

CONDOMINIUM HOA FULL REVIEW QUESTIONNAIRE

| Borro | Borrower Name: Unit #: | | | |
|--|--|--------------------------|--|--|
| Project Legal Name: | | | | |
| Project Address: | | | | |
| Please answer all questions; where numbers are requested, please provide the count (not the percentage). | | | | |
| 1. | Does the project have any of the items listed below? Please check all that apply. Central Phones Check-in Desk Continuing Care Retirement Community Hotel Operations Houseboat Maid Service Mandatory Rental Pool Manufactured Housing Multi-Dwelling Unit (more than 1 unit per Deed) Timeshares Under 30-Day Rentals | Yes No | | |
| | □ Project Listed as Investment Security with the SEC □ Project Contains Non-Incidental Business Operations (Restaurant, Spa, Etc.) □ Project is Common Interest Apartment or Community Apartment Property | | | |
| 2. 3. | Is the HOA a licensed Hotel, Motel, Resort, or Hospitality Entity? Does project have any significant deferred maintenance that meets one or more of the following criteria: | ☐ Yes ☐ No ☐ Yes ☐ No | | |
| | a) full or partial evacuation of the building for 7 or more days is required to complete repairs; b) project has deficiencies, defects, substantial damage, or deferred maintenance that i) is severe enough to affect safety, soundness, structural integrity, or habitability of improvements, | | | |
| | ii) improvements need substantial repairs and rehabilitation, including many major components, or | | | |
| | iii) impedes safe and sound functioning of one or more of the building's major structural or mechanical elements, including but not limited to foundation, roof, load-bearing structures, electrical system, HVAC, or plumbing? | | | |
| 4. | Has project failed to obtain an acceptable certificate of occupancy or pass local regulatory inspections or recertifications in the last 5 years? | ☐ Yes ☐ No | | |
| | a) If no, provide any applicable inspection, engineering, or other certification reports related to any issues. | | | |
| 5. | Does the HOA or do the Legal Documents require owners to make units available for rental pooling? | ☐ Yes ☐ No | | |
| 6. | Does the HOA or do the Legal Documents require owners to share profits for the rental or units with the HOA Management Company or resort/hotel rental company? | ☐ Yes ☐ No | | |
| 7. | Please list total number of units in the project for items a—g (please enter numbers, not percentages): | | | |
| | a. Number in the project | | | |
| | b. Number sold and closed | | | |
| | c. Number under contract to owner occupants | | | |
| | d. Number under contract to investors | | | |
| | e. Number under contract to second home/vacation home buyers | | | |
| | f. Number owned by a single person/entityg. Number over 60 days delinquent, and dollar amount of delinquency | | | |
| 8. | g. Number over 60 days delinquent, and dollar amount of delinquency Are there any additional phases? | Yes No | | |
| 9. | Units are owned as Fee Simple / Leasehold | | | |
| 9. 10. | Are all units, common areas, and amenities completed? | ☐ Yes ☐ No | | |
| 11. | Date association was turned over to unit owner control (Month/Year) | | | |
| 12. | Is the project a conversion? | ☐ Yes ☐ No | | |
| 12. | a. If yes, was conversion a Gut Rehab with renovation of a property down to the shell with replacement of all HVAC & electrical components? Year converted: | Yes No | | |
| 13. | Does the project contain any governmentally regulated low- or moderate-income housing units (also known as inclusionary zoning)? | ☐ Yes ☐ No | | |
| 14. | Is the project subject to a recreation/land lease? | ☐ Yes ☐ No | | |



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| 15. | Are the units subject to private transfer fee covenants? | ☐ Yes ☐ No | | |
| | a. If yes, private transfer fee paid to: | | | |
| 16. | Does the project have a mandatory club membership? | ☐ Yes ☐ No | | |
| | a. If yes, the club owner is: | | | |
| 17. | Are there any special assessments ongoing or planned? | ☐ Yes ☐ No | | |
| | a. If yes, reason for special assessment: | | | |
| 18. | Is the association subject to any lawsuits or litigation? | ☐ Yes ☐ No | | |
| | a. If yes, please attach a copy of the Legal Complaint filed with the court. | | | |
| 19. | Does the project contain any commercial space? | ☐ Yes ☐ No | | |
| | a. If yes, what percentage of the project is commercial? | | | |
| 20. | Has the HOA or Developer retained any right of first refusal? | ☐ Yes ☐ No | | |
| | a. If yes, are the mortgagees (lenders) excluded from this right of first refu | ısal? ☐ Yes ☐ No | | |
| 21. | If a unit is Foreclosed or claimed with Deed-in-lieu of Foreclosure is the lefor HOA dues? If yes, how long? \Box 0—6 months \Box more than 6 month | | | |
| 22. | Is the project located in a Master Association? | ☐ Yes ☐ No | | |
| | a. If yes, Master Association legal name: | | | |
| | b. and Master Association legal entity type is: Condominium PUD | | | |
| | c. Master Association required to pay fees? | amount: | | |
| 23. | Does the HOA or Management Company maintain separate accounts for op and reserve funds? | perating expense Yes No | | |
| 24. | Is the project managed by an outside professional management firm? | ☐ Yes ☐ No | | |
| | a. If yes, will the outside management contract expire within three years? | ☐ Yes ☐ No | | |
| | b. and can the outside management contract be canceled by either part cause with 90-day written notice? | y with or without Yes No | | |
| 25. | Are monthly account statements being sent directly to the HOA? | ☐ Yes ☐ No | | |
| 26. | Monthly HOA dues per unit | | | |
| 27. | Date monthly dues are assessed | | | |
| 28. | Segregated reserve account balance | | | |
| 29. | Insurance: Agent Name: Phone: _ | | | |
| | RCE OF INFORMATION: Acceptable sources of information include a ciation or a qualified employee of the association's management comp | | | |
| Sou | rce Name Source Title | | | |
| Sou | rce Signature Date Complet | ed | | |
| Sou | rce Email Address Source Phone | Number | | |
| Association Website Address: | | | | |