

REQUEST FOR PROPOSAL Condominium Project Approval Worksheet

Condominium Project Name: _____

Condominium Street Address: _____

City _____ State _____ Zip _____

Residential Units _____

Residential Units Owner Occupied _____

Residential Units Owned as Investments _____

Does an owner or related party own 10% or more of the units? Yes _____ No _____

If Mixed-Use Project, what is the # of Commercial Units: _____
What percentage of the total building(s) square footage is allocated to commercial space? _____

What year was the condominium project was completed? _____

If the condominium project is not complete, how many legal phases remain to be built? _____

Date the Unit Owners took control of the Condo Board _____

Units delinquent on assessments greater than 60 days _____

Replacement Reserve: Is 10% of the aggregate monthly unit assessments deposited in to the Reserve Fund? Yes _____ No _____

Are there any known construction defects or unexpected and required major repairs? Yes _____ No _____

Is the Condo Association subject to any current or pending litigation? If Yes, provide a separate explanation. Yes _____ No _____

Are there any current or pending special assessments? If Yes, provide a separate explanation. Yes _____ No _____

Does the Condo Association have any outstanding loans? If Yes, provide loan details on a separate page. Yes _____ No _____

Are there any Live / Work units in the project? Yes _____ No _____

Are there any affordable housing deed restrictions? Yes _____ No _____

Do the condo legal documents contain leasing restrictions? Yes _____ No _____

Do the condo legal documents contain a Right of First Refusal? Yes _____ No _____

Do the condo legal documents require payment of a fee upon the transfer / sale of a unit? If Yes, provide a separate explanation Yes _____ No _____

REQUEST FOR PROPOSAL WORKSHEET
CONTACT INFORMATION

PARTY REQUESTING PROPOSAL

Contact Person: _____
Company: _____
Street Address: _____
City: _____ **State** _____ **Zip** _____
Phone: _____ **Cell:** _____
Email: _____

Additional Contact: _____
Phone: _____ **Cell:** _____
Email: _____

PROFESSIONAL MANAGEMENT COMPANY (if any)

Contact Person: _____
Company: _____
Street Address: _____
City: _____ **State** _____ **Zip** _____
Phone: _____ **Cell:** _____
Email: _____

Additional Contact: _____
Phone: _____ **Cell:** _____
Email: _____

ATTORNEY REPRESENTING CONDO BOARD

Contact Person: _____
Company: _____
Street Address: _____
City: _____ **State** _____ **Zip** _____
Phone: _____ **Cell:** _____
Email: _____

Additional Contact: _____
Phone: _____ **Cell:** _____
Email: _____