



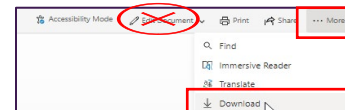
Last Reviewed: 06/10/2024



# FULL CONDO PROJECT QUESTIONNAIRE

## DIRECTIONS FOR UHM PARTNER USE:

1. A new copy of this checklist must be downloaded for **each individual use**.
2. Open the document, select "**More**," then "**Download**" (image to the right).
3. **DO NOT** use the "Edit This Document" feature in PartnerNet.



## PLEASE COMPLETE ALL QUESTIONS BELOW:

Project Name:	HOA Name:
Subject Address:	HOA Tax ID#:

1. Complete the following table. "Units for Sale" applies to units currently owned by the developer.

	Entire Project	Subject Phase
A.) Total # of Units		
B.) # of Units for Sale		
C.) # of Units Sold and Closed		
D.) # Owner Occupied Units		
E.) # Second Home Units		
F.) # Investors-Owned Units		
G.) # Developer-Owned Units		
H.) # HOA-Owned Units		

**\*Rows D-H above must equal the total number of units (Row A).**

2. Is the project 100% complete, including construction or renovation of units, common elements, and shared amenities for all project phases? Yes ☐ No ☐
3. Has the developer transferred control of the HOA to the unit owners? Yes ☐ No ☐
  - a. If yes, date transferred \_\_\_\_\_ If no, estimated date of transfer will occur \_\_\_\_\_
  - b. Monthly HOA dues range from \$ \_\_\_\_\_ to \$ \_\_\_\_\_
4. Is the project a conversion? Yes ☐ No ☐
  - a. If yes, what year was the conversion? \_\_\_\_\_
  - b. If yes, was it a full gut conversion (down to the studs)? Yes ☐ No ☐
5. What is the maximum number of units owned by a single entity? \_\_\_\_\_
  - a. If a single entity owns more than 20% of units, supply the following information:
    - i. Is the entity current on HOA dues? Yes ☐ No ☐
    - ii. If yes, is the subject unit one of the units owned by a single entity? Yes ☐ No ☐
6. Is the HOA involved in any active or pending litigation? Yes ☐ No ☐
  - a. If yes, is the litigation relating to matters other than collection of outstanding HOA dues? Yes ☐ No ☐
    - i. If yes, for all other matters, please supply a filed complaint with narrative detailing the current status of the suit.
7. How many units are 60+ days delinquent on HOA dues? \_\_\_\_\_
  - a. Is the subject unit one of the delinquent units? Yes ☐ No ☐
8. Are there any adverse environmental factors affecting the project as a whole? Yes ☐ No ☐
  - a. If yes, please explain \_\_\_\_\_
9. Are there any restrictions on transferability of title that affect future sales (i.e., age restriction, right of first refusal, low/moderate income units)? Yes ☐ No ☐
  - a. What restrictions apply? \_\_\_\_\_
  - b. If yes, is the subject unit impacted? Yes ☐ No ☐
10. For how many months is the lender liable for delinquent assessments in the event of foreclosure or deed-in-lieu of foreclosure?
   
☐ 0-6 Months ☐ 7-12 months ☐ 12+ months



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	Yes	No
11. Is the project on leased land? If yes, please provide the leasehold agreement.	<input type="checkbox"/>	<input type="checkbox"/>
12. Does the HOA require payment of mandatory upfront and/or periodic membership fees to a third party?	<input type="checkbox"/>	<input type="checkbox"/>
13. Does the project have any hotel/motel/resort activities, mandatory or voluntary rental-pooling arrangements, or other restrictions on the unit owner's ability to occupy their unit?	<input type="checkbox"/>	<input type="checkbox"/>
14. Is the project subject to a master association?	<input type="checkbox"/>	<input type="checkbox"/>
15. Do the unit owners have sole ownership interest and the right to use the project's amenities, facilities, and common areas?	<input type="checkbox"/>	<input type="checkbox"/>
16. Does the project contain Multi-Dwelling Unit Condos?	<input type="checkbox"/>	<input type="checkbox"/>
17. Does the project operate as a Continuing Care Community or Facility?	<input type="checkbox"/>	<input type="checkbox"/>
18. Is the project located on a contiguous parcel of land?	<input type="checkbox"/>	<input type="checkbox"/>
19. Do legals allow for live/work units?	<input type="checkbox"/>	<input type="checkbox"/>
a. If yes, is the live/work unit primarily residential?	<input type="checkbox"/>	<input type="checkbox"/>

20. Is any part of the project used for commercial/non-residential purposes? Yes ☐ No ☐

a. If yes, list the percentage and nature of the commercial space:

\_\_\_\_\_

21. Is the HOA professionally managed? Yes ☐ No ☐

a. If yes, Managing Agent Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

22. Supply the project's insurance agent name and phone number:

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

**FOR PROJECTS CONSISTING OF 21 OR MORE UNITS, ALL QUESTIONS BELOW MUST BE ANSWERED:**

23. What is the balance of the reserve fund? (A current balance sheet can be supplied) \$ \_\_\_\_\_

	Yes	No
24. Does the bank send copies of monthly bank statements directly to the HOA AND the HOA maintain separate accounts for the operating and reserve fund?	<input type="checkbox"/>	<input type="checkbox"/>
25. Does the management company maintain separate records and bank accounts for each HOA that uses its service AND the management company does not have authority to draw checks on, or transfer funds from, the HOA's reserve account?	<input type="checkbox"/>	<input type="checkbox"/>
26. Are two HOA board members required to sign any check written on the reserve account?	<input type="checkbox"/>	<input type="checkbox"/>

**Certification**

This form was completed by the undersigned representative of the HOA to the best of his/her knowledge as of the date printed below:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Company Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

HOA Website: \_\_\_\_\_



Last Reviewed: 06/10/2024



## CONDOMINIUM PROJECT QUESTIONNAIRE ADDENDUM

This addendum must be completed by an authorized representative of the HOA.

### PROJECT INFORMATION

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

### BUILDING SAFETY, SOUNDNESS, STRUCTURAL INTEGRITY, AND HABITABILITY

The questions below are NOT requesting HOA/Management Company to provide an independent evaluation of structural safety/soundness. Responses should be based on current knowledge of the project.

If answers are not provided to the questions below, please provide the most recent 6 months of meeting minutes or Reserve Study completed within the last 36 months.

1. Please provide the date (month/year) of the last Building inspection (not inspection of a single unit for sale) that was completed by a licensed architect, licensed engineer, or any other building inspector. \_\_\_\_\_

**A COPY OF ANY BUILDING INSPECTION REPORTS COMPLETED WITHIN THE LAST 3 YEARS IS REQUIRED.**

2. Does the project have any critical repairs or replacements that significantly impact the safety, soundness, structural integrity, or habitability of the project's building, or the financial viability or marketability of the project? Yes ☐ No ☐
  - a. If yes, have recommended repairs/replacements been completed? Yes ☐ No ☐
3. Does the project have material deficiencies which, if left uncorrected, have the potential to result in or contribute to critical element or system failure within one year? Yes ☐ No ☐
4. Has the project failed to pass state county or jurisdictional mandatory inspections or certifications specific to structural safety, soundness, or habitability Yes ☐ No ☐
  - a. If yes, provide notice from the applicable jurisdictional entity.
5. Does the project contain any mold, water intrusion, or potentially damaging leaks? Yes ☐ No ☐
6. Does the project contain any advanced physical deterioration? Yes ☐ No ☐
7. Are there any unfunded repairs? (Unfunded is defined as the HOA does not currently have the funds in place either with a loan or a special assessment.) Yes ☐ No ☐
  - a. If yes, what is the total cost of the unfunded repairs? \$ \_\_\_\_\_
8. Is the project subject to a partial or total evacuation order due to unsafe conditions that have not been remediated Yes ☐ No ☐
9. Has the HOA had a reserve study completed on the project within the past 3 years? Yes ☐ No ☐
10. Are there any current special assessments unit owners are obligated to pay? Yes ☐ No ☐
  - a. If yes,
    - i. What is the total amount of the special assessment(s)? \$ \_\_\_\_\_
    - ii. Are the per unit payment terms of the special assessment Monthly ☐, or Quarterly ☐, or Annually ☐
    - iii. What is the purpose of the special assessments? \_\_\_\_\_
    - iv. If for critical repairs, are the repairs complete? Yes ☐ No ☐
    - v. How many units (if any) are 60+ days past due in special assessment payments? \_\_\_\_\_
    - vi. What is the special assessment balance for the subject unit? \_\_\_\_\_
      - Is it transferrable with the title? Yes ☐ No ☐



Last Reviewed: 06/10/2024

11. Are there any planned special assessments within the next 12 months? Yes ☐ No ☐

a. If yes,

i. What is the total amount of the planned special assessment(s)? \$ \_\_\_\_\_

ii. What Are the per unit payment terms of the special assessment Monthly ☐, or Quarterly ☐, or Annually ☐

iii. What is the purpose of the special assessments? \_\_\_\_\_

iv. If for critical repairs, are the repairs complete? Yes ☐ No ☐

12. Has the HOA obtained any loans to finance improvements or deferred maintenance? Yes ☐ No ☐

a. Please specify the repair/improvement items the loan was secured for

\_\_\_\_\_

b. Are any residents expected to be displaced as a result of the repair/improvement item? Yes ☐ No ☐

\_\_\_\_\_

c. What is the amount borrowed? \$ \_\_\_\_\_

d. What are the terms of repayment?

\_\_\_\_\_

e. Have the repairs been completed and remediated the problem? \_\_\_\_\_

**Additional Comments:**

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**Contact Information:**

Name of Preparer: \_\_\_\_\_

Title of Preparer: \_\_\_\_\_

Preparer's Phone: \_\_\_\_\_

Preparer's Email Address: \_\_\_\_\_

Preparer's Company Name: \_\_\_\_\_

Preparer's Company Address: \_\_\_\_\_

Date Completed: \_\_\_\_\_