

**SELLER'S PROPERTY DISCLOSURE STATEMENT**  
EXHIBIT "  A  "



2006 Printing

For property located at 14461 Club Circle, Alpharetta, Georgia, 30004 together with all improvements thereon ("Property")

**NOTICE TO BUYER AND SELLER:** This disclosure statement is designed to assist Seller in disclosing to prospective buyers all known material adverse facts relating to the physical condition of Property that may not be readily observable, disclosing historical information and past problems with Property, and identifying those fixtures/items that are included with the sale of Property. All questions are to be answered with respect to the above referenced Property.

**IF THE ANSWERS TO ANY OF THE QUESTIONS LISTED BELOW ARE "YES," PLEASE EXPLAIN IN DETAIL IN THE "ADDITIONAL EXPLANATIONS" SECTION.**

	Yes	No	Don't Know
<b>1. OCCUPANCY:</b>			
(a) Is Property vacant?	___	<input checked="" type="checkbox"/>	___
If yes, how long has it been since Seller occupied Property? _____			
(b) Are there any leases, written or verbal, on Property or any part thereof?	___	<input checked="" type="checkbox"/>	___
<b>2. SOIL, TREES, SHRUBS AND BOUNDARIES:</b>			
(a) Are there any landfills (other than foundation backfill), graves, mine shafts, trash dumps or wells (in use or abandoned) on Property?	___	<input checked="" type="checkbox"/>	___
(b) Is there any sliding, settling (other than normal settling), earth movement, sinkholes, upheaval, or earth stability/expansive soil problems?	___	<input checked="" type="checkbox"/>	___
(c) Are there any diseased or dead trees on Property?	___	<input checked="" type="checkbox"/>	___
(d) Are there any encroachments, leases, unrecorded easements, or boundary line disputes?	___	<input checked="" type="checkbox"/>	___
<b>3. ROOF, GUTTERS AND DOWNSPOUTS:</b>			
(a) Approximate age of roof: _____ years.			
(b) Has the roof, or any part thereof, been repaired during your ownership?	___	<input checked="" type="checkbox"/>	___
(c) Are there any roof leaks or other problems with the roof, roof flashing, gutters or downspouts?	___	<input checked="" type="checkbox"/>	___
<b>4. TERMITES, DRY-ROT, PESTS, AND WOOD-DESTROYING ORGANISMS:</b>			
(a) Is there any past or present damage to Property caused by infiltrating pests, termites, dry-rot, or other wood-destroying organisms?	___	<input checked="" type="checkbox"/>	___
(b) Is your Property currently under a transferable bond, warranty or other coverage for termites or other wood destroying organisms by a licensed pest control company?	<input checked="" type="checkbox"/>	___	___
If yes, check type of coverage: <input type="checkbox"/> re-treatment and repair; or <input type="checkbox"/> re-treatment only			
(c) Is there a cost to transfer the bond, warranty or other coverage?	___	___	<input checked="" type="checkbox"/>
If yes, what is the cost? \$ _____			
(d) Is there a cost to maintain the bond, warranty or other coverage? If yes, what is the annual cost? \$ _____	<input checked="" type="checkbox"/>	___	___
(e) Have any termite/pest control reports or treatments for Property been done in the last five years?	<input checked="" type="checkbox"/>	___	___
(f) Does any dwelling or garage on Property have any untreated wood or exterior siding/cladding, such as rigid board insulation, foam plastic, synthetic stucco, hard coat stucco, wood or masonry siding (excluding brick), below grade or within six inches of finished grade?	___	<input checked="" type="checkbox"/>	___
<b>5. STRUCTURAL ITEMS, ADDITIONS AND ALTERATIONS:</b>			
(a) What year was the main residential dwelling constructed? <u>1999</u>			
(b) Has there been any movement, shifting, settling (other than normal settling), cracking, deterioration, or other structural problems with any dwelling or garage on Property?	___	<input checked="" type="checkbox"/>	___
(c) Has there been any additional structural bracing, underpinning, or other structural reinforcement added to any dwelling or garage on Property?	___	<input checked="" type="checkbox"/>	___
(d) Are there any problems with driveways, walkways, patios, or retaining walls on Property?	___	<input checked="" type="checkbox"/>	___
(e) Have there been any additions, structural changes, or any other major alterations to the original improvements on the Property?	___	<input checked="" type="checkbox"/>	___
(f) Has there been any work done on the Property where required permits and/or approvals (public or private) were not obtained?	___	<input checked="" type="checkbox"/>	___
(g) Has any work been done to Property that was not in compliance with building codes or zoning regulations?	___	<input checked="" type="checkbox"/>	___
(h) Does any part of the exterior siding or cladding of any dwelling or garage on Property consist of synthetic stucco?	___	<input checked="" type="checkbox"/>	___

**6. DRAINAGE, FLOODING AND MOISTURE:**

- |  | Yes | No | Don't Know |
|--|-----|----|------------|
| (a) Has there been any water leakage, water accumulation, or dampness within the basement, crawl space or other parts of the main dwelling at or below grade?        | —   | ✓  | —          |
| (b) Have any repairs been made to control any water or dampness problems in the basement, crawl space, or other parts of the main dwelling at or below grade?        | —   | ✓  | —          |
| (c) Is the Property or any improvements thereon located in a flood zone?   | —   | ✓  | —          |
| (d) Does water regularly stand on Property for more than one day after it has rained?  | —   | ✓  | —          |
| (e) Has there been any past flooding on Property?  | —   | ✓  | —          |
| (f) Are there any problems with siding or exterior cladding, swelling, chipping, delaminating or retaining moisture?   | —   | ✓  | —          |
| (g) Does mold appear on interior heated and cooled portions of any dwelling on Property other than on the walls, floors or ceilings of showers, sinks, and bathtubs? | —   | ✓  | —          |

**7. PLUMBING RELATED ITEMS:**

- |   |   |   |   |
|---|---|---|---|
| (a) What is your drinking water source: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Well on Property | — | — | — |
| (b) If your drinking water is from a well, has it been tested within the past twelve months?  | — | ✓ | — |
| (c) Do you have a water softener, filter or purifier? If yes, <input type="checkbox"/> Leased <input type="checkbox"/> Owned                                  | — | ✓ | — |
| (d) What is the type of sewage system: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Septic Tank       | — | — | ✓ |
| (e) Is the main dwelling served by sewage pump or lift system?  | — | ✓ | — |
| (f) Do you know if any septic tank or cesspool on Property has ever been professionally serviced? If yes, please give the date of last service: _____         | — | ✓ | — |
| (g) Do you know of any past or present leaks, backups, or other similar problems relating to any of the plumbing, water and/or sewage-related items?          | — | ✓ | — |
| (h) Is there any polybutylene plumbing, other than primary service line, on Property?   | — | ✓ | — |

**8. OTHER SYSTEMS AND COMPONENTS:**

- |   |   |   |   |
|---|---|---|---|
| (a) What type of heating system(s) serve the main dwelling? <input checked="" type="checkbox"/> Gas <input type="checkbox"/> electric <input type="checkbox"/> other  | — | — | — |
| (b) What is the approximate age of heating system(s): <u>7</u> years  | — | — | — |
| (c) What type of air conditioning system(s) serve the main dwelling? <input type="checkbox"/> Gas <input checked="" type="checkbox"/> electric <input type="checkbox"/> other   | — | — | — |
| (d) What is the approximate age of air conditioning system(s) <u>7</u> years  | — | — | — |
| (e) Is any portion of the main dwelling not served by a central or zoned heating and/or air conditioning system?  | — | ✓ | — |
| (f) How is water heated in the main dwelling? <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Solar  | — | — | — |
| (g) What is the approximate age of water heater: <u>7</u> years   | — | — | — |
| (h) Does the main dwelling have aluminum wiring other than the primary service line?  | — | ✓ | — |
| (i) Is there any system or appliance which is leased or for which the buyer must pay a transfer fee to continue to use? If yes, what is the transfer fee? \$ _____<br>If yes, what is the current use fee to be paid by the buyer? \$ _____ | — | ✓ | — |
| (j) Are any fireplaces not working or in need of repair?  | — | ✓ | — |
| (k) When was each fireplace, wood stove or chimney/flue last cleaned? Date: _____   | — | — | ✓ |

**9. TOXIC SUBSTANCES:**

- |  |   |   |   |
|--|---|---|---|
| (a) Are there any underground tanks, toxic or hazardous substances on Property (structure or soil) such as asbestos, urea-formaldehyde, methane gas, radioactive material, radon, mold, benzene or other environmental contaminants? | — | ✓ | — |
| (b) Has Property ever been tested for radon, lead, mold or any other potentially toxic substances?   | — | ✓ | — |

**10. COVENANTS, FEES AND ASSESSMENTS:**

- |   |   |   |   |
|---|---|---|---|
| (a) Is Property part of a condominium, community association or subject to covenants, conditions and restrictions (CC & Rs)?  | ✓ | — | — |
| (b) Is there a mandatory community association fee or assessment?<br>If yes, what is the amount? \$ _____ per _____<br>Is there an initiation fee? If yes, what amount? \$ _____  | — | — | — |
| (c) Are there any recreational facilities in the community for which the obligation to pay and the right to use are optional?<br>If yes, please describe the nature of the facilities and the optional fee or charge. _____ | — | ✓ | — |
| (d) In purchasing Property, will any initiation, transfer, or other similar fee be owed to the Association? If yes, what is the amount? \$ _____  | — | — | — |
| (e) Are there any special assessments approved by but yet not owing or due to a community Association that are not yet owed or due?   | — | ✓ | — |

**11. OTHER MATTERS:**

	Yes	No	Don't Know
(a) Have there been any inspections of Property in the past year? If yes, by whom and of what type? _____	_____	<input checked="" type="checkbox"/>	_____
(b) Does Property contain any building products which are or have been the subject of class action lawsuits, litigation or legal claims alleging that the product is defective? If yes, please identify the product or products and the general location of each on Property: _____	_____	<input checked="" type="checkbox"/>	_____
(c) Is there or has there been in the past any litigation involving Property or any improvement therein alleging negligent or improper construction defects, termites, and/or title problems?	_____	<input checked="" type="checkbox"/>	_____
(d) Has there been any award or payment of money in lieu of repairs for such a defective building product?	_____	<input checked="" type="checkbox"/>	_____
(e) Has any release been signed that would limit a future owner from making any claims in connection with Property?	_____	<input checked="" type="checkbox"/>	_____
(f) Has there been any fire, flood or wind damage which required repairs to Property in excess of \$500,00?	_____	<input checked="" type="checkbox"/>	_____
(g) Approximately how many insurance claims have been filed on Property since you owned it? <u>0</u>	_____	<input checked="" type="checkbox"/>	_____
(h) Are any fixtures or appliances included in the sale in need of repair?	_____	<input checked="" type="checkbox"/>	_____
(i) Have any repairs been made to the electrical, plumbing, or heating and air condition systems, or any part thereof?	_____	<input checked="" type="checkbox"/>	_____
(j) Was any dwelling on Property or portion thereof (excluding mobile, modular and manufactured dwelling) moved to the site from another location?	_____	<input checked="" type="checkbox"/>	_____

**12. FIXTURES/ITEMS:** (Check (✓) only those fixtures/items below that are included in the sale of Property. Unless otherwise indicated, if there is more than one item (such as a second refrigerator or two chandeliers or three smoke detectors), all such fixtures/items checked are included in the sale of Property. Those fixtures/items listed below that are not checked shall not be included in the sale of Property.

- |  |  |   |
|--|--|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Air Conditioning Window Unit</li> <li><input type="checkbox"/> Air Purifier</li> <li><input checked="" type="checkbox"/> Alarm System (Burglar)             <ul style="list-style-type: none"> <li><input type="checkbox"/> Leased <input checked="" type="checkbox"/> Owned</li> </ul> </li> <li><input checked="" type="checkbox"/> Alarm System (Smoke/Fire)             <ul style="list-style-type: none"> <li><input type="checkbox"/> Leased <input checked="" type="checkbox"/> Owned</li> </ul> </li> <li><input type="checkbox"/> Arbor</li> <li><input type="checkbox"/> Attic Fan (Whole House Fan)</li> <li><input type="checkbox"/> Attic Ventilator Fan</li> <li><input type="checkbox"/> Awning</li> <li><input type="checkbox"/> Basketball Post &amp; Goal             <ul style="list-style-type: none"> <li><input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input type="checkbox"/> Birdhouses</li> <li><input type="checkbox"/> Boat Dock</li> <li><input type="checkbox"/> Carbon Monoxide Detector</li> <li><input checked="" type="checkbox"/> Ceiling Fan</li> <li><input checked="" type="checkbox"/> Chandelier</li> <li><input checked="" type="checkbox"/> Closet Shelving System             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input type="checkbox"/> Dehumidifier             <ul style="list-style-type: none"> <li><input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input checked="" type="checkbox"/> Dishwasher             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input type="checkbox"/> Dog House</li> <li><input checked="" type="checkbox"/> Door &amp; Window Hardware</li> <li><input type="checkbox"/> Dryer             <ul style="list-style-type: none"> <li><input type="checkbox"/> Gas <input type="checkbox"/> Electric</li> </ul> </li> <li><input checked="" type="checkbox"/> Fence (Invisible)</li> <li><input checked="" type="checkbox"/> Fence Pet Collar</li> <li><input checked="" type="checkbox"/> Fireplace             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Gas Logs</li> <li><input type="checkbox"/> Screen/Door</li> <li><input type="checkbox"/> Wood Burning Insert</li> </ul> </li> <li><input type="checkbox"/> Flag Pole</li> </ul> | <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Garage Door Opener             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Remote Control</li> </ul> </li> <li><input checked="" type="checkbox"/> Garbage Disposal</li> <li><input type="checkbox"/> Gas Grille             <ul style="list-style-type: none"> <li><input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input type="checkbox"/> Gazebo</li> <li><input type="checkbox"/> Hot Tub</li> <li><input type="checkbox"/> Humidifier</li> <li><input checked="" type="checkbox"/> Ice Maker (refrigerator)             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input type="checkbox"/> Intercom</li> <li><input checked="" type="checkbox"/> Jetted Tub</li> <li><input type="checkbox"/> Landscaping Lights</li> <li><input checked="" type="checkbox"/> Light Fixtures<br/>(Except Chandeliers)</li> <li><input checked="" type="checkbox"/> Mailbox</li> <li><input checked="" type="checkbox"/> Microwave Oven             <ul style="list-style-type: none"> <li><input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input checked="" type="checkbox"/> Mirror (Attached)</li> <li><input type="checkbox"/> Outbuilding</li> <li><input type="checkbox"/> Outdoor Bench</li> <li><input type="checkbox"/> Playhouse</li> <li><input type="checkbox"/> Porch swing</li> <li><input type="checkbox"/> Propane Gas Tanks             <ul style="list-style-type: none"> <li><input type="checkbox"/> Above ground <input type="checkbox"/> Buried</li> <li><input type="checkbox"/> Leased <input type="checkbox"/> Owned</li> </ul> </li> <li><input checked="" type="checkbox"/> Radio (Built-In)</li> <li><input checked="" type="checkbox"/> Refrigerator</li> <li><input checked="" type="checkbox"/> Satellite Dish/Receiver</li> <li><input type="checkbox"/> Sauna</li> <li><input type="checkbox"/> Septic Pump</li> <li><input checked="" type="checkbox"/> Shelving Unit &amp; System             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input checked="" type="checkbox"/> Shower Head/Sprayer</li> <li><input checked="" type="checkbox"/> Smoke Detector             <ul style="list-style-type: none"> <li><input type="checkbox"/> Battery Operated <input type="checkbox"/> Hard Wired</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Speakers (Built-In)</li> <li><input checked="" type="checkbox"/> Sprinkler System</li> <li><input type="checkbox"/> Statuary</li> <li><input type="checkbox"/> Stepping Stones</li> <li><input type="checkbox"/> Storage Building</li> <li><input checked="" type="checkbox"/> Stove             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric</li> <li><input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input type="checkbox"/> Sump Pump</li> <li><input type="checkbox"/> Surface Unit Cook Top             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric</li> </ul> </li> <li><input type="checkbox"/> Swimming Pool             <ul style="list-style-type: none"> <li><input type="checkbox"/> Above Ground</li> </ul> </li> <li><input type="checkbox"/> Swimming Pool Equipment<br/>(List below)</li> <li><input type="checkbox"/> Swing Set</li> <li><input checked="" type="checkbox"/> Switch Plate Covers</li> <li><input checked="" type="checkbox"/> Telephone Jacks/Wires</li> <li><input type="checkbox"/> Television Antenna</li> <li><input checked="" type="checkbox"/> Television Cable/Jacks</li> <li><input checked="" type="checkbox"/> Thermostat (Programmable)</li> <li><input type="checkbox"/> Trash Compactor             <ul style="list-style-type: none"> <li><input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing</li> </ul> </li> <li><input type="checkbox"/> Tree House</li> <li><input type="checkbox"/> Trellis</li> <li><input type="checkbox"/> Vacuum System (Built-In)             <ul style="list-style-type: none"> <li><input type="checkbox"/> Vacuum Attachments</li> </ul> </li> <li><input type="checkbox"/> Vent Hood</li> <li><input type="checkbox"/> Washing Machine</li> <li><input type="checkbox"/> Water Purification System</li> <li><input type="checkbox"/> Water Softener System</li> <li><input type="checkbox"/> Weather Vane</li> <li><input type="checkbox"/> Well Pump</li> <li><input checked="" type="checkbox"/> Window Screens</li> <li><input checked="" type="checkbox"/> Window Treatments</li> <li><input type="checkbox"/> Wine Cooler</li> </ul> |
|--|--|---|

Other fixtures/items included in the sale of Property:

Other fixtures/items not included in the sale of Property:

The common law of fixtures shall apply to fixtures not addressed herein. Those fixtures/items that are not included in the sale of Property shall remain Property of Seller and shall be removed prior to closing or the transfer of possession of Property to Buyer, whichever is later. Seller shall lose the right to remove any such fixtures/items not timely removed. In removing all fixtures/items, Seller shall use reasonable care to prevent damage and, if necessary, to restore Property to its original condition.

13. LEAD-BASED PAINT: Was any part of the residential dwelling on Property constructed prior to 1978?

Yes  Don't Know  No (if no, proceed to paragraph 14.)

If you have answered "Yes" above, Seller does hereby provide the following warning and shall disclose the following information regarding lead-based paint and lead-based paint hazards.

**PURCHASE AND SALE TRANSACTION LEAD WARNING STATEMENT.**

Every purchaser of any interest in residential property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

**Seller's Disclosure.** [Seller to mark and initial sections A and B below]

A. Presence of lead-based paint and/or lead paint hazard (check one below):

Seller Initials

Known lead-based paint and/or lead-based paint hazards are present in the housing (explain below):

Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

Seller Initials

B. Records and Reports available to the Seller (check one below):

Seller has provided the Buyer with all the available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list document below):

Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

**Buyer's Acknowledgment.** [Buyer to mark and initial sections C, D, and E below]

Buyer Initials

C. Buyer has received copies of all information listed above regarding lead-based paint and/or lead-based paint hazards

Buyer Initials

D. Buyer has read and understands the above lead warning statement and has received the pamphlet "Protect Your Family From Lead In Your Home."

Buyer Initials

E. Buyer has (check one below):

Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment inspection for the presence of lead-based paint and/or lead-based paint hazards; or

Waived the opportunity to conduct a risk assessment inspection for the presence of lead-based paint and/or lead-based paint hazards.

**Broker Acknowledgment.** [Broker to initial section F below]

Broker Initials

F. Broker has informed the Seller of the Seller's obligations under 42 U.S.C. § 4852(d) and is aware of his/her responsibility to ensure compliance.

\_\_\_\_\_  
Broker's (or Broker's Affiliated Licensee's) signature

The lead-based paint disclosures must occur prior to Seller's acceptance of Buyer's written offer to purchase; if the potential Buyer makes the offer to purchase before the requisite disclosures are provided to Buyer, Seller can not accept the offer until: 1) the disclosure is made; and 2) the potential Buyer has had an opportunity to review the information and consider whether to amend the offer.

14. **AGRICULTURAL DISCLOSURE:** Is Property within, partially within, or adjacent to any property zoned or identified on an approved county land use plan as agricultural or forestry use?  Yes  Don't Know  No

It is the policy of this state and this community to conserve, protect, and encourage the development and improvement of farm and forest land for the production of food, fiber, and other products, and also for its natural and environmental value. This notice is to inform prospective property owners or other persons or entities leasing or acquiring an interest in real property that property in which they are about to acquire an interest lies within, partially within, or adjacent to an area zoned, used, or identified for farm and forest activities and that farm and forest activities occur in the area. Such farm and forest activities may include intensive operations that cause discomfort and inconveniences that involve, but are not limited to, noises, odors, fumes, dust, smoke, insects, operations of machinery during any 24 hour period, storage and disposal of manure, and the application by spraying or otherwise of chemical fertilizers, soil amendments, herbicides, and pesticides. One or more of these inconveniences may occur as the result of farm or forest activities which are in conformance with existing laws and regulations and accepted customs and standards.

15. **ADDITIONAL EXPLANATIONS OR DISCLOSURES:**

Mark box if additional pages are attached.

16. **SELLER'S REPRESENTATION:**

To the best of Seller's knowledge and belief, the information contained in this Seller's Property Disclosure Statement is accurate and complete as of the date signed by Seller. It should not be a substitute for Buyer inspecting Property or obtaining any warranties with regard to Property that Buyer may wish to obtain. Seller hereby authorizes Broker to provide this Seller's Property Disclosure Statement to prospective buyers of Property and to real estate brokers and their affiliated licensees. Seller agrees to promptly update this Seller's Property Disclosure Statement and to provide any Buyer and Broker with a revised copy of the same if there are any material changes in the answers to the questions contained herein.

Is each individual named below a U. S. Citizen or resident alien?

Yes  No

Has each individual named below been a Georgia resident for the past two years?

Yes  No

Has Property been Seller's primary residence for at least two of the last five years?

Yes  No

Seller: *[Signature]*

Date: 9/20, 2006

Seller: *Alle M. Foster*

Date: 9/20, 2006

17. **RECEIPT AND ACKNOWLEDGMENT BY BUYER:**

I acknowledge receipt of this Seller's Property Disclosure Statement. I understand that, except as stated in the Purchase and Sale Agreement, Property is being sold in its present condition, without warranties or guarantees of any kind by Seller or Brokers. No representations concerning the condition of Property are being relied upon by Buyer except as disclosed herein or stated in the Purchase and Sale Agreement.

Buyer: \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_\_\_

Buyer: \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_\_\_

# OFFICIAL GEORGIA WOOD INFESTATION INSPECTION REPORT

Company Name SKYLINE PEST SOLUTIONS, INC. License No. 99378  
 Address P. O. BOX 3034, McDONOUGH, GEORGIA 30253  
 Telephone No. 678-432-5464 Date of Issuance 09-20-06  
 Seller MICHAEL & ALI FOSTER Inspector DAVID KING  
 File No. \_\_\_\_\_ Purchaser(s) LISTING LETTER

### SCOPE OF INSPECTION

An inspection of the below listed structure(s) was performed by a qualified inspector employed by this firm to determine the presence or previous presence of an infestation of the listed organisms and is not intended to be a structural report. Neither is this a warranty as to absence of wood destroying organisms. This report is subject to all conditions enumerated on the reverse side and is issued without warranty or guarantee except as provided in Rule 620-6-.03 of the Rules of the Georgia Structural Pest Control Act or subject to any treatment guarantee specified below.

Main Structure \_\_\_\_\_  
 Other Structures (Specify) \_\_\_\_\_  
 Address of Structure WALTON CLUB CIRCLE ALPHARETTA, GA. 30004

### FINDINGS

Inspection Reveals Visible Evidence of:

- Subterranean Termites
- Powder Post Beetles
- Wood Boring Beetles
- Dry Wood Termites
- Wood Decaying Fungus (Not Molds and Mildews)

Active Infestation

YES \_\_\_\_\_ NO

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Previous Infestation

YES \_\_\_\_\_ NO

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Were any areas of the structure obstructed or inaccessible?  
 If yes, list these areas (see item 3 on reverse side of form)

YES  NO

### WALL AND FLOOR COVERINGS VOIDED

The following conditions conducive to infestation for wood destroying organisms were found at the time of inspection. The location of these conditions conducive to infestation are indicated on the attached diagram:

Remarks/Additional Findings:

NOTE: If visible evidence of active or previous infestation is reported it should be assumed that some degree of damage is present and a diagram identifying the structure(s) inspected and showing the location of such evidence must be attached to this form. Evaluation of damage and any corrective action should be performed by a qualified inspector in the building trade approved by the purchaser and lending agency.

### TREATMENT

The above described structure(s) was treated by this company as follows:

Organism	Treatment Date	Contract Expiration	Type Treatment (Chemical Barrier, Bait, Wood Treatment)
Subterranean Termites	<u>8/04</u>	<u>9/07</u>	<u>Bait</u>
Powder Post Beetles	_____	_____	_____
Wood Boring Beetles	_____	_____	_____
Dry Wood Termites	_____	_____	_____
Wood Decaying Fungus	_____	_____	_____

The present treatment warranty(ies) is:

- Transferable to any subsequent owner of the property upon payment of a fee on or before the expiration date.
- \_\_\_\_\_ Not transferable to any subsequent owner of the property.
- \_\_\_\_\_ The above structure(s) are not covered by a treatment contract with this company.

This structure has a current Exception Form II issued by this Company.  Yes  No  
 If Yes, a copy must be attached as part of this report.

### CERTIFICATION

This is to certify that neither I, nor the company has had or contemplates having any interest in the property involved, nor is acting in any association with any party to the transaction.

[Signature]  
 Signature of Designated Certified Operator

\_\_\_\_\_  
 Signature of Purchaser or Legal Representative Acknowledging Receipt of Report

Copies to: \_\_\_\_\_ Purchaser \_\_\_\_\_ Mortgagee \_\_\_\_\_ Realtor \_\_\_\_\_ Seller

## SELLER'S UTILITY RECORD

THE FOLLOWING INFORMATION IS BASED ON PREVIOUS UTILITY BILLS:

Address: 14461 Club Circle	Year: 2005-2006
City: Alpharetta	County: Fulton

DSL Avail?      Y       N       ?

COMPANY	ADDRESS	PHONE
Electric:	Sawnee	7) 887-2363
Satellite Company:	n/a	
Gas:	Ga. Natural Gas	
Security System Company:	not monitored	
Water/Sewer:	Fulton Co.	4) 730-6830
Sanitation/Trash:	through n'hood assoc.	
Cable:	Comcast	

MONTH	ELECTRIC	GAS	WATER/SEWER	SANITATION
January	105.95		101.15	
February	103.10			
March	94.72		97.33	
April	97.27		143.81	billed through
May	120.16		88.20	
June	173.97		156.78	n'hood assoc.
July	232.57		77.52	
August	339.68		146.87	
September	203.49		84.38	
October	177.48			
November	106.05			
December	113.35		171.35	
<b>Totals</b>				

2006 electric

2005 electric

Information herein believed to be accurate but not warranted