



SONYMA MANUFACTURED HOME COMMUNITY QUESTIONNAIRE



Instructions: Facility Owner must complete all information below, provide documentation request and submit this information form to SONYMA's community partner agency.

I. CONTACT INFORMATION

Facility Legal Name:
Facility Owner Name:
Authorized Personnel Contact Name:
Contact Phone Number:
Contact Email Address:
Facility Address:
County:
Census Tract # of Facility:

(You can find the Census Tract # by visiting this website: Census Geocoder and finding the 6-digit Tract Code)

II. SITE INFORMATION:

Average pad size sq. ft.

Does your park have any Zoning Variance? Yes No If yes, attach copy.

Does the Park maintain a blanket policy for flood insurance? Yes No

Does the park have a third-party management company? Yes No

If yes, complete the following information regarding the management company.

Table with 4 rows: Management Company Name, Address, Contact Name, Phone Number, Email Address.

Does the park provide tax abatement or exemptions to its residents? Yes No

If YES, what is the average value of the exemption per pad? \$

Please indicate which of the following if any are included in monthly lot rent charges:

Table with 3 columns: Items included in Lot Rents charged, Yes/No, Average Amount. Rows include Water, Sewer, and Utilities.

# SONYMA - MANUFACTURED HOME PARK FACILITY QUESTIONNAIRE

(continued)

Real Estate Taxes	Yes <input type="checkbox"/> No <input type="checkbox"/>	\$
Other (please specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	\$

### III. FACILITY OWNERSHIP

1. How many total pads are authorized in the park? \_\_\_\_\_
2. Of the authorized pads how many are currently vacant (no home on pad)? \_\_\_\_\_
3. Of the occupied pads , how many homes are owner occupied? \_\_\_\_\_
4. Of the occupied pads, how many are park owned and used as rentals? \_\_\_\_\_
5. Of the occupied pad how many vacant homes are there? \_\_\_\_\_

Average Vacancy Rate (including both vacant pads and vacant homes) for the past 12 months: \_\_\_\_\_ %

Are there any homeowners and/or renters that are more than one (1) month delinquent in the payment of lot rent? Yes  No

If yes, complete the information requested below:

Site Ownership & Occupancy	Number (#) of Units	\$ Amount Past Due
Owners		\$
Renters		\$
<b>TOTAL</b>		\$

**Submission Documents:** Please attach the following documents as part of the questionnaire.

- Two Years of Income/Expenses Statements (i.e. tax returns, audited financial statements etc.)
- Professional Property Management Agreement, if applicable
- Master Blanket Policy Declarations Page, Fire, and Liability Insurance, including Flood, if applicable
- Sample Standard Community Lease

**CERTIFICATION:** I, the undersigned, certify that to the best of my knowledge and belief, the information and statements contained on this form and the attachments are true and correct.

I hereby authorize SONYMA to conduct a full background search on the MH Community detailed above. This search may include, but is not limited to consumer complaints and past business dealings. I understand that the information obtained may be used to determine the suitability of this community for participation in the MH Loan program.

Signature of Facility Owner or Authorized Employee: \_\_\_\_\_

Print Name & Title of Representative: \_\_\_\_\_

Company: \_\_\_\_\_ Date: \_\_\_\_\_

Phone (if different from above): \_\_\_\_\_ Email (if different from above): \_\_\_\_\_