



MCFI LIMITED REVIEW CONDO QUESTIONNAIRE

BORROWER'S NAME: _____ **LOAN NUMBER:** _____

Project Legal Name	
Project Physical Address	
Subject Unit #	
Subject Unit Phase	
Number of Units in Project	
Total Units Sold	
Regular Monthly HOA Dues (per unit)	
HOA Management Address	
HOA Name (if different from Project Legal Name)	
HOA Tax ID #	
HOA Management Company Tax ID #	
Name of Master Umbrella Association (if applicable)	

1	When was the last building inspection by a licensed architect, licensed engineer, or any other building inspector? Provide copy of inspection report within 3 years. If inspection is over 3 years or not inspected, provide 6 months HOA minutes.		
2	Did the last inspection have any findings related to the safety, soundness, structural integrity, or habitability of the project's building(s)? 2a) If yes, have recommended repairs/replacements been completed? If the repairs/replacements have not been completed, answer the following questions: 2b) What repairs/replacements remain to be completed? 2c) When will the repairs/replacements be completed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3	Is the HOA aware of any deficiencies related to the safety, soundness, structural integrity, or habitability of the project's building(s)? 3a) If yes, what are the deficiencies? 3b) Of these deficiencies, what repairs/replacements remain to be completed? 3c) Of these deficiencies, when will the repairs/replacements be completed? 3d) Does the project have an acceptable Certificate of Occupancy and/or has the project passed local regulatory inspections or re-certifications? (Provide documentation if applicable)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4	Are there any outstanding violations of jurisdictional requirements (zoning ordinances, codes, etc.) related to the safety, soundness, structural integrity, or habitability of the project's building(s)? 4a) If yes, provide notice from the applicable jurisdictional entity	<input type="checkbox"/> YES	<input type="checkbox"/> NO
5	Are there any plans for repairs or maintenance that would require full or partial evacuation of any building(s) in the project to complete them? 5a) If yes, explain reason and duration:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6	Are there any scheduled repairs or maintenance over \$3,000 that are not fully funded/budgeted? 6a) If yes, provide further explanation and amount of repairs/maintenance: 6b) If yes, will this be undertaken within the next 12 months?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
7	What is the total of the current reserve account balance(s)?		
8	Does the HOA have any current or proposed special assessments? Select One: Current <input type="checkbox"/> Proposed <input type="checkbox"/> None <input type="checkbox"/> If there are current or proposed special assessments, answer the following questions: 8a) Provide the reason for the special assessment, the total amount assessed, the repayment terms, and the unit owner's monthly obligation. (If repairs are needed, provide the associated total cost of repair) 8b) Is the assessment already included in the unit owner's HOA dues? 8c) If the special assessments are current, has at least 95% of the amount budgeted for the special assessment been collected?	<input type="checkbox"/> YES <input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NO

9	Has control of the owners association been turned over to the HOA? <i>if YES, enter the date that the project was turnedover:</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
10	Are all units, common areas and recreational facilities associated with the entire project 100% complete?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
11	Do unit owners possess full ownership of the common areas and amenities?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
12	Is the project a condominium-hotel?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
13	Is the project a timeshare or segmented ownership project?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
14	Is the project a multi-dwelling unit condominium (in which ownership of multiple units is evidenced by a single deed and mortgage)? <i>Is the subject unit one of these combined units?</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
15	Does the condominium represent a legal, but non-conforming use of the land (do zoning regulations prohibit rebuilding to current density in the event of destruction?)	<input type="checkbox"/> YES	NO
16	Is the project built on a Leasehold Estate?	YES	NO
17	Please indicate the highest number of units owned by a single entity owner within the entire project:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
18	Is any portion of the project designated for commercial use only? This is required even if the commercial portion of the building/project has a separate association. <i>If YES, what percentage of the project?</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
19	Does the project allow daily rentals or short-term rentals less than 30 days? <i>If Yes, provide the Master Declaration and Bylaws.</i> <i>Is the HOA involved in renting the units?</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
20	Does the project contain a rental desk?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
21	Does the project participate in a mandatory rental pool?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
22	Does the project provide food service or daily housekeeping?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
23	Does the project have blackout dates that restrict the owner's use?	<input type="checkbox"/> YES	NO
24	Is the project the subject of current litigation, mediation, arbitration or similar dispute resolution process? <i>If YES, attach a letter of explanation for litigation from the attorney or a copy of the court complaint.</i>	<input type="checkbox"/> YES	NO
25	Are the property taxes for the individual units included in the HOA fees? If YES, A. If new construction, will the taxes be individually assessed after recording? B. If established, are the units currently individually assessed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

CONTACT INFORMATION

1	Name of Preparer	
2	Title of Preparer	
3	Preparer's Company Name	
4	Preparer's Phone	
5	Preparer's Email	
6	Preparer's Company Address	
7	Date Completed	

I, the undersigned, certify that to the best of my knowledge, belief, the information and statements contained on this form, and the attachments are true and correct.

Signature of Association Representative or Preparer

Date

Name of Association Representative or Preparer

Title

Preparer's Company Address

Preparer's Phone Number