

QM Loan Full Review HOA Questionnaire

| Project Legal Name | | HOA Prepa | are Name | | |
|--|-------------------------------------|-----------------|------------------------|-----------------|------------|
| Subject Property | Position/ Title | | | | |
| Date | | Email/Phor | ne | | |
| 1. Building Type (subject property): | | | □Detached | □Attached Has | |
| 2. control of the owners association been turned over to the HOA? | | | | | □No |
| If Yes, date of the transfer:_ | ; If No, estim | ated date of | transfer: | | |
| 3. Is the project 100% comple | ete, including all construction of | or renovation | of units, common | elements, and | shared |
| amenities for all project phases? | | | | | □No |
| If No, complete lines a-c: | | | | | |
| a. Is the project subject to additional phasing or annexation? | | | | | □No |
| b. Is the subject legal phase | 100% complete to buyer's prefer | rence (i.e. plu | mbing, electricity, su | ub-flooring and | drywall)? |
| | | | | □Yes | □No |
| c. Are common areas and rec | creational facilities associated wi | ith the subjec | t phase complete? | □Yes | □No |
| 4. What's the monthly HOA Fee | e (subject property)? | | | | |
| 5. Total number of phases: | Subject Phase #: | | | | |
| | | | Entire project | Sub | ject phase |
| a. Total number of units | | | | | |
| b. Total number of units under | contract for sale | | | | |
| c. Total number of units sold | | | | | |
| d. Total number of units sold a | nd under contract to investor ow | ner | | | |
| e. Total number of units sold ar | nd under contract to owner-occu | pants | | | |
| 6. Does the project contain any | af the fellowing? | | | | |
| | mandatory or voluntary rental p | ooling arran | sements or other rest | trictions on | |
| the unit owner's ability to occu | | oomig arrang | gements, or other res | | □N- |
| 1 M - C 4- 11 | | | | □Yes | □No |
| | b. Manufactured homes | | | □Yes | □No |
| c. Mandatory fee-based memberships for use of project amenities or services. | | | □Yes | □No | |
| d. Supportive or continuing care for seniors or for residents with disabilities. | | | | □Yes | □No |
| 7. Is the project Leasehold Estate or A Fee? □Leasehold | | | □Fee | Simple | |
| 8. Please indicate the highest n | umber of units by a single entity | owner in the | project: | | |
| 9. Is there any space that is use | d for nonresidential or commerc | ial purposes? | | □Yes | □No |
| If Yes, what percentage of the | ne project? | | | | |
| 10. If a unit is taken over in for | reclosure or deed-in-lieu, is the n | nortgagee (le | nder) responsible for | delinquent HO | A dues? |
| | | | | □Yes | □No |
| If Yes, are they responsible for | for: $\square 0$ -6 months | □7+ mo | onths | | |



| 11. Is there any pending litigation involving the homeowner's association? | □Yes | □No |
|---|---------------------|------------------|
| **If Yes, provide the attorney letter and any other related document to indicate the litigati | on details and sta | atus. |
| Additional condition may apply. | | |
| 12. Is the project a conversion? | □Yes | □No |
| If Yes, date of conversion: | | |
| 13. Is the budget adequate and does it provide for the funding of replacement reserves for c | apital expenditui | res and deferred |
| maintenance that is at least 10% of the budget? | □Yes | □No |
| 14. If the unit owners in the project have the sole ownership interest in, and rights to the use of | of the project's fa | cilities, common |
| elements, and limited common elements? | □Yes | \square No |
| 15. Total # of Units Delinquent on HOA Dues greater than 60 days: | | |
| 16. Is there currently any significant deferred maintenance or physical obsolescence noted in | the project? | |
| | □Yes | □No |
| 17. When was the last building inspection completed? | | |
| **If completed within the last three years, provide a copy of the report. | | |
| 18. Are there any special assessments unit owners are obligated to pay? | □Yes | □No |
| If Yes, complete lines a-d: | | |
| a. Total amount of the special assessment(s) | | |
| b. Monthly payment | | |
| c. Terms of the special assessment(s) | | |
| d. Purpose of the special assessment(s) | | |
| 19. How many unit owners are 60 days or more past due on the special assessment payment? | | |