

		ver's Name:	Loan Number:								
1	Proi	ect Legal Name									
2		ect Physical Address									
3	HOA	A Name (if different from pa I name)	roject								
4		Does the project contain any of the following project characteristics? (check all that apply)									
a		Timeshare, fractional, or segmented ownership projects									
b		Mandatory upfront or periodic membership fees for the use of recreational amenities, such as country club facilities and golf courses, owned by an outside party (including the developer or builder). Membership fees paid for the use of recreational amenities owned exclusively by the HOA or master association are acceptable.									
С		Leases with a third party for access to recreational facilities									
d		The unit owners do not have sole ownership interest in and the right to use the project amenities and common areas?									
е		Managed and operated as a hotel or motel, even though the units are individually owned									
f		Covenants, conditions, and restrictions that split ownership of the property or curtail an individual borrower's ability to utilize the property									
g		Non-incidental business operations owned or operated by the HOA including, but not limited to, a restaurant, spa, or health club									
h		HOA or co-op corporation is named as a party to mediation, pre-litigation, pending litigation, or active litigation OR the project sponsor or developer is named as a party to mediation, pre-litigation, pending litigation, or active litigation that relates to the safety, structural soundness, habitability, or functional use of the property									
i	Enter the % of space that is used for nonresidential or commercial purposes in relation to the total space of the project:										
j		nplete the following table	if more than on	e ur	nit is owned by the	e sa	me individual	or en	tity.		
	Individual/ Entity Name		Developer o Sponsor (Yes or No)	r	Number of Units Owned		Percentage Owned of Total Project Units		nber Leased Market nt	Number Leased under Rent Control	
			Yes N	0			%				
			Yes N	No			%				
			Yes N	0			%				
			Yes N	0			%				
k	Complete the following information concerning ownership of units:					5:	Entire Project Subject Legal which the uni applicable		gal Phase (in unit is located) if		
	Total number of units										

	Total number of units sold and closed			
	Total number of units under bona-fide sales contracts			
	Total number of units sold and closed or under contract to own occupants OR second home owners	ner-		
ı	Complete the following information:	YES	NO	
	Is the construction of the project 100% complete?			
	Has the control of the HOA been turned over to unit own	ers?		
	Is the project subject to additional phasing or annexation	1?		
	Provide additional detail here, if applicable (optional): I, the undersigned, certify that to the best of my knowledge and bel		ents contained	
	on this form and the attachments are true and correct.			
	Signature of Association Representative or Preparer	Date Phon	e Number	
	Name of Association Representative or Preparer			
	Preparer's Company and Address			

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