Condominium Full Questionnaire

REQUESTER CONTACT INFORMATION

Name: Scott Edwards Title:

Phone: 661-373-1034 Fax: Email: thedoc@lower.com

HOA/Management contact info:

HOA/Management Contact Name: Sheila Esteban

Title: Escrow Coordinator Phone: 818-778-3331

Email:

Borrower's Name: Loan #

Project Name: 19350 Sherman Way Homeowner Association

Project Address: 19350 Sherman Way Unit # Unit 328

HOA Name: 19350 Sherman Way Homeowner Association

HOA Federal Tax ID# 95-4348072 HOA contact name/number Sheila Esteban 818-778-3331

City: Reseda State: CA Zip Code: 91335-3768

PROJECT ELIGIBILITY - Basic Project Information

	YES	NO
1. Do any of the following characteristics apply? (Check ALL that apply)	☐	☑

- ☐ HOA/Property manager has a website. Website:
- ☐ Timeshares/segmented ownership allowed
- ☐ Contain any Manufactured Homes
- ☐ HOA/Property manager operates any businesses that generate income (golf course, restaurant, spa/gym, housekeeping, rental/beach equipment, wristband, commercial parking, etc.)
- ☐ Short term rentals (less than 30 days) allowed.
- ☐ Condo Hotel
- ☐ Onsite rental agent or check-in/check-out desk
- ☐ Is the project a Houseboat

If **Yes**, list business and provide budget/financials

2. Is the project **100% complete**, including all construction or renovation of units, common elements, and shared amenities for all project phases? Y ☑ N ☐
   a. If **no**, what is incomplete?
   b. If **no**, is our subject phase completed?
   c. Is the project subject to **additional phasing**? Y ☐ N ☐
   d. Is this a **conversion** within the past 3 years of an existing structure? Y ☐ N ☐
3. Has control of the Homeowner's Association been turned over to the Unit Owners? **If** Yes**, complete a or b** Y ☑ N ☐
   a. Date transferred: **1991** b. Expected Date of Transfer
4. Do the HOA Governing Documents allow for "**multi-dwelling units**"? (2 units under a single deed/mortgage) Y ☐ N ☑
5. 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? Y ☐ N ☑
   If **YES**, how long is the mortgage responsible for paying common expense assessments?
   ☐ 1 to 6 months ☐ 7 to 12 months ☐ More than 12 months
6. Is the HOA or Developer involved in any active or pending **litigation**, or pre-litigation such as mediation or arbitration? Y ☐ N ☑
   If **YES**, provide the filed complaint/court documentation and attorney's case status letter.
7. Does any **owner/entity** own more than one unit? Y ☐ N ☑
   If **YES**, provide the name and number of units owned in the below table (or use separate sheet)

Owner's Name	Number of Units Owned	Developer	Housing Authority
		☐	☐
		☐	☐

8. Do the unit owners have sole ownership interest in and exclusive use of the Project amenities and common areas? If NO, please explain: _____ Y ☑ N ☐

9. Are any units **live/work** units or **Inclusionary/Housing Authority** low income housing? Y ☐ N ☑
If **YES**, how many units are under a housing agreement? _____

10. Are any units subject to **Resale Restrictions** (e.g. age, income, rent stabilization agreement) Y ☐ N ☑
If **YES**, identify the restriction:

11. Provide Balance currently held in **Reserves**: $ **865,061.40**

12. Please provide the following Unit count information for all units in the project.

Subject Phase	#	If Project Completed	#	If Project Incomplete	#
Total # of Units N/A - Project is complete		Total # of Phases Project is complete. Not required.		Total # of Planned Phases N/A - Project is complete	
# Units Completed		# Units	132	# Planned Units	
# Units for Sale		# Units for Sale	0	# Units for Sale	
# Units Sold		# Units Sold	132	# Units Sold	
# Units Rented		# Units Rented	43 off-site	# Units Rented	
# Owner-Occupied Units		# Owner Occupied Units	89 on-site	# Owner-Occupied Units	
# 2nd Home Units		# 2nd Home Units	included in off-site	# 2nd Home Units	

13. How many units are more than **60 days delinquent** in the payment of their monthly assessments? **2**

14. Which of the following **financial safeguards** does the Homeowners Association and the management company adhere to :

a. Separate bank accounts are maintained for the Operating Account and Reserve Account Y ☑ N ☐
b. Monthly bank statements are sent directly to the Homeowners Association Y ☑ N ☐
c. At least two board members are required to sign checks written on the Reserve Account Y ☑ N ☐
d. If a management company handles the Association's finances, does it maintain separate records and bank accounts for each Association that uses its services? Y ☑ N ☐
e. If a management company handles the Association's finances, does it have authority to draw checks on, or transfer funds from, the Association's Reserve Account? Y ☐ N ☑

15. Is there any part of the BUILDING devoted to non-residential space (**commercial units**)? Y ☐ N ☑
If **YES**.... a. Provide total Square Footage of the non-residential/commercial space? _____
b. Provide the % Square Footage of the non-residential/commercial space to the Total Building Square Footage? _____

16. Are there any mandatory upfront or periodic membership fees for the use of recreational **amenities** that are not owned exclusively by the Homeowners Association, or the Master Association? Y ☐ N ☑

17. Are you aware of any **evacuation orders** in the past, currently or potentially in the future? Y ☐ N ☑

18. Is the project currently or has it been involved in any **termination, deconversion, dissolution of the project's legal structure, voluntary or involuntary bankruptcy, insolvency, liquidation, or receivership** proceeding, or any substantially similar action under state or federal law? Y ☐ N ☑

MASTER INSURANCE CONTACT INFORMATION

Name of Provider: **Schultz Insurance Agency**

Phone: **818-830-3400** Email: **jschultz@farmersagent.com**

CERTIFICATION

The undersigned hereby certifies that to the best of their knowledge and belief, the information and statements on this form and any attachments are true and correct. The undersigned further represents they are authorized by the Homeowners' Association Board of Directors and/or the Managing Agent to provide this information on behalf of the Association.

Contact Name: **Sheila Esteban** Date: **07-13-2026**

Signature: *Sheila Esteban* Title: **Escrow Coordinator**

Company Name: **HOA Organizers Inc.** Phone: **818-778-3331** Email: _____

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DEFERRED MAINTENANCE/Special Assessments

19. Has the HOA or Property Manager been notified of any complaints from the unit owners that affect the safety, structural soundness, habitability, or functional use of the project? Y ☐ N ☑

If **YES**, complete Section **A** on page 3.

20. Has the HOA or Property Manager been notified of any code violations or local government certifications that have not been satisfied? Y ☐ N ☑

If **YES**, complete Section **B** on page 3.

21. Has the HOA or Property Manager been notified of any pending or active Special Assessments? Y ☐ N ☑

If **YES**, complete Section **C** on page 3.

22. Have there been any structural or mechanical inspection reports completed in the last 3 years? Y ☐ N ☑

If **Yes**, please provide a copy of the inspection report(s)

NOTE: If answer to 19,20, 21 or 22 is YES, the Deferred Maintenance/Special Assessment info below MUST be completed.

DEFERRED MAINTENANCE & SPECIAL ASSESSMENT ADDENDUM

This addendum is ONLY to be completed if there is evidence of Significant Deferred Maintenance, code violations, and/or Special Assessments

A. *DEFERRED MAINTENANCE* (Defined as deficiencies, defects, substantial damage, or maintenance that is severe enough to affect the safety, soundness, structural integrity, or habitability of the improvements)

Are the repairs 100% complete and paid for? If **Yes**, skip to next section **N/A No repairs** Y ☐ N ☐

If **No**, what specifically is not complete?

i. When is the estimated time of completion for the remaining repairs? _____

ii. What is the estimated cost of any unfinished repairs? _____

iii. Does the maintenance require full or partial evacuation of the building to complete repairs for > 7 days (or for an unknown period of time)? Y ☐ N ☐

iv. Do any unfinished repairs affect the functioning of any major building components (including but not limited to the foundation, roof, load bearing structures, electrical, HVAC or plumbing)? Y ☐ N ☐

DOCUMENTATION REQUIRED: PROVIDE Any local government inspections/engineer's reports/certifications (if applicable); provide last 6 months HOA and Board Meeting Minutes

B. *CODE VIOLATIONS/* LOCAL GOVERNMENT CERTIFICATION REQUIREMENTS

Are there any outstanding code violations or local government certification requirements? Y ☐ N ☑

i. Provide detail of specific code violations or local government certification requirements

ii. When is the estimated time of completion for the remaining violations? _____

iii. What is the estimated cost of any unfinished repairs? $ _____

iv. When will the building be re-inspected to confirm the violations are satisfied? _____

DOCUMENTATION REQUIRED: PROVIDE copy of the code violations (if applicable)

C. SPECIAL ASSESSMENTS

Are there any outstanding current or pending **Special Assessments**? Y ☐ N ☑

i. Provide the reason for all current or pending Special Assessments:

_____

ii. Total amount assessed: $ _____

iii. How many units, if any, are more than 60 days delinquent on their Special Assessment payments? _____

iv. Amount assessed to our unit and duration/frequency: $ _____

v. Is any portion of the repairs being funded by the HOA's reserves? Y ☐ N ☐

vi. Do sufficient reserves currently exist to complete ALL the work regardless of Special Assessments? Y ☐ N ☐

vii. Has a determination been made that the assessment amount is sufficient to complete the work? Y ☐ N ☐

viii. If **No**, will future assessments be imposed to complete the work?

Comments Addendum

Only an authorized agent can provide insurance information. For all insurance questions, please contact the insurance agent.
Insurance broker's or agent's company name: Schultz Insurance Agency
Insurance agent's name: Joan Schultz
Insurance agent's phone number: 818-830-3400
Insurance agent's email address: jschultz@farmersagent.com

Off-site addresses are addresses where association correspondence is sent to the unit owner. They may refer to, but are not limited to, rental units, Second Homes, PO Boxes, or places of employment.

THIS DISCLOSURE IS INTENDED STRICTLY FOR THE USE OF REAL ESTATE AND LENDING PROFESSIONALS. THIS INFORMATION, WHILE DEEMED TO COME FROM RELIABLE SOURCES, IS NOT GUARANTEED. PROSPECTIVE BUYERS OF REAL ESTATE SHOULD SEEK APPROPRIATE AND COMPLETE DISCLOSURES FROM THE SELLER OF THE SUBJECT PROPERTY.

THE RESPONSES HEREIN ARE MADE IN GOOD FAITH AND TO THE BEST OF MY ABILITY AS TO THEIR ACCURACY.