



FHA Single Unit Approval Questionnaire Form 9991

PROJECT NAME:	
STREET ADDRESS:	
CITY, STATE and ZIP:	

REQUIRED ITEMS:

- _ 1. HUD Form 9991. (Attached)
- _ 2. Certificate of Insurance.
 - _____ a) Property/wind
 - _____ b) Liability
 - _____ c) Fidelity.
 - _____ d) FEMA Flood Map.
 - _____ e) Flood including RCV, if required.
 - _____ f) HO-6 if Master insurance is not walls in.
- _ 3. Recorded copy of CCR's or Declaration of Condominium.
- _ 4. Recorded copy of By-Laws of Condominium.
- 5. Recorded copy of Articles of Incorporation of the condo association.
If unincorporated please advise.
- _ 6. Financials
 - _____ a) Current Annual Budget
 - _____ b) YTD Operating Statement.
 - _____ c) Prior Year Operating Statement.
 - _____ d) Balance Statement (Less than 90 days)
 - _____ e) Financial Distress Resolution
- _ 7. Litigation- Provide copy of Complaint(s).

Florida Capital Bank, N.A.
Condominium Review Department
E-mail: condoreview@flcb.com
4704 18th Avenue West
Bradenton, FL 34209
Telephone number: 941-748-3087
Fax number: 941-747-9725

**FHA Condominium Loan Level/
Single-Unit Approval
Questionnaire**

**U.S. Department of Housing
and Urban Development
Office of Housing**

Public Reporting Burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a currently valid OMB control number. This information collection is required to obtain or retain benefits. This information will not be held confidential. The information is used to process single-unit approvals for forward mortgages and Home Equity Conversion Mortgages. This information is collected to determine if a condominium project is eligible for FHA project approval and if a unit in an approved or unapproved condominium project is eligible for FHA-insured financing. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of the Chief Information Officer, U.S. Department of Housing and Urban Development, 451 7th Street SW, Washington, DC 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (OMB Number: 2502-0610) Washington, DC 20503. Do not send this completed form to either of the above addresses.

General: Mortgagees must complete the questionnaire as outlined in Form HUD-9991 Instructions and provide the required documentation per HUD Handbook 4000.1, *FHA Single Family Housing Policy Handbook* (Handbook 4000.1).

FHA Case Number: _____ **Lender Loan Number:** _____

Section 1: Mortgagee Information.

1.a. Mortgagee Information				
Mortgagee Name:			FHA Lender ID Number:	
Street Address:		City:		
State:	ZIP Code:	Phone Number:	Fax Number:	
Contact Name/Title:			Email Address:	

Section 2: Condominium Project Information.

2.a. Condominium Project		Loan Level <input type="checkbox"/>	Single-Unit <input type="checkbox"/>
Legal Name of Project:		FHA Condo ID Number:	
Street Address:			
City:	State:	ZIP Code:	
Project Completion Date:	Number of Phases:	Number of Completed Phases:	

2.b. Condominium Association				
Condominium Association Name:			Association Tax ID Number:	
Street Address:		City:		
State:	ZIP Code:	Phone Number:	Fax Number:	
Contact Name/Title:			Email Address:	

Section 3: Condominium Project Eligibility. Must be completed to verify both loan level and Single-Unit Approval requirements.

3.a. Occupancy Requirements by Construction Type	
1. Owner Occupancy	
<ul style="list-style-type: none"> Owner-occupied Units include any Unit: <ul style="list-style-type: none"> occupied by the owner for any portion of the calendar year and that is not rented for a majority of the year; listed for sale, and not listed for rent, that was previously occupied by the owner, as described above; or sold to an owner who intends to occupy the Unit as described in the first bullet of this section. A Unit owned by the builder/developer is not an owner-occupied Unit. A non-owner-occupied Unit refers to a Unit that does not meet the requirements above. 	
2. Check Appropriate Construction Type for Condominium Project.	
<input type="checkbox"/> Existing Construction (>12 months old)	<input type="checkbox"/> Complete Legal Phase
<input type="checkbox"/> New Construction Complete Project (<12 months old)	
# of Units	
3. Provide the total number of Units in the Condominium Project.	
i. Provide the number of owner -occupied Units (as described in 3.a.1.).	
ii. Provide the number of non-owner -occupied Units.	

3.b. Individual Owner Concentration	Yes	No
1. Does any single owner own more than one Unit? If "Yes," please complete the information in the table.	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the Individual Owner Concentration comply with the FHA requirement?	<input type="checkbox"/>	<input type="checkbox"/>
3. Individual/Entity Name (Attach list for additional individual owners as necessary)	Developer/ Builder	# of Units Owned
	<input type="checkbox"/>	
	<input type="checkbox"/>	

3.c. Property Information	Please answer the following questions. Is the Condominium Project:	
	Yes	No
1. A Condominium Project under a Leasehold Interest?	<input type="checkbox"/>	<input type="checkbox"/>
2. A Gut Rehabilitation (Gut Rehab) conversion project?	<input type="checkbox"/>	<input type="checkbox"/>
3. A New Construction project? (Including Proposed Construction, Under Construction, or Existing Construction Less than One Year)	<input type="checkbox"/>	<input type="checkbox"/>
4. A Manufactured Home Condominium Project?	<input type="checkbox"/>	<input type="checkbox"/>

3.d. Units in Arrears	# of Units
1. How many Units are more than 60 Days past due on their Condominium Association dues and special assessment payments? (Excluding late fees or other administrative expenses)	

3.e. Insurance Requirements	Yes	No	
Walls-In	Does the Condominium Association have a master or blanket insurance policy that includes interior Unit coverage and will cover the replacement of interior improvements the Borrower may have made to the Unit? If "No," a Borrower-obtained Walls-In policy (HO-6) covering the same is required.	<input type="checkbox"/>	<input type="checkbox"/>

Section 4: Single-Unit Approval. Mortgagees must complete this section for approval of a Unit located in a Condominium Project that is **not** FHA-approved.

4.a. Recorded Documents and Transfer of Control		Yes	No
1.	Have governing documents been recorded as required by applicable law?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do the governing documents allow for Live/Work arrangements that comply with FHA requirements?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Has Control of the Condominium Association been transferred from the developer/builder to the Unit owners?	<input type="checkbox"/>	<input type="checkbox"/>

4.b. Financial Condition		Yes	No
1.	Does the Condominium Association have a reserve account for capital expenditures and deferred maintenance?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Does the Condominium Association maintain separate accounts for operating and reserve funds?	<input type="checkbox"/>	<input type="checkbox"/>
3.	For projects with Commercial/Non-Residential Space, are the residential and commercial portions of the Condominium Project independently sustainable? Check here if not applicable: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Has the project experienced a Financial Distress Event within the last 36 months?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Provide the following information:	Amount	
a.	Annual Condominium Association Dues	\$	
b.	Special Assessments	\$	
c.	Reserve Account Balance	\$	

4.c. Commercial/Non-Residential Space		<input type="checkbox"/> N/A	Sq. Footage
1.	Total square footage of the Condominium Project		
2.	Total square footage of the Commercial/Non-Residential Space		
3.	Total square footage of the Residential Space		

4.d. Additional Insurance Requirements for Single-Unit Approval			Yes	No
Insurance Type				
1.	Liability Insurance	Does the Condominium Association maintain comprehensive Liability Insurance policy for the entire Condominium Project, including all common areas, Common Elements, public ways, and all other areas that are under its supervision, in the amount of at least \$1 million for each occurrence?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Fidelity Insurance	Does the Condominium Association maintain Fidelity Insurance for all officers, directors, and employees of the Condominium Association and all other persons handling or responsible for funds administered by the Condominium Association (including management company)?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Hazard Insurance	Does the Condominium Association have a master or blanket Hazard Insurance policy in an amount equal to at least 100% of the insurable replacement cost of the Condominium Project, including the individual Units in the Condominium Project?	<input type="checkbox"/>	<input type="checkbox"/>

4.d. Additional Insurance Requirements for Single-Unit Approval			Yes	No
Insurance Type				
4.	Flood Insurance	Are Units or Common Elements located in a Special Flood Hazard Area (SFHA)? If "Yes," Flood Insurance is in force equaling (select only one option below): 100% replacement cost; <input type="checkbox"/> Maximum coverage per Condominium Unit available under the <input type="checkbox"/> National Flood Insurance Program (NFIP); or Some other amount (enter amount here) \$_____.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

4.e. Litigation		Yes	No
1.	Is the Condominium Project or Condominium Association subject to any pending Litigation? If "Yes," provide a signed and dated explanation.	<input type="checkbox"/>	<input type="checkbox"/>

Lender's Certification:

I, the undersigned, certify that the information provided above was collected within the last 90 Days and accurately represents the information obtained from verifiable and reliable sources, including a Condominium Association, public records, independent third parties, or other data sources. The information and statements contained in all sections of the questionnaire are true and correct to the best of my knowledge and belief and that all required documents have been provided.

Name (printed)

Title and Company Name

Signature

Date

WARNING: This warning applies to all certifications made in this document.

Anyone who knowingly submits a false claim, or makes false statements is subject to criminal and civil penalties, including confinement for up to 5 years, fines, and civil penalties. 18 U.S.C. §§ 287, 1001 and 31 U.S.C. §3729