

## Condo/Co-Op Project Questionaire

Loan Number								
Applicant Name								
Unit Number								
Dear Association Representative: In order to offer a mortgage to your member, and also for future purchase association or management firm may respond. Completion of this form				_		-	-	
LEGAL NAME OF PROJECT								
Address								
City, State, Zip		State Zip Code						
County		Size (square feet)						
Year Built/Converted								
Number of Buildings		Number of Floors						
Number of Units		Total Size (Square feet)						
Number of Units Sold		Number of Units Conveyed						
Owner Occupied	:	Second Home Investor			or			
Unit's monthly HOA dues								
Number of 30 day delinquent units				Amount				
PROJECT INFORMATION								
1. Is the project completed, including any commercial space,	e, more tha	n 5 units and 90% of units are convey	yed to unit purc	hasers?		YES	○ NO	
2. Have the unit owners taken control of the HOA? (If still in t	the hands	of the HOA)	YES	○ NO	Turnover Date			
3. Does the project have a Fannie Mae PERS approval?						YES	○ NO	
4. Is the project a conversion of an existing building?			YES	Оио	Conversion Date			
5. Is the project subject to additional phasing						YES	○ NO	
6. Does any entity own more than 2 units?			YES	O NO	If yes, provide list.			
7. Does the project have commercial space > 25% of total area?						YES	○ NO	
Commercial Square Footage De	Describe co	mmercial space						
8. Is there a hotel at the same address or within the project?						YES	○ NO	
9. Does the project allow rentals less than 30 days or operation as a Condotel?						YES	○ NO	
10. Is there a reservation desk?			YES	○ NO	Maid Service?	YES	○ NO	
11. Is the project subject to any timesharing agreement?						YES	○ NO	
12. Title is held: Fee simple		or Leasehold			(If leasehold p	orovide cop	oy of lease)	
13. Are the units taxed individually?						YES	○ NO	
14. Are there any foreclosed units within the project?			YES	○ NO	If yes, number			
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<b>16.</b> Is the Condo project or HOA in	ivolved in any current or pending litigation?		YES	○ NO	
Description:					
Please describe the potential liabil	lity:				
17. Are there Judgments or Mechanics Liens filed against the project or HOA?					
18. If a unit is taken over by foreclosure, is the lender liable for more than six months of delinquent HOA dues?					
19. Are there any deed or resale re	estrictions?		O YES	○ NO	
If yes, please explain:					
20. If the project is located in New	York or New Jersey, are any of the units rent controlled or rent stabilized	zed units?	YES	○ NO	
If yes, how many units?	Who is the owner of the rent controlled units?				
What is the number of rent control	lled/rent stabilized units available for sale?				
21. Does the HOA maintain separate bank accounts for the working account and the reserve account each with appropriate access controls and in which funds are deposited sends copies of the monthly bank statements directly to the HOA?					
FINANCE					
22. Are there loans outstanding to	the project?		○ YES	O NO	
Lender:	Mortgage Balance:	Monthly Payment:			
23. Are there any current special b	pudget assessments?		○ YES	O NO	
Describe:					
24. Does the HOA maintain a sepa	arate reserve account for capital expenditures and maintenance?	O YES O NO Current Balance			
	management company, does the management company maintain sep nagement company does not have the authority to draw checks on, or		O YES	O NO	
26. Does the HOA require two me	embers of the Board of Director's to sign any checks written on the I	reserve account?	O YES	O NO	
INSURANCE					
<b>27.</b> Does the Association carry Far	nnie Mae compliant Flood Insurance?		○ YES	O NO	
28. Does the Association have Fid	lelity Bond Coverage?		O YES	O NO	
29. Does the Association have Ge	neral Liability Insurance?		O YES		
<b>30.</b> Does the Association have Ear	<u> </u>		() YES		
	% replacement coverage on the building?		O YES		
<b>32.</b> Is the deductible greater than			O YES		
33. Does the Association carry Um			O YES	O NO	
	y of the current year's operating budget and reserves for the A	ssociation and complete copy of the financia	-	_	
The second of th	,				
Name / Email / Telephone of insura	ance agency covering this project				
The project is managed by: Pro	fessional Agent / Unit Owners / Developer				
Company Name / Address / Main 7	Telephone				
I hereby certify that to the best o	f my knowledge the above is true and correct.				
		Telephone Number		Date	
	Contact Name/Title	Contact Email		Signature	

