

Condominium Project Questionnaire

Fairway Loan #: _____ Borrower(s): _____
 Unit Property Address: _____
 Subject Unit #: _____ Project Name: _____
 # of Phases in Project: _____ Subject Phase #: _____

1. Total # of units in the project: _____ Out of Units **Sold** in the Project, How Many Are:
 Total # of units in the subject phase: _____ Primary Residence: _____
 Total # of units **sold** in subject phase: _____ 2nd Home: _____
 Total # of units **sold** in the project: _____ Investments (Occupied by Tenants) _____

2. The project, **or** subject property's legal phase, is fully constructed, and any recreation facilities and common areas have been fully completed (including those which may be part of an umbrella or master association): YES: _____ NO: _____

3. Unit Owners have been in control of the Condominium HOA since: (M/D/Y) _____/_____/_____
 (If not applicable please mark N/A) Monthly HOA fee range: From \$ _____ to \$ _____

4. If the project does not meet **all** the following criteria, please complete the grid below:
 At least 90% of the total units in the project are sold, the project's common areas are complete, and the HOA has been turned over to the unit owners (Additional pages may be attached if necessary)

Phase and/or Building	Marketing Date	Total Number of Units	Number Units Sold &/or Under Contract	Occupancy (Including Sold and Under contract)		
				O/O	2 nd Home	Investment
Totals						

5. Is the project subject to any further phasing or annexation? YES _____ NO _____

6. Number of Units Devoted to Commercial Space: _____
 Percentage % of Space in Whole Project Devoted to Commercial Space: _____
 Type of Commercial Space: _____
 Does the HOA Own or Operate any Business in the Commercial Space: YES _____ NO _____

7. Does any single investor or entity own more than 10% of the total units in the project: YES _____ NO _____
 (For project **less than 10 units**, does any single investor own more than **one** unit?)
 If YES, please provide breakdown of the number of units and % owned:

8. Number of unit owners 30 days or more delinquent in payment of their unit assessments: _____
 Total Amount of Delinquent HOA dues \$ _____

9. Is the association involved in any pending litigation? YES _____ NO _____
 If **YES**, please provide a copy of the information regarding the litigation, from attorney or HOA.
 a) Is this a personal injury litigation? YES _____ NO _____
 b) If YES, will liability insurance cover any potential liability? YES _____ NO _____

10. If unit is taken over in foreclosure or deed-in-lieu of foreclosure, is the mortgagee (lender) responsible for any delinquent HOA dues that accrued prior to acquisition: YES _____ NO _____
 If **YES**, How many months _____

11. Is the project on leased land? YES _____ NO _____ If **YES**, provide a copy of lease
12. Do the unit owners have sole ownership interest in, and rights to the use of, the project's facilities, common elements, and limited common elements? YES _____ NO _____ (If **NO**, provide copy of lease)
13. Are there any adverse environmental factors affecting the project as a whole: YES _____ NO _____
14. Is the property a conversion of an existing building? YES _____ NO _____
 If **YES**, conversion date: M/D/Y ____/____/____
 If **YES**, was this conversion a "Full Gut Conversion" _____ or a "Non Gut" Conversion _____
15. Have there been any special assessments within the past twelve months, or any currently planned?
 YES _____ NO _____
 If yes, please explain the reason for assessment, amount per unit, and length of assessment:

16. Is the project professionally managed? YES _____ NO _____ (If **YES** complete below)
 Name of Mgmt Company: _____ Phone # _____
 Address: _____ City: _____ State: _____ Zip: _____
17. Is the project a Time–Share or a segmented ownership project? YES _____ NO _____
18. Is the project a Condotel? YES _____ NO _____
19. Does the project have short term (less than 30 days) and/or weekly/nightly rentals? YES _____ NO _____
 If **YES**, are hotel like services included in the monthly HOA? YES _____ NO _____
20. Is there on-site rental management or a registration desk? YES _____ NO _____
21. Is there evidence of project marketed as a hotel-type facility? YES _____ NO _____
22. Is there a mandatory or voluntary rental pool or revenue sharing? YES _____ NO _____
23. Does the project contain any units that are less than 400 sq feet YES _____ NO _____
24. The total amount of the most recent annual budget (income) \$ _____
25. Current amount in the replacement reserve account \$ _____
26. Does the current budget contain a line item to pay next due insurance premiums? YES _____ NO _____
- Insurance Agent (for master policy): _____ Phone #: _____

CERTIFICATION

The undersigned certifies that the following information concerning the above mentioned project is true to the best of his/her knowledge. Please do not use approximate figures.

Signature: _____ Date: _____

Print Name: _____ Title: _____

Email Address: _____ Phone Number: _____

HOA Website (if applicable): _____

*****Please note** this questionnaire must be completed by an officer of the condominium homeowners association or authorized management company representative for the subject condominium project.***