



The  
**Road Home**  
BUILDING A SAFER,  
STRONGER, SMARTER LOUISIANA

Is this information correct? Yes  No

If this information is not correct, please enter the correct condominium association name, address, and contact information below:

**Corrected Condominium Association Name:**

HARBOR HOMEOWNERS' ASSOCIATION

**Corrected Condominium Association Address:**

500 LAKE MARINA DRIVE

NEW ORLEANS, LA. 70124

**Corrected Condominium Association Phone Number:**

504-831-6694 - PROPERTY MANAGEMENT  
DEBAIE POROFF

**Corrected Condominium Representative Name:**

MICHAEL GEORGE

**Corrected Condominium Representative Street:**

3525 N. CAUSEWAY BLVD. SUITE 633

**Corrected Condominium Representative State and Zip Code:**

METairie, LA. 70002

**Corrected Condominium Representative Phone Number:**

504-835-1969



The  
**Road Home**  
BUILDING A SAFER,  
STRONGER, SMARTER LOUISIANA

## **THE ROAD HOME CONDOMINIUM SUPPLEMENTAL INFORMATION REQUEST Form 2 (Condominium Complex)**

### **Applicant:**

Processing condominium applications requires additional information beyond that provided on the Homeowner application that you previously completed. Due to the unique nature of condominiums, *The Road Home* needs not only the information that you have already provided with your homeowner application, but also some specific information about your condominium unit and the condominium complex.

This form is the second of two that you must provide to *The Road Home* to support the processing of your application. In order to collect the necessary information, please provide this form to an authorized representative of your condominium association. An authorized representative is an individual who is authorized by the bylaws or other condominium association documentation to commit the association legally, especially with respect to signing contracts.

The purpose of requesting this information about the condominium complex is to assist in the calculation of benefits and to obtain information about possible duplication of benefits.

### **Information about the Condominium Complex**

#### **CONDOMINIUM COMPLEX SIZE**

**2** What is the *residential* square footage of all buildings in the condominium complex? Residential space excludes external, non-resident buildings and other facilities that are not "living space." For example, offices, mail rooms, recreation areas, and meeting rooms are not considered as residential space.

82,265



The  
Road Home

BUILDING A SAFER,  
STRONGER, SMARTER LOUISIANA

3 What is the combined total square footage of all buildings on the condominium property/ complex, *both residential and non-residential*?

104,723

4 What is the total square footage of the building where the applicant's condominium unit is located? If the condominium complex has only one building, use the value from number 3 above.

104,723

5 What is the *residential* square footage of the building where the applicant's condominium unit is located? If the condominium complex has only one building, use the value from number 2 above.

82,265

6 What is the *total number of units* within the entire condominium complex?

101



### Information about the Condominium Association's Insurance Coverage.

In addition to the information below, you must also attach the insurance declarations page --or similar documentation-- for each insurance policy, typically Hazard, Wind, and Flood. This declaration must identify the company, policy number, insured, term, insured value and any payments made to the condominium association and/or the individual unit owner.

Did your condominium association receive payments as a result of Hurricane Katrina or Rita for structural damage? Please, provide the amount of the payment.

**7** Flood Insurance

Yes  No

Payment Received:

289,761.75

**8** Hazard Insurance

Yes  No

Payment Received:

Ø

**9** Wind Insurance

Yes  No

Payment Received:

3,636,050.39

#### Required Attachments:

Attach the insurance declarations for Hazard, Flood, and Wind. Each declaration must identify the company, policy number, insured, term, insured value and any payments made to the condominium association and/or the individual unit owner.

## Harborview Condominiums

	Unit	Unit	Percentage			Unit	Percentage
	Unit	Square	Of Undivided			Square	Of Undivided
Unit #	Description	Footage	Interest	Unit #	Description	Footage	Interest
201	1 BR.	703.76	0.8555%	328	2 BR.	971.12	1.1805%
202	1 BR.	615.10	0.7477%	329	2 BR.	971.12	1.1805%
203	1 BR.	676.50	0.8223%	330	1 BR.	718.38	0.8733%
204	1 BR.	676.50	0.8223%	331	1 BR.	681.11	0.8279%
205	1 BR.	676.50	0.8223%	332	2 BR.	971.12	1.1805%
206	1 BR.	676.50	0.8223%	333	2 BR.	968.69	1.1775%
207	1 BR.	676.50	0.8223%	334	3 BR.	1,141.84	1.3880%
208	1 BR.	676.50	0.8223%	401	1 BR.	703.76	0.8555%
209	1 BR.	676.50	0.8223%	402	1 BR.	615.10	0.7477%
210	1 BR.	676.50	0.8223%	403	1 BR.	676.50	0.8223%
211	3 BR.	1,143.00	1.3894%	404	1 BR.	676.50	0.8223%
212	1 BR.	676.50	0.8223%	405	1 BR.	676.50	0.8223%
213	1 BR.	676.50	0.8223%	406	1 BR.	676.50	0.8223%
214	1 BR.	754.47	0.9171%	407	1 BR.	676.50	0.8223%
215	1 BR.	694.54	0.8443%	408	1 BR.	676.50	0.8223%
216	1 BR.	676.50	0.8223%	409	1 BR.	676.50	0.8223%
217	1 BR.	676.50	0.8223%	410	1 BR.	676.50	0.8223%
218	2 BR.	864.23	1.0505%	411	3 BR.	1,143.00	1.3894%
220	2 BR.	864.23	1.0505%	412	1 BR.	676.50	0.8223%
221	2 BR.	951.13	1.1562%	413	1 BR.	676.50	0.8223%
222	2 BR.	971.12	1.1805%	414	1 BR.	754.47	0.9171%
223	2 BR.	971.12	1.1805%	415	1 BR.	694.54	0.8443%
224	2 BR.	971.12	1.1805%	416	1 BR.	676.50	0.8223%
225	2 BR.	971.12	1.1805%	417	1 BR.	676.50	0.8223%
226	2 BR.	971.12	1.1805%	418	2 BR.	864.23	1.0505%
227	2 BR.	971.12	1.1805%	419	1 BR.	694.54	0.8443%
228	2 BR.	971.12	1.1805%	420	2 BR.	864.23	1.0505%
229	2 BR.	971.12	1.1805%	421	2 BR.	951.13	1.1562%
230	1 BR.	718.38	0.8733%	422	2 BR.	971.12	1.1805%
231	1 BR.	681.11	0.8279%	423	2 BR.	971.12	1.1805%
232	2 BR.	971.12	1.1805%	424	2 BR.	971.12	1.1805%
233	2 BR.	968.69	1.1775%	425	2 BR.	971.12	1.1805%
234	3 BR.	1,141.84	1.3880%	426	2 BR.	971.12	1.1805%
301	1 BR.	703.76	0.8555%	427	2 BR.	971.12	1.1805%
302	1 BR.	615.10	0.7477%	428	2 BR.	971.12	1.1805%
303	1 BR.	676.50	0.8223%	429	2 BR.	971.12	1.1805%
304	1 BR.	676.50	0.8223%	430	1 BR.	718.38	0.8733%
305	1 BR.	676.50	0.8223%	431	1 BR.	681.11	0.8279%
306	1 BR.	676.50	0.8223%	432	2 BR.	971.12	1.1805%
307	1 BR.	676.50	0.8223%	433	2 BR.	968.69	1.1775%
308	1 BR.	676.50	0.8223%	434	3 BR.	1,141.84	1.3880%
309	1 BR.	676.50	0.8223%	<b>Total Square Footage</b>		<b>82,264.76</b>	
310	1 BR.	676.50	0.8223%				
311	3 BR.	1,143.00	1.3894%				
312	1 BR.	676.50	0.8223%				
313	1 BR.	676.50	0.8223%				
314	1 BR.	754.47	0.9171%				
315	1 BR.	694.54	0.8443%				
316	1 BR.	676.50	0.8223%				
317	1 BR.	676.50	0.8223%				
318	2 BR.	864.23	1.0505%				
319	1 BR.	694.54	0.8443%				
320	2 BR.	864.23	1.0505%				
321	2 BR.	951.13	1.1562%				
322	2 BR.	971.12	1.1805%				
323	2 BR.	971.12	1.1805%				
324	2 BR.	971.12	1.1805%				
325	2 BR.	971.12	1.1805%				
326	2 BR.	971.12	1.1805%				
327	2 BR.	971.12	1.1805%				



JUNE 20, 2005

Fire Policy Status

HARBORVIEW HOMEOWNERS' ASSN  
500 LAKE MARINA DR  
NEW ORLEANS LA 70124-1660

H Ph. (504)283-3661  
FIRE Policy: 98-RE-0437-6 F Yr issd: 1991  
Xref: 98-05-3881-1 CD

Type: FLOOD-ROBAP  
Coverage information  
A-DWELLING 5881200  
Term: 12 MTHS  
Premium: 2,910.00  
Renew date: NOV-26-03

Amount paid: 2910.00  
Date paid: NOV-12-04  
Bill to: INSD  
Prev prem: 2,064

Prev risk: 5,279,300

Deductibles applied: 5000 FL-BLD

Messages:

FLOOD SERV FEE 630.00

Number of floors: 3  
Flood proofed: Zone: AOB  
Firm: POST  
Occupancy: O  
Program type: REG  
Location contents:  
Elevation difference: 11  
Basement: N  
Elevated Building: Y

~~STATE FARM~~  
AGENT: CHRIS McLAN  
0-504-302-9560



JUNE 20, 2005

Fire Policy Status

HARBORVIEW HOMEOWNER ASSN  
500 LAKE MARINA DR  
NEW ORLEANS LA 70124-1668

H Ph. (504)283-3661  
GENL Policy: 98-05-3881-1 G Yr issd: 1991  
Xref: 18-42-3831-3 CD

Location: 500 LAKE MARINA DR  
NEW ORLEANS LA 70124

Term: CONT

Renew date: OCT-15-05

Type: CONDOMINIUM  
Coverage information  
A-BUILDING 6870500

Premium: 28,331.00

L-BUSN LIAB 1000000  
GEN AGGREGT 2000000  
PCO AGGREGT 2000000  
- M-MED/PERSN 5000  
1169500

Amount due: SFPP  
Date due: SFPP  
Bill to: SFPP

Prev prem: 22,839

Prev risk: 6,173,000

SFPP acct:0086-3628-22

Deductibles applied:5000 OTH PER10.00% HURR OTHER DED MAY APPLY

Messages:

Year built: 1987  
Zone: 61  
Prot class: 2

Constr: MASONRY  
Units: 0101

STATE FARM  
AGENT: CHRIS McLAN  
0-507-533-4560