

Conventional Homeowners' Association Questionnaire Limited Review

Project Name: _____	
Project Master Association Name: _____	
Property Street Address: _____	
City: _____	State: _____
1. Total # of legal phases is project _____	Subject Property located in legal phase #: _____
Total # of units in project _____	Total # of units in subject legal phase (if greater than two phases complete the phasing addendum at the end of this document) _____
2. # of units sold and conveyed in project _____	# of units sold and conveyed in subject phase _____
3. Are all units, common elements and amenities complete in subject project?	Yes No
Are all units, common elements and amenities completed in subject legal phase?	Yes No
If No, What is incomplete?	
Number of units complete:	# _____
What common elements & amenities are incomplete?	
4. Is the project subject to any additional phasing or additions?	Yes No
5. Has the homeowners' association been turned over to the unit owners?	Yes No
If Yes, provide date control of Homeowners' Association turned over to unit owners	_____
6. Does any investor own more than 10% of the total project?	Yes No
7. Are there any monthly assessments delinquent more than 30 days?	Yes No
	If Yes: \$ # _____
8. The amount currently held in the reserve for future repair and/or replacement of major components of project (If over 20 units in project)	\$ _____
9. Is fidelity insurance in place covering the maximum amount of funds that will be in the custody of the owners association or Management Company at any time? (Required if project is 20 units or more)	Yes No
10. Is any part of the project used for commercial purposes?	Yes No
If Yes, what percentage of square footage is used for commercial purposes?	/ # _____
11. Is there any pending litigation involving the homeowners' association?	Yes No
If Yes, provide details and documentation of the circumstances surrounding litigation:	
12. The project was created and exists in full compliance with applicable laws and regulations including all State law requirements in the jurisdiction where the project is located	Yes No
13. Are day, night or short-term rentals permitted?	Yes No
14. Does project have on-site registration or check-in desk?	Yes No
15. Does project have on-site housekeeping/maid service?	Yes No
16. Does project have a phone system?	Yes No
17. Does project have room service?	Yes No
I, the undersigned, certify that to the best of my knowledge and belief the information and statements contained on this form and the attachments are true and correct.	
_____ Signature of Association Representative or Preparer	_____ Name and Title of Association Representative or Preparer
_____ Representative or Preparer's Company Name	_____ Address
_____ Date of Completion	_____ Telephone Number