

CONDOMINIUM REGISTRATION FORM

Builder Name:	Lux mem	ber #:
Address:	Email:	
Project management Co.:	Cont	act:
Contact Phone: Cell:	Office:	Email:
Project Name:	Address:	
Construction Start Date:	Completion Date:	Est. Final sale date:
Architect:	Contact:	Phone#:
Structural Firm:	Contact:	Phone#:
Soils Engineer:	Contact:	Phone#:
Documents Required:		
A list of the condo unit numbers to be registere	ed.	
<u>Architectural Drawings</u> ; The drawings must p as well as related details to decks and roof	•	or envelope openings (doors, windows, vents) he Architects liability insurance.
Soils Engineers; Soils investigation and requi	irement report. A current copy of liabilit	y insurance.
Structural Engineer; A stamped copy of the o	drawings, with a current copy of liability	insurance.
Mechanical Engineer; A stamped copy of the	drawings, with a current copy of liabilit	y insurance.
Budget:		
Gross Sales Income:	\$	
Land Cost:	\$ \$	
Construction, Sale & Administration cost: Net Income:		 Date:
Financing Details:		
Lenders	Credit line of Mortgage	Security
	\$	
	\$	
	\$	
Developers cash / equity \$		
I declare that all the information on this fo	orm is accurate and complete in all aspe	ects.
Builder Name:	Authorized Builder Signature:	Date: