



## Limited Review Condominium Project Questionnaire

Borrower: \_\_\_\_\_ Date: \_\_\_\_\_  
Co-Borrower: \_\_\_\_\_ Loan #: \_\_\_\_\_  
Project Name: \_\_\_\_\_ Unit #: \_\_\_\_\_ Subject Phase #: \_\_\_\_\_  
Project Address \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

**This Limited Review Condominium Project Questionnaire may be used when FNMA DU findings authorize a “limited review” on an established project, for conforming loans not exceeding \$417,000, or other programs where a limited review is allowed**

**Questions 1-11 may be completed by the HOA or the management company; question 12 to be completed by the lender.**

1.a Is the project any of the following: manufactured home, houseboat, timeshare or segmented ownership, non-conforming zoning, “Own-Your-Own” or project owned as tenants-in common, project of multi-unit properties, condotel, live-work condo, resort condominium, an investment ownership, or project with businesses owned or operated by the HOA (restaurant, spa, health club, etc.)?  Yes  No

Does the project exhibit any of the following?

- Is publicly advertised as a condominium hotel or resort (for example, the project advertises on travel or hotel Web sites, or has a Web site on the Internet and presents itself as a condominium hotel) or Web sites are available to determine room availability and/or to make reservations.
- Has hotel-like amenities (such as front desk, maid service, concierge service, on site recreational activities, lifeguard on duty, towel or linen service, etc.)
- Shares facilities, common elements, or amenities with a hotel, resort, and/or lodge owned and managed by the developer or another third-party entity (pool, spa, fitness center, parking, business center, conference facility, etc.)
- Has units that do not have full size kitchen appliances, or that have efficiency kitchens
- Has a name that includes “hotel,” “resort,” “motel,” “inn,” or “lodge,” has an affiliation with, and/or is managed by an entity, usually a hotel chain or hospitality entity.
- Is located at the same address as a hotel or resort, or within a hotel or resort, or has a hotel or hospitality identity
- Has non-incidentual businesses operated or owned by the homeowner’s association (for example, restaurant, health club, spa, etc.).
- Has a revenue sharing arrangement between a rental management firm and the HOA
- Requires mandatory membership (tennis, golf, health club, etc.)
- Requires a mandatory rental pooling agreement or has blackout periods.

1.b Do the bylaws, CC&Rs, or the HOA allow short-term and seasonal rentals (periods of less than one month), or fractional or time-share ownership?  Yes  No

1.c Does the HOA budget include items that suggest hotel-type features, such as housekeeping costs, business income, membership fee income, personnel costs (lifeguard, maid, concierge, front desk, shuttle service, internet service fees, etc.)?  Yes  No

**If you answered “Yes” to any of the above, stop here, the project is ineligible.**

2. Are all the units, common elements, and facilities within the project 100% complete?  Yes  No
3. The project is not subject to any additional phasing or add-ons?  Yes (not subject to phasing)  No
4. Has control of the Homeowners’ Association been turned over to the unit owner’s?  Yes  No
5. Has at least 90% of the units in the project been sold and closed?  Yes  No
6. **Association Litigation:** There is no pending litigation. If there is, attach a detailed explanation. The lawsuit must not impact marketability and/or liability policy covers potential loss. The lawsuit must be reviewed by HSOA Credit Policy.  Yes (no pending litigation)  No
7. The title to the units is held in Fee Simple.  Yes  No



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8. No single entity, individual, or group owns more than 10% of the total units in the project?  Yes  No
9. Commercial use in project is less than 20% of project space?  Yes  No
10. The project is not subject to deed restrictions or inclusionary zoning that limit a foreclosing lender's ability to sell a foreclosed property in any manner.  Yes (no deed restrictions)  No
11. The Project meets the insurance requirements as indicated below:
- The insurance policy is in the exact name of the Condominium Association  Yes  No
  - Policy is active, Expiration Date:
  - Policy includes 100% current replacement cost hazard coverage on common structures with a deductible not to exceed 5% of the policy face value.
  - Policy meets the higher of state required liability coverage or \$1million general liability coverage for homeowners' association
  - Policy includes flood Insurance (only if common structures located in flood zone) with a deductible that not greater than \$25,000 of the policy face amount unless state law allows for a higher deductible – Attach an explanation if accepting state mandated higher deductibles

Condominium project insurance master or blanket policies do NOT contain either of the following:

- A blanket policy that covers multiple unaffiliated condominium associations or projects, or
- A self insurance arrangement whereby the owners' association is self insured or has banded together with other unaffiliated associations to self insure all of the general and limited common elements of the various associations.

Homeowner's Association contact information:

- Name:
- Title & Organization or Company Name:
- Phone or e-mail :

### Required Documentation

Evidence of the following Project insurance policies, as applicable

- a. Hazard
- b. Flood
- c. Liability
- d. Fidelity Bond (if >20 units )

If the project is located near water, snow, or a resort or recreation area, provide the following additional documentation:

- e. CC&Rs and bylaws
- f. Budget

### Note: Individual unit Insurance coverage requirements:

Must be a 'walls-in' policy, often called a HO-6 policy; coverage amount to be at least 20% of the appraised value.

### HOME OWNERS ASSOCIATION CERTIFICATION

The undersigned hereby certifies that to the best of his/her knowledge and belief that the information and statements contained on this form and any attachments are true and correct. The undersigned further represents that he/she is authorized by the HOA to provide this information on behalf of the HOA.

Signature

Date

Name

Title

**If any of the answers were "No" for questions 2-11, the project is not eligible for the Limited Review and must be processed using an alternate review type.**



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12. Underwriter has completed an Internet search on the project name as well as the project address, and has found no indications of offerings for nightly or short-term rentals. (Question 1.a)  Yes  No
13. If the project is near water, snow or a recreation area, the bylaws and CC&Rs do not allow short-term rentals, and the budget shows no hotel-like income or expense items. (Question 1.b and 1.c)  Yes  No  
 N/A
14. DU findings include a notation that the subject loan is eligible for Limited Review condominium determination, and the loan amount does not exceed \$417,000 (enter condo type "Q" on the 1008)  Yes  No

### **LENDER CERTIFICATION**

*(To be completed by HSOA Underwriter). The undersigned hereby certifies that to the best of his/her knowledge and belief that the information and statements contained on this form and any attachments are true and correct. The undersigned further represents that he/she is authorized by the Seller to provide this information on behalf of the Lender and is authorized representative with document signing authority.*

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*Signature*

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*Date*

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*Name*

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*Title*