

Limited Review Questionnaire & Certification

Project Information	
Project Legal Name:	
Project Physical Address:	
HOA Management Name (if different than Project Legal Name):	
HOA Management Address:	
Name of Master or Umbrella Association (if applicable):	

Pro	ject Characteristics	Yes	No
1	Have 90% or more of the units been conveyed (i.e. sold and closed) to unit purchasers?		
2	Is the project 100% complete, including all construction or renovation of units, common elements, and shared amenities for all project phases?		
3	Is the project subject to additional phasing or annexation?		
4	Has the developer transferred control of the HOA to the unit owners?		
5	Total number of units		
6	Total number of units sold		

Pro	ject Questionnaire	Yes	No
1	Does the project require mandatory upfront or periodic membership fees (including recreational leases) for the use of recreational amenities, such as country club facilities and golf courses, owned by an outside party (including the developer or builder)?		
2	Is the project managed and operated as a hotel or motel or otherwise provide hotel/motel/resort activities?		
3	Does the project contain mandatory or voluntary rental-pooling arrangements, any covenants, conditions or restrictions that split ownership of the property or otherwise restrict the unit owner's ability to occupy the unit (e.g. timeshare, fractional, or segmented ownership)?		
4	Is the project comprised of property that is not Real Estate, such as a houseboat project?		
5	Is the project owned or operated in whole or in part as a continuing care facility?		
6	Does the project contain non-incidental business operations owned or operated by the HOA including, but not limited to, a restaurant, spa, or health club? • If yes, what percentage of the HOA's budgeted income is being received from		%
	the non-incidental business arrangement Is the project a live/work project (i.e. permits unit owners to operate and run a small business from their unit)?		
7	 If yes, does the project comply with local zoning, program, or statutory requirements for live-work projects and is the nature of the project primarily residential? 		

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		•
developer named as a party to active or pending litigation		
de documentation regarding the litigation/pre-litigation		
or HOA. Also please provide the attorney's name and		
n.		
ne individual, investor group, partnership, or corporation)		
otal number of units in the project?		
0 units = 2 units?		
nits = 20%?		
esidential or commercial space representative of > 35% of		
ner to hold title (or stock ownership and the		
s) to more than one dwelling unit, with ownership of all of		
res) evidenced by a single deed and financed by a single		
a unit due to foreclosure or a deed-in-lieu of foreclosure, is		
paying delinquent common expense assessments?		
ny months is the mortgage responsible for paying the		m o c
assessment?		_mos
t applicable for the following states:		
GA, HI, ID, IL, IN, IA, KS, MD, MA, MI, MT, NH, NJ, NY, NC, C, SD, TN, UT, WI, WY		_NA
ural Integrity, and Habitability	Yes	No
have any findings related to the safety, soundness,		
ility of the project's building(s)?		
mended repairs/replacements been completed?		
acements have not been completed, what		
nts remain to be completed?		
nts remain to be completed.		
. /		
airs/replacements be completed? Provide a copy of the		
A board meeting minutes to document findings and action		
encies related to the safety, soundness, structural		
project's building(s)?		
e deficiencies?		
e deficiencies?		
e deficiencies? es, what repairs/replacements remain to be completed?		
		ies, when will the repairs/replacements be completed?

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15	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)? If yes, provide notice from the applicable jurisdictional entity. Is it anticipated the project will, in the future, have such violations(s)? If yes, provide	
16	details of the applicable jurisdiction's requirement and the project's plan to remediate the violation.	
17	Does the project have a funding plan for its deferred maintenance components/items to be repaired or replaced?	
18	Does the project have a schedule for the deferred maintenance/components/items to be repaired or replaced? If yes, provide the schedule.	
19	Has the HOA had a reserve study completed on the project within the past 3 years?	
20	Is the total of the current reserve account balance(s) \geq 10% of the HOA's total budgeted assessment income?	
21	Are there any current or planned special assessments unit owners are obligated to pay? If Yes: What is the total amount of the special assessment(s)? What are the terms of the special assessment(s)? What is the purpose of the special assessment?	
22	Has the HOA obtained any loans to finance improvements or deferred maintenance? Amount borrowed? Terms of repayment?	

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Contact Information Name of Preparer Title of Preparer HOA/Management Company Name HOA/Management Company Address Phone Email Date Completed Lender Authorized Signature Underwriter Certification I certify that the condominium project qualifies for Full Review and meets applicable underwriting eligibility requirements. Date Completed Signature HOA Notes
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