

## Seller's Acknowledgment

Seller acknowledges that: the information contained in this disclosure is accurate, true and complete to the best of Seller's knowledge, information and belief; Seller has provided all the information contained in this Seller's Property Disclosure; and that the Broker has not prepared, nor assisted in the preparation of this Disclosure. Seller hereby authorizes the listing broker to provide copies of this Disclosure to other real estate brokers and agents and prospective buyers of the property.

Seller is occupant:


☒

Yes

☐

No

Seller certifies that the information herein is true and correct to the best of the Seller's knowledge as of the date signed by Seller.

Seller  7/4/2025  
Date

Seller Courtney Matton 7/4/25  
Date

## BUYER'S ACKNOWLEDGMENT AND AGREEMENT

1. I have personally inspected the property. I will rely upon the inspections encouraged under my contract with Seller. Subject to any inspections, I agree to purchase the property in its present condition without representations or guarantees of any kind by the Seller or any Brokers concerning the condition or value of the property.
2. I agree to verify any of the above information that is important to me by an independent investigation of my own. I have been advised to have the property examined by professional inspectors.
3. I acknowledge that neither Seller nor any Brokers involved in this transaction is an expert at detecting or repairing physical defects in the property. I state that no important representations concerning the condition of the property are being relied upon by me except as disclosed above or as fully set forth as follows:
4. "Kansas law requires persons who are convicted of certain crimes, including certain sexually violent crimes, to register with the sheriff of the county in which they reside. If you, as the buyer, desire information regarding those registrants, you may find information on the homepage of the Kansas Bureau of Investigation (KBI) at <http://www.Kansas.gov/kbi> or by contacting the local sheriff's office."

Buyer \_\_\_\_\_  
Date

Buyer \_\_\_\_\_  
Date

**Seller's Property Disclosure**  
(To be completed by Seller)

**This report supersedes any list appearing in the MLS**

Property Address: 1267 ROAD 230 EMPORIA, KS 66801 Date of Purchase: 7/22/22

Seller(s): RYAN M. BENTON COURTNEY L. MATLON

This report serves a dual purpose, to disclose property condition and to indicate items the Seller intends to leave in the home **which will be transferred to the Buyer pursuant to the purchase contract**, and it will be made a part of the purchase contract. Please be as complete and accurate as possible. Attach additional sheets if space is insufficient for all applicable comments. Seller acknowledges and understands that the Broker(s) and potential buyer of the property will rely upon the accuracy of facts and opinions set forth in this disclosure.

**PART I - Indicate the condition of the following items by marking the appropriate box. Check only one box for each item.**

Does Not Transfer to Buyer	TRANSFERS TO BUYER			Does Not Transfer to Buyer	TRANSFERS TO BUYER		
	Working	Not Working	Don't Know		Working	Not Working	Don't Know

**APPLIANCES**

Central Vac	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dishwasher	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disposal	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas Grill	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microwave Oven	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:	<div></div>			

Oven/Range	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refrigerator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Satellite Dish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receiver(s) & Remotes #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vent Hood	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**ELECTRICAL SYSTEMS**

Elec Air Filter	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ceiling Fan(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Door Bell	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intercom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sauna	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vent Fan	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Light Fixtures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Switches/Outlets	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Security System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Own <input type="checkbox"/> Rent/Financed Co	<div></div>			
Comments:	<div></div>			

Smoke/Fire Detectors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inside Telephone Wiring/ Blocks/Jacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cable TV Wiring/Jacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Garage Door Opener	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remote Control(s) #	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aluminum Wiring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copper Wiring	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
220 Volt	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service Panel Total Amps	<u>200 AMP</u>			
Other	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**DRAINAGE/SEWAGE SYSTEMS Part I (See Part II also)**

Sewage System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:	<u>LIFT PIT, EFFLUENT LAGOON</u>			

Sump Pump	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Seller Initials RMB CLM

Buyer Initials

**PART I - Indicate the condition of the following items by marking the appropriate box. Check only one box for each item.**

	TRANSFERS TO BUYER			TRANSFERS TO BUYER		
	Does Not Transfer to Buyer	Not Working	Don't Know	Does Not Transfer to Buyer	Not Working	Don't Know

### HEATING AND COOLING SYSTEMS

Humidifier	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solar Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whole House/ Attic Fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Window/Wall AC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas Log Lighter	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Propane Tank	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Own <input checked="" type="checkbox"/> Rent Co.	MFA			

Comments:

### WATER SYSTEMS Part I (See Part II also)

Hot Tub/Spa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool/Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Purifier/R.O.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Instant Hot Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Softener	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Own <input type="checkbox"/> Rent Co.				

Comments:

GRAVITY RECIRCULATION ON  
HOT WATER HEATER - PEX

Cooling System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Type	FORCED AIR / CENTRAL		Age	3 mo.
Heating System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Type	FORCED AIR / CENTRAL		Age	7 mo.
Fireplace	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fireplace Insert	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Woodburning Stove	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date	<input type="checkbox"/> Fireplace	<input type="checkbox"/> wood stove	<input type="checkbox"/> chimney	<input type="checkbox"/> flue
was last cleaned	UNKNOWN			
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Plumbing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Type	COPPER SUPPLY / PVC DRAIN			
Water Heater	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Type/Size	PROPANE w/ POWER EXHAUST 50 GAL			
Age	2 YRS			
Underground Sprinkler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has approved backflow device been installed?				
Date last tested/inspected				

### Part II - Answer questions to the best of your (Seller's) knowledge.

Yes No Don't  
Know

### WATER SYSTEMS (Part II)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a public water system?
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, <input type="checkbox"/> City Water <input checked="" type="checkbox"/> Rural Water Transfer Fee \$ <input type="checkbox"/> District <input type="checkbox"/> 5
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a private water system?
	<input type="checkbox"/>	<input type="checkbox"/>	If yes, <input type="checkbox"/> Drinking Well <input type="checkbox"/> Irrigation Well
			Location <input type="checkbox"/> Depth <input type="checkbox"/> Type <input type="checkbox"/>
			Location <input type="checkbox"/> Depth <input type="checkbox"/> Type <input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Has water ever shown test results of contamination? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (explain below)
			Are there any abandoned <input type="checkbox"/> cisterns or <input type="checkbox"/> unplugged wells?
Comments <input type="checkbox"/>			

Seller Initials RMB ☐

Buyer Initials ☐

**Part II – Answer questions to the best of your (Seller's) knowledge. Specify relevant details in comments line.**

Yes No Don't Know

**DRAINAGE/SEWAGE SYSTEMS (Part II)**

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is property connected to a public sewer system? If yes, no explanation is required.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is property connected to a septic system? Date last pumped <input type="text"/>
			Tank size <input type="text"/> Location <input type="text"/> # feet laterals <input type="text"/>
			# feet infiltrators <input type="text"/> Location <input type="text"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a lagoon system? Location <u>NORTH WEST OF HOUSE</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to some other type of waste disposal system? Explain below.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, is there any problem relating to the waste disposal system?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property located in a subdivision with a master drainage plan?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	If so, is the property in compliance?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Has the property ever had a drainage problem during your ownership?
			Comments <input type="text"/>

**STRUCTURAL FOUNDATION/WALLS**

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Check all that apply <input checked="" type="checkbox"/> Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> Slab
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are any exterior walls covered with Exterior Insulation & Finish System (synthetic stucco)?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If yes, are you aware of any adverse conditions (explain below)?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>To your knowledge, indicate any past or present:</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Movement, shifting, deterioration or other problems with walls or foundation?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cracks or flaws in the walls, floors, or foundation?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Problems with driveways, walkways, patios, retaining walls, party walls?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Problems with operation of windows or doors, or broken seals?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Repairs to items in this section?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any transferable warranties (explain below)?
			Comments <input type="text"/>
			<u>MINOR CRACK, BASEMENT WALL BELOW WINDOW - NON STRUCTURAL</u>

**ROOF/INSULATION**

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Age <u>3 YRS</u> Type <u>ASPHALT SHINGLE</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, are there any <input checked="" type="checkbox"/> past or <input type="checkbox"/> present roof leaks?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Has the roof been <input type="checkbox"/> replaced or <input type="checkbox"/> repaired during your ownership?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any transferable warranties?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you know of any problems with roof or rain gutters?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insulation in (circle all that apply): <u>NDK</u> ceiling/attic <u>NDK</u> walls <u>YDK</u> floors
			Comments <input type="text"/>
			<u>ROOF REPLACED JULY 2022 - PRIOR TO OUR OWNERSHIP</u>

**HOMEOWNER'S ASSOCIATION**

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property subject to rules or regulations of any homeowner's association?
			Comments <input type="text"/>
			Annual Dues \$ <input type="text"/> Initiation Fee \$ <input type="text"/>
Seller Initials <u>RMB</u> <u>CLM</u>		Buyer Initials <input type="text"/> <input type="text"/>	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To your knowledge, are there any problems relating to any common area?  
 Have you been notified of any condition which may result in an increase in assessment?  
 Comments

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Are there any restrictive covenants?  
 Comments

**Part II – Answer questions to the best of your (Seller's) knowledge.**

		<b>Don't</b>
<b>Yes</b>	<b>No</b>	<b>Know</b>

**TERMITES, WOOD INFESTATION, DRY ROT**

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Do you have knowledge of ☐ termites, ☐ dry rot, or ☐ other wood infestation on/affecting property?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Do you have any knowledge of any damage to the property caused by ☐ termites, ☐ wood infestation, or ☐ dry rot?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Have there been any repairs of such damage?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Is the property currently under termite warranty or other coverage by a licensed pest control company? Who?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Have you had any termite control reports in the last five years?

Comments

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Have you had any termite control treatments in the last five years?

Comments

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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FLINK HILLS PEST - TERMITE TREATMENT (PREVENTATIVE) JULY 2023  
 Have you had any pest control reports in the last five years?

Comments

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Have you had any pest control treatments in the last five years?

Comments

**BOUNDARIES/LAND**

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Have you had a survey of your property?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Are the boundaries of your property marked in any way?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Is there any fencing on the boundary(ies) of the property?

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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If yes, does the fencing belong to the property?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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To your knowledge, are there any boundary disputes, encroachments, or unrecorded easements?

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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To your knowledge, is any portion of the property located in a federally designated flood plain or wetlands area?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Do you currently pay flood insurance?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Are there any features of the property shared in common with adjoining landowners, such as walls, fences, roads, driveways (explain below)?

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Is the property owner responsible for maintenance of any such shared feature?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Do you know of any ☐ expansive soil, ☐ fill dirt, ☐ sliding, ☐ settling, ☐ earth movement, ☐ upheaval, or ☐ earth stability problems that have occurred on the property or the immediate neighborhood?

Comments

Seller Initials RMB CM

Buyer Initials

Yes	No	Don't Know
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[illegible]

**To your knowledge, indicate any past or present:**

Comments \_\_\_\_\_

According to the EPA, molds are part of the natural environment. Molds reproduce by means of tiny spores that are invisible to the naked eye, and float through outdoor and indoor air. Mold may begin growing indoors when mold spores land on surfaces that are wet. Inhaling or touching mold spores may cause allergic reactions in sensitive individuals.

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Comments \_\_\_\_\_

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Licensees do not have any expertise in evaluating environmental conditions.

Do you have any reports or records pertaining to groundwater contamination or other environmental concerns?

[illegible]

Seller Initials RMB Cm

Buyer Initials

**Part II – Answer questions to the best of your (Seller's) knowledge.**

Yes No

<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ureaformaldehyde foam insulation (UFFI)
<input type="checkbox"/>	<input type="checkbox"/>	Other <input type="text"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	To your knowledge, are any of the above conditions present near your property?
		Comments <input type="text"/>

**MISCELLANEOUS**

To your knowledge:		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Have any structural additions, changes, or repairs been made to the property without obtaining all necessary permits and government approvals?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any producing or non-producing gas/oil wells on the property or adjacent property?
		Do mineral rights convey to Buyer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know <input type="checkbox"/> N/A
		If no, please define: <input type="text"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any current special assessments or do you have knowledge of any future assessments?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there any unrepaired damage due to hail, storm, wind, fire, flood, rodents, or pets?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any stains, tears, burns, holes, etc. in the Property that are not readily visible?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you currently own or have you ever owned a pet in this property?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Has there been any damage due to pets, including but not limited to odors, stains, etc.?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Have you had any insurance claims in the past five years?
		Were repairs made? Explain <input type="text"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is the present use of the property a non-conforming use?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are any local, state, or federal agencies requiring repairs, alterations, or corrections of any existing conditions?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any diseased or dead trees or shrubs?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do all window and door treatments stay? If no, list those that do not stay <input type="text"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any other facts, conditions, or circumstances, on or off site, which could affect the value, beneficial use, or desirability of the property? If yes, explain.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any transferable warranties on appliances or remaining personal property (list below)?
		Comments <input type="text"/>
		A FEW DEAD TREES IN THE TREE LINE

**Seller's Disclosures Concerning Special Assessments**

The law requires that the Seller disclose the existence of special assessments or fee against a property. To your knowledge:		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	The Property may be subject to special assessment or similar fee or is located in an improvement district. (See attached document.)
		<input type="checkbox"/> Owner <input type="checkbox"/> County <input type="checkbox"/> Public Record <input type="checkbox"/> Other: <input type="text"/>

Seller Initials

RMB 

Buyer Initials

<input type="text"/>	<input type="text"/>
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