

NAME OF DOCUMENT:

**Keller Williams Realty**



**NEW JERSEY ASSOCIATION OF REALTORS® STANDARD FORM OF  
SELLER'S PROPERTY CONDITION DISCLOSURE STATEMENT**



**Property Address:** \_\_\_\_\_

**Seller:** \_\_\_\_\_

The purpose of this Disclosure Statement is to disclose, to the best of Seller's knowledge, the condition of the Property, as of the date set forth below. The Seller acknowledges that he/she is under an obligation to disclose any known material defects in the Property even if not addressed in this printed form. Seller alone is the source of all information contained in this form. All prospective buyers of the Property are cautioned to carefully inspect the Property and to carefully inspect the surrounding area for any off-site conditions that may adversely affect the Property. Moreover, this Disclosure Statement is not intended to be a substitute for prospective buyer's hiring of qualified experts to inspect the Property.

If your property consists of multiple units, systems and/or features, please provide complete answers on all such units, systems and/or features even if the question is phrased in the singular, such as if a duplex has multiple furnaces, water heaters and fireplaces.

**OCCUPANCY**

- |                          |                          |                          |  |
|--------------------------|--------------------------|--------------------------|--|
| Yes                      | No                       | Unknown                  |  |
|                          |                          | <input type="checkbox"/> | 1. Age of House, if known _____  |
| <input type="checkbox"/> | <input type="checkbox"/> |                          | 2. Does the Seller currently occupy this property?<br>If not how long has it been since Seller occupied the property? _____  |
| <input type="checkbox"/> | <input type="checkbox"/> |                          | 3. What year did the seller buy the property? _____  |
|                          |                          |                          | 3a. Do you have in your possession the original or a copy of the deed evidencing your ownership of the property? If "yes," please attach a copy of it to this form |

**ROOF**

- |                          |                          |                          |   |
|--------------------------|--------------------------|--------------------------|---|
| Yes                      | No                       | Unknown                  |   |
|                          |                          | <input type="checkbox"/> | 4. Age of roof _____  |
| <input type="checkbox"/> | <input type="checkbox"/> |                          | 5. Has roof been replaced or repaired since seller bought the property? |
| <input type="checkbox"/> | <input type="checkbox"/> |                          | 6. Are you aware of any roof leaks?                                     |
|                          |                          |                          | 7. Explain any "yes" answers that you give in this section: _____       |

**ATTICS, BASEMENTS AND CRAWL SPACES (Complete only if applicable)**

- |                          |                          |         |  |
|--------------------------|--------------------------|---------|--|
| Yes                      | No                       | Unknown |  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 8. Does the property have one or more sump pumps?  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 8a. Are there any problems with the operation of any sump pump?  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 9. Are you aware of any water leakage, accumulation, or dampness within the basement or crawl spaces or any other areas within any of the structures on the property?  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 9a. Are you aware of the presence of any mold or similar natural substance within the basement or crawl spaces or any other areas within any of the structures on the property?  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 10. Are you aware of any repairs or other attempts to control any water or dampness problem in the basement or crawlspace? If "yes" describe the location, nature and date of the repairs:<br>_____  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 11. Are you aware of any cracks or bulges in the floor or foundation walls? If "yes", specify location. _____  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 12. Are you aware of any restrictions on how the attic may be used as a result of the manner in which the attic or roof was constructed?   |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 13. Is the attic or house ventilated by: <input type="checkbox"/> a whole house fan? <input type="checkbox"/> an attic fan?  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 13a. Are you aware of any problems with the operation of such a fan?   |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 14. In what manner is access to the attic space provided? <input type="checkbox"/> staircase <input type="checkbox"/> pull down stairs<br><input type="checkbox"/> crawl space with aid of ladder or other device <input type="checkbox"/> other |
|                          |                          |         | 15. Explain any "yes" answers that you give in this section: _____   |

**TERMITES/WOOD DESTROYING INSECTS, DRY ROT, PESTS**

- |                          |                          |         |  |
|--------------------------|--------------------------|---------|--|
| Yes                      | No                       | Unknown |  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 16. Are you aware of any termites/wood destroying insects, dry rot, pests affecting the property?  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 17. Are you aware of any damage to the property caused by termites/wood destroying insects, dry rot, or pests?   |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 18. If "yes," has work been performed to repair the damage?  |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 19. Is your property currently under contract by a licensed pest control company? If "yes", state the name and address of licensed pest control company: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> |         | 20. Are you aware of any termite/pest control inspections or treatments for the property in the past?  |

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21. Explain any "yes" answer that you give in this section:  
\_\_\_\_\_  
\_\_\_\_\_

**STRUCTURAL ITEMS**

- |                          |                          |  |
|--------------------------|--------------------------|--|
| Yes                      | No                       |  |
| <input type="checkbox"/> | <input type="checkbox"/> |  |
22. Are you aware of any movement, shifting, or other problems with walls, floors or foundations including any restrictions on how any space, other than the attic or roof, may be used as a result of the manner in which it was constructed?
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
23. Are you aware if the property or or any of the structures on it have ever been damaged by fire, smoke, wind or flood?
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
24. Are you aware of any fire retardant plywood used in the construction?
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
25. Are you aware of any current or past problems with driveways, walkways, patios, sinkholes, or retaining walls on the property?
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
26. Are you aware of any present or past efforts made to repair any problems with the items in this section?
27. Explain any "yes" answers that you give in this section. Please describe the location and nature of

\_\_\_\_\_  
\_\_\_\_\_

**ADDITIONS/REMODELS**

- |                          |                          |         |
|--------------------------|--------------------------|---------|
| Yes                      | No                       | Unknown |
| <input type="checkbox"/> | <input type="checkbox"/> |         |
28. Are you aware of any additions, structural changes or other alterations to the structures on the property made by any present or past owners?
- |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|
29. Were the proper building permits and approvals obtained? Explain any "yes" answers you give in this section:

\_\_\_\_\_  
\_\_\_\_\_

**PLUMBING, WATER AND SEWAGE**

- |                          |                          |         |
|--------------------------|--------------------------|---------|
| Yes                      | No                       | Unknown |
| <input type="checkbox"/> | <input type="checkbox"/> |         |
30. What is the source of your drinking water?  Public  Community System  Well on property  Other (explain) \_\_\_\_\_
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
31. If your drinking water supply is not public have you performed any tests on the water? If so when? \_\_\_\_\_  
Attach a copy of or describe the results.
- |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|
32. Does the wastewater from any clothes washer, dishwasher, or other appliance discharge to any location other than the sewer, septic, or other system that services the rest of the property?
- |  |  |                          |
|--|--|--------------------------|
|  |  | <input type="checkbox"/> |
|--|--|--------------------------|
33. When was well installed? \_\_\_\_\_  
Location of Well? \_\_\_\_\_
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
34. Do you have a softener, filter, or other water purification system?  
 Leased  Owned
35. What is the type of sewage system?  Public Sewer  Private Sewer  Septic System  Cesspool  Other (explain): \_\_\_\_\_
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
36. If you answered "septic system," have you ever had the system inspected to confirm that it is a true septic system and not a cesspool?
- |  |  |                          |
|--|--|--------------------------|
|  |  | <input type="checkbox"/> |
|--|--|--------------------------|
37. If Septic System, when was it installed? \_\_\_\_\_  
Location? \_\_\_\_\_
- |  |  |                          |
|--|--|--------------------------|
|  |  | <input type="checkbox"/> |
|--|--|--------------------------|
38. When was the Septic System or Cesspool last cleaned and/or serviced? \_\_\_\_\_
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
39. Are you aware of any abandoned Septic Systems or Cesspools on your property?
- |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|
- 39a. If "yes," is the closure in accordance with the municipality's ordinance? (explain): \_\_\_\_\_
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
40. Are you aware of any leaks, backups, or other problems relating to any of the plumbing systems and fixtures (including pipes, sinks, tubs and showers), or of any other water or sewage related problems? If "yes," explain: \_\_\_\_\_
- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> |  |
|--------------------------|--------------------------|--|
41. Are you aware of any shut off, disconnected, or abandoned wells, underground water or sewage tanks, or dry wells on the property?
- |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|
42. Is either the private water or sewage system shared? If "yes," explain: \_\_\_\_\_
43. Water Heater:  Electric  Fuel Oil  Gas  
Age of Water Heater \_\_\_\_\_
- |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|
- 43a. Are you aware of any problems with the water heater?
44. Explain any "yes" answers that you give in this section:

\_\_\_\_\_  
\_\_\_\_\_

**HEATING AND AIR CONDITIONING**

- |                          |                          |         |
|--------------------------|--------------------------|---------|
| Yes                      | No                       | Unknown |
| <input type="checkbox"/> | <input type="checkbox"/> |         |
45. Type of air conditioning:  
 Central one zone  Central multiple zone  Wall/Window Unit  None
46. List any areas of the house that are not air conditioned:  
\_\_\_\_\_
- |  |  |                          |
|--|--|--------------------------|
|  |  | <input type="checkbox"/> |
|--|--|--------------------------|
47. What is the age of Air Conditioning System \_\_\_\_\_
48. Type of heat:  Electric  Fuel Oil  Natural Gas  Propane  Unheated  Other
49. What is the type of heating system? (for example, forced air, hot water or base board, radiator, steam heat) \_\_\_\_\_

- 150 50. If it is a centralized heating system, is it one zone or multiple zones?  
 151 \_\_\_\_\_  
 152 [ ] 51. Age of Furnace \_\_\_\_\_ Date of Last Service \_\_\_\_\_  
 153 [ ] 52. List any areas of the house that are not heated:  
 154 \_\_\_\_\_  
 155 [ ] [ ] [ ] 53. Are you aware of any tanks on the property, either above or underground, used to store fuel  
 156 or other substances?  
 157 [ ] [ ] 54. If tank is not in use, do you have a closure certificate?  
 158 [ ] [ ] 55. Are you aware of any problems with any items in this section? If "yes," explain:  
 159 \_\_\_\_\_  
 160 \_\_\_\_\_

161 **WOOD BURNING STOVE OR FIREPLACE**

- 162 Yes No Unknown  
 163 [ ] [ ] 56. Do you have [ ] wood burning stove? [ ] fireplace? [ ] insert? [ ] Other  
 164 [ ] [ ] 56a. Is it presently usable?  
 165 [ ] [ ] [ ] 57. If you have a fireplace, when was the flu last cleaned? \_\_\_\_\_  
 166 [ ] [ ] [ ] 57a. Was the flue cleaned by a professional or non-professional? \_\_\_\_\_  
 167 [ ] [ ] [ ] 58. Have you obtained any required permits for any such item?  
 168 [ ] [ ] 59. Are you aware of any problems with any of these items? If "yes," please explain:  
 169 \_\_\_\_\_  
 170 \_\_\_\_\_

171 **ELECTRICAL SYSTEM**

- 172 Yes No Unknown  
 173 60. What type of wiring is in this structure? [ ] Copper [ ] Aluminum [ ] Other [ ] Unknown  
 174 61. What amp service does it have?  
 175 [ ] 60 [ ] 100 [ ] 150 [ ] 200 [ ] Other [ ] Unknown  
 176 [ ] [ ] [ ] 62. Does it have 240 volt service? Which are present? [ ] Circuit Breakers [ ] Fuses or [ ] Both?  
 177 [ ] [ ] 63. Are you aware of any additions to the original service? If "yes" were the additions done  
 178 by a licensed electrician? Name and address:  
 179 \_\_\_\_\_  
 180 \_\_\_\_\_  
 181 [ ] [ ] [ ] 64. If yes, were proper building permits and approvals obtained?  
 182 [ ] [ ] 65. Are you aware of any wall switches, light fixtures or electrical outlets in need of repair?  
 183 66. Explain any "yes" answers you give in this section:  
 184 \_\_\_\_\_  
 185 \_\_\_\_\_  
 186 \_\_\_\_\_

187 **LAND (SOILS, DRAINAGE AND BOUNDARIES)**

- 188 Yes No Unknown  
 189 [ ] [ ] 67. Are you aware of any fill or expansive soil on the property?  
 190 [ ] [ ] 68. Are you aware of any past or present mining operations in the area in which the property is  
 191 located?  
 192 [ ] [ ] 69. Is the property located in a flood hazard zone?  
 193 [ ] [ ] 70. Are you aware of any drainage or flood problems affecting the property?  
 194 [ ] [ ] [ ] 71. Are there any areas on the property which are designated as protected wetlands?  
 195 [ ] [ ] 72. Are you aware of any encroachments, utility easements, boundary line disputes, or drainage or  
 196 other easements affecting the property?  
 197 [ ] [ ] 73. Are there any water retention basins on the property or the adjacent properties?  
 198 [ ] [ ] 74. Are you aware if any part of the property is being claimed by the State of New Jersey as land  
 199 presently or formerly covered by tidal water (Riparian claim or lease grant)? Explain:  
 200 \_\_\_\_\_  
 201 \_\_\_\_\_  
 202 [ ] [ ] 75. Are you aware of any shared or common areas (for example, driveways, bridges, docks, walls,  
 203 bulkheads, etc.) or maintenance agreements regarding the property?  
 204 76. Explain any "yes" answers to the preceding questions in this section:  
 205 \_\_\_\_\_  
 206 \_\_\_\_\_  
 207 [ ] [ ] 77. Do you have a survey of the property?  
 208 \_\_\_\_\_

209 **ENVIRONMENTAL HAZARDS**

- 210 Yes No Unknown  
 211 [ ] [ ] 78. Have you received any written notification from any public agency or private concern informing  
 212 you that the property is adversely affected, or may be adversely affected, by a condition that exists  
 213 on a property in the vicinity of this property? If "yes," attach a copy of any such notice currently in  
 214 your possession.  
 215 [ ] [ ] 78a. Are you aware of any condition that exists on any property in the vicinity which adversely affects,  
 216 or has been identified as possibly adversely affecting, the quality or safety of the air, soil, water,  
 217 and/or physical structures present on this property? If "yes," explain:  
 218 \_\_\_\_\_  
 219 \_\_\_\_\_  
 220 [ ] [ ] 79. Are you aware of any underground storage tanks (UST) or toxic substances now or previously  
 221 present on this property or adjacent property (structure or soil), such as polychlorinated biphenyl  
 222 (PCB), solvents, hydraulic fluid, petro-chemicals, hazardous wastes, pesticides, chromium,  
 223 thorium, lead or other hazardous substances in the soil? If "yes," explain:  
 224 \_\_\_\_\_  
 225 \_\_\_\_\_  
 226 [ ] [ ] 80. Are you aware if any underground storage tank has been tested? (Attach a copy of each test report  
 227 or closure certificate if available).

- 228    81. Are you aware if the property has been tested for the presence of any other toxic substances, such as  
 229 lead-based paint, urea-formaldehyde foam insulation, asbestos-containing materials, or others?  
 230 (Attach copy of each test report if available).  
 231 82. If "yes" to any of the above, explain:  
 232 \_\_\_\_\_  
 233 \_\_\_\_\_  
 234   82a. If "yes" to any of the above, were any actions taken to correct the problem? Explain:  
 235 \_\_\_\_\_  
 236 \_\_\_\_\_  
 237    83. Is the property in a designated Airport Safety Zone?  
 238

239 **DEED RESTRICTIONS, SPECIAL DESIGNATIONS, HOMEOWNERS ASSOCIATIONS/CONDOMINIUMS**  
 240 **AND CO-OPS**

- 241 Yes No Unknown  
 242   84. Are you aware if the property is subject to any deed restrictions or other limitations on how it may be  
 243 used due to its being situated within a designated historic district, or a protected area like the New  
 244 Jersey Pinelands, or its being subject to similar legal authorities other than typical local zoning  
 245 ordinances?  
 246   85. Is the property part of a condominium or other common interest ownership plan?  
 247   85a. If so, is the property subject to any covenants, conditions, or restrictions as a result of its being part  
 248 of a condominium or other form of common interest ownership?  
 249   86. As the owner of the property, are you required to belong to a condominium association or  
 250 homeowners association, or other similar organization or property owners?  
 251   86a. If so, what is the Association's name and telephone number?  
 252 \_\_\_\_\_  
 253    86b. If so, are there any dues or assessments involved? If "yes," how much? \_\_\_\_\_  
 254   87. Are you aware of any defect, damage, or problem with any common elements or common areas that  
 256 materially affects the property?  
 257   88. Are you aware of any condition or claim which may result in an increase in assessments or fees?  
 258    89. Since you purchased the property, have there been any changes to the rules or by-laws of the  
 259 Association that impact the property?  
 260 90. Explain any "yes" answers you give in this section:  
 261 \_\_\_\_\_  
 262 \_\_\_\_\_  
 263

264 **MISCELLANEOUS**

- 265 Yes No Unknown  
 266   91. Are you aware of any existing or threatened legal action affecting the property or any condominium  
 267 or homeowners association to which you, as an owner, belong?  
 268   92. Are you aware of any violations of Federal, State or local laws or regulations relating to this  
 269 property?  
 270   93. Are you aware of any zoning violations, encroachments on adjacent properties, non-conforming  
 271 uses, or set-back violations relating to this property? If so, please state whether the condition is  
 272 pre-existing non-conformance to present day zoning or a violation to zoning and/or land use laws.  
 273 \_\_\_\_\_  
 274 \_\_\_\_\_  
 275   94. Are you aware of any public improvement, condominium or homeowner association assessments  
 276 against the property that remain unpaid? Are you aware of any violations of zoning, housing,  
 277 building, safety or fire ordinances that remain uncorrected?  
 278   95. Are there mortgages, encumbrances or liens on this property?  
 279   95a. Are you aware of any reason, including a defect in title, that would prevent you from conveying clear  
 280 title?  
 281   96. Are you aware of any material defects to the property, dwelling, or fixtures which are not disclosed  
 282 elsewhere on this form? (A defect is "material," if a reasonable person would attach importance to its  
 283 existence or non-existence in deciding whether or how to proceed in the transaction.) If "yes,"  
 284 explain: \_\_\_\_\_  
 285 \_\_\_\_\_  
 286   97. Other than water and sewer charges, utility and cable tv fees, your local property taxes, any special  
 287 assessments and any association dues or membership fees, are there any other fees that you pay on  
 288 an ongoing basis with respect to this property, such as garbage collection fees?  
 289 98. Explain any other "yes" answers you give in this section:  
 290 \_\_\_\_\_  
 291 \_\_\_\_\_  
 292  
 293  
 294

295 **RADON GAS Instructions to Owners**

296 By law (N.J.S.A. 26:2D-73), a property owner who has had his or her property tested or treated for radon gas may require  
 297 that information about such testing and treatment be kept confidential until the time that the owner and a buyer enter into a contract of  
 298 sale, at which time a copy of the test results and evidence of any subsequent mitigation or treatment shall be provided to the buyer.  
 299 The law also provides that owners may waive, in writing, this right of confidentiality. As the owner(s) of this property, do you wish  
 300 to waive this right?

301 Yes No  
 302   \_\_\_\_\_ (Initials) \_\_\_\_\_ (Initials)  
 303  
 304

305 If you responded "yes," answer the following questions. If you responded •no,• proceed to the next section.

306  
307 Yes No Unknown  
308 [ ] [ ]  
309  
310  
311  
312 [ ] [ ]  
313 [ ] [ ]  
314  
315

99. Are you aware if the property has been tested for radon gas? (Attach a copy of each test report if available.)  
100. Are you aware if the property has been treated in an effort to mitigate the presence of radon gas? (If "yes," attach a copy of any evidence of such mitigation or treatment.)  
101. Is radon remediation equipment now present in the property?  
101a. If "yes," is such equipment in good working order?

316 **MAJOR APPLIANCES AND OTHER ITEMS**

317 The terms of any final contract executed by the seller shall be controlling as to what appliances or other items, if any, shall be  
318 included in the sale of the property. Which of the following items are present in the property? (For items that are not present,  
319 indicate "not applicable.")

320  
321 Yes No Unknown N/A  
322 [ ] [ ] [ ]  
323 [ ] [ ] [ ]  
324 [ ] [ ] [ ]  
325  
326  
327  
328 [ ] [ ] [ ]  
329

102. Electric Garage Door Opener  
102a. If "yes," are they reversible? Number of Transmitters \_\_\_\_\_  
103. Smoke Detectors  
[ ] Battery [ ] Electric [ ] Both How many \_\_\_\_\_  
[ ] Carbon Monoxide Detectors How many \_\_\_\_\_  
Location \_\_\_\_\_  
104. With regard to the above items, are you aware that any item is not in working order?

104a. If "yes," identify each item that is not in working order or defective and explain the nature of the problem:

\_\_\_\_\_  
\_\_\_\_\_

334  
335 [ ] [ ] [ ]  
336 [ ] [ ] [ ]  
337 [ ] [ ] [ ]  
338  
339 [ ] [ ] [ ]  
340

105. [ ] In-ground pool [ ] Above-ground pool [ ] Pool Heater [ ] Spa/Hot Tub  
105a. Were proper permits and approvals obtained?  
105b. Are you aware of any leaks or other defects with the filter or the walls or other structural or mechanical components of the pool or spa/hot tub?  
105c. If an in-ground pool, are you aware of any water seeping behind the walls of the pool?

106. Indicate which of the following may be included in the sale? (Indicate Y for yes N for no.)

- [ ] Refrigerator
- [ ] Range
- [ ] Microwave Oven
- [ ] Dishwasher
- [ ] Trash Compactor
- [ ] Garbage Disposal
- [ ] In-Ground Sprinkler System
- [ ] Central Vacuum System
- [ ] Security System
- [ ] Washer
- [ ] Dryer
- [ ] Intercom
- [ ] Other

107. Of those that may be included, is each in working order? If "no," identify each item not in working order, explain the nature of the problem:

\_\_\_\_\_  
\_\_\_\_\_

362 **ACKNOWLEDGMENT OF SELLER**

363 The undersigned Seller affirms that the information set forth in this Disclosure Statement is accurate and complete to the best  
364 of Seller's knowledge, but is not a warranty as to the condition of the Property. Seller hereby authorizes the real estate brokerage  
365 firm representing or assisting the seller to provide this Disclosure Statement to all prospective buyers of the Property, and to other  
366 real estate agents. Seller alone is the source of all information contained in this statement. If the Seller relied upon any credible  
367 representations of another, the Seller should state the name(s) of the person(s) who made the representation(s) and describe the  
368 information that was relied upon.

369 \_\_\_\_\_  
370 \_\_\_\_\_  
371 \_\_\_\_\_

374 \_\_\_\_\_  
375 SELLER

\_\_\_\_\_  
DATE

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379 SELLER

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**EXECUTOR, ADMINISTRATOR, TRUSTEE**

(If applicable). The undersigned has never occupied the property and lacks personal knowledge necessary to complete this Disclosure Statement.

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\_\_\_\_\_ DATE

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\_\_\_\_\_ DATE

**RECEIPT AND ACKNOWLEDGMENT BY PROSPECTIVE BUYER**

The undersigned Prospective Buyer acknowledges receipt of this Disclosure Statement prior to signing a Contract of Sale pertaining to this Property. Prospective Buyer acknowledges that this Disclosure Statement is not a warranty by Seller and that it is Prospective Buyer's responsibility to satisfy himself or herself as to the condition of the Property. Prospective Buyer acknowledges that the Property may be inspected by qualified professionals, at Prospective Buyer's expense, to determine the actual condition of the Property. Prospective Buyer further acknowledges that this form is intended to provide information relating to the condition of the land, structures, major systems and amenities, if any, included in the sale. This form does not address local conditions which may affect a purchaser's use and enjoyment of the property such as noise, odors, traffic volume, etc. Prospective Buyer acknowledges that they may independently investigate such local conditions before entering into a binding contract to purchase the property. Prospective Buyer acknowledges that he or she understands that the visual inspection performed by the Seller's real estate broker/broker-salesperson/salesperson does not constitute a professional home inspection as performed by a licensed home inspector

\_\_\_\_\_ PROSPECTIVE BUYER

\_\_\_\_\_ DATE

\_\_\_\_\_ PROSPECTIVE BUYER

\_\_\_\_\_ DATE

**ACKNOWLEDGMENT OF REAL ESTATE BROKER/BROKER-SALESPERSON/SALESPERSON**

The undersigned Seller's real estate broker/broker-salesperson/ salesperson acknowledges receipt of the Property Disclosure Statement form and that the information contained in the form was provided by the Seller.

The Seller's real estate broker/broker-salesperson/salesperson also confirms that he or she visually inspected the property with reasonable diligence to ascertain the accuracy of the information disclosed by the seller, prior to providing a copy of the property disclosure statement to the buyer.

The Prospective Buyer's real estate broker/broker-salesperson/ salesperson also acknowledges receipt of the Property Disclosure Statement form for the purpose of providing it to the Prospective Buyer.

\_\_\_\_\_ PROSPECTIVE BUYER'S REAL ESTATE  
BROKER / BROKER - SALESPERSON /  
SALESPERSON

\_\_\_\_\_ DATE

\_\_\_\_\_ SELLER'S REAL ESTATE BROKER/  
BROKER-SALESPERSON/SALESPERSON

\_\_\_\_\_ DATE