

Legal Name of Project:	Tax ID:
Street Address:	City/State/Zip:
Condo Assoc. Name:	Contact Name/Title:
Street Address:	City/State/Zip:
Ph/Fax #:	Email Address:

Property Type

- ___ 1. Property is fee simple.
- ___ 2. Property is under a leasehold interest, **if yes:**
 - ___ Provide recorded lease & all amendments
- ___ 3. Is the project any of the following:
 - ___ Condominium Hotel
 - ___ Common Interest Apartment
 - ___ Timeshare, Fragmented/Segmented Ownership
 - ___ Houseboat
- ___ 4. Project has weekly rentals, housekeeping.
- ___ 5. Does HOA require any type of screening for potential tenants to reside in project?

Additional Comments:

Construction Type

- ___ 1. Existing, all legal phases & common areas, are completed for 12 months or greater.
- ___ 2. Has control of the HOA been transferred from developer/builder to the Unit Owners?
- ___ 3. Full Gut Conversion.
- ___ 4. NON-Gut Conversion, **if yes:**
 - ___ All rehabilitation work & repairs are complete
 - ___ Engineering/Architectural inspection evidencing rehabilitation completed & dated within 12 months
 - ___ Work/Repairs have been fully completed, **and**
 - ___ Certificate of Occupancy, or equivalent, has been issued
- ___ 5. New Construction (*Proposed Construction, Under Construction, or Existing Construction less than 1 year*), **if yes:**
 - ___ All units & common areas are fully completed, **and**
 - ___ Certificate of Occupancy has been issued for all units within the legal phase

Additional Comments:

Legal Restriction on Conveyance

- ___ 1. The project has affordable housing or rent restricted units.
- ___ 2. The project contains Live/Work units, **if yes:**
 - ___ Do the governing documents allow for Live/Work arrangements?
- ___ 3. The project is subject to Private Transfer Fees, **if yes:**
 - ___ Provide the Private Transfer Fee document(s)
- ___ 4. Common/Recreational areas are held in a recreational lease/easement, **if yes:**
 - ___ Provide recorded lease documents & all recorded amendments

Additional Comments:

Completion/Phasing/Financials

- 1. Entire project is 100% complete (**all units, common areas, and is not subject to additional phasing**).
- 2. Subject phase is 100% complete.

Subject Phase		Entire Project	
Phase Number		Total # of legal phases	
Total units in phase		Total # of units	
Total units completed		Total units completed	
Total units sold/conveyed		Total units sold/conveyed	
Total unit's owner occupied		Total unit's owner occupied	
Total unit's investment		Total unit's investment	

- 3. There are unit owners that own more than 1 unit in the project, **if yes**:
 Provide # of units owned by each owner (**i.e., owner 1 owns 2 units; owner 2 owns 6 units, etc.**)

Individual/Entity Name:	Developer/Builder:	# of Units:

- 4. Association maintains separate accounts for operating & reserve funds.
- 5. Association financial statements indicate a loss within the last 2 years, **if yes**:
 Provide explanation for the loss & how the funds were recovered

Explanation:

- 6. Project has experienced financial distress within the last 36 months.
- 7. Are any unit's 60+ days past due on HOA dues or Special Assessment payments? **if yes**:
 How many units are past due on HOA dues?
 How many units are past due on Special Assessment payments?
- 8. HOA restricts management company from drawing checks or transferring funds from reserve acct without board approval.
- 9. Management company maintains separate records & bank accounts for the Association.
- 10. A reserve study has been prepared within the last 36 months, **if yes**:
 Most Recent Date Prepared: _____
- 11. Project has special assessments currently or within the last 12 months, **if yes**:
 Explanation for the Special assessments

Explanation:

- Total amount of Special Assessment
- Amount due to HOA from Unit Owners (**if applicable**)
- Payment options offered to unit owners, **if yes**:

Payment Options:

- Confirmation all repairs are complete, **or**
- If all repairs are not complete, attach list of repairs pending completion & estimated completion date (per occur)
- 12. Project contains units for use as Commercial/Retail/Non-residential space, **if yes**:
 - a. Total sq. ft. of Condominium Project: _____
 - b. Total sq. ft. of Residential Space: _____
 - c. Total sq. ft. of Commercial/Non-Residential Space: _____
- 13. Is the HOA currently involved in any litigation other than for foreclosure or delinquent HOA dues? **if yes**:
 - Provide copy of filed complaint(s)
 - Provide signed & dated letter from HOA, and HOA's Management or Attorney, **that includes all of the following**:
 - Reason(s) for Litigation(s)
 - Anticipated Settlement/Judgement Date
 - HOA Insurance Agent has agreed to cover case & pay out any Settlement/Judgment
 - Litigation(s) impact on the HOA's financial well being

Additional Comments: _____

Insurance

- _____ 1. HOA maintains current Liability Insurance policy for entire Project, **if yes**:
 - _____ Includes all common areas, common elements, public ways, and all other areas that are under its supervision
 - _____ Coverage in the amount of at least \$1 million per each occurrence
- _____ 2. HOA maintains current Fidelity Insurance policy, **if yes**:
 - _____ Fidelity policy which covers **all** of the following:
 - _____ Officers
 - _____ Directors
 - _____ Employees of the HOA, **and**
 - _____ All other person's handling/responsible for funds administered by the HOA (**incl. Management company**)
- _____ 3. HOA maintains current Master or Blanket Hazard Insurance policy, **if yes**:
 - _____ Policy coverage for an amount equal to at least 100% replacement cost of the entire Project
 - _____ Policy coverage for an amount equal to at least 100% replacement cost of all Individual Units
 - _____ Policy includes individual interior Unit coverage & will cover the replacement of interior improvements, **or**
 - _____ Unit owners are responsible to obtain Walls-In policy covering the same requirements
- _____ 4. Are Units or Common Elements located in a Special Flood Hazard Area (SFHA)? **if yes**:
 - _____ HOA maintains current Master or Blanket Flood Insurance policy, **if yes**:
 - _____ Flood Insurance currently in place equals (**select only one option below**)
 - _____ 100% replacement cost;
 - _____ Maximum coverage per Unit available under the NFIP; **or**
 - _____ Another amount (enter amount here): _____

Additional Comments:

Contracts

- _____ 1. There are existing contracts entered into by builder prior to transferring of control
- _____ 2. The existing contracts require no more than 90 days' notice to terminate (**not related to builder**)

Additional Comments:

I hereby certify the information represented above is true and accurate to the best of my knowledge, and has not been completed by any interested party to the transaction.

Signature of HOA/Management Co. Representative	Date Completed	Print Name
Title	Phone Number	Email Address
Name of Management Company	Address	Phone Number