



Condominium & PUD Project Questionnaire

Is the subject property located in a H ** If yes, please complete the question	Yes	No	
Name:	Signature:	Date:	
Homebuyer Name(s):			
Subject Property Address:		Unit #	
City:	State:	ZIP:	
Condo/PUD Project Name:			
Condo/PUD Project Address:			
HOA Contact Name:	Phone:		
HOA Payment Website:			
Property Management Company:			
Address:			
Contact Name:	Phone:		

What kind of project is it?	Condominium	PUD					
Is the project currently in litigatio	n? Yes	No					
Total number of units in the proje	ect?						
Total number of units occupied as Primary Residence and Second Home?							
What is the ownership percentage allowed for Investment occupancy?							
What is the dues amount?							
When are the dues assessed?	Monthly	Quarterly	Semi-Annually		Annually		
Does the project have a master in ** If yes, please provide a copy of	Yes	No					
Does the project have a master or umbrella association? ** If yes, please answer the questions below. **			Yes	No			
What is the name of the maste	r association?						
What is the dues amount?							
When are the dues assessed?	Monthly	Quarterly	Semi-Annually Annually		Annually		
Representative Name:							
Company Name:							
Phone:	Em	ail:					