

PROJECT LEGAL NAME: _____

CITY AND STATE: _____

Total # of Units	# of Units conveyed	# of Developer owned	# of Owner Occupied	# of Second Homes	# of Investors

1. Are there short-term rentals? _____ Yes _____ No If yes, what is the minimum rental period? _____
 2. Does the project have any of the items listed below? Please mark all which apply. _____ Yes _____ No

- | | |
|---|---|
| <input type="checkbox"/> Hotel Services
<input type="checkbox"/> Licensed as a hotel, motel, resort or hospitality entity
<input type="checkbox"/> Rentals handled through the management company
<input type="checkbox"/> Occupancy limits or blackout dates
<input type="checkbox"/> Project is listed as an investment security with the SEC
<input type="checkbox"/> Project contains non-incidental business operations (restaurant, spa, etc.)
<input type="checkbox"/> Legal documents require owners to share profits from rentals of units with HOA, Management Co. or resort/Hotel rental company | <input type="checkbox"/> Hotel or Resort ratings through hotel booking websites or agencies
<input type="checkbox"/> Managed by a hotel/resort management company
<input type="checkbox"/> Rental pooling
<input type="checkbox"/> Interior decorating or furnishing restrictions
<input type="checkbox"/> Project is a common interest apartment or community apartment
<input type="checkbox"/> Multi-dwelling Unit (more than one unit on deed and/or mortgage) |
|---|---|

3. Largest number of units owned by a single person/entity. (The lowest number would be at least 1.) _____

4. No. of units over 60 days delinquent and dollar amount of delinquency. _____ / \$ _____

5. Is there any additional phasing or annexation? _____ Yes _____ No

6. Are units owned fee simple (FS) or leasehold (LH)? _____ FS _____ LH

7. Are all units, common areas, and amenities completed? _____ Yes _____ No

8. Date Association turned over to unit owner control (Month/Year). _____

9. Is the project a conversion? _____ Yes _____ No
 If yes, is the project a gut rehab with renovation of property down to the shell replacement of all HVAC & electrical components? _____ Yes _____ No Year converted _____

10. Does the project contain any low or moderate-income housing units (aka inclusionary zoning)? _____ Yes _____ No
 If yes, is the subject unit designated as a low to moderate income unit? _____ Yes _____ No

11. Is the project subject to a recreational lease? _____ Yes _____ No

12. Are the units subject to recurring transfer fees paid to the developer upon the sale of a unit? _____ Yes _____ No

13. Does the project have a mandatory club membership? _____ Yes _____ No
 If yes, who owns the club? _____

14. Is the association subject to any lawsuits or pre-litigation activity (e.g. mediation, arbitration, etc.)? _____ Yes _____ No
 If yes, provide the complaint(s) for the lawsuit(s) and/or details of the pre-litigation activity. _____

15. Does the project contain commercial space? _____ Yes _____ No
 If yes, what percentage of the project is commercial? _____

16. Has the HOA or Developer retained any right of first refusal? _____ Yes _____ No
 If yes, are mortgagees excluded from this right of first refusal? _____ Yes _____ No

17. If a unit is foreclosed or taken back by deed in lieu of foreclosure, is the mortgagee (lender) responsible for HOA dues? _____ Yes _____ No
 If yes, for how long? _____ 0-6 months _____ 7-12 months _____ More than a year

18. Is the project located in a Master Association? _____ Yes _____ No

19. Is the project subject to an action that would cause the project to cease to exist? _____ Yes _____ No
 (Including termination, deconversion, or dissolution of the project's legal structure)

20. Is the project subject to a voluntary, or involuntary, bankruptcy, insolvency, liquidation or any substantially similar action under state or federal law? _____ Yes _____ No

Financial Information:

21. Does the HOA or management co. maintain separate accounts for operating & reserve funds? Yes No
22. Are the monthly account statements being sent directly to the HOA? Yes No
23. Does the management company have the authority to draw checks against or transfer funds from the reserve account? Yes No
24. Are 2 or more members of Board of Directors required to sign checks from the reserve account? Yes No
25. What is the balance in the segregated reserve account? _____
26. What are the current monthly HOA dues? _____

Special Assessments:

27. How many Special Assessments are ongoing or planned? _____
28. What is the purpose of each Special Assessment?
- _____
- _____
- _____
- _____
29. What is the total amount of each special assessment? _____
30. When does the special assessment begin and end? _____
31. If the special assessment(s) are related to critical repairs, have all repairs been completed? Yes No
32. How many unit owners are more than 60 days delinquent in their special assessment? _____

DEFERRED MAINTENANCE

31. Does the association have any reports regarding deferred maintenance? If yes, please provide copy of the report.	_____ Yes	_____ No
32. Have there been any inspections done within the past three years? If yes, please provide copy of the inspection report.	_____ Yes	_____ No
33. Has the project failed to pass state or other jurisdictional inspections or certifications related to structural soundness, safety, or habitability?	_____ Yes	_____ No
34. Is the project subject to evacuation orders?	_____ Yes	_____ No
35. Does the project have material deficiencies that would result in critical elements or system failures within 1 year? If yes, what elements are impacted?	_____ Yes	_____ No
36. Is there mold, water intrusion, or damaging leaks that have not been repaired? If yes, please explain.	_____ Yes	_____ No
37. Is there any advanced physical deterioration? If yes, what elements are impacted?	_____ Yes	_____ No
38. Are there any unfunded repairs costing more than \$10,000 per unit that should be repaired within the next 12 months? If yes, please explain.	_____ Yes	_____ No

Acceptable sources include an officer of the condominium association or a qualified employee of the association’s management company.

Source of Information

Signature

Title

Date

Phone Number

Email Address

Website Address of Association

