



HOMEOWNER'S ASSOCIATION INFORMATION

Date:

Loan:

Name

Address:

Does the subject property belong to a Homeowners Association:

NO

YES

If yes, please complete the following below:

Project/HOA name:

Monthly HOA Dues: \$_____

Is the HOA involved in litigation (please check): YES NO

If yes, please explain:

Name, address and telephone number of individual or Management Company to

Complete HOA survey:

Name:

Address:

Telephone:

Fax:

Note: The individual/management company responsible for completing the homeowner association's survey and providing insurance information may charge a fee for this service. The credit union may require reimbursement of these fees.

Name:

Date:

Name:

Date:
