Real Estate Commission
Department of Commerce and Consumer Affairs
State of Hawaii
335 Merchant Street, Room 333
Honolulu, Hawaii 96813

**QUESTIONNAIRE**
**CHAPTER 514B, HRS**

1.    Name of Project: _____

       Registration No.: _____
                       (For office use only)

2.    Location of Project: _____

        _____

       Mailing Address of Project: _____
       (If different from location) _____

3.    Property Committed or to be Committed to the Regime:

       a.  ☐ Master Deed    ☐ Master Lease    ☐ Other    ☐ Agreement of Sale
                                       (attach doc.)  ☐ Option
                                               ☐ Purchase Contract
                                             ☐ Sublease
                                             ☐ _____ (Describe)

       b.  Date Recorded: _____

            Recordation Data: _____

            Not Recorded: _____

4.    Description of Project:

       a.  Is this project subject to a Special Management Area (SMA) Permit?  ☐ Yes    ☐ No

          If so, what is the status of this permit? _____

       b.  Is this project subject to the design and construction requirements in new construction for persons with disabilities as required under the Federal Fair Housing Amendments Act of 1988?  ☐ Yes    ☐ No

          If "yes," what apartments in the project are "accessible" and "adaptable" for persons with disabilities (24 C.F.R. Section 100 et seq.)?

          _____

          _____

          If "no," why is this project not subject to the requirements?

          _____

          _____

       c.  Is the project in compliance with all county zoning and building ordinance and codes and all other county permitting requirements applicable to the project pursuant to HRS §514B-5, chapter 205, and all applicable state and federal requirements?  ☐ Yes    ☐ No

5.	Architect/Engineer/Surveyor:

Name	Address	Hawaii Reg No.

_____	_____	_____

_____	_____	_____

6.	Contractor:

Name	Address	Hawaii Reg No.

_____	_____	_____

_____	_____	_____

7.	Are purchaser's funds being used to pay for project construction costs including conversion costs prior to closing?

☐ Yes	☐ No

8.	Sales to Owner-Occupants:

a.	Is the project developed pursuant to HRS §§46-15 or 46-15.1, or chapter 53, 201H or 206?

☐ Yes	☐ No

b.	Is the project developed pursuant to an affordable housing condition or provision imposed by a state or county governmental agency?

☐ Yes	☐ No

c.	Does the developer intend to sell the project to a spouse or family members related by blood, descent, or adoption?

☐ Yes	☐ No

d.	Does the developer plan to construct or convert to condominium status two or fewer apartments?

☐ Yes	☐ No

9.	Title (Title insurance, abstract, certificate, others):

a.	Type: _____

b.	Name of firm who issued certificate: _____

c.	Date issued **(not more than 60 days old at the time of filing)** : _____

10.	Is the developer affiliated with or does the developer have a financial interest with the subject condominium project's real estate broker, escrow company, general contractor, condominium managing agent, or attorney?

☐ Yes	☐ No

If so, please describe in detail the affiliation or financial interest on a separate exhibit.

11. Conversion of Existing Structures to Condominium Status:

If this project includes existing structures that have been in existence for five years or more, with units that may be occupied for residential use, and the existing structures are now being converted to condominium status, then please list and provide specific information about all of the following (§514B-84 and §514B-89, HRS):

a. Any outstanding notices of uncured violations of zoning, building, or other county regulations (notices include a county letter specifying the violations);

b. Estimated costs to cure violations; and

c. Deadline date for completion of repairs to cure all the listed violations.

12. Encumbrances and Status Report:

Is the project subject to any of the following? If subject to any of the following, provide a brief description of the encumbrance, terms, amount due if any, and current status of the encumbrance; for example, whether the taxes are paid.

a. Dedications, agriculture, historic properties, etc.;  ☐ Yes  ☐ No

b. Roll Back taxes;  ☐ Yes  ☐ No

c. Real property taxes of master parcel (i.e. subdivision parcel, nested condominium parcel);
☐ Yes  ☐ No

d. Real property taxes of individual unit.  ☐ Yes  ☐ No

13.   Other & Unique Disclosures:

Is the project subject to any of the following? If subject to any of the following provide a brief description.

a.   Is the condominium located in flood zone?   ☐ Yes   ☐ No

b.   If yes, are there revised flood maps?   ☐ Yes   ☐ No

c.   Does each unit have an assigned mailbox?   ☐ Yes   ☐ No