

CONVENTIONAL LIMITED REVIEW CONDOMINIUM QUESTIONNAIRE

Dai	e: Loai	n No Borrower(s) N	lame:				
Pro	ject Name (Ex	kact): Pl	hase Number:				
Pro	ject Address:		County:				
Cit	/ :	State:	Zip:				
Sub	ject Property	Address/Unit #:					
Th	e following ir	age loan is being processed on oformation is required to comp apprecia e this form when the follo	plete the process. Your ti ted.	mely response is			
Ye:							
		1. All units, common elements/amenities including Master Association, phases, and annexation/add-ons are 100% complete					
2. 90% sold and closed							
	3. HOA control has been turned over to the unit owners						
		4. Terms of the loan meet the following parameters in the table below (state/occupancy/LTV)					
	All state	All states with exception of Florida: Condos in the state of Florida		of Florida:			
Occup	ancy Type	Maximum HTV, CLTV and HCLTV	Occupancy Type	Maximum HTV, CLTV and HCLTV			
rimary	Residence	90%	Primary Residence	75% / 90% / 90%			
Secor	nd Home	75%	Second Home	70% / 75% / 75%			
vestme	nt Property	75%	Investment Property	70% / 75% / 75%			
N	ote: An answ	er of 'no' to any of the above ro	equires a full agency revi or Freddie Mac form 476				

Rev. 5/8/2025



Yes	No		
		1. Is project a timeshare or condo hotel or is it managed or operated as a hotel, motel, or vacation resort, even though units are individually owned?	
		2. Are unit owners required to pay mandatory upfront and/or periodic membership fees for use of recreational amenities not owned by the Homeowners' Association? (i.e., owned by an outside party including developer/builder)	
		3. Are units subject to private transfer fees other than those paid directly to the Homeowners' Association or Property Manager? (Defined as a transfer fee paid to an identified third party such as developer or trustee upon each resale.)	
		4. If the property is not located in a Super Lien State and if the unit is taken over in foreclosure or deed-in-lieu, is the lien priority of those dues more than 6 months?	
		*If yes, what are the number of months? <u>Super Lien States</u> : Alabama, Alaska, Colorado, Connecticut, Delaware, Florida, Hawaii, Illinois, Maryland, Massachusetts, Minnesota, Missouri, Nevada, New Hampshire, New Jersey, Oregon, Pennsylvania, Rhode Island, Vermont, Washington, Washington D.C., West Virginia	
		5. Is more than 35% of the total square footage of the project used for non-residential purposes such as commercial spaces?	
		*If yes, is the project mostly residential in character and are the unit owners' operators of the business? Yes No	
		 7. Are multi-dwelling units allowed? (Owner owns more than 1-unit secured by a single deed and single mortgage) 8. Is the project subject to zoning restrictions that may prohibit the project from 	
		 being rebuilt to current density? 9. Does any single entity including but not limited to individual, investor group, partnership, corporation, or government housing authority own more than the following number of units in the project? (See below) 	
		Projects with 5-20 units: greater than 2 units: Number owned? More than 20 units: greater than 10% of total units: Number Owned?	
	10. Is the Homeowners' Association currently involved in any litigation other the as the Plaintiff in a lawsuit against unit owners to collect unpaid common expense assessments, or as a "Necessary Defendant" in a mortgage foreclosure action again unit owners?		
	11. Does the project allow an owner to hold title to more than one unit, with ownership being evidenced by a single deed or mortgage?		
	12. Are more than 15% of the total number of units in the project are 60 days most past due in the payment of each special assessment?		
		13. Does the project consist of manufactured homes?	

Rev. 5/8/2025 2



Building Safety, Soundness, Structural Integrity, and Habitability

1.	Is the Homeowners' Association or Property Management aware of any deficiencies related to safety, soundness, structural integrity, and/or habitability of the project's building(s)? Yes No				
	If yes, please explain and indicate if repairs are completed:				
	If yes, of these deficiencies, what repairs/replacements remain to be completed?				
	If yes, of these deficiencies, when will the repairs/replacements be completed?				
2.	Is there currently a special assessment or is one planned? If yes, what are the terms of special assessment (Dollars/Term)?				
	If yes, what repairs or deferred maintenance are planned or required? Please indicate if repairs are needed or completed.				
3.	Are there any outstanding violations of jurisdictional requirements (zoning ordinances, codes, etc.)? If yes, provide notice from the applicable jurisdictional entity.				
4.	Is it anticipated the project will, in the future, have such violation(s)? Yes No If yes, provide details of the applicable jurisdiction's requirement and the project's plan to remediate the violation.				

Rev. 5/8/2025 3



5.	Does the project have a funding plan for its deferred mainte components/items to be repaired or replaced? Yes	enance No			
6.	Does the project have a schedule for the deferred maintenato be repaired or replaced? Yes No If yes, provide the schedule.	ance components/items			
7.	Has the HOA had a reserve study completed on the project years? Yes No	within the past 3			
8.	What is the total of the current reserve account balance(s)?				
	e: Additional documents may be required based on answer				
Contac	t Name / Title				
	Company Name				
Phone	Number Email				
By signing below, I certify that, to the best of my knowledge, the information provided is true and correct. The undersigned further represents they are authorized by the Homeowners' Association Board of Directors and/or the Managing Agent to provide this information on behalf of the Association.					
Signat	 ure	—————— Date			

Rev. 5/8/2025 4