

CONDOMINIUM HOA LIMITED REVIEW QUESTIONNAIRE

Borrower Name: _____

Project Legal Name: _____

Master Association (if applicable): _____

Project Address: _____

If answer to any question **1-5** is **Yes**, please stop and complete a FULL REVIEW QUESTIONNAIRE.

YES | NO

1. Is the project both new and are the units attached? ☐ | ☐
2. Does the project operate like a resort condominium, condotel, leasehold, live-work, or have a rental desk? ☐ | ☐
3. Is the HOA under control of the Developer? ☐ | ☐
4. Is the project subject to any additional phasing or add-ons? ☐ | ☐
5. Does any single entity, individual, or group: a) if project is 5-20 units, own more than two units; or b) if project is more than 20 units, own more than 20% of the total units? ☐ | ☐

If answer to any question **6 or 8** is **No**, or questions **9-11** are **Yes**, please stop and complete a FULL REVIEW QUESTIONNAIRE.

6. Are the units, common areas, and recreational facilities of the project 100% complete with no additional phases to be built? ☐ | ☐
7. Is the HOA clear of any pending litigation or arbitration? ☐ | ☐

YES | NO

8. Do unit owners, through HOA, have sole ownership interest in and full rights to use the project's facilities and common areas? ☐ | ☐
9. Is there any commercial space in the complex? ☐ | ☐
 - a. If **Yes**, is it greater than 25% of the complex? ☐ | ☐
10. Is the property a conversion? ☐ | ☐
 - a. If **Yes**, date of conversion: _____
11. Are there any special assessments? ☐ | ☐
 - a. If **Yes**, provide documents detailing use. _____
12. Are any unit owners more than 60 days delinquent on HOA Dues? ☐ | ☐

If **Yes**, how many? _____
13. HOA Tax Identification Number (TIN or EIN) (required): _____

Hazard Insurance (*required*): If policy shows Co-Insurance, an Agreed Amount Endorsement is required.

14. Please provide Hazard Insurance Declaration/Loss Payee page.

☐ Attached

☐ N/A

15. Please provide HO6 Declaration/Loss Payee page.

☐ Attached

☐ N/A

SOURCE OF INFORMATION: Acceptable sources of information include an officer of the condominium association or a qualified employee of the association's management company.

Source Name

Source Title

Source Signature

Date Completed

Source Email Address

Source Phone Number

Association Website Address: _____



Condominium Project Questionnaire Addendum

This Addendum is applicable to both condominium and cooperative projects. It must be completed by an authorized representative of the HOA/Cooperative Corporation.

Project Information

Project Name:

Project Address:

Building Safety, Soundness, Structural Integrity, and Habitability

1 When was the last building inspection by a licensed architect, licensed engineer, or any other building inspector?

2 Did the last inspection have any findings related to the safety, soundness, structural integrity, or habitability of the project's building(s)?

☐ YES ☐ NO

2a If **Yes**, have recommended repairs/replacements been completed?

☐ YES ☐ NO

If the repairs/replacements have not been completed:

2b What repairs/replacements remain to be completed?

2c When will the repairs/replacements be completed?

Provide a copy of the inspection and HOA or cooperative board meeting minutes to document findings and action plan.

3 Is the HOA/Cooperative Corporation aware of any deficiencies related to the safety, soundness, structural integrity, or habitability of the project's building(s)?

☐ YES ☐ NO

3a If **Yes**, what are the deficiencies?

3b Of these deficiencies, what repairs/replacements remain to be completed?

3c Of these deficiencies, when will the repairs/replacements be completed?

**Building Safety, Soundness, Structural Integrity, and Habitability**

- 4** Are there any outstanding violations of jurisdictional requirements (zoning ordinances, codes, etc.) related to the safety, soundness, structural integrity, or habitability of the project's building(s)? ☐ YES ☐ NO

If **Yes**, provide notice from the applicable jurisdictional entity.

- 5** Is it anticipated the project will, in the future, have such violation(s)? ☐ YES ☐ NO

If **Yes**, provide details of the applicable jurisdiction's requirement and the project's plan to remediate the violation.

- 6** Does the project have a funding plan for its deferred maintenance components/items to be repaired or replaced? ☐ YES ☐ NO

- 7** Does the project have a schedule for the deferred maintenance components/items to be repaired or replaced? ☐ YES ☐ NO

If **Yes**, provide the schedule.

- 8** Has the HOA/Cooperative Corporation had a reserve study completed on the project within the past 3 years? ☐ YES ☐ NO

- 9** What is the total of the current reserve account balance(s)? \$

- 10** Are there any current special assessments unit owners/cooperative shareholders are obligated to pay? If **Yes**: ☐ YES ☐ NO

- 10a** What is the total amount of the special assessment(s)? \$

- 10b** What are the terms of the special assessment(s)?

- 10c** What is the purpose of the special assessment(s)?

Building Safety, Soundness, Structural Integrity, and Habitability

11 Are there any planned special assessments that unit owners/cooperative shareholders will be obligated to pay? If **Yes**:

☐ YES ☐ NO

11a What will be the total amount of the special assessments?

\$

11b What will be the terms of the special assessments?

11c What will be the purpose of the special assessments?

12 Has the HOA obtained any loans to finance improvements or deferred maintenance?

☐ YES ☐ NO

12a Amount borrowed?

\$

12b Terms of repayment?

Additional Comments:

Contact Information

Name of Preparer:

Title of Preparer:

Preparer's Phone:

Preparer's Email:

Preparer's Company Name:

Preparer's Company Address:

Date Completed: