



CONVENTIONAL ABBREVIATED CONDO QUESTIONNAIRE FOR 2-10 UNIT AND DETACHED CONDO PROJECTS

Date	Loan No.	Property Seller Name & Phone
Project Name (Exact)		
Project Address: (including county)		
Phase# (if applicable)		
Borrower(s)		

Keystone Funding is processing a mortgage loan on the subject property listed above. The following information is required to complete the process. Your timely response is appreciated.

PROJECT PROFILE (TO BE COMPLETED BY HOA, MANAGING AGENT)

Name of Association or Management Company _____
 Number of total units in project: _____
 What is the monthly HOA fee for the subject unit?: _____

1. Is the project an investment security/co-op/time share? _____
2. Does the project consist of property that is not real estate (e.g. houseboat, boat slip, etc.)? _____
3. Is the project terminating or involved in insolvency proceedings? _____
4. Does the project contain any hotel/motel/resort activities, mandatory or voluntary rental-pooling arrangements, or other restrictions on the unit owner’s ability to occupy the unit? _____
5. Does the project permit a priority lien for unpaid common expenses in excess of 6 months? If yes, provide a copy of the Declaration/Master Deed or state statutes. _____

Supply the information requested below. Do NOT enter “contact agent”.

Type of Insurance	Carrier/Agent Name	Carrier/Agent Phone Number	Policy Number
Hazard			
Liability			
Fidelity			
Flood			

6. Is the HOA aware of any deficiencies related to the safety, soundness, structural integrity, or habitability of the project's buildings? (If the loan is a FHLMC loan or a FNMA to FNMA limited cash out refinance).

If yes, what are the deficiencies?

Of these deficiencies, what repairs/replacements remain to be completed?

Of these deficiencies, when will the repairs/replacements be completed?

7. 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)? _____

If yes, provide notice from the applicable jurisdictional entity. _____

CONTACT AND SIGNATURE (TO BE COMPLETED BY HOA, MANAGING AGENT)

Contact Name/Title: _____

Company Name: _____

Phone Number: _____ HOA Tax ID (not required): _____

By signing below, I certify that the information represented on this form is true and correct to the best of my knowledge.

Signature