## UNIFORM CONDOMINIUM QUESTIONNAIRE

Project Name:	Date:
Address:	
City:	
GEI	NERAL INFORMATION
1. The legal name of this project is:	
It is a ( ) Condominium, or ( ) a Planned Unit	-
	version of an existing building, please provide the following:
	Type of original use:
3. The project ( ) is ( ) is not a legally phased pr	oject. The project consists of units in legal phases.
4. Describe the unit sales. For a fully constructed pr	roject that has been sold out, complete the below information.
UNIT SALES	UNIT TYPES
Total number of units in project	Single-Family Detached
Total number of units conveyed to purchases	
show breakdown below:	Garden No. of stories
Total no. principal residence units conveyed	
Total no. second home units conveyed	
Total no. investor -owned units conveyed	
Total no. units retained by developer/converter	
5 Does any investor own more than one unit $( )$	YES () NO. If YES, identify the investor, (the same individual,
-	icates the total number of units owned by each such investor in the
project	eaces the total number of anns owned by each such investor in the
6. Does any investor own more than ten percent of t	he total units in the project? ( ) YES ( ) NO
	master association) include: ( ) Pool # ( ) Clubhouse # ( )
Tennis Court # ( ) Playground #	
	ded all amenities and common areas such as pool, tennis courts, roads, walkway
parking areas, landscaping, clubhouse, and renovation	
	is Phases have been completed. Describe the incomplete items:
	I hases have been completed. Describe the meomplete rems.
9. Can the project be expanded beyond its current si	ze? ( ) YES ( ) NO
10. Is the Owners' Association currently a party in a	any type of litigation or public administrative action (including any violations of
any environment or public health statutes and laws of	or current environmental or public health litigation or administrative action)?
( ) YES ( ) NO. If YES, describe the nature	e of the litigation or public action and attach any information
	ny violation of any government or land-use regulations (such as zoning
	YES ( ) NO. If YES, describe the nature of the violation and attach
any information.	
	e Leasehold. If Leasehold, please provide a copy of the lease.
	y common area leases? ( ) YES ( ) NO. If YES, please provide a copy
of the lease.	

14. Does the unit owner own the lot or land below the unit or an undivided interest in common land?
( ) lot ( ) undivided interest.
15. Do the unit owners have sole ownership interest in and the right to the use of the project facilities ( ) YES ( ) NO.
If NO, please explain:
16. Does the developer retain ownership interest in any of the facilities or common area? ( ) YES ( ) NO. If YES, please
explain:
17. Do the project documents allow the units to be leased or rented for less than a 30-day period? ( ) YES ( ) NO.
18. Are there any other restrictions relating to the term of any lease or rental agreement? ( ) YES ( ) NO. If YES, describe
restrictions:
19. Has voting control of the Board of Directors been turned over from the builder and/or developer?
( ) YES, control was turned over in (Month/Year).
( ) NO, the anticipated date for the transfer of control is (Month/Year).
20. The Owners' Association fiscal year is from to (Month/Year).
21. How many budget cycles have been controlled by the unit owners as a majority (as opposed to the developer)?
( ) NONE ( ) ONE ( ) TWO ( ) MORE THAN TWO
22. The unit assessment/common charges for all units are:
( ) The same, the assessment is \$ per month.
( ) Not the same, the assessments range from \$ to \$ per month.
23. Do the unit assessments include any charges for unit utilities? ( )YES ( )NO. If YES, please indicate which
utilities:
24. As of the start of the current fiscal year, how many are delinquent more than thirty (30) days in their unit assessment charges?
# Total amount of outstanding delinquent charges is \$
25. Are there any special assessments now approved, or have there been any in the past two years? ( ) YES ( ) NO. If YES,
describe the nature / purpose, the total amount, and the per unit charge. Nature / Purpose of assessment:
Total amount of assessment: \$ Per unit charge: \$
26. Indicate if the project is ( ) Self-Managed, or ( ) Managed by a management firm.
27. If a management firm manages the project, is it related to the developer? ( ) YES ( ) NO. If YES, describe the nature of
the relationship:
Name:    Company Name:
Address:      Telephone #:
28. If an Owners' Association employee manages the project, supply the following contact information:
Name:Title:
Mailing Address:
CERTIFICATION
I, the undersigned, certify that to the best of my knowledge and belief, the information and statements contained on this

Signature of Association Representative or Preparer	Date	Telephone Number
Name of Association Representative or Preparer		Title