

# Shamrock Financial Corporation

NMLS # 2227

75 Newman Avenue, East Providence, RI 02916  
800-321-8129

## CONDOMINIUM PROJECT QUESTIONNAIRE FOR FHA RE-CERTIFICATION

If project is 20 or more units, is there a fidelity bond/fidelity insurance policy?  YES  NO

Is there commercial usage within the project?  YES  NO If Yes, what type of business? \_\_\_\_\_

If project has 10 or more units, does any single entity own more than 10% of the total units in the project?  YES  NO

Please provide number of units owned by each individual investor. \_\_\_\_\_

How many units are in arrears, more than 30 days past due, on association fees? (Includes REO owned units) \_\_\_\_\_.

Are the units, common elements, and recreation facilities complete (including any planned rehabilitation for a condominium conversion)?  YES  NO

Is the developer/builder in control of the Homeowners Association (HOA)?  YES  NO

Are there any special assessments pending?  YES  NO

Is there any legal action pending against the condominium association or its directors or officers?  YES  NO

Are there any adverse environmental factors affecting the project?  YES  NO

Have there been any changes or additions to the condominium legal documents?  YES  NO

Month/Year Completed: \_\_\_\_\_ Manufactured Housing:  YES  NO

Total Number of Units: \_\_\_\_\_ Total Number of Legal Phases: \_\_\_\_\_ Number of Completed Phases: \_\_\_\_\_

Number of Units of Vacant and Unsold: \_\_\_\_\_ Number of Units Bank Owned (REO): \_\_\_\_\_

Number of Units Rented: \_\_\_\_\_ Number of Units Owner Occupied: \_\_\_\_\_

Number of defined Affordable Housing Units: \_\_\_\_\_

HOA Tax Identification Number: \_\_\_\_\_

Condo FHA ID: \_\_\_\_\_

Condominium Legal Project Name: \_\_\_\_\_

Address: \_\_\_\_\_

Primary Contact Person: \_\_\_\_\_

Primary Contact Telephone Number: \_\_\_\_\_

Primary Contact E-mail Address: \_\_\_\_\_

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

\_\_\_\_\_  
Signature of Association Representative or Preparer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**Please print form, sign, and fax to 401-228-9019, or include the completed form with your submission package. If you have any questions, please contact Deb Skillin at 401-228-9594 or at [deb.skillin@shamrockfinancial.com](mailto:deb.skillin@shamrockfinancial.com) . Thank you.**

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## Document Checklist for Re-Certification of Condominium Project:

- Copy of **Recorded** project site plan, plat map and/or site survey which adequately indentifies the units;
- Coy of **Recorded** Declaration of Condominium;
- Copy of **Recorded** Amendments, if any;
- Copy of Articles of Incorporation, if applicable;
- Copy of the By-Laws;
- 2 years of condominium association annual budget which must include a breakdown of reserves for replacement of the common areas (i.e. roofs, sidewalks, roads, etc.);
- Management agreement, if applicable;
- FEMA Flood Map;
- Minutes of the last two association meetings, if operational; and
- Proof of hazard and liability insurance coverage, and if applicable, flood & fidelity bond/fidelity insurance.

**NOTE:** While this is the complete list of documents required for the HUD recertification process there maybe circumstances that necessitate you provide additional information for clarification.