

## FHA Condominium Loan Level/ Single-Unit Approval Questionnaire

## U.S. Department of Housing and Urban Development

Office of Housing

**Public Reporting Burden** for this collection of information is estimated to average .75 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information collection is required to obtain or retain benefits. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of the Chief Information Officer, U.S. Department of Housing and Urban Development, 451 7th Street, SW, Washington, DC 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (OMB Number: 2502-0610) Washington, DC 20503. Do not send this completed form to either of the above addresses.

General: The information in this questionnaire is needed to obtain FHA-insured financing for a Condominium Unit (Unit)

located in a Condominium Project. The Condominiu the section(s) checked below and return the complete section (s) checked below and return the complete section (s).		· •		
☐ <b>Section 3</b> : Loan Level Requirements	☐ <b>Section 4</b> : Additional Requirements for Single-Unit Approval			
FHA Case Number:	Lende	r Loan Number:		
Section 1: Mortgagee Information. To be	ما المعادمة المعادمة	the District		
1.a. Mortgagee Information	completed b	y the Mortgagee.		
Mortgagee Name:			FHAC Lender ID Number:	
Street Address:				
City:	State:	Zip Code:	Phone Number:	
Contact Name:	Email Address:		Fax Number:	
Section 2: Condominium Project Inform management company.	<b>ation.</b> To b	e completed by the	Condominium Association or	
2.a. Condominium Project				
Legal Name of Project:			FHA Condo Approval ID Number:	
Street Address:				
City:	State:		Zip Code:	
2.b. Condominium Association				
Condominium Association Name:	Association Tax ID Num		Association Tax ID Number:	
Street Address:				
City:	State:	Zip Code:	Phone Number:	
Association Contact Name:	Email Address:		Fax Number:	
2.c. Management Company				
Management Company Name:			Management Company Tax ID Number:	
Street Address:				
City:	State:	Zip Code:	Phone Number:	
Management Contact Name / Title: Email Address: Fax Number:			Fax Number:	

**Section 3: Loan Level Requirements.** To be completed by the Condominium Association or management company and used to verify loan level requirements for Units located in an Approved Condominium Project/phase and Single-Unit Approvals.

3.a.	Occupancy Requirements by Construction Type				
i. d	r-occupied Units include any Unit: occupied by the owner for any portion of the calendar year and that is not rented for a majority of the isted for sale, and not listed for rent, that was previously occupied by the owner as described in (i) a cold to an owner who intends to occupy the Unit as described in (i) above.	-			
A Unit	owned by the builder/developer is not an owner-occupied Unit.				
	-owner occupied Unit refers to a Unit that does not meet the definitions above.				
	sting Construction Occupancy iisting Construction (greater than 12 months old)				Jnits in Project
Total	Number of Units in the Condominium Project				
a					
b	Non owner-occupied Units as defined above				
	ew Complete Project (less than 12 months old); or				
	gal Phase				
i. I	Number of Units in the Condominium Project Multi-phased Condominium Project: Include the total number of Units in the first declared Legal Phases. Single-phased Condominium Project: Include all Units.	hase	and		
a	Owner-occupied Units as defined above				
b	Non-owner occupied Units as defined above				
3.b.	Individual Owner Concentration				
Total	number of Units owned by a single owner or Related Party (Related Party includes any individual ity related to the Unit owner)				
If any	single owner or Related Party own more than the number of Units allowed under FHA's Individual please complete the information in the table below.	Owr	er Co	ncer	ntration
Indivi	dual / Entity Name		elop onsor	er/	Number of Units Owned
			$\perp$		
Attacl	   list for additional individual owners as required.				
	·	•			1
3.c.	Property Information				
	Is the Unit located in any of the following (check all that apply):		Ye	S	No
1.	a Condominium Project under a Leasehold Interest?			]	
2.	a Gut Rehabilitation (Gut Rehab) conversion project?			]	
3.	a New Construction project? including Proposed Construction, Under Construction, or Existing Construction Less than a Year	sting			
4.	a Manufactured Home Condominium Project?		Т	7	П

3.d.	Units in Arrears	Number
1.	How many Units are 60 Days or more past due on their Condominium Association fee	
	payments? (Excluding late fees or other administrative expenses)	

	Insurance Type			Yes	No	
1.	Walls-In	Does the Condom	ninium Association have a master or blanket insurance that			
		includes interior (	Unit coverage that will cover the replacement of interior			
		improvements th	e Borrower may have made to the Unit? If "No", Borrower			
		must obtain a Wa	ılls-In policy (HO-6).			
2.	Hazard Insurance	Does the Condom				
		Insurance policy in an amount equal to at least 100% of the insurable				
		replacement cost				
		in the Condominium Project?				
3.	Flood Insurance	Are Units or Common Elements located in a Special Flood Hazard Area				
		(SFHA)?				
		If "Yes," Flood Ins	urance is in force equaling (select only one option below):			
		100% re	placement cost;			
		Maximu	m coverage per Condominium Unit available under the			
		National Floo	d Insurance Program (NFIP); or			
		Some ot	her amount (enter amount here) \$			
3.f.	Required Docume	entation for All U	nits (Loan Level and Single-Unit Approval)			
	Section		Required Documentation			
	3.e.1. Walls-In Insu	rance	Certificate of insurance or complete copy of the insurance po	olicy.		
H	3.e.2. Hazard Insura	ance	Certificate of insurance or complete copy of the insurance po			
	3.e.3. Flood Insurar	nce	Federal Emergency Management Agency (FEMA) flood map			
Ш	3.c.3. 1 1000 11130101		Condominium Project location clearly marked; and, if applica			
			the certificate of insurance or a complete copy of th		rv. and	
			the Letter of Map Amendment (LOMA), Letter of Ma	· · · · · · · · · · · · · · · · · · ·	-	
			or elevation certificate.	ap itevision	(LOIVIII),	
	3.c.1. Property Info	rmation -	Leasehold agreement and any other documentation required	d by the Mo	rtgagee	
	Leasehold Interest		to comply with FHA's leasehold guidance.			
	3.c. Property Inforn	nation - New	Mortgagee to determine eligibility and may request addition	al documer	ntation	
ш	Construction, Gut R		for Units located in these types of Properties.			
	Manufactured Hom					
I certify tl	hat I have completed	this section of the	questionnaire using information and resources that, to the be	est of my kn	owledge	
and belie	f, are correct and rel	iable. WARNING: H	IUD will prosecute false claims and statements. Conviction ma	y result in c	riminal	
and/or ci	vil penalties (18 U.S.	C. 1001, 1010, 1012	2; 31 U.S.C. 3729, 3802).			
Name (printed) Title			 Title			
- 11	,					

Date

Signature

**Section 4: Additional Requirements for Single-Unit Approval.** To be completed by the Condominium Association or management company and used by the Mortgagee in combination with the information in Section 3 to verify FHA's requirements for approval of a Unit located in a Condominium Project that is <u>not</u> FHA-approved.

4.a.	Project Eligibility			
Does	the Condominium Project, Unit(s), or Common Elements have any of the following characteristics? (Check all the	nat apply	)	
		Yes		No
1.	Cooperative ownership		] [	
2.	Condominium hotel or "condotel"			
3.	Mandatory rental pooling agreements that require Unit owners to either rent their Units or give a management firm control over the occupancy of the Units	nt	]	
4.	Timeshare or segmented ownership projects			
5.	Multi-dwelling condominiums (more than one dwelling per Condominium Unit)			
6.	Houseboat project			
7.	Continuing care facility		<u>ו</u>	
8.	Less than five Units		יו נ	
9.	Located in an Approved Condominium Project or unapproved Legal Phase of a Condominium project with an approved Legal Phase		]	
10.	Defined Coastal Barrier Resources System (CBRS) location			
11.	A Certificate of Occupancy that was issued less than one year ago or has never been occupied		]	
12.	Adverse determination by FHA for significant issues			
4.b.	Transfer of Control and Recorded Documents	Yes	١	No
1.	Have governing documents been recorded as required by applicable law to bind the prospective Unit owners or other third parties?			
2.	Does the Condominium Project allow for Live/Work arrangements?			
3.	Has control of the Condominium Association been transferred from the developer/builder to the Unit owners?			
		Da	ate	
4.	Date of transfer	L		
4.0		V		1.
4.c.	Financial Condition  Does the Condominium Association have a reserve account for capital expenditures and deferred	Yes		NO NO
1.	maintenance?		L	
2.	Is the reserve account funded as required by FHA?			
3.	Does the Condominium Association maintain separate accounts for operating and reserve funds?			
4.	For projects with Commercial/Non-Residential Space, are the residential and commercial portions of the Condominium Project independently sustainable?  Check here if not applicable:		Ī	
5.	Has the project experienced a Financial Distress Event within the last 36 months:  • sought protection under bankruptcy laws;  • been placed into receivership (mandated or voluntary);  • been subject to foreclosure or any seizure of assets by creditors; or			
	offered a Deed-in-Lieu (DIL) of Foreclosure?			

4.d.	Commercial/Non-Residential Space Square				Footage			
1.	Total square footage							
2.	Total square footage of Commercial/Non-Residential Space							
3.	Total square foota	Total square footage of the Residential Space						
4.e.	Additional Insur	rance Requiremen	nts for Single-Unit Approval					
	Insurance Type				Yes	No		
1.	Liability	Does the Condom	inium Association maintain a comprehensive Liability Insur	ance for				
	Insurance	the entire Condominium Project, including all common areas, Common Elements,						
			all other areas that are under its supervision, in the amount	of at				
_	I II.		r each occurrence?					
2.	Fidelity	I .	inium Association maintain Fidelity Insurance for all officer					
	Insurance		ployees of the Condominium Association and all other pers nsible for funds administered by the Condominium Associa					
		(including manage		LIOII				
						<u> </u>		
4.f.	Litigation				Yes	No		
1.		um Project or Condo	ominium Association subject to pending Litigation? If "Yes,"	provide				
	a signed and date			·				
2.	Is the Condominion	um Project or Condo	ominium Association subject to any other litigation risk?					
	•							
4.g.	Additional Requ	uired Documentat	ion for Single-Unit Approval					
	Section		Required Documentation					
	4.b. Transfer of Co		Recorded Covenants, Conditions, and Restrictions (CC&R	5).				
П	4.c.4. Financial St	ability -	<ul> <li>a current year budget approved by the board(s);</li> </ul>					
	Commercial/Non-	-Residential Space	an income and expense statement for the previous	ıs year's eı	nd result	s;		
			<ul> <li>a year-to-date income and expense statement da</li> </ul>	ted within	90 days	if the		
			prior year-to-date actuals are more than 90 Days					
			a current balance sheet dated within 90 Days price.	or to the da	ite of			
	4.c.5. Financial St	ability Distress	submission.	Distross Ev	ıont			
Ш	Event	ability – Distress	Dated legal document evidencing Resolution of Financial	Distress Ev	rent.			
	4.d. Commercial/Non-Residential Recorded Site Condominium plans and recorded CC&Rs.							
ш	Space		'					
	4.e.1. Liability Insurance Certificate of insurance or a complete copy of the insurance polic			nce policy.				
	4.e.2. Fidelity Insu	urance	Certificate of insurance or a complete copy of the insurar		rom the			
	4 f 1 Litigation		Condominium Association and/or from the management company.  Explanation for pending Litigation.					
Ш	4.f.1. Litigation		Explanation for pending Litigation.					
•	I certify that I have completed this section of the questionnaire using information and resources that, to the best of my knowledge							
	and belief, are correct and reliable. <b>WARNING:</b> HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802).							
	, 5. 5 , 5 , 15 5 , 15 15, 15 15, 15 15, 57 15, 55 15, 5							
Name (	printed)		Title					

Date

Signature