

Limited Condo Questions



The following questions must be answered in one of the following ways:

- HOA completes this form
- Email from HOA answering all questions on this form
- Processor verbally completing this form with the HOA

HOA name:

HOA phone:

HOA contact:

In the event a lender acquires a unit due to foreclosure or a deed-in-lieu of foreclosure, is the mortgagee responsible for paying delinquent common expense assessments? Yes No

If yes, how long is the mortgagee responsible for paying common expense assessments?

1-6 months 7-12 months 12+ months

Is the HOA involved in any active or pending litigation other than litigation where the HOA is a plaintiff seeking past due assessments of a foreclosure action? Yes No

If **yes**, provide a copy of the court-filed complaint and any other pertinent documentation.

If **yes**, Attorney Name:

Attorney Phone:

1. Complete the following fields if more than one unit is owned by the same individual or entity.

Individual / Entity Name	Developer or Sponsor (Yes or No)	Number of Units Owned	Percentage Owned of Total Project Units	Number Leased at Market Rent	Number Leased Under Rent Control
	Yes	No			
	Yes	No			
	Yes	No			
	Yes	No			

2. Does the project contain any of the following? Check all that apply.

Hotel/motel/resort activities, mandatory or voluntary rental-pooling arrangements, or other restrictions on the unit owner's ability to occupy the unit

Manufactured homes

Supportive or continuing care for seniors or for residents with disabilities

Non-incident income from business operations

Mandatory fee-based memberships for use of project amenities or services

Timeshare, segmented ownership, or other transient use

Multi-dwelling units

3. Is the HOA and/or management company aware of any conditions or project-wide deferred maintenance within the project that may negatively impact the safety, structural soundness, habitability, or functional use of any individual unit or the project as a whole?

Yes

No

If **yes**, provide a description and supporting documentation.

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4. Are there any current or planned special assessments?

Yes

No

If **yes**, provide details.

Completed By

Name/position:

Phone:

Date completed:

If this form was completed by a Processor, the following information is required:

Name of the individual(s) who answered the above questions from the HOA or Management Company:

Position of the individual(s) who answered the above questions: