



**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:

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Monthly HOA Dues: \$\_\_\_\_\_

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

If yes, please explain:

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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.

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Name:

Date:

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Name:

Date:

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