## SELLER'S PROPERTY DISCLOSURE STATEMENT

Seller's Name: \_\_\_\_\_

Property Address:				
pro val de pu wil	tice to Seller: This Property Disclosure Statement ("Disclosure") allows a Seller of residential operty to disclose to a potential Buyer all known facts that materially and adversely affect the ue of the subject property that is not readily observable. This Disclosure statement is signed to assist the Seller with informing a potential Buyer in evaluating the property for richase. The listing real estate agent, the selling real estate agent and their respective agents I also rely upon this information when marketing and presenting the property to prospective yers. Completion of this Disclosure should be done in accordance with State law.			
ki a c o d	otice to Buyer: The information provided is the representation is of the Seller's best nowledge as of the date noted. Disclosure by the Seller is not a substitute for an inspection and you may wish to obtain such an independent home inspection company. The information ontained in this statement is not a warranty by the Seller as to the condition of the Property, if which the Seller is required to disclose any known latent (hidden, concealed, or unseen) refects to any potential Buyer.  Luyer(s)' Initials:/			
1.	OWNERSHIP.			
	Property Type: (ex: "single family", "condo", etc.)  Year Built:  Ownership Length: (ex: "5 years")  Accurate Survey of the Property? □ No   □ Yes   □ N/A  Dates Lived on the Property: (mm/dd/yyyy) to (mm/dd/yyyy)  Other Comments:			
2.	WATER SUPPLY.  Type:   Public     Well     Other:   Any Issues with the Water?   No     Yes, the issues are:			
	Any Water Treatment Systems? ☐ No   ☐ Yes   ☐ Unknown   ☐ N/A   ☐ Leased  Any Fire Sprinkler Systems? ☐ No   ☐ Yes   ☐ Unknown   ☐ N/A   ☐ Leased			

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Fire Sprinklers in Operating Condition? ☐ No   ☐ Yes   ☐ Unknown   ☐ N/A		
	Other Comments:	
3. SEWAGE DISPOSAL.		
	Type:   Public     Septic, and approved for(#) of Bedrooms.  Septic Systems Functioning Properly?   No     Yes     Unknown     N/A  Last Time the Septic System was Pumped?(mm/dd/yyyy)  Other Comments:	
4.	HEATING.	
	Type: □ Oil   □ Natural Gas   □ Electric   □ Propane   □ Other:	
	Is Heat Supplied to All Finished Rooms? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
	Are the Systems in Operating Condition? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
	Other Comments:	
5.	AIR CONDITIONING.	
	Type: □ Oil   □ Natural Gas   □ Electric   □ Propane   □ Other:	
	Is AC Supplied to All Finished Rooms? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
	Is the AC System in Operating Condition? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
	Other Comments:	
6.	HOT WATER.	
	Type: □ Oil   □ Natural Gas   □ Electric   □ Other:	
	Age: (ex: "5 years")	
	Other Comments:	
7.	FOUNDATION.	
	Any Settlement or other Problems? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
	Other Comments:	
8.	BASEMENT / CRAWLSPACE / CELLAR.	
	Any Leaks or Excessive Moisture? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
	Other Comments:	

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9.	ROOF.		
	Any Leaks or Evidence of Moisture? ☐ No   ☐ Yes   ☐ Unknown   ☐ N/A  Any Existing Fire-Retardant Treated Plywood? ☐ No   ☐ Yes   ☐ Unknown   ☐ N/A		
	Other Comments:		
10.	PLUMBING SYSTEM.		
	Is the Plumbing System in Operating Condition? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A Are there any Known Issues with the Plumbing System? $\square$ No   $\square$ Yes, Explain:		
	Other Comments:		
11.	ELECTRIC SYSTEMS.		
	Any Known Issues with the Electrical System? $\Box$ No   $\Box$ Yes   $\Box$ Unknown   $\Box$ N/A		
	Other Comments:		
12.	INSULATION.		
	In Exterior Walls? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A		
	In Ceiling/Attic? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A		
	Under the Floor? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A		
	In any Other Areas? ☐ No   ☐ Yes   ☐ Unknown   ☐ N/A		
	Other Comments:		
13.	EXTERIOR DRAINAGE.		
	Water Stand on the Property after a Heavy Rain? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A		
	Are Gutters and Downspouts in Operating Condition? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A		
	Other Comments:		
14.	WOOD-DESTROYING INSECTS.		
	Any Known Infestations and/or Prior Damage? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A		
	Other Comments:		

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15.	CARBON MONOXIDE ALARM.
	Is a Carbon Monoxide Alarm on the Property? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A
	Other Comments:
16.	HAZARDOUS OR REGULATED MATERIALS.
	Are there any Hazardous or Regulated Materials located on the Property, including, but not limited to, mold, asbestos, radon gas, lead-based paint, licensed landfills, methamphetamine labs, underground storage tanks, any mining operations or other past contamination on the Property? $\square$ No $ \square$ Yes $ \square$ Unknown $ \square$ N/A Other Comments:
17.	FIRE.
	Any Fireplaces, Woodstoves, or Chimneys? ☐ No   ☐ Yes   ☐ Unknown   ☐ N/A  How Many (#)?  Are they in Working Condition? ☐ No   ☐ Yes   ☐ Unknown   ☐ N/A
	Other Comments:
18.	ZONING VIOLATIONS.
	Are there any Zoning Violation, nonconforming uses, violation of building restrictions or setback requirements or any recorded or unrecorded easement, except for utilities, on or affecting the Property? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A
	Other Comments:
19.	IMPROVEMENTS.
	Have you or a Contractor made Improvements on the Property? ☐ No   ☐ Yes
	□ Unknown   □ N/A
	Other Comments:
20.	FLOOD ZONE.
	Is the Property located in a Flood Zone? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A
	Other Comments:

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21. RESTRICTIONS.	
Are there any Restrictions on the Property? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
Other Comments:	
22. MINERAL RIGHTS.	
Are there any Mineral Rights on the Property? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
Do you Own the Mineral Rights? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
Other Comments:	
23. MURDER / SUICIDE.	
To your knowledge, has there ever been a murder or suicide within the boundaries of the Property? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
Other Comments:	
24. ILLEGAL DRUG OR CRIMINAL ACTIVITY.	
To your knowledge, has there ever been illegal drug or criminal activity within the boundaries of the subject property? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
Other Comments:	
25. MATERIAL DEFECTS.	
Are there any Material Defects, including latent defects, affecting the physical condition of the Property? $\square$ No   $\square$ Yes   $\square$ Unknown   $\square$ N/A	
Other Comments:	
26. STRUCTURAL SYSTEMS.	
Are there any defects with other Structural Systems on the Property? (including but not limited to, exterior walls, floors, driveways, etc.) $\square$ No $ \square$ Yes $ \square$ Unknown $ \square$ N/A	
Other Comments:	

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## **27. ADDITIONAL DISCLOSURES.**

28. SIGNATURES.	
Buyer's Signature:	Date:
Printed Name:	
Buyer's Signature:	Date:
Printed Name:	
Seller's Signature:	Date:
Printed Name:	
Seller's Signature:	Date:
Printed Name:	
Agent's Signature:	Date:
Printed Name:	
Agent's Signature:	Date:
Printed Name:	

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