SPORTATION SUILDIN NG APPROVED BUDGET 2002	92480 00	8540 GG	8040.CO	8040.00	8040.00	8040.00	8040,00	90.40.00	8040.00	3040.00	8040.00	8040.00	8040.00	MOIMIN TOK
Part	9,500.00	800.00	800.00	800,00	800.00	800.00	800.00	800.00	800.00	800.00	800.00	800.00	800.00	(HOA)
Part Mary	3,600.00	300.00	300.00	300,00	300.00	300.00	300.00	300,00	300.00	300.00	300.00	300.00	300.00	RESERVE
Patricular Mar	1,200.0	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	GENERATOR
Part Mar May May	16,800.0	1,400.00	1,400.00	1,400,00	1,400.00	1,400.00	1,400.00	1,400.00	1,400.00	1,400.00	1,400.00	1,400.00	1,400.00	GROUNDS GAS
Patilida Nac Approversia Aliany Intervious In	360.	30.00	30.00	30,00	30.00	30,00	30.00	30,00	30.00	30.00	30,00	30.00	30.00	GEN. MAINT.
Pathibia Nac Approved Budget 1,200.00 1,200.0	996.00	83,00	83.00	83,00	83,00	83,00	83,00	83,00	83.00	83.00	83.00	83.00	83.00	ELEVATOR
Feb Mar Approved 1,200.00 1,200	2,040.00	170.00	170.00	170,00	170.00	170.00	170.00	170,00	170.00	170.00	170.00	170.00	170.00	ACCOUNTING
Feb Mar Approved Jun Jun Aug Seph Oct Mov Dec 1,200.00	2,496.0	208.00	208.00	208,00	208.00	208.00	208.00	208,00	208.00	208.00	208.00	208.00	208.00	SYSTEM
Feb Mor App. May Jun Jul Aug Sep Oct Mov Doc 1,200,00 1,20	420.00	35.00	35.00	35,00	35.00	35.00	35.00	35.00	35.00	35.00	35,00	35.00	35,00	SYSTEM FIRE, SPRINK.
BUILDIN ING APPROVED BUIJGET 2022 Feb Mor Apr May Jun Jul Aug Sep Oct Mov Dec 900.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00 1,000.00	1,800.00	150.00	150.00	150,00	150.00	150.00	150.00	150,00	150.00	150.00	150.00	150.00	150.00	INSURANCE ALARM
Feb Mor Approved Many Jun Jul Aug Sap Oct Mov Doc 1,200.00 900.00 900.00 900.00 1,200	3,300.00	275.00	275.00	275,00	275.00	275.00	275.00	275,00	275.00	275.00	275.00	275.00	275.00	LIABILITY
Feb Mor Apr May Jun Jul Aug Sep Oct Nov Dec 9CC.00 900.00 900.00 900.00 1,200.00	12,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	E E E E E E E E E E E E E E E E E E E
Feb Mor Approved May Jun Jul Aug Sep Oct Nov Dec 9CC.00 900.00 900.00 900.00 1,200.00	2,220.00	185.00	185.00	185,00	185.00	185.00	185.00	185.00	185,00	185.00	185.00	185.00	185.00	FVATOR
Feb Mor Apr May Jun Jul Aug Sep Oct Nov Dec 9CC.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,200.00 1,070.00 <td>1,608.00</td> <td>134.00</td> <td>134.00</td> <td>134,00</td> <td>134,00</td> <td>134.00</td> <td>134.00</td> <td>134.00</td> <td>134.00</td> <td>134.00</td> <td>134.00</td> <td>134.00</td> <td>134.00</td> <td>exterminat Garbage</td>	1,608.00	134.00	134.00	134,00	134,00	134.00	134.00	134.00	134.00	134.00	134.00	134.00	134.00	exterminat Garbage
BUILDIN ING APPROVED BUDGET 2022 Feb Mor Apr May Jun Jul Aug Seab Oct Nov Doc 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00 1,200.00 1	12,840.00	1,070.00	1,070.00	1,070,00	1,070,00	1,070.00	1,070.00	1,070.00	1,070.00	1,070.00	1,070.00	1,070.00	1,070.00	INSURANCE
BUILDIN ING APPROVED BUDGET 2022 Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec 900.00 900.00 900.00 900.00 900.00 900.00 900.00 900.00	14,400.00	1,200.00	1,200.00	1,200,00	1,200,00	1,200.00	1,200.00	1,200.00	1,200.00	1,200.00	1,200.00	1,200.00	1,200.00	(COMMON)
BUILDINING APPROVED BUDGET	10,600	Dec 900.00	%av 900.00	900,00	00'006	Aug 900.00	900.00	Jun 900.00	00,000 900,000	Apr 900.00	MGr 900,00	Feb 900.00	Jan 900.00	EXPENSES WATER ELECTRICITY
	and and section (section)	the property of the contract o	The same agreement of the court	Commission for the first for the first for the first for the first form of the first	communities adoptings and a party of a	* 35	2022	Š	KED BL	APPRO	Ž		ROLVI	ANSPOR

TOTAL @ \$8040.00/30= \$269.00 NUMBER OF BEDROOMS:

BER OF BEDROOMS: TOTAL HOA FEES

1 \$268.00
2 \$536.00
3 \$804.00
2 \$1,608.00

Approved 11/22/3021

Mayor my



Date 12/31/21 Primary Account Enclosures

Page 1 1000456064

Transportation Building Assoc Inc Escrow Account 2201 1st Ave N, 6th Floor Birmingham AL 35203

** CHECKING ACCOUNTS ***

Account Title: Transportation Building Assoc Inc

Escrow Account

The Capital Account
Account Number 1000456064 Statement Dates 12/01/21 thru 12/31/21
Previous Balance 54,035.26 Deposits .00 Average Ledger 54,035.26
Checks/Charges .00 Average Collected 54,035.26
Monthly Service Fee .00 Interest Earned 3.67
Interest Paid 3.67 Annual Percentage Yield Earned 0.08%
Current Balance 54,038.93 2021 Interest Paid 37.33

ACTIVITY IN DATE ORI	DIER		
Date Description	Amount	Balance	The state of the s
12/31 Interest Deposit	3.67	54,038.93	
THANK YOU F	OR BANKING WITH US !		
**********************	• • • • • • • • • • • • • • • • • • • •		



Date 12/31/21 Primary Account Enclosures

Page 1 1000456056 11

Transportation Building Assoc Inc 2201 1st Ave N, 6th Floor Birmingham AL 35203

*** CHECKING ACCOUNTS ***

Account Title: Transportation Building Assoc Inc

Enterprise Checking Account Number Previous Balance 8 Deposits 12 Checks/Charges Monthly Service Fee Interest Paid Current Balance	1000456056 23,653.36 10,410.86 13,782.78 .00 20,281.44	Number of Enclosures Statement Dates 12/01/21 t Days This Statement Period Average Ledger Average Collected	hru 12/31/21 31 24,401.19 24,144.58
--	---	---	--

ACTIVITY IN DATE	ORDER		
Date Description	Amount	Parlance	
12/03 Regular Deposit	516.51	24,169,87	
12/03 Regular Deposit	557.49	24,727.36	
12/07 Regular Deposit	3,060.00	27,787,36	
12/09 Regular Deposit	1,408.50	29,195.86	
12/09 Check # 352	1,835.00-	27,360.86	
12/09 Check # 353	42.80-	27,300.00	
12/10 Regular Deposit	255.00	27,513.06	
12/10 Check # 351	325.00-	27,373.00	
12/13 Check # 355	58.00-	27,190.06	
12/13 Check # 354	215.81-	26,974.25	
12/14 Regular Deposit	365.87	27,340.12	
12/15 DEPOSIT VDM PROPERTIES L	2.188.97		
CCD DP23869800	2,100.97	29,529.09	
BIZEDP			
12/15 Check # 356	3,362.32-	26,166.77	



Date 12/31/21 Primary Account Enclosures

Page 2 1000456056 11

Enterprise Checking

1000155055	<i>-</i>	
1000456056	(Continue	ri 'n
	(wone in the c	~ _

ACTIVITY IN DATE O	RDER		120
Date Description	Amount	Balance	CONTRACTOR OF THE PARTY OF THE
12/17 Check # 358	111.73-	26,055.04	
12/20 Check # 357	445.24-	25,609.80	
12/21 INSURANCE FIRST INSURANCE CCD 900-94720570	1,058.80-	24,551.00	
2363437365			
12/21 Check # 359	945.67-	23,605.33	
12/22 Debit Memo	4,182.41-	19,422.92	
12/23 Regular Deposit	2,058.52	21,481.44	
12/31 Check # 362	1,200.00-	20,281.44	

					OK NUMBER				
	ieck No	Amount	Date (Theck No	Amount D	ate	Check No	Amount	
12/10 12/09 12/09 12/13 * Indicates	351 352 353 354 Break in	325.00 1,835.00 42.80 215.81 Check Number	12/15 12/20 12/17	355 356 357 358 e	58.00 1 3,362.32 1 445.24 111.73	2/21 2/31	359 362*	945.67 1,200.00	

THANK YOU FOR BANKING WITH US !



Condominium Questionnaire Addendum- Full Form

	nust be completed and signed by a representative of the HOA. Document must be led with the Condominium Project Questionnaire-Full Form.
1.	What is the project's total square footage? 2. Condo on whole b/dg?
2.	Is project licensed as a hotel, motel, resort, transient, or hospitality entity? Yes
3.	Does the HOA or project's legal documents restrict owners' ability to occupy the unit during any part of
	the year? Yes No
4.	Does the HOA or project's legal documents require owners to make their unit available for rental pooling
	(daily or otherwise)? Yes No
5.	Does the HOA or project's legal documents require unit owners to share profits from rental of units with
	the HOA, management company, resort, or hotel rental company? Yes
6.	Does project have current or pending special assessments? X Yes No
g Bldg 14	Repairityes, provide dollar amount and reason for assessment. But ELEVATOR REPAIRS (19,744) 25 CAND ASSEMBNT (4,370)
7.	For any single entity owners who own 20% or more of the total units in project, are HOA
	assessments current? Yes No N/A
	If no, provide number delinquent and explanation.
8.	If in a flood zone and commercial space in project exceeds 25%, provide a copy of the full flood
	policy. NA

Form 1076

Condominium Project Questionnaire

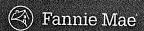


ADDENDUM ADDED DECEMBER 2021

Instructions

Lender: Complete the first table below and enter the date on which the form should be returned to you.

mor eligi	neowners' Association (HOA) or Management Company: The tgage financing to purchase or refinance a unit in this project bility of the project for mortgage financing purposes. Complew. Questions about this form should be directed to the lende	nis form has been sent to you on behalf of an individual seeking. The mortgage lender needs this information to determine the ete and return this form by to the lender listed r contact.
Ler	nder Name:	Lender Phone Number:
Cor	ntact Name:	Lender Fax Number:
Len	nder Address:	Lender Email Address:
1 2 3 4 5 6 7	HOA Management Address: 2201 FIRST HOA Management Address: SAME HOA Name (if different from Project Legal Name): TRAS HOA Tax ID#: 30 - 0546597 HOA Management Company Tax ID#: WA	
8	Name of Master or Umbrella Association (if applicable): Does the project contain any of the following? Check all that appl	A
	 a Hotel/motel/resort activities, mandatory or voluntary or other restrictions on the unit owner's ability to occu b Deed or resale restrictions 	rental-pooling arrangements,
	c	
	d	menities or services
	e	
	f Supportive or continuing care for seniors or for residen	ts with disabilities
	Provide additional detail here, if applicable (optional):	



II. F	rojec	t Completion Information				
1	Is th	e project 100% complete, including all construction or renovation of units, common nents, and shared amenities for all project phases?	岚	YES		ОМ
	If No	o, complete lines a-f:				
	а	Is the project subject to additional phasing or annexation?		YES] NO
	b	Is the project legally phased?		YES		ОИ
	c	How many phases have been completed?				
	d	How many total phases are legally planned for the project?				
	е	How many total units are planned for the project?				
	f	Are all planned amenities and common facilities fully complete?		YES) NO
2	Has	the developer transferred control of the HOA to the unit owners?	K	YES		ate transferred: VOV, 2006
				ŇO		stimated date the ansfer will occur:
III. N	lewly	Converted or Rehabilitated Project Information				
1	as an	e project a conversion within the past 3 years of an existing structure that was used a partment, hotel/resort, retail or professional business, industrial or for other residential use?		YES	>	Ç NO
	If Yes	s, complete lines a-g:				
	а	In what year was the property built?				
	b	In what year was the property converted?				
	c	Was the conversion a full gut rehabilitation of the existing structure(s), including replacement of all major mechanical components?		YES		I NO

f

g

components are sufficient?

Does the report from the licensed engineer indicate that the project is structurally sound, and that the condition and remaining useful life of the project's major

Are all repairs affecting safety, soundness, and structural integrity complete?

Are replacement reserves allocated for all capital improvements?

Are the project's reserves sufficient to fund the improvements?

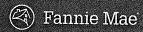
□ NO

□ NO

☐ YES

☐ YES

☐ YES



IV. Financial Information NONE How many unit owners are 60 or more days delinquent on common expense assessments? 1 In the event a lender acquires a unit due to foreclosure or a deed-in-lieu of foreclosure, 2 is the mortgagee responsible for paying delinquent common expense assessments? 1 to 6 months If Yes, for how long is the mortgagee responsible for paying common expense assessments? 7 to 12 months (Select one) More than 12 months 3 Is the HOA involved in any active or pending litigation? YES If Yes, attach documentation regarding the litigation from the attorney or the HOA. Provide the attorney's name and contact information: Attoney Name: Attorney Phone Number:

V. Ownership & Other Information

1 Complete the following information concerning ownership of units:

	Entire Project	Subject Legal Phase (in which the unit is located) If Applicable
Total number of units	13 AS DEVELOPED	
Total number of units sold and closed		
Total number of units under bona-fide sales contracts		
Total number of units sold and closed or under contract to owner-occupants	NONE	
Total number of units sold and closed or under contract to second home owners	3 (100,200,76)	
Total number of units sold and closed or under contract to investor owners	3 (100,200,70)	
Total number of units being rented by developer, sponsor, or converter		
Total number of units owned by the HOA		



2 Complete the following table if more than one unit is owned by the same individual or entity.

Individual / Entity Name	Developer or Sponsor (Yes or No)	Number of Units Owned	Percentage Owned of Total Project Units		r Leased ket Rent	Number Leased under Rent Control
ELIAS HONDER	g □ yes □ no	800,500,1000 4AB,50	40%	√6		
Moreus	☐ YES ☐ NO	100,200	20%	%		
	☐ YES ☐ NO	de constante e reconstante e r	9	⁄ 6	a establishment	
	☐ YES			6	Supplied State of Sta	
3 Do the unit owners ha amenities and commo	ave sole ownership intero on areas?	est in and the right to	use the project	YES	□ NO	
If No , explain who has and common areas:	s ownership interest in a	nd rights to use the p	roject amenities			
4 Are any units or any pa	art of the building used f	or non-residential or	commercial space?	YES	□ №	

Type of Commercial or Non-Residential Use	Name of Owner or Tenant	Number of Units	Square Footage	% Square Footage of Total Project Square Footage
AUAILABLE FOR LEAST	MARCUT TAY LOP	10,200		%
pricoat				%
				%
				%

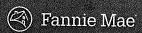
What is the total square footage of commercial space in the building that is separate from the residential HOA?

Include above and below grade space used for commercial purposes, such as public parking facilities, retail space, apartments, commercial offices, and so on.

Total square footage of commercial space:

If Yes, complete the following table:

7100ES 1+2



VI. I	nsura	nce Information & Financial Controls			
1	Are u	units or common elements located in a flood zone?		YES	X NO
	If Ye	s, flood coverage is in force equaling (Select only one option below):			
		100% replacement cost			
		Maximum coverage per condominium available under the National Flood Insurance Program			
		Some other amount (Enter amount here): \$			
2	Chec	k all of the following that apply regarding HOA financial accounts:			
	JA.	HOA maintains separate accounts for operating and reserve funds.			
	B	Appropriate access controls are in place for each account.			
	A	The bank sends copies of monthly bank statements directly to the HOA.			
		Two members of the HOA Board of Directors are required to sign any check written on the reser	ve ac	count.	
		The Management Company maintains separate records and bank accounts for each HOA that us	ses it	s services.	
	П	The Management Company does not have the authority to draw checks on, or transfer funds from, t	ne re	serve account	of the HOA.

3 Supply the information requested below. Do NOT enter "contact agent."

Type of Insuran	ce Carrier/Agent Name	Carrier/Agent Phone Number	Policy Number
Hazard	Collins Insaapm Agency	E 1-800-288-8	740
Liability	All policies	The Control of Control	
Fidelity			
Flood			

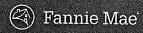
VII. Contact Information	
Name of Preparer:	ELIAE HONDRICKS
Title of Preparer:	PRESIDENT (HOA)
Preparer's Phone:	205 9119 21150
Preparer's Email:	e butchkendricks @ YAhoo. com
Preparer's Company Name:	THANSPORTATION Bldg C+0200 Accom
Preparer's Company Address:	2201 FIRST ADE, KORTH
Date Completed:	2/23/20
	45/50



Condominium Questionnaire Addendum- Full Form

This <u>must</u> be completed and signed by a representative of the HOA. Document must be returned with the Condominium Project Questionnaire-Full Form.

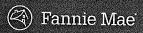
1.	What is the project's total square footage?						
2.	Is project licensed as a hotel, motel, resort, transient, or hospitality entity? Yes						
3.							
4.	Does the HOA or project's legal documents require owners to make their unit available for rental pooling (daily or otherwise)? No						
5.	Does the HOA or project's legal documents require unit owners to share profits from rental of units with						
	the HOA, management company, resort, or hotel rental company? Yes						
6.	Does project have current or pending special assessments? Yes No						
	If yes, provide dollar amount and reason for assessment.						
7.	For any single entity owners who own 20% or more of the total units in project, are HOA assessments current? Yes No N/A If no, provide number delinquent and explanation.						
8.	If in a flood zone and commercial space in project exceeds 25%, provide a copy of the full flood policy.						
Name o	of Preparer:						
Date Co	ompleted:						
Signatu	re:						



Condominium Project Questionnaire Addendum

This Addendum is applicable to both condominium and cooperative projects. It must be completed by an authorized representative of the HOA/Cooperative Corporation.

Proje	ect Info	rmation		1 - E						
Proje	ect Nam	ne:								
Proje	ct Add	ress:								
				SERVICE AND		ara et este		Santi Servinos Port		
Build		fety, Soundness, Structural Integrity, and Habitability								
1	Wher licen	n was the last building inspection by a licensed architect, sed engineer, or any other building inspector?								
2	soun	he last inspection have any findings related to the safety, dness, structural integrity, or habitability of the project's ling(s)?	П	ES		NO				
	2a	If Yes , have recommended repairs/replacements been completed?	Y	ES		NO				
	If the	repairs/replacements have not been completed:								
	2b	What repairs/replacements remain to be completed?								
	2c	When will the repairs/replacements be completed?								
	Provid	de a copy of the inspection and HOA or cooperative board n	neeting m	inutes t	o docui	ment fi	ndings	and acti	on plan.	
3	defici	HOA/Cooperative Corporation aware of any iencies related to the safety, soundness, structural rity, or habitability of the project's building(s)?	YI	ES		NO				
	3a	If Yes, what are the deficiencies?								
	3b	Of these deficiencies, what repairs/replacements remain to be completed?								
	3c	Of these deficiencies, when will the repairs/replacements be completed?								



Build	ing Saf	ety, Soundness, Structural Integrity, and Habitability				
4	requi safety	nere any outstanding violations of jurisdictional rements (zoning ordinances, codes, etc.) related to the y, soundness, structural integrity, or habitability of the ct's building(s)?	The Authority and the state of	YES	NO	
	If Yes	provide notice from the applicable jurisdictional entity.				
5	ls it ai violat	nticipated the project will, in the future, have such ion(s)?		YES	ИО	
	If Yes , requir	provide details of the applicable jurisdiction's rement and the project's plan to remediate the violation.				
6	Does t	the project have a funding plan for its deferred enance components/items to be repaired or replaced?		YES	NO	
7		the project have a schedule for the deferred enance components/items to be repaired or replaced?		YES	NO	
	If Yes,	provide the schedule.				
8	Has th	e HOA/Cooperative Corporation had a reserve study leted on the project within the past 3 years?		YES	NO	
9	What i	s the total of the current reserve account balance(s)?	\$			
10	Are th	ere any current special assessments unit owners/ rative shareholders are obligated to pay? If Yes :		YES	NO	
	10a	What is the total amount of the special assessment(s)?	\$			
	10b	What are the terms of the special assessment(s)?				
	10c	What is the purpose of the special assessment(s)?				
PP Total distribution on the self-op-passed age						



Build	ing Safe	ety, Soundness, Structural Integrity, and Habitability	
11	Are th	ere any planned special assessments that unit owners/ rative shareholders will be obligated to pay? If Yes :	□ YES □ NO
	11a	What will be the total amount of the special assessments?	
	11b	What will be the terms of the special assessments? What will be the purpose of the special assessments?	
12	Has th deferr	e HOA obtained any loans to finance improvements or ed maintenance?	□ YES □ NO
	12a	Amount borrowed?	\$
	12b	Terms of repayment?	
GA December	Artan Grad Arcanian		
Additi	onal Co	mments:	
Conta	ct Infori	nation	
Name	of Prep	arer:	
Title o	f Prepai		
Prepai	rer's Ph	one:	
Prepai	rer's Em	ail:	
Prepai	er's Co	mpany Name:	
Prepar	er's Coi	npany Address:	
Date C	omplet	ed:	

Form 1076

Condominium Project Questionnaire

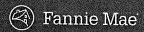


ADDENDUM ADDED DECEMBER 2021

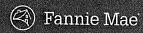
Instructions

Lender: Complete the first table below and enter the date on which the form should be returned to you.

mor eligil	tg bil	age lity	of t	an he	Association (HOA) or Management Company: cing to purchase or refinance a unit in this project project for mortgage financing purposes. Compans about this form should be directed to the lend	ct. The mortgage lender needs t lete and return this form by	on behalf of a this information	n individual seeking on to determine the to the lender listed
Len	nd	er N	lam	e:		Lender Phone Number:		
Cor	nta	act	Nam	ıe:		Lender Fax Number:		
Len	nde	er A	ddr	ess		Lender Email Address:		
			tunki)ii	400				Annima pikkiiki kaasa shiri sa
l. E	3a	sic	Proj	eC	t Information			
1		Pro	ject	Le	gal Name:			
2		Pro	ject	Ph	ysical Address:			
3		HO.	A Ma	na	gement Address:			
4		НΟ	A Na	me	e (if different from Project Legal Name):			
5		НО	A Tax	c IC)#:			
6		НО	А Ма	na	gement Company Tax ID #:			
7	ı	Nar	ne o	fΜ	laster or Umbrella Association (if applicable):			
8	ı	Doe	s th	e p	project contain any of the following? Check all that ap	mana, ang sa masangang balah bly:		
	i	а.			Hotel/motel/resort activities, mandatory or voluntar or other restrictions on the unit owner's ability to occ	y rental-pooling arrangements, upy the unit		
	ı)			Deed or resale restrictions			
	•	2			Manufactured homes			
	(d			Mandatory fee-based memberships for use of project	amenities or services		
	•	2			Non-incidental income from business operations			
	f	:			Supportive or continuing care for seniors or for reside	ents with disabilities		
	P	'rov	ride i	ado	ditional detail here, if applicable (optional):			



II. F	rojec	t Completion Information				
1	Is th	ne project 100% complete, including all construction or renovation of units, common nents, and shared amenities for all project phases?		YES		NO
	If No	o, complete lines a-f:	1			
	a	Is the project subject to additional phasing or annexation?		YES		NO
	b	Is the project legally phased?		YES		NO
	c ,	How many phases have been completed?				
	d	How many total phases are legally planned for the project?	Consumer of company			
	e	How many total units are planned for the project?				
	f	Are all planned amenities and common facilities fully complete?		YES		NO
2	Has	the developer transferred control of the HOA to the unit owners?		YES	Da	te transferred:
111. N	Is th	Converted or Rehabilitated Project Information e project a conversion within the past 3 years of an existing structure that was used a partment, hotel/resort, retail or professional business, industrial or for other	The control of the co	NO		timated date the insfer will occur:
		residential use?		IES	L.	NO
	If Ye	s, complete lines a-g:				
	a , .	In what year was the property built?				
	b	In what year was the property converted?				
	c	Was the conversion a full gut rehabilitation of the existing structure(s), including replacement of all major mechanical components?		YES	0	NO
	d	Does the report from the licensed engineer indicate that the project is structurally sound, and that the condition and remaining useful life of the project's major components are sufficient?		YES	0	NO
	e	Are all repairs affecting safety, soundness, and structural integrity complete?		YES		NO
	f	Are replacement reserves allocated for all capital improvements?		YES		NO
	g	Are the project's reserves sufficient to fund the improvements?		YES	. ·	NO

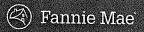


IV. I	inancial Information			
1	How many unit owners are 60 or more days delinquent on common expense assessments?			
2	In the event a lender acquires a unit due to foreclosure or a deed-in-lieu of foreclosure, is the mortgagee responsible for paying delinquent common expense assessments?	YES	□ NO	
	If Yes , for how long is the mortgagee responsible for paying common expense assessments? (Select one)	1 to 6 me 7 to 12 m More tha		
3	Is the HOA involved in any active or pending litigation?	YES	□ №	
	If Yes , attach documentation regarding the litigation from the attorney or the HOA. Provide the attorney's name and contact information:			
	Attoney Name:			
	Attorney Phone Number:			

V. Ownership & Other Information

1 Complete the following information concerning ownership of units:

	Entire Project	Subject Legal Phase (in which the unit is located) If Applicable
Total number of units		
Total number of units sold and closed		
Total number of units under bona-fide sales contracts		
Total number of units sold and closed or under contract to owner-occupants		
Total number of units sold and closed or under contract to second home owners		
Total number of units sold and closed or under contract to investor owners		
Total number of units being rented by developer, sponsor, or converter		
Total number of units owned by the HOA		



2 Complete the following table if more than one unit is owned by the same individual or entity.

Individual / Entity Name	Developer or Sponsor (Yes or No)	Number of Units Owned	Percentage Owned of Total Project Units	Number Leased at Market Rent	Number Leased under Rent Control		
	☐ YES ☐ NO		%				
	☐ YES		9/6				
	☐ YES ☐ NO		%				
	☐ YES		%				
3 Do the unit owners had amenities and commo	3 Do the unit owners have sole ownership interest in and the right to use the project amenities and common areas? ☐ YES ☐ NO						
If No, explain who has ownership interest in and rights to use the project amenities and common areas:							
	Are any units or any part of the building used for non-residential or commercial space? ☐ YES ☐ NO NO						

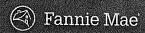
Type of Comr Non-Reside		Name of Owner or Tenant	Number of Units	Square Footage	% Square Footage of Total Project Square Footage	
	ting to a		0.00		%	
					• • • • • • • • • • • • • • • • • • •	
					%	
					%	

5	What is the total square footage of commercial space in the building that is separate from the residential HOA?
	Include above and below grade space used for commercial purposes, such as public parking facilities, retail space, apartments commercial offices, and so on.

Total square footage of commercial space:



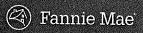
VI. I	nsura	nce Information & Financial Controls
1		inits or common elements located in a flood zone?
	If Ye:	s, flood coverage is in force equaling (Select only one option below):
		100% replacement cost
		Maximum coverage per condominium available under the National Flood Insurance Program
		Some other amount (Enter amount here): \$
2	Chec	k all of the following that apply regarding HOA financial accounts:
		HOA maintains separate accounts for operating and reserve funds.
		Appropriate access controls are in place for each account.
		The bank sends copies of monthly bank statements directly to the HOA.
		Two members of the HOA Board of Directors are required to sign any check written on the reserve account.
		The Management Company maintains separate records and bank accounts for each HOA that uses its services.
		The Management Company does not have the authority to draw checks on, or transfer funds from, the reserve account of the HOA.
3	Sunn	ly the information requested below. Do NOT enter "contact agent."
	of Insu	
Haza		Carrier/Agent Name Carrier/Agent Phone Number Policy Number
11020	ıu	
Liabi	lity	
Fidel	ity	
Floor	. .	
		t Information
		parer:
		Phone: The state of the state o
		Company Name:
		Company Name:
	Compl	



Condominium Project Questionnaire Addendum

This Addendum is applicable to both condominium and cooperative projects. It must be completed by an authorized representative of the HOA/Cooperative Corporation.

Proje	ct Information									
Proje	ct Name:									
Proje	ct Address:	The state of the s								
Build	ing Safety, Soundness, S	tructural Integrity, and Habitability								10 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
1	When was the last build	ing inspection by a licensed architect, y other building inspector?								
2		nave any findings related to the safety, ntegrity, or habitability of the project's		YES		NO				
	2a If Yes , have recorcompleted?	nmended repairs/replacements been		YES		NO				
	If the repairs/replaceme	ents have not been completed:								
	2b What repairs/rep	lacements remain to be completed?								
	2c When will the rep	airs/replacements be completed?								
	Provide a copy of the ins	pection and HOA or cooperative board m	eeting	minute	es to doc	ument	findings a	nd action	plan.	
3	deficiencies related to t	Corporation aware of any ne safety, soundness, structural of the project's building(s)?		YES		NO				
	3a If Yes, what are	the deficiencies?	er a medicaleticom alme en fredericado (fig. De el foresta e promogenicaçõe)							
	3b Of these deficie remain to be con	ncies, what repairs/replacements mpleted?	e de la companya de l	3						
	3c Of these deficient replacements be	ncies, when will the repairs/ e completed?	The second secon							



Build	ing Saf	ety, Soundness, Structural Integrity, and Habitability					
4	requir safety	nere any outstanding violations of jurisdictional rements (zoning ordinances, codes, etc.) related to the y, soundness, structural integrity, or habitability of the ct's building(s)?	The state of the s	YES		NO	
	If Yes,	provide notice from the applicable jurisdictional entity.					
5	Is it ar violat	nticipated the project will, in the future, have such ion(s)?		YES		NO	
	If Yes , requir	provide details of the applicable jurisdiction's rement and the project's plan to remediate the violation.					
6	Does t maint	the project have a funding plan for its deferred enance components/items to be repaired or replaced?		YES		NO	,
7	Does t maint	the project have a schedule for the deferred enance components/items to be repaired or replaced?		YES	О	NO	
	If Yes,	provide the schedule.					
8	Has th compl	e HOA/Cooperative Corporation had a reserve study leted on the project within the past 3 years?	0	YES		NO	
9	What i	is the total of the current reserve account balance(s)?	\$				
10	Are the	ere any current special assessments unit owners/ rative shareholders are obligated to pay? If Yes :		YES	О	NO	
	10a	What is the total amount of the special assessment(s)?	\$				
	10b	What are the terms of the special assessment(s)?					
	10c	What is the purpose of the special assessment(s)?					
	CONTRACTOR CONTRACTOR						
	1						
gh h a' a gairg dag da dha dha dha a' a gairg a an a alas an a			Noted the Secretary to the		PSS and a magnificance of the con-		



Buildin	g Safe	ty, Soundness, Structural Integrity, and Habitability	
11 /	Are the	ere any planned special assessments that unit owners/ rative shareholders will be obligated to pay? If Yes :	□ YES □ NO
1	11a	What will be the total amount of the special assessments?	\$
	11b	What will be the terms of the special assessments? What will be the purpose of the special assessments?	
12 H	······································	e HOA obtained any loans to finance improvements or ed maintenance?	□ YES □ NO
1	.2a	Amount borrowed?	· The control of the
1	.2b	Terms of repayment?	
Addition	ial Cor	nments:	The second se
Contact l	Inforn	nation	
Name of			
Title of P		er:	
Preparer			
Preparer			
		npany Name:	
Date Com		npany Address:	