

## Limited Condominium Questionnaire

To be completed by the HOA's Management Company, Property Manager or a member of the HOA Board.

A mortgage loan is being processed on the subject property listed below. The following information is required to complete the process.

Your timely response is appreciated.

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General Project Information:		
Loan No.:	Borrower(s) Name:	
Legal Project Name (per Declaration or CC&R's):		
Phase Number:	HOA Tax Identification No. (TIN):	
HOA Name (per Articles of Incorporation):		
Master Association Name (if applicable):		
Project Street Address:		Project Unit #:
Project City:	State:	Zip Code:

Use this form when the following conditions are met:		
1. All units, common elements/amenities including Master Association, phases, and annexation/add-ons are 100% complete	Yes	No
2. 90% sold and closed	Yes	No
3. HOA control has been turned over to the unit owners	Yes	No
4. Terms of the loan meet the following parameters in the table below (state/occupancy/LTV)	Yes	No

All states with the	exception of Florida:	Condos in the s	state of Florida:
Occupancy Type	Max HTV, CLTV, and HCLTV	Occupancy Type	Max HTV, CLTV, and HCLTV
Primary Residence	90%	Primary Residence	75% / 90% / 90%
Second Home	75%	Second Home	70% / 75% / 75%
Investment Property	75%	Investment Property	70% / 75% / 75%

**Note:** An answer of "No" to any of the above requires a full agency review of the condo requiring either FNMA Form 1076, Freddie Mac form 476, or the ATM Full Condominium Questionnaire.

Project Unit Information		
Number of Units in Project:	Unit is:	Attached

Project Information		
<b>1.</b> Is the project a timeshare or condo hotel or is it managed or operated as a hotel, motel, or vacation resort, even though units are individually owned?	Yes	No
2. Are unit owners required to pay mandatory upfront and/or periodic membership fees for use of recreational amenities not owned by the Homeowners' Association? (i.e., owned by an outside party including developer/builder)	Yes	No
<b>3.</b> Are units subject to private transfer fees other than those paid directly to the Homeowners' Association or Property Manager? (Defined as a transfer fee paid to an identified third party such as developer or trustee upon each resale.)	Yes	No
4. If unit is taken over in foreclosure or deed-in-lieu, is the lien priority of those dues more than 6 months? *If Yes, what are the number of months?	Yes	No
<b>5.</b> Is more than 35% of the total square footage of the project used for non-residential purposes such as commercial spaces?	Yes	No
6. Does the project consist of live-work units or considered a live-work project?	Yes	No
*If Yes, is the project mostly residential in character and are the unit owners' operators of the business?	Yes	No
7. Are multi-dwelling units allowed? (Owner owns more than 1-unit secured by a single deed and single mortgage)	Yes	No

8. Is the project subject to zoning restrictions that may prohibit the project from being built to current density?	Yes	No
9. Does any single entity including but not limited to individual, investor group, partnership, corporation, or government housing authority own more than the following number of units in the project? (See below)  Projects with 5-20 units – Greater than 2 units: Number owned?  More than 20 units – Greater than 20% of total units: Number owned?	Yes	No
<b>10.</b> Is the Homeowners' Association currently involved in any litigation <i>other than</i> as the Plaintiff in a lawsuit against owners to collect unpaid common expense assessments, <i>or</i> as a "Necessary Defendant" in a mortgage foreclosure action against unit owners?	Yes	No
11. Does the project allow an owner to hold title to more than one unit, with ownership being evidenced by a single deed or mortgage?	Yes	No
<b>12.</b> Are more than 15% of the total number of units in the project 60 days or more past due in the payment of each special assessment?	Yes	No
13. Does the project consist of manufactured homes?	Yes	No
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Building Safety, Soundness, Structural Integrity, and Habitability		
1. Is the Homeowners' Association or Property Management aware of any deficiencies related to safety, soundness, structural integrity, and/or habitability of the project's building(s)?	Yes	No
If <b>Yes</b> , please explain and indicate if repairs are completed:		
If <b>Yes</b> , of these deficiencies, what repairs/replacements remain to be completed?		
If <b>Yes</b> , of these deficiencies, when will the repairs/replacements be completed?		
2. Is there currently a special assessment or is one planned?	Yes	No
If Yes, what are the terms of the special assessment (Dollars/Terms)?		
If <b>Yes</b> , what repairs or deferred maintenance are planned or required? Please indicate if repairs are needed or complete	ted.	
3. Are there any outside violations of jurisdictional requirements (zoning ordinances, codes, etc.)?		
If <b>Yes,</b> provide notice from the applicable jurisdictional entity.	Yes	No
4. Is it anticipated the project will, in the future, have such violation(s)?	Yes	No
If <b>Yes</b> , provide details of the applicable jurisdiction's requirement and the project's plan to remediate the violation.		
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5. Does the project have a funding plan for its deferred maintenance components/items to be repaired or replaced?  6. Does the project have a schedule for the deferred maintenance components/items to be repaired or replaced?	Yes	No
<b>6.</b> Does the project have a schedule for the deferred maintenance components/items to be repaired or replaced? If <b>Yes</b> , provide the schedule.	Yes	No
7. Has the HOA had a reserve study completed on the project within the past 3 years?	Yes	No
What is the total of current reserve account balance(s)?		

Note: Additional documents may be required based on answers to above questions.

Insurance Agency/Company Name:	
Agent Name or Contact Person:	
Agency Phone No.:	
Agent/Contact Email Address:	
The undersigned hereby certifies that to tland and accurate and accurate to the contract of th	he best of his/her knowledge, the information and statements contained in this form, te.
Certification / Signature	
Preparer's Printed Name:	
Preparer's Title:	
Preparer's Phone Number:	
Preparer's Email Address:	
Management Co. Name (if applicable):	
Property Manager's Name: (if different from preparer)	
Property Manager's Phone Number:	
Property Manager's Email Address:	
Date Completed:	
Preparer's Signature: (digital signatures accepted)	

**HOA Insurance Company / Agency – Contact Information**