

Conventional Limited/Streamline Review Certification	
Project Name:	
Property Address:	
City, State, Zip:	
County/Borough:	HOA Tax ID#:

Section 1: General Project Information			
1	Project Information:	1a. Total # of units in project	
		1b. Total # of units sold or under contract	
2	Are the units of the project:	ATTACHED	DETACHED
3	Are at least 90% of the units sold and conveyed?	YES	NO
4	Are all units, common elements, and facilities within the project 100% complete?	YES	NO
5	Is the project subject to additional phasing or annexation?	YES	NO
6	Has the HOA been turned over to the unit owners and do the unit owners have sole ownership and rights to use the project facilities and amenities?	YES	NO
7	Does any single person or entity own more than 10% of the total units in the project?	YES	NO
	7a. If YES, how many units are owned by each person or entity?		

Section 2: Project Characteristics & Amenities			
8	Does the project contain any of the following:		
	8a. Hotel/motel/resort activities, mandatory or voluntary rental pooling arrangements, or other restrictions on the unit owner's ability to occupy the unit?	YES	NO
	8b. Deed/resale restrictions that split ownership of property or curtail an individual borrower's ability to utilize the property; including common interest apartments? If YES, please explain:	YES	NO
	8c. Manufactured homes?	YES	NO
	8d. Mandatory fee-based memberships for use of project amenities or services?	YES	NO
	8e. Non-incident income > 10% from business operations owned or operated by HOA? If YES, please provide a copy of the HOA Budget.	YES	NO
	8f. Supportive or continuing care for seniors or for residents with disabilities?	YES	NO
9	Is any part of the project used for commercial/non-residential purposes?		
	9a. If YES, what % of the total project square footage is commercial space?	YES	NO
	9b. What is the nature of the commercial use?		
10	Does each unit have its own heating and cooling system?		
	10a. If NO, are each of the units separately metered?	YES	NO

Section 3: Legal & Financial Information			
11	Is the HOA currently involved in litigation, mediation, or arbitration?		
	11a. If YES, provide a litigation disclosure that describes: a) the nature of the claim; b) if the insurance company defending the claim; and c) the estimated amount of the claim.		
12	Does the project permit a priority lien for unpaid common expenses in excess of 6 months (in excess of 12 months for Florida)?		
	12a. If YES, please provide a copy of the Declaration/Master Deed or state statutes.		

Section 4: Management Company & Preparer Information

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

Company Name:

Address:

Preparer's Name:

Title:

Preparer's Signature:

Phone #:

Email Address:

Date:

Miscellaneous

Large empty rectangular area for miscellaneous information.