

FORM 14
ESTOPPEL CERTIFICATE

(Condominium Property Act, S.N.B. 2009, c. C-16.05, ss.51(1) and (2))

_____ **Condominium Corporation No.** _____
(If the Corporation was created prior 2010 – County name)

(address for service)

We, of the _____ Condominium Corporation No _____ certify the following with respect to Unit # _____, level # _____ located at the following address:

Street: _____

Suite #: _____

Municipality: _____

Postal Code: _____

Right of lien or registered lien against the unit

The corporation has

A right of lien against the unit in accordance with subsection 46(1) of the Act in the amount of \$ _____.

A registered lien against the unit in accordance with subsection 46(7) the Act as of _____ *(date)* in the amount of \$ _____.
(yyyy-mm-dd)

Assessments of common expenses

1) The annual amount of the common expenses for condominium fees is \$ _____ for the current year. The condominium fees are payable in the following manner:

Monthly fees \$ _____

Annual fees \$ _____

Quarterly \$ _____

As they become due

Other \$ _____

The balance of condominium fees for the unit as of _____ (date) is \$ _____
(yyyy-mm-dd)

2) The amount of the common expenses for special assessments is \$ _____ for the current year.

The fees are payable in the following manner:

- Monthly fees \$ _____, payable over _____ months
- Annual assessment \$ _____, payable over _____ years
- Single total payment \$ _____
- Other \$ _____

The balance of special assessment fees for the unit as of _____ (date) is \$ _____
(yyyy-mm-dd)

3) Other: The amount owing for damages, fines, services charges, or other expenses incurred by the corporation on behalf of the unit.

- Damages \$ _____, Description _____
- Fines \$ _____, Description _____
- Service Charges \$ _____, Description _____
- Other \$ _____, Description _____

Reserve Fund

The reserve fund is collected in the following manner:

(if calculated as a percentage of the common expenses refer to that percentage)

The reserve fund balance on _____ (date) is \$ _____
(yyyy-mm-dd)

Capital expenditures

The corporation has planned major capital expenditures: Yes No

If "yes",

Nature of expenditure: _____

Anticipated amount of expenditure: \$ _____

Lawsuits by or against the corporation

There are pending/anticipated lawsuits involving the corporation: Yes No

If “yes”, provide details *(names of parties, nature of action, amount of claim, current status, etc.)*

Debts of the corporation

The corporation carries a debt as of _____ (date) in the amount of \$ _____
(yyyy-mm-dd)

Insurance coverage of the Corporation

Master policy.....Insurance company

Fire and other risk

Yes No

Value: \$ _____

Name: _____

Address: _____

Director and Officer’s liability

Yes No

Value: \$ _____

Name: _____

Address: _____

Other

Yes No

Value: \$ _____

Name: _____

Address: _____

Declaration and By-Laws

Proposed by-laws or amendment to by-laws: Yes No

If “yes”, attach the content of the proposed by-laws or the amendment to the by-laws.

Proposed amendment to declaration: Yes No

If “yes”, attach the content of the proposed amendment to the declaration.

Owners

The following persons own 10% or more of the common elements:

Contact information for management *(Management Company or Manager of the corporation)*

Name: _____

Telephone: _____

Address: _____

Email: _____

Contact information of the officers of the corporation

Name: _____ President

Address: _____ Secretary

Email: _____ Other _____

Name: _____ President

Address: _____ Secretary

Email: _____ Other _____

Name _____ President

Address: _____ Secretary

Email: _____ Other _____

Dated this _____ day of _____ 20 _____.

SIGNED, SEALED AND DELIVERED

SEAL

By: _____
(please print)

By: _____
(signature)

In the presence of:

*(Need to be witnessed if
the Corporation has no Seal)*

By: _____
(please print)

By: _____
(signature)

Additional notes: