____ No
10. Date Association turned over to unit owner control (Month/Year).	_____
11. Is the project subject to a recreational or land lease?	_____ Yes _____ No
12. Are the units subject to recurring transfer fees <b>paid to the developer</b> upon the sale of a unit?	_____ Yes _____ No
13. Does the project have a mandatory club membership (other than the HOA)? If yes, who owns the club? _____	_____ Yes _____ No
14. Is the association subject to any lawsuits or pre-litigation activity (e.g., mediation, arbitration, etc.)? If yes, provide the complaint(s) for the lawsuit(s) and/or details of the pre-litigation activity.	_____ Yes _____ No
15. Does the project contain commercial space? If yes, what percentage of the project is commercial? _____%	_____ Yes _____ No
16. Has the HOA or Developer retained any right of first refusal? If yes, are mortgagees excluded from this right of first refusal?	_____ Yes _____ No _____ Yes _____ No
17. Has the HOA obtained any loans to finance improvements or deferred maintenance?	_____ Yes _____ No

**SPECIAL ASSESSMENTS**

18. How many special assessments are ongoing or planned? \_\_\_\_\_

 What is the purpose of each special assessment? \_\_\_\_\_  
 \_\_\_\_\_

What is the total amount of each special assessment? \_\_\_\_\_

When does the special assessment begin and end? \_\_\_\_\_

Are the special assessments related to critical repairs? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

- If YES, have all repairs been completed? \_\_\_\_\_ Yes \_\_\_\_\_ No

- If NO, what repairs remain outstanding and what are the anticipated completion dates of each? \_\_\_\_\_

How many unit owners are more than 60 days delinquent in their special assessment? \_\_\_\_\_

**DEFERRED MAINTENANCE** — Answer questions to the best of your knowledge. FNMA & FHLMC require answers to these questions.

19. Does the association have any reports regarding deferred maintenance? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide copy of the report.

20. Have there been any inspections done within the past three years? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide copy of the inspection report.

21. Has the project failed to pass state or other jurisdictional inspections or certifications related to structural soundness, safety, or habitability? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

22. Is the project subject to evacuation orders? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

23. Does the project have material deficiencies that would result in critical elements or system failures within 1 year? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what elements are impacted? \_\_\_\_\_

24. Is there mold, water intrusion, or damaging leaks that have not been repaired? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain. \_\_\_\_\_

25. Is there any advanced physical deterioration? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what elements are impacted? \_\_\_\_\_

26. Are there any unfunded repairs costing more than \$10,000 per unit that should be repaired within the next 12 months? \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain. \_\_\_\_\_

**Acceptable sources include an officer of the condominium association or a qualified employee of the association's management company.**

Source of Information \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Website Address of Association \_\_\_\_\_