

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 (attach doc.)     Agreement of Sale  
 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 Act 251 (SLH 2000) 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 section 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 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 the affiliation or financial interest, in detail, 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