



HOA Condo Certification Questionnaire

Project name: _____
 Address: _____
 Subject Unit # / Subject Phase: _____ / _____
 City, State: _____

1. DESCRIBE THE UNIT SALES

A. Established projects (100% complete / HOA turned over to unit owner's for at least one year)

- _____ Total no. Units in project
- _____ Total no. Units conveyed to purchasers, show breakdown
- _____ Total no. Units primary residences
- _____ Total no. Units second homes
- _____ Total no. Units rented/investor/off-site mailings

B. NEW Construction projects (incomplete and/or Builder/Developer in control) – Presale Information

| Phase / Bldg. | Date Marketing Began | # of Units | # Sold & Under Contract | Proposed Occupancy (Include Sold and Under Contract) | | |
|---------------|----------------------|------------|-------------------------|---|------------|---------------------|
| | | | | # Owner-Occupied | # 2nd Home | # Rental / Investor |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Totals | | | | | | |

2. Does any one entity (same individual, investor group, partnership, or corporation) own more than one unit? ()Yes ()No

If yes, identify entity and indicate number of units and percentage owned.

Entity _____ # Units _____ Percentage _____

Entity _____ # Units _____ Percentage _____

3. Are all units, common areas and amenities, including those that are part of a master association, substantially complete?

()Yes ()No

4. Is the project subject to additional phasing? ()Yes ()No

5. Is project a conversion of an existing building? ()Yes ()No If yes, please indicate conversion date: _____ / _____ / _____

6. Has control of the owners association been turned over to the unit purchasers? ()Yes ()No

Date turned over to owners: _____

7. How is title to the units held? ___ Fee simple ___ Leasehold (If leasehold, please provide a copy of lease.)
8. Are there any leased recreational facilities or any common area leases? () Yes () No. (If yes, please provide a copy of the lease.)
9. Is any space within the project designated for commercial/non-residential use? () Yes () No

If yes, how many commercial units are there? _____ What is the percentage of the total square footage %

What type of commercial space? _____

10. Are there any adverse environmental factors affecting the project as a whole or as individual units? () Yes () No.

11. Do the project documents allow short-term rentals (less than 30 days)? () Yes () No

If yes, are hotel like services included in the monthly HOA fee assessment? () Yes () No

Is there on-site rental management or a registration desk? () Yes () No

Is there evidence of project marketed as a hotel-type facility? () Yes () No

12. Is there a mandatory or voluntary rental pool or revenue sharing? () Yes () No

13. Is the HOA required to maintain hazard, and if applicable flood, insurance? () Yes () No

If yes, does the current budget contain an adequate line item assessment to pay next due premiums? () Yes () No

14. The total amount of the most recent annual budget is \$ _____.

The total income received from commercial sources is \$ _____, which is _____% of budget.

15. The amount of reserve funds budgeted for replacement reserves is \$ _____ which is _____% of budget.

16. The number of owners currently delinquent more than 30 days in their unit assessments _____, which is _____%.

Total amount of delinquent charges \$ _____

17. Is the HOA involved in any lawsuits or pending litigation? () Yes () No

If yes, provide information regarding litigation, from attorney or HOA, as a separate attachment

18. If this is personal injury litigation, will liability insurance cover any potential liability? () Yes () No

Certification

| | |
|---|-------|
| <small>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.</small> | |
| Signature of Association Representative or Preparer: | Date: |
| Printed Name and Title of Association Representative or Preparer: | |
| Preparer's Company Name: | |
| Preparer's Company Address: | |