

Homeowner's Association Certification Limited Review

(TO BE COMPLETED BY HOA OR MANAGING AGENT)

Borrower Name:				Loan #:		Date:	
Project Name:							
Address / City / State / Zip code:							
Project and Unit Information							
1.	1. Project is: 2. Unit is: 3. Units are: 4. Unit owners in control of H Condo Attached Fee Simple Yes, as of/						
	Condo PUD	Detached	Leasehold	No,	as or /	_ (VIIVI/ 1 1 1 1)	
	1 CD	Detached		110	-		
					Entire Project	Subject Phase	
5.	Total # buildings in p	-					
6.	Total # units in project						
7.	Total # units, primary/2 nd home, closed						
8.	Total # units, primary/2 nd home, under contract, not closed Total # units, investor/sublet, closed						
9. 10	Total # units, investor/sublet, under contract, not closed Total # units, investor/sublet, under contract, not closed						
11.							
	Project design type:	ensponsor owned, un	15014				
	Garden/Low-rise Row/Townhouse Mid/rise (5-7 stories) High-rise (8+ stories)						
13.	Predominant building	g type:		· -	_ ` `	·	
	Attached I						
Please mark Yes or No to the following questions & explain if needed. 14. Is project part of a "Master" or Umbrella" Association?						YES NO	
14.							
15	If YES, please list the name of the Master Association: 15. Is the lender liable for delinquent common charges if the unit is foreclosed on OR						
15.	prior to the lender acquiring the property? If YES, lender is responsible for months.						
16.	6. Do unit owners have sole ownership & exclusive right to project facilities?						
	7. Is the HOA party to any current or pending litigation (excluding foreclosure or collection actions)?						
	If YES, provide written details separately.						
18. Number of units that are over 60 days delinquent in common charges/HOA fees Total amount delinquent \$							
19. Monthly HOA Dues: \$/ per month							
HOA Management Information							
20. Is the HOA professionally managed?							
	Yes No						
	If yes, provide name & contact information for the management company						
	Company Name:						
	Company Name: Phone:						
Certification							
The undersigned hereby certifies the information and statements contained on this form and any attachments are true							
and correct, to the best of their knowledge and belief. The undersigned further certifies they are authorized by the							
Homeowner's Association Board of Directors to provide these information on behalf of the Association.							
Contact Name:				1	Date:		
Company Name:							
Signature:							