

Sample Community Homeowners Association
City Property Management Company
4645 E. Cotton Gin Loop
Phoenix, AZ 85040
Tel: (602) 437-4777 Fax: (602) 437-4770

Planned Unit Development Questionnaire

11/5/2015

Sample Lender
Attention: Sample Lender Contact
lender@lender.com

Sample Community Homeowners Association
Unit #1000
3920 Stony Bridge Ln
Scottsdale, AZ 85250
Current Owner: Sample Owner
New Owner: Sample Borrower

Property Information

1. Total number of units	739
2. Total number of units sold	739
3. Total number of units rented	
4. Total number of units with offsite addresses	295
5. Total number of units with offsite addresses within the state of Arizona	123
6. Total number of units with offsite addresses outside the state of Arizona	172
7. Total number of units still owned by the developer	0
8. Are there individuals that own more than one unit in the project?	Yes
9. Largest number of units owned by a single person?	2
10. Are all units, common areas and facilities 100% complete? If no, explain:	Yes
11. Is the property subject to additional phasing and/or add-ons?	No
12. Is there an onsite rental office?	No
13. Can Units be rented on a daily basis?	No
14. Does the project consist of any commercial space? What percentage of total space does it compromise?	No 0.00%
15. Has the project been converted or is it in the process of being converted? Date of conversion:	No
16. Are the Units owned fee simple?	Yes
17. Is the project a Timeshare or segmented ownership project?	No
18. Are the Units attached, detached or both?	Attached
19. Is there an age restriction?	No

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|--|------------------|
| 20. Is the developer still in control of the Association?
If no, please provide date of turnover: | No
10/18/2005 |
| 21. Is the project subject to "Inclusionary Zoning" which may affect future sales?
What units are affected and what are the terms? _____
_____ | No |
| 22. Is the property subject to a Master/Umbrella Association? | No |

Financial Information

- | | |
|---|-------------------|
| 1. Are there any special Assessments pending or levied within the Homeowners Association? | No |
| 2. If special assessments exist, special assessment details: | |
| 3. Number of units with current homeowners 30 days or more delinquent on assessments:
Total amount of delinquent charges: | 67
\$10,000.00 |
| 4. Is the Association currently a defendant in any litigation?
If yes, explain: _____
_____ | No |
| 5. What is the current balance of the reserve fund? | \$100,000.00 |
| 6. What is the budgeted amount for reserves this year? | \$10,000.00 |
| 7. What is the total income amount budgeted for this year? | \$886,800.00 |
| 8. Are the reserves fund and operating fund separate? | Yes |
| 9. Are there any outstanding loans owed by the Association? | No |
| 10. Are monthly account statements being sent directly to the Homeowners Association? | Yes |
| 11. Does the management company have the authority to draw checks against or transfer from the reserve account? | Yes |
| 12. Are two or more members of the Board of Directors required to sign checks drafted against the reserve account? | No |
| 13. What is the current monthly assessment per unit? | \$100.00 |
| 14. If a unit is taken over in foreclosure or deed-in-lieu, is the mortgagee responsible for:
a) Delinquent HOA dues?
b) Current Dues upon foreclosure or deed-in-lieu? | No
Yes |

Insurance Information

- | | |
|--|----|
| 1. Is the project located in a flood zone? | No |
| 2. Contact information for insurance agents servicing this Association:
Sample Insurance Agency
123 Elm Ln
Phoenix, AZ 85030
Tel: 800-555-1212 Fax: 800-555-1213 | |

PLEASE SEE ATTACHED DOCUMENTS FOR INSURANCE INFORMATION.

Management Information

- | | |
|---|-----|
| 1. Is the project professionally managed? | Yes |
|---|-----|

2. City Property Management Company
4645 E. Cotton Gin Loop
Phoenix, AZ 85040
Manager: Sample Manager
Accountant: Sample Accountant
Assistant: Sample Assistant
Tel: (602) 437-4777 Fax: (602) 437-4770

3. What is the management termination policy?

30 days

4. Is there a penalty?

No

Attachments:

Current budget

Certificate(s) of Insurance

THE UNDERSIGNED DOES HEREBY CERTIFY THAT THE INFORMATION
ABOVE IS TRUE AND ACCURATE TO THE BEST OF THEIR KNOWLEDGE AS
OF: 11/5/2015

Sample Manager
Name

City Property Management Company
Company Name

Property Manager
Position/Title

(602) 437-4777 x123
Phone