

# UNIFORM CONDOMINIUM QUESTIONNAIRE

**Project Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_

## GENERAL INFORMATION

1. The legal name of this project is: \_\_\_\_\_  
It is a ( ) Condominium, or ( ) a Planned Unit Development (PUD).
2. If the project was (or is being) created by the conversion of an existing building, please provide the following:  
Age of building: \_\_\_\_\_ Year converted: \_\_\_\_\_ Type of original use: \_\_\_\_\_
3. The project ( ) is ( ) is not a legally phased project. The project consists of \_\_\_\_\_ units in \_\_\_\_\_ legal phases.
4. Describe the unit sales. For a fully constructed project that has been sold out, complete the below information.

### UNIT SALES

Total number of units in project \_\_\_\_\_  
Total number of units conveyed to purchases \_\_\_\_\_  
show breakdown below:  
Total no. principal residence units conveyed \_\_\_\_\_  
Total no. second home units conveyed \_\_\_\_\_  
Total no. investor -owned units conveyed \_\_\_\_\_  
Total no. units retained by developer/convertor \_\_\_\_\_

### UNIT TYPES

Single-Family Detached \_\_\_\_\_  
Townhouse, Row, or Cluster \_\_\_\_\_  
Garden \_\_\_\_\_ No. of stories \_\_\_\_\_  
Mid-rise \_\_\_\_\_ No. of stories (3-5) \_\_\_\_\_  
High-rise \_\_\_\_\_ No. of stories (6 or more) \_\_\_\_\_  
Other \_\_\_\_\_

5. Does any investor own more than one unit ( ) YES ( ) NO. If YES, identify the investor, (the same individual, investor group, partnership, or corporation) and indicates the total number of units owned by each such investor in the project \_\_\_\_\_
6. Does any investor own more than ten percent of the total units in the project? ( ) YES ( ) NO
7. The recreational amenities (other than those in a master association) include: ( ) Pool # \_\_\_\_\_ ( ) Clubhouse # \_\_\_\_\_ ( ) Tennis Court # \_\_\_\_\_ ( ) Playground # \_\_\_\_\_ ( ) Other \_\_\_\_\_ ( )
8. Are all units and facilities complete? (This included all amenities and common areas such as pool, tennis courts, roads, walkways, parking areas, landscaping, clubhouse, and renovations associated with conversions.) ( ) YES ( ) NO  
If NO, please provide the following: \_\_\_\_\_ units is \_\_\_\_\_ Phases have been completed. Describe the incomplete items:  
\_\_\_\_\_
9. Can the project be expanded beyond its current size? ( ) YES ( ) NO
10. Is the Owners' Association currently a party in any type of litigation or public administrative action (including any violations of any environment or public health statutes and laws or current environmental or public health litigation or administrative action)? ( ) YES ( ) NO. If YES, describe the nature of the litigation or public action and attach any information  
\_\_\_\_\_
11. Has the Owners' Association been notified of any violation of any government or land-use regulations (such as zoning ordinances and coastal tideland or wetlands laws)? ( ) YES ( ) NO. If YES, describe the nature of the violation and attach any information. \_\_\_\_\_
12. How is title to the units held: \_\_\_\_\_ Fee Simple \_\_\_\_\_ Leasehold. If Leasehold, please provide a copy of the lease.
13. Are there any leased recreational facilities or any common area leases? ( ) YES ( ) NO. If YES, please provide a copy of the lease.

14. Does the unit owner own the lot or land below the unit or an undivided interest in common land?  
 lot  undivided interest.
15. Do the unit owners have sole ownership interest in and the right to the use of the project facilities  YES  NO.  
 If NO, please explain: \_\_\_\_\_
16. Does the developer retain ownership interest in any of the facilities or common area?  YES  NO. If YES, please explain: \_\_\_\_\_
17. Do the project documents allow the units to be leased or rented for less than a 30-day period?  YES  NO.
18. Are there any other restrictions relating to the term of any lease or rental agreement?  YES  NO. If YES, describe restrictions: \_\_\_\_\_
19. Has voting control of the Board of Directors been turned over from the builder and/or developer?  
 YES, control was turned over in \_\_\_\_\_ (Month/Year).  
 NO, the anticipated date for the transfer of control is \_\_\_\_\_ (Month/Year).
20. The Owners' Association fiscal year is from \_\_\_\_\_ to \_\_\_\_\_ (Month/Year).
21. How many budget cycles have been controlled by the unit owners as a majority (as opposed to the developer)?  
 NONE  ONE  TWO  MORE THAN TWO
22. The unit assessment/common charges for all units are:  
 The same, the assessment is \$ \_\_\_\_\_ per month.  
 Not the same, the assessments range from \$ \_\_\_\_\_ to \$ \_\_\_\_\_ per month.
23. Do the unit assessments include any charges for unit utilities?  YES  NO. If YES, please indicate which utilities: \_\_\_\_\_
24. As of the start of the current fiscal year, how many are delinquent more than thirty (30) days in their unit assessment charges? # \_\_\_\_\_. Total amount of outstanding delinquent charges is \$ \_\_\_\_\_
25. Are there any special assessments now approved, or have there been any in the past two years?  YES  NO. If YES, describe the nature / purpose, the total amount, and the per unit charge. Nature / Purpose of assessment: \_\_\_\_\_  
 \_\_\_\_\_ Total amount of assessment: \$ \_\_\_\_\_. Per unit charge: \$ \_\_\_\_\_.
26. Indicate if the project is  Self-Managed, or  Managed by a management firm.
27. If a management firm manages the project, is it related to the developer?  YES  NO. If YES, describe the nature of the relationship: \_\_\_\_\_  
 Name: \_\_\_\_\_ Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_
28. If an Owners' Association employee manages the project, supply the following contact information:  
 Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**CERTIFICATION**

I, the undersigned, certify that to the best of my knowledge and belief, the information and statements contained on this form and the attachments are true and correct.

\_\_\_\_\_  
 Signature of Association Representative or Preparer                      Date                      Telephone Number

\_\_\_\_\_  
 Name of Association Representative or Preparer                      Title

\_\_\_\_\_  
 Preparer's Company Name and Address