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**AMERICAN CAPITAL CORPORATION**  
**HOA Condo Certification Questionnaire**  
**(for 100% financing)**

HOA Condo Certification Questionnaire

Project name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Subject Unit # / Subject Phase: \_\_\_\_\_ / \_\_\_\_\_  
 City, State: \_\_\_\_\_

1. DESCRIBE THE UNIT SALES

A. Established projects (100% complete / HOA turned over to unit owner's for at least one year)

- \_\_\_\_\_ Total no. Units in project
- \_\_\_\_\_ Total no. Units conveyed to purchasers, show breakdown
- \_\_\_\_\_ Total no. Units primary residences
- \_\_\_\_\_ Total no. Units second homes
- \_\_\_\_\_ Total no. Units rented/investor

B. NEW Construction projects (incomplete and/or Builder/Developer in control) – Presale Information

| Phase / Bldg. | Date Marketing Began | # of Units | # Sold & Under Contract | Proposed Occupancy<br>(Include Sold and Under Contract) |                        |                     |
|---------------|----------------------|------------|-------------------------|---|------------------------|---------------------|
|               |                      |            |                         | # Owner-Occupied  | # 2 <sup>nd</sup> Home | # Rental / Investor |
|               |                      |            |                         |   |                        |                     |
|               |                      |            |                         |   |                        |                     |
|               |                      |            |                         |   |                        |                     |
| <b>Totals</b> |                      |            |                         |   |                        |                     |

2. Does any one entity (same individual, investor group, partnership, or corporation) own more than one unit?  
 Yes  No If yes, identify entity and indicate number of units and percentage owned.

Entity \_\_\_\_\_ # Units \_\_\_\_\_ Percentage \_\_\_\_\_  
 Entity \_\_\_\_\_ # Units \_\_\_\_\_ Percentage \_\_\_\_\_

3. Are all units, common areas and amenities, including those that are part of a master association, substantially complete?  Yes  No

4. Is the project subject to additional phasing?  Yes  No

5. Is project a conversion of an existing building?  Yes  No If yes, please indicate conversion date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

6. Has control of the owners association been turned over to the unit purchasers?  Yes  No

Date turned over to owners: \_\_\_\_\_

7. How is title to the units held? \_\_\_ Fee simple \_\_\_ Leasehold (If leasehold, please provide a copy of lease.)

8. Are there any leased recreational facilities or any common area leases?  Yes  No. (If yes, please provide a copy of the lease.)

9. Is any space within the project designated for commercial/non-residential use?  Yes  No

If yes, how many commercial units are there? \_\_\_\_\_  
 What type of commercial space? \_\_\_\_\_

10. Are there any adverse environmental factors affecting the project as a whole or as individual units?  Yes  No.

11. Do the project documents allow short-term rentals (less than 30 days)?  Yes  No

If yes, are hotel like services included in the monthly HOA fee assessment?  Yes  No

12. Is there a mandatory rental pool?  Yes  No

13. The amount of reserve funds for future repairs and/or replacement of major components currently held in a segregated reserve fund is \$\_\_\_\_\_.

14. The number of owners currently delinquent more than 30 days in their unit assessments \_\_\_\_\_  
 Total amount of delinquent charges \$\_\_\_\_\_

15. Is the HOA involved in any lawsuits or pending litigation?  Yes  No

If yes, provide information regarding litigation, from attorney or HOA, as a separate attachment

16. If this is personal injury litigation, will liability insurance cover any potential liability?  Yes  No

**Certification**

|  |       |
|--|-------|
| I, the undersigned, certify that to the best of my knowledge and belief, the information and statements contained on this form and the attachments are true and correct. |       |
| Signature of Association Representative or Preparer:   | Date: |
| Printed Name and Title of Association Representative or Preparer:  |       |

|                             |                           |                            |
|-----------------------------|---------------------------|----------------------------|
| Preparer's Company Name:    |                           |                            |
| Preparer's Company Address: |                           |                            |
| Preparer's Phone #: (     ) | Preparer's Fax #: (     ) | Preparer's e-mail Address: |

