



## ASSOCIATION BUDGET QUESTIONNAIRE

The Association Budget (RE623, RE624A) is for the primary purpose of obtaining a Final Public Report

FOR THE FOLLOWING SECTIONS, PLEASE MARK Yes, No, N/A, OR FILL IN THE REQUESTED INFORMATION.

1. Advertising Name of Project \_\_\_\_\_

2. Property Address or Cross Streets \_\_\_\_\_  
\_\_\_\_\_

3. Tract Number \_\_\_\_\_

4. Year in which project will be completed \_\_\_\_\_

5. Year project was originally completed \_\_\_\_\_ (For **existing** structures being converted)

6. How many phases are there in project? \_\_\_\_\_

7. Cost of Insurance for Project \$ \_\_\_\_\_ per year

8. List information on key person of contact:

Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Cell # \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

9. Is there a separate company name or person connected to the project that you would like the proposal addressed to, if so please list name: \_\_\_\_\_  
\_\_\_\_\_

10. List contact information on project engineer:

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

11. List contact information of the DRE Processor(SRP) or Title Company:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

12. List contact information of Law Firm preparing Homeowners Association CC&R's, ByLaws, Articles:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

13. **BUILDING LAYOUT**

Number of Buildings \_\_\_\_\_ Number of Units \_\_\_\_\_ Size of Lot \_\_\_\_\_

Perimeter of each Building \_\_\_\_\_

Type of Roof \_\_\_\_\_ Square Footage \_\_\_\_\_

Additional Roof(s) \_\_\_\_\_ Square Footage \_\_\_\_\_

Type of Exterior Surfaces \_\_\_\_\_ and \_\_\_\_\_

Number of Balconies \_\_\_\_\_

Number of BR & BA \_\_\_\_\_

Number of Units & Square Footage of each \_\_\_\_\_

\_\_\_\_\_ Number of Floors \_\_\_\_\_

Total Number of Parking Spaces \_\_\_\_\_ **LIST NUMBER OF PARKING SPACES IN EACH CATEGORY**

Garage \_\_\_\_\_ Carport \_\_\_\_\_ Tuck Under \_\_\_\_\_ Open Spaces \_\_\_\_\_ Subterranean \_\_\_\_\_

14. **PAVING & LANDSCAPE AREAS**

Square Footage of Paving \_\_\_\_\_ **IF KNOWN, LIST SQUARE FOOTAGE IN EACH CATEGORY**

Concrete \_\_\_\_\_ Asphalt \_\_\_\_\_ Enhanced \_\_\_\_\_

Square Footage of General Landscape \_\_\_\_\_

General Turf / Shrub \_\_\_\_\_ Slopes \_\_\_\_\_ Open Space \_\_\_\_\_

**15. ELECTRICAL (Please ONLY list common lighting to be paid by the Association)**

Number of Street Lights \_\_\_\_\_ (watts) \_\_\_\_\_  
Number of Landscape Lights \_\_\_\_\_ (watts) \_\_\_\_\_  
Number of Exterior Building Lights \_\_\_\_\_ (watts) \_\_\_\_\_  
Number of Interior Lights \_\_\_\_\_ (watts) \_\_\_\_\_  
Other Lighting \_\_\_\_\_ (watts) \_\_\_\_\_

**16. UTILITIES (Please ONLY list common utilities to be paid by the Association)**

Trash (Y or N) Company Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Electric (Y or N) Company Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Gas (Y or N) Company Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Cable (Y or N) Company Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Water (Y or N) Company Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Size of Water Meter \_\_\_\_\_ (1" 1½" 2" 3")  
Drainage LF Pipe \_\_\_\_\_ Number of Basins \_\_\_\_\_ Number of Filters \_\_\_\_\_  
Sewer LF Pipe \_\_\_\_\_ Number of Pumps \_\_\_\_\_ Sewer Lift Station Y or N

**17. GATES / FENCING**

Number of Vehicle Security Gates \_\_\_\_\_ Gate(s) Motorized \_\_\_\_\_  
Type of Gate \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_  
(Slide, Arm, Overhead, Double Slide, Double Arm)  
Other Wrought Iron Gates Length \_\_\_\_\_ Height \_\_\_\_\_ Painted \_\_\_\_\_ (Y or N)  
Wrought Iron Fencing Length \_\_\_\_\_ Height \_\_\_\_\_ Painted \_\_\_\_\_ (Y or N)  
Wood Fencing Length \_\_\_\_\_ Height \_\_\_\_\_ Painted \_\_\_\_\_ (Y or N)  
Block Walls Length \_\_\_\_\_ Height \_\_\_\_\_ Painted \_\_\_\_\_ (Y or N)  
Railings Length \_\_\_\_\_ Height \_\_\_\_\_ Painted \_\_\_\_\_ (Y or N)  
Vinyl Fencing Length \_\_\_\_\_ Height \_\_\_\_\_ Painted \_\_\_\_\_ (Y or N)  
Other \_\_\_\_\_ Length \_\_\_\_\_ Painted \_\_\_\_\_ (Y or N)

18. **OTHER / MISCELLANEOUS**

Elevator (Y or N) \_\_\_\_\_ Number of Stops \_\_\_\_\_

Monument Sign (Y or N) \_\_\_\_\_ Cost of Monument \_\_\_\_\_

Fountains (Y or N) \_\_\_\_\_ Cost of Fountain \_\_\_\_\_

Common Water Heater (Y or N) Number of WH \_\_\_\_\_ Cost of Each \_\_\_\_\_

Intercom System (Y or N) \_\_\_\_\_ Cost of System \_\_\_\_\_

Guard House (Y or N) \_\_\_\_\_

Size \_\_\_\_\_ x \_\_\_\_\_ Type of Roof \_\_\_\_\_ Type of Exterior \_\_\_\_\_

Number of Security Guards \_\_\_\_\_ Hours a Day \_\_\_\_\_

Number of Pools \_\_\_\_\_ Size each \_\_\_\_\_

Number of Spas \_\_\_\_\_ Size each \_\_\_\_\_

Restrooms (Description) \_\_\_\_\_ Size \_\_\_\_\_

Outdoor Showers (Description) \_\_\_\_\_ Size \_\_\_\_\_

Outdoor Furniture (Description) \_\_\_\_\_ Cost \_\_\_\_\_

Recreational Rooms (Description) \_\_\_\_\_ Size \_\_\_\_\_

Indoor Furniture (Description) \_\_\_\_\_ Cost \_\_\_\_\_

Athletic Equipment (Description) \_\_\_\_\_ Cost \_\_\_\_\_

Number of Laundry Rooms \_\_\_\_\_ Size each \_\_\_\_\_

Number of Washer / Dryers \_\_\_\_\_ Leased or Owned \_\_\_\_\_

THIS QUESTIONNAIRE WAS COMPLETED BY \_\_\_\_\_ ON  
\_\_\_\_\_, 20\_\_\_\_.

**REQUIRED FOR ALL ASSOCIATION BUDGETS:** Please send a copy of the **Insurance Proposal** for the Homeowners Association, showing annual premium and coverage amounts. Coverage should include at a minimum: General Liability, Property Coverage, Directors & Officers Coverage, and Fidelity Bond Coverage. Please consult with a Licensed Insurance Broker/Firm to verify that your coverage limits will meet or exceed the required minimums. If you don't have an insurance company that insures Homeowners Associations please let us know and we can direct you to a company that does.

**REQUIRED FOR PHASED PROJECTS:** Please include a **Phasing Schedule** that includes residential lot numbers, common area lot numbers/letters and a breakdown of the common area for each phase (Required).

