

FHA Single Unit Approval Questionnaire Form 9991

PROJECT	T NAME:			
STREET A	ADDRESS:			
CITY, STA	ATE and ZIP:			
REQUIR	EED ITEMS:			
1.	HUD Form 9991. (Attached)			
_ 1.	HOD Form 9991. (Attached)			
_2.	Flood Determination Certificate.			
3.	Certificate of Insurance.			
_	a) Property/wind			
•	b) Liability			
•	c) Fidelity.			
•	d) FEMA Flood Map.			
	e) Flood including RCV, ifrequired.			
	e) Flood including KCV, if required f) HO-6 if Master insurance is not walls in.			
	i) Ito-o ii waster iiisurance is not wans iii.			
_ 4.	Recorded copy of CCR's or Declaration of Condominium.			
_ 5. Recorded copy of By-Laws of Condominium.				
_ s. Iteestates copy of by barns of contactinities.				
_ 6.	Recorded copy of Articles of Incorporation of the condo association.			
	If unincorporated please advise.			
7.	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			
_ 8.	Litigation- Provide copy of Complaint(s).			

Florida Capital Bank, N.A. Condominium Review Department

E-mail: reviews@condoreviews.com
10200 Forest Green Blvd, Suite 112
Louisville, KY 40223
Telephone number: 941-748-3087 / 833-242-4484

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 (HECM). 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. Privacy Act Notice: Section 203 of the National Housing Act (12 U.S.C. § 1715z-20) authorize HUD to process applications for FHA insurance of eligible Single Family and Home Equity Conversion Mortgages and respond to inquiries regarding applications for mortgage insurance. 31 U.S.C. § 7701 and 42 U.S.C. § 3543 authorize HUD to collect taxpayer identifying numbers, which may include Social Security Numbers (SSN).

HA Case Number:		Lender Loa	n Number	:
ection 1: Mortg	gagee Information.			
1.a. Mortgagee I	Information			
Mortgagee Name:				FHA Lender ID Number:
Street Address:			City:	
State:	ZIP Code:	Phone Number:		Fax Number:
Contact Name/Title:			Email A	ddress:
ection 2: Condo	ominium Proiect Info	rmation.		
	ominium Project Info Im Project	ormation. Loan Level		Single-Unit ■
2.a. Condominiu	ım Project			Single-Unit FHA Condo ID Number:
2.a. Condominiu egal Name of Proje	ım Project			
egal Name of Proje treet Address:	ım Project			
egal Name of Proje treet Address:	rm Project	Loan Level		FHA Condo ID Number:
P.a. Condominius egal Name of Project Completion	m Project ct: Date:	State:		FHA Condo ID Number: ZIP Code:
Project Completion	Date:	State:		FHA Condo ID Number: ZIP Code:
P.a. Condominiu Legal Name of Proje Street Address: City: Project Completion Condominium Assoc	Date:	State:	City:	FHA Condo ID Number: ZIP Code: Number of Completed Phases:
ection 2: Condo 2.a. Condominiu Legal Name of Proje Street Address: City: Project Completion Condominium Associates Street Address:	Date:	State:	City:	FHA Condo ID Number: ZIP Code: Number of Completed Phases:

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

require	ements.			
3.a.	Occupancy Requirements by Construction Type			
1. Ow	ner Occupancy			
•	Owner-occupied Units include any Unit:			
	- 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,			ove; 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 about	VΩ		
2 Ch	eck Appropriate Construction Type for Condominium Project.	ve.		
	isting Construction (>12 months old)			
	ew Construction Complete Project (<12 months old)			
	W Construction Complete Project (12 months ord)		#	of Units
3. Pro	vide the total number of Units in the Condominium Project.		T	
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. Do	es any single owner own more than one Unit? If "Yes," please complete the information ible.	in		
	es the Individual Owner Concentration comply with the FHA requirement?			
3. Ind	ividual/Entity Name (Attach list for additional individual owners as necessary)	Develop Builde		# of Units Owned
3.c.	Property Information			
	Please answer the following questions. Is the Condominium Project:	Yes		No
1.	A Condominium Project under a Leasehold Interest?		\bot	<u> </u>
2.	A Gut Rehabilitation (Gut Rehab) conversion project?	<u> </u>		<u> </u>
3.	A New Construction project? (Including Proposed Construction, Under			
1	Construction, or Existing Construction Less than One Year)		+	
4.	A Manufactured Home Condominium Project?		<u></u>	
3.d.	Units in Arrears	# of	Unit	
1.	How many Units are more than 60 Days past due on their Condominium Association du		Onic	.3
	and special assessment payments? (Excluding late fees or other administrative expense			
3.e.	Insurance Requirements	Yes		No
Walls		l		
	policy that includes interior Unit coverage and will cover the replacemen interior improvements the Borrower may have made to the Unit? If "No,			
	Borrower-obtained Walls-In policy (HO-6) covering the same is required.	u		

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.

Condo	minium Project th	at is not FHA-approved.		
4.a.	Recorded Docur	ments and Transfer of Control	Yes	No
1.	Have governing d	ocuments been recorded as required by applicable law?		
2.	Do the governing requirements?	documents allow for Live/Work arrangements that comply with FHA		
3.	Has Control of the Condominium Association been transferred from the developer/builder to the Unit owners?			
4.b.	Financial Condit		Yes	No
1.	Does the Condominium Association have a reserve account for capital expenditures and deferred maintenance?			
2.		ninium Association maintain separate accounts for operating and reserve funds?		
3.		Commercial/Non-Residential Space, are the residential and commercial portions ium Project independently sustainable? applicable: \Box		
4.	Has the project ex	xperienced a Financial Distress Event within the last 36 months?		
5.	Provide the follow	ving information:	Amo	ount
a.	Annual Condomir	nium Association Dues	\$	
b.	Special Assessme	nts	\$	
C.	Reserve Account	Balance	\$	
			c =	
4.c.		on-Residential Space	Sq. Fo	otage
1. 2.	-	otage of the Condominium Project otage of the Commercial/Non-Residential Space		
3.		otage of the Residential Space		
<u>J.</u>	Total square 100	rage of the Residential Space	<u> </u>	
4.d.	Additional Insu	rance Requirements for Single-Unit Approval		
	Insurance Type		Yes	No
1.	Liability	Does the Condominium Association maintain comprehensive Liability		
	Insurance	Insurance policy for the entire Condominium Project, including all common		
		areas, Common Elements, public ways, and all other areas that are under its		
2.	Fidelity	supervision, in the amount of at least \$1 million for each occurrence? Does the Condominium Association maintain Fidelity Insurance for all officers,		
۷.	Insurance	directors, and employees of the Condominium Association and all other		
		persons handling or responsible for funds administered by the Condominium		
		Association (including management company)?		
3.	Hazard	Does the Condominium Association have a master or blanket Hazard Insurance		
	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?		

4.d.		rance Requirements for Single-Unit Approval	Yes	No
4.	Insurance Type Flood	Are Units or Common Elements located in a Special Flood Hazard Area (SFHA)?		
	Insurance	If "Yes," Flood Insurance is in force equaling (select only one option below): 100% replacement cost;		
		Maximum coverage per Condominium Unit available under the		
		National Flood Insurance Program (NFIP); or Some other amount (enter amount here) \$		
		Some other amount (enter amount here) \$		
4.e.	Litigation		Yes	No
1.		ium Project or Condominium Association subject to any pending Litigation? If signed and dated explanation.		
_	ed documents hav	public records, independent third parties, or other data sources. I/We further certi e been provided.	.,	
Name ((printed)	Title and Company Name		
 Signatu	ıre			
		ning applies to all certifications made in this document. nits a false claim, or makes false statements is subject to criminal and civil penalties, including confine		

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 1010, 1012, 1014; 31 U.S.C. §§ 3729, 3802)