

Limited Review Questionnaire & Certification

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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): ____

Project 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?		

Project Questionnaire			No
1	Is the project managed and operated as a hotel or motel or 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)?		
2	Is the project owned or operated in whole or in part as a continuing care facility?		
_	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?		
3	If yes, what percentage of the HOA's budgeted income is being received from the non- incidental business arrangement		%
	Is the HOA, project sponsor or developer named as a party to active or pending litigation?		
4	 If yes, please provide documentation regarding the litigation from the attorney or HOA. Also please provide the attorney's name and contact information. 		
5	Does the project permit an owner to hold title (or stock ownership and the accompanying occupancy rights) to more than one dwelling unit, with ownership of all of his or her owned units (or shares) evidenced by a single deed and financed by a single mortgage (or share loan)?		
6	Is the lender liable for owing more than six months of the unit's unpaid HOA dues that accrued prior to acquisition of the title to the unit (pursuant to the remedies in the mortgage or through foreclosure) by the lender?		
	If more than six months, for how many months is the mortgagee responsible for paying the common expense assessments?		_mos
	 This question is not applicable for the following states: AR, CA DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, MD, MA, MI, MT, NH, NJ, NY, NC, ND, OH, OK, OR, SC, SD, TN, UT, WI, WY 		_NA
Ans	wer to questions 7, 8, 9 and 10 not required if information can be obtained on the appraisal.		
7	 Does any single entity (the same individual, investor group, partnership, or corporation) own more than the following total number of units in the project? Project with 5 to 20 units = 2 units? Project with 21+ units = 20%? 		
8	Does the project contain nonresidential or commercial space that is > 35% of the total project space (or >		
9	9 Total number of units		
10	0 Total number of units sold		

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 Limited/Streamlined Review and meets applicable underwriting eligibility requirements.

Date Completed	
Signature	