# CONDOMINIUM PROJECT QUESTIONNAIRE—FULL FORM

(Fannie Mae Form 1076/Freddie Mac Form 476)

(Lender:	Please complete this section.)			
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Lender Name	Lender Phone Number
Contact Name	Lender Fax Number
Lender Address	Lender Email Address

## I: Basic Project Information

1	Project Legal Name	Gateway Townhomes Association
2	Project Physical Address	14472 E. Mississippi Ave., Aurora CO 80012
3	HOA Management Address	921 S. Dearborn Way, Aurora CO 80012
4	HOA Name	
	(if different from Project Legal Name)	
5	HOA Tax ID#	84-0779076
6	HOA Management Company Tax ID #	N/A
7	Name of Master or Umbrella	
	Association (if applicable)	N/A
8	Does the project contain any of the follow	wing (check all that apply):
а		Hotel/motel/resort activities, mandatory or voluntary rental- pooling
		arrangements, or other restrictions on the unit owner's ability to
		occupy the unit
b		Deed or resale restrictions
С		Manufactured homes
d		Mandatory fee-based memberships for use of project
		amenities or services
e		Non-incidental income from business operations
f		Supportive or continuing care for seniors or for residents with
		disabilities

Ш	Pr	oject	Comp	letion	Info	rmat	tion
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Is the project 100% complete, including all construction or renovation of units, common elements, and shared amenities for all project phases? Yes If No, complete the table below:

		Yes	No
а	Is the project subject to additional phasing or annexation?		···
b	Is the project legally phased?		
С	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?		

1. Has the developer transferred control of the HOA to the unit owners? Yes, Dec., 1975

## III: Newly Converted or Rehabilitated Project Information

1. Is the project a conversion within the past 3 years of an existing structure that was used as an apartment, hotel/resort, retail or professional business, industrial or for other non-residential use? No If Yes, complete the table below:

		Yes	No
а	In what year was the property built?		
b	In what year was the property converted?		
С	Was the conversion a full gut rehabilitation of the existing structure(s), including replacement of all major mechanical components?		
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?		
е	Are all repairs affecting safety, soundness, and structural integrity complete?		
f	Are replacement reserves allocated for all capital improvements?		
g	Are the project's reserves sufficient to fund the improvements?		

- 1. How many unit owners are 60-or-more says delinquent on common-expense assessments? 0
- 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, 6 months
- 3. Is the HOA involved in any active or pending litigation? No

If Yes, attach	documentation	regarding the	litigation from the	e attorney or the	HOA. Provide	the attorney's	name and contact
information:						•	
					٦		
Name:					Phone:	<u></u>	

## 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	32	
Total number of units sold and closed	32	
Total number of units under bona-fide sales contracts		
Total number of units sold and closed or under contract to owner- occupants	21	
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	11	
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				
	□ No		%		
<ol> <li>Do the unit owners have sole ow Yes</li> <li>If No, explain who has ownership</li> <li>Are any units in the project used</li> </ol>	interest in and ri	ghts to use the	project amenitie		
If Yes, complete the following table	e:				
Type of Commercial or Non-Residential Use	Name of Owi	ner or Tenant	Number of Units	Square Footage	% Square Footage of Total Project Square Footage
					%
					%
					%
					%
What is the total square footage include above and below grade sapartments, commercial offices, a       Total square footage of co	space used for co and so on.	ommercial purp	ling that is sepa oses, such as p	rate from the reublic parking fa	esidential HOA? cilities, retail space,
Total square lootage of co	illinercial space	-			
VI: Insurance Information & Financial	Controls				
. Are units or common elements loc	ated in a flood z	one? No			
If Yes, flood coverage is in force	equaling ( <b>selec</b>	t only one opt	ion below):		
☐ 100% replacement cost max ☐ Flood Insurance Program so				ler the Nationa	I

1.

- 2. Check 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.
- 1. Supply the information requested below. Do NOT enter "contact agent." See attached ACORD certificate.

Type of Insurance	Corrier/Agent Name	Carrier/Agent Phone Number	Delias Nombre
modrance	Carrier/Agent Name	Phone Number	Policy Number
Hazard			
Liability			
Fidelity			
Flood			

### **VII: Contact Information**

Name of Preparer	
	Mitchell Powell
Title of Preparer	Managing Agent
Preparer's Company Name	
Preparer's Phone	303-337-5811
Preparer's Email	
	mitchellpowell@comcast.net
Preparer's Company Address	
Date Completed	(insert current date)
	1

LOC#: 0



## **ADDITIONAL REMARKS SCHEDULE**

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AGENCY		NAMED INSURED	
ccig		Gateway Townhomes Assп Inc Attn: Mitch Powell	
POLICY NUMBER	10-10-1	921 S. Dearborn Way	
SEE PAGE 1		Aurora, CO 80012	
CARRIER	NAIC CODE	- {	
SEE PAGE 1	SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM, FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

#### **Additional Coverage**

Travelers Policy #680-294M7088-17-42 includes:

\*2% Wind/Hail Deductible
Ordinance or Law: Cov A Included; Cov B \$250,000; Cov C \$500,000
Fidelity/Employee Dishonesty \$25,000 Limit/\$1,000 Deductible
(Includes Manager)

General Liability includes separation of insureds clause

### (Equipment Breakdown Excluded)

COVERAGE: Directors and Officers Liability INSURER: Great American Insurance Company

POLICY #: EPP5665751-15 Claims Made Prior & Pending Litigation Date 04/15/03

EFFECTIVE: 11/05/17 - 11/05/18 LIMIT: \$1,000,000 / \$1,000 SIR

This coverage applies only to the named insured shown on the certificate and does not apply to any other property, business or association.

11:41 AM 11/10/17 Accrual Basis

# **GATEWAY TOWNHOME ASSOC.** 2018 Budget January through December 2018

	Jan - Dec 18
Income	
Assessment Income	87,168.00
Total Income	87,168.00
Expense	
Building Maintenance	1,200.00
Electric	600.00
Grounds Maintenance	14,968.00
Insurance	14,000.00
Legal & Professional Fees	600.00
Management	10,800.00
Reserves	9,000.00
Trash Removal	6,000.00
Water & Sewer	30,000.00
Total Expense	87,168.00
Net Income	0.00