

***This certification is required for established projects.**

Unit Address: _____

Borrower Name: _____ Loan Number: _____

This company is processing a mortgage loan, which is located in the subject homeowners' association/project. Your assistance is required in answering the questions on this form. Your immediate response is requested as the subject loan funding is pending.

1. Legal name of the Project/Homeowners' Association is: _____
2. HOA Tax Identification Number (TIN): _____
3. The Project is a: Condominium PUD
4. Was the project created by the conversion of an existing building? If yes, provide the following information:
Age of Subject: _____ Year converted: _____ Original use: _____
5. Voting control of the Board of Directors has been turned over from the Builder/Developer since: ____/____ (month/year).
If control has not been turned over, provide the anticipated date of turnover: ____/____ (month/year).
6. Is the Project a legal phased project? Yes No The project consists of ____ units in ____ legal phases.
7. Are all units and common areas/facilities complete? Yes No
8. Can the project be expanded beyond its current size? Yes No If Yes, number of add'l units to be built: _____
9. Indicate all common amenities other than those in a Master Association.
 Pool, # of: _____ Clubhouse, # of: _____ Tennis Court, #of: _____ Playground, # of: _____
 Other: _____
10. Is there designated commercial space in the project? Yes No Describe _____
If yes, is the designated space more than 25% of the total square footage of the entire project? Yes No
11. Is there more than one association for the project, such as a "Master" or "Umbrella" association? Yes No
If yes, list the name of the Master Association: _____
List any recreational amenities: _____
Are the amenities complete? Yes No
Date control of the MHOA turned over to the unit owners: _____
12. Is the subject association involved in any litigation? Yes No If yes, provide copies of all available litigation information.
13. How is title to the units held? Fee Simple Leasehold If leasehold, provide copies of the lease(s).
14. Are there any leased common areas/facilities? Yes No If yes, provide copy of lease(s).
15. Do the unit owners have sole ownership in and right to the use of the project facilities? Yes No
16. Does the project contain any leased or rented units? Yes No If yes, how many? _____
17. Is there a rental service for leasing/renting units? Yes No
18. Does the homeowners' association provide a cleaning service for the leased/rented units? Yes No
19. Does the project have a front check-in desk for the leased/rented units? Yes No
20. Does any single investor or entity own more than 10% of the total units in the project? Yes No
If yes, identify the investor/entity and indicate the total number of units owned by each separate investor:

21. Does an outside, professional management firm manage the project? Yes No
If yes, provide contact information:
Company Name: _____ Contact Name: _____
Company Address: _____ Contact Phone: _____
22. Does the management agreement expire in 3 years or less? Yes No
If No, provide details: _____
23. Can the agreement be cancelled by either party with or without cause with 90 days written notice? Yes No
If No, provide details: _____
24. Is there a termination/cancellation fee or penalty? Yes No
If Yes, provide details: _____
25. The unit assessment charges/fees for all units are:
 Uniform charges of \$ _____ per month. Varying charges of \$ _____ to \$ _____ per month.
26. How many unit owners are delinquent more than 30 days in their payment? _____ More than 60 day? _____
Total amount: \$ _____
27. Does the project have other non-incidentual business income? Yes No
If yes, indicate the income source: _____
28. The amount currently held in a segregated reserve account for future repair/replacement of the project is \$ _____
Is this amount adequate for replacement of major components? Yes No
29. Are there any special assessments now approved, or have any been approved in the past year? Yes No
If yes, describe the nature of the assessment, amount, and per unit charge: _____

30. Are there any mortgages or other long-term debts currently outstanding for the association? Yes No
If yes, state and describe the terms of the loan: _____
31. Provide the following insurance information:
Company Name: _____ Agent Name: _____ Phone: _____
32. Provide the following sales information:
_____ Total number of units in project _____ Total number of units conveyed
_____ Total number of units under contract _____ Total number of units conveyed/under contract to investors

THE UNDERSIGNED DOES HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND ACCURATE TO THE BEST OF THEIR KNOWLEDGE AS OF (Date): _____

Name (Print): _____ Title: _____

Organization of Signer: _____

Phone Number: _____ Email Address: _____

Signature: _____

THIS FORM IS TO BE COMPLETED BY A DIRECTOR OR OFFICER OF THE HOA OR MANAGER OF THE MANAGEMENT COMPANY ONLY.

Add any additional comments or contact information here.