



HOA Questionnaire and Certification

Project Name: _____ **Project Address:** _____

HOA Name: _____ **HOA Address:** _____

Name of Master Association (if applicable): _____

1. Is the project 100% complete for all phases? Yes No

If No, complete the following questions:

- Is the project subject to additional phasing? Yes No
- Is the project legally phased? Yes No
- How many phases have been completed? Yes No
- How many phases are planned? _____
- Are all planned amenities and communal areas complete? Yes No
- Has the developer turned over control of the HOA to the unit owners? Yes No
If No, what is the estimated date for the transfer? _____

2. Does the project contain any of the following:

- Hotel/Motel activities Yes No
- Deed or resale restrictions Yes No
- Mandatory fee-based memberships Yes No
- Non-incident income for business operations Yes No

3. Complete the following questions with respect to the project:

- What is the total number of units in the project? _____
- How many are sold and closed? _____
- How many are under contract to be sold? _____
- How many are sold or under contract to owner occupants? _____
- How many are sold or under contract to investors? _____
- Does any one person or entity own more than 30% of the total units? Yes No
If Yes, provide name(s) and number of units owned.

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- Do the unit owners have sole ownership and the right to use the project amenities and common areas? Yes No
If No, please explain who does:

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- Are any of the units of building used for non-residential or commercial purposes? Yes No
If Yes, what is the total square footage and percentage of total square footage?
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- How many unit owners are 60 or more days delinquent on common assessments?

- If a lender acquires a unit due to foreclosure or deed-in-lieu of foreclosure, is the mortgage responsible for paying delinquent assessments? Yes No
If Yes, for how long (number of months)? _____
- Is the HOA involved in any active litigation? Yes No
(If Yes, provide the complaint and supportive documents regarding the outcome)
- Does the budget provide adequate funding for operations, reserves and insurance deductibles? Yes No
If No, please explain:



I hereby certify that this information is true, accurate and complete.

Name of HOA representative that completed this form: _____

Title of HOA representative that completed this form: _____

Email of HOA representative that completed this form: _____

Phone number of HOA representative that completed this form: _____

Date form completed: _____