This document has legal consequences. If you do not understand it, consult your attorney. The text of this form may not be altered in any manner without written acknowledgement of all parties.

Form # 2091 01/20

SELLER'S DISCLOSURE STATEMENT

1 2 3	in th	be completed by SELLER concerning 328 W. Milton St., New Florence, MO 63363 (Property Address) located a municipality of New Florence (if incorporated), County of Montgomery, Missouri. e: If Seller knows or suspects some condition which might lower the value of the property being sold or adversely affect						
3 4		er's decision to buy the property, then Seller needs to disclose it. This statement will assist Buyer in evaluating the property						
5		g considered. Real estate brokers and agents involved in the sale do not inspect the property for defects, and they cannot						
6	guarantee the accuracy of the information in this form.							
	-							
7		SELLER: Your truthful disclosure of the condition of your property gives you the best protection against future charges						
8		you violated your legal obligation to Buyer by concealing a material defect(s), lead-based paint, use as a site for						
9		hamphetamine production or storage and/or any other disclosure required by law. Your knowledge of the property prior to						
10		r ownership may be relevant. In the case of a material defect, for example, if information that you possess indicates some						
11		sistent pattern of a problem not completely remedied, such information should be included in this disclosure in order to						
12		eve full and honest disclosure. Your answers or the answers you fail to provide, either way, may have legal consequences,						
13		after the closing of the sale. This questionnaire should help you meet your disclosure obligation, but it may not cover all						
14		ects of your property. If you know of or suspect some condition which would substantially lower the value of the property,						
15		air the health or safety of future occupants, or otherwise affect Buyer's decision to buy your property, then use the space at						
16	the e	end of this form to describe that condition.						
17	то	BUYER: THIS INFORMATION IS A DISCLOSURE ONLY AND IS NOT INTENDED TO BE A PART OF ANY						
18		NTRACT BETWEEN BUYER AND SELLER. If you sign a contract to purchase the property, that contract, and not this						
19		losure statement, will provide for what is to be included in the sale. So, if you expect certain items, appliances, or equipment						
20		uded, you must specify them in the contract. Since these disclosures are based on the Seller's knowledge, you cannot be sure						
21		there are, in fact, no problems with the property simply because the Seller is not aware of them. The answers given by the						
22		er are not warranties of the condition of the property. Thus, you should condition your offer on a professional inspection of						
23		property. You may also wish to obtain a home protection plan/warranty. Due to the variety of insurance, requirements,						
24		ducts, and arrangements Buyer should contact appropriate party to determine insurance coverage needed.						
25		ditions of the property that you can see on a reasonable inspection should either be taken into account in the purchase price						
26		ou should make the correction of these conditions by the Seller a requirement of the sale contract.						
	v	· ·						
27	SUB	BDIVISION, CONDOMINIUM, VILLA, CO-OP OR OTHER SHARED COST DEVELOPMENT (if applicable)						
21	500							
28	(a)	Development Name						
	(a) (b)	Development Name Phone						
28 29 30	(a) (b)	Contact Phone						
29 30	· · /	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome						
29 30 31	(b)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30	· · /	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30 31 32	(b)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Co-Op Condominium Townhome						
29 30 31 32 33	(b) (c)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Co-Op per: month quarter half-year year Mandatory Assessment: # \$						
29 30 31 32 33 34	(b) (c)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Co-Op per: month quarter Ihalf-year year Mandatory Assessment: # \$						
29 30 31 32 33 34 35	(b) (c)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Co-Op per: month quarter half-year year Mandatory Assessment: # \$						
29 30 31 32 33 34 35 36	(b) (c)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Co-Op per: month quarter half-year year Mandatory Assessment: # \$						
29 30 31 32 33 34 35 36 37	(b) (c)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Co-Op per: month quarter half-year year Mandatory Assessment: # \$						
29 30 31 32 33 34 35 36 37 38	(b) (c)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30 31 32 33 34 35 36 37 38 39	(b) (c)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30 31 32 33 34 35 36 37 38 39 40	(b) (c)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Mandatory Assessment: # \$						
29 30 31 32 33 34 35 36 37 38 39 40 41	(b) (c) (d)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Mandatory Assessment: #						
29 30 31 32 33 34 35 36 37 38 39 40 41 42	(b) (c) (d)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Mandatory Assessment: # \$						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43	(b) (c) (d) (e)	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44	 (b) (c) (d) (e) (f) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45	 (b) (c) (d) (e) (f) (g) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47	 (b) (c) (d) (e) (f) (g) (h) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 5 46 47 48	 (b) (c) (d) (e) (f) (g) (h) (i) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 9	 (b) (c) (d) (e) (f) (g) (h) (i) (j) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Townhome Villa Co-Op Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment(s) include: \$per: month quarter half-year year Gonvertile \$per: month quarter Gonvertile \$per: month quarter Gonverting specific to this dwelling _						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46	 (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Villa Co-Op Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment(s) include: \$per: month quarter half-year year Gentrance sign/structure \$ street maintenance icommon ground \$ snow removal of common area Some insurance is positive to this dwelling \$ landscaping specific to this dwelling \$ landscaping specific to this dwelling Colubnus pool tennis court \$ exercise area \$ reception facility \$ water \$ real estate taxes Other specific tem(s): \$ security \$ elevator \$ other common facility						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 950	 (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Townhome Villa Co-Op Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment(s) include: \$per: month quarter half-year year Gonvertile \$per: month quarter Gonvertile \$per: month quarter Gonverting specific to this dwelling _						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 50 51	 (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Willa Co-Op Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment(s) include: \$per: month facility water half-year Colubnous pool tensis dwelling security elevator dorman cooling heating security elevator security elevator downan secoling heating security						
29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 50 51	 (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) 	Contact Phone Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome Townhome Villa Co-Op Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment: # \$per: month quarter half-year year Mandatory Assessment(s) include: \$per: month quarter half-year year Gonvertile \$per: month quarter Gonvertile \$per: month quarter Gonverting specific to this dwelling _						

dotloop signature verification: dtlp.us/VvQU-ReBk-5TcL

53		LITIES
54 55	<u>Utili</u> Gas/	ty <u>Current Provider</u> Propane:New Florence if Propane, is tank Owned Leased
56		ric:Ameren
57		r: New Florence
58		er: New Florence
59		n: New Florence
60	Recy	
61	Inter	net:
62	Phon	
63		TING, COOLING AND VENTILATING (Seller is not agreeing that all items checked are being offered for sale.)
64	(a)	Heating Equipment: Forced Air Hot Water Radiators Steam Radiators Radiant Baseboard
65 66	(b)	Source of heating: □Electric ☑ Natural Gas □Propane □ Fuel Oil □Other
66 67	(c) (d)	Areas of house not served by central heating/cooling:
68	(u) (e)	Additional: Humidifier Electronic Air Filter Media Filter Attic Fan Other:
69	(f)	Are you aware of any problems or repairs needed with any item in this section? \Box Yes \boxed{W} No If "Yes", please explain
70		
71	(g)	Other details:
72	FIRI	EPLACE(S)
73	(a)	Type of fireplace: Wood Burning Uvented Gas Logs Uvent Free Gas Logs Wood Burning Stove Natural Gas Propane
74	(b)	Type of flues/venting:
75		Functional: (properly vented for wood burning and vented gas logs) Number of fireplace(s) <u>1</u> Location(s)
76	<i>(</i>)	Non-Functional: Number of fireplace(s) Location(s) Please explain
77 78	(c)	Are you aware of any problems or repairs needed with any item in this section? Yes No If "Yes", please explain
79 80		MBING SYSTEM, FIXTURES AND EQUIPMENT; POOL/SPA/POND/LAKE/HOT TUB Water Heater: ☑ Electric □Natural Gas □Propane □Tankless □Other:
80 81	(a) (b)	Water Heater: Electric Natural Gas Propane Tankless Other: Ice maker supply line: Yes No
82	(0) (c)	Jet Tub: \square Yes \blacksquare No
83	(d)	Swimming Pool/Spa/Hot Tub: Yes No
84	. /	(If Yes, attach Form #2180, Pool/Spa/Pond/Lake Addendum to Seller's Disclosure Statement)
85	(e)	Lawn Sprinkler System: Yes No If yes, date of last backflow device inspection certificate:
86	(f)	Are you aware of any problems or repairs needed in the plumbing system? TYes ZNo If "Yes", please explain
87		
88		FER (If well exists, attach Form #2165, Septic/Well Addendum to Seller's Disclosure Statement)
89		What is the source of your drinking water? Public Community Well Other (explain)
90 01	(b)	If Public, identify the utility company: New Florence Do you have a softener, filter or other purification system? Yes YNO Owned Leased/Lease Information
91 92	(c) (d)	Are you aware of any problems relating to the water system including the quality or source of water or any components such as
93	(u)	the curb stop box? \Box Yes \Box No If "Yes", please explain
94	SFW	/ERAGE (If Septic or Aerator exists, attach Form #2165, Septic/Well Addendum to Seller's Disclosure Statement)
95	(a)	What is the type of sewerage system to which the house is connected? \square Public \square Private \square Septic \square Aerator \square Other
96	(4)	If "Other" please explain
97	(b)	Is there a sewerage lift system? Yes No If "Yes", is it in good working condition? Yes No
98	(c)	When was the septic/aerator system last serviced?
99	(d)	Are you aware of any leaks, backups, open drain lines or other problems relating to the sewerage system? Yes YNO
100		If "Yes", please explain
101	APP	LIANCES (Seller is not agreeing that all items checked are being offered for sale.)
102	(a)	Electrical Appliances and Equipment: Electric Stove/Range/Cook top
103		Dishwasher Garbage Disposal Trash Compactor Wired smoke alarms Electric dryer (hook up)
104 105	(b)	Ceiling Fan(s) Intercom System Central Vaccum System Other Gas Appliances & Equipment: Natural Gas Propane
105	(0)	Oven Gas Stove/Range/Cook top Exterior Lights Barbecue Water heater Tankless Water Heater
100		Gas dryer (hook up) Other
108	(c)	Other Equipment: TV Antenna Cable Wiring Phone Wiring Network/Data Wiring
109		Electric Garage Door Opener(s) Number of controls
110		Security Alarm System Owned Leased /Lease information:
		Page 2 of 6
		BUYER BUYER BUYER

	Satellite Dish Owned Leased/LeaseInformation: Electronic Pet Fence System Number of Collars: Other:					
(d)	Are you aware of any items in this section in need of repair or replacement? Yes No If "Yes", please explain					
ELE	CTRICAL					
	of service panel: Fuses Circuit Breakers Other:					
(a)	Type of wiring Copper Aluminum Knob and Tube Unknown					
(b)	e of service panel: Fuses Circuit Breakers Other: Type of wiring: Copper Aluminum Knob and Tube Unknown Are you aware of any problems or repairs needed in the electrical system? Yes No If "Yes", please explain					
ROO	DF, GUTTERS AND DOWNSPOUTS					
(a)						
(b)	Has the roof ever leaked during your ownership? Yes No If "Yes" please explain					
(c)	Has the roof been repaired, recovered or any portion of it replaced or recovered during your ownership? Yes No If "Yes It and the root of the replaced or recovered during your ownership?					
	please explain replaced 8 years ago					
(d)	Are you aware of any problems with the roof, gutters or downspouts? Yes No If "Yes", please explain					
CON	ISTRUCTION					
(a)	Are you aware of any problems with the footing, foundation walls, sub-floor, interior and exterior walls, roof construct					
(<i>a</i>)	decks/porches or other load bearing components? Yes VNo If "Yes" please describe in detail					
(b)	Are you aware of any repairs to any of the building elements listed in (a) above? Yes No If "Yes", please describ					
(b)	location, extent, date and name of the person/company who did the repair or control effort					
(c)	Are you aware that any of the work in (b) above was completed without required permits? Yes					
(d)	List all significant additions, modifications, renovations, & alterations to the property during your ownership:					
	added carport, concrete parking, vinyl siding, new gutters					
(e)	Were required permits obtained for the work in (d) above? Yes No					
BAS	EMENT AND CRAWL SPACE (Complete only if applicable)					
(a)	Sump pit Sump pit and pump					
(b)	Type of foundation: Concrete Stone Cinder Block Wood					
(c)	Are you aware of any dampness, water accumulation or leakage, in the basement or crawl space? Yes No If "Yes", p					
(-)						
	describe in detail					
(d)	Are you aware of any repairs or other attempts to control any water or dampness problem in the basement or crawl space?					
(4)	\Box Yes \Box No If "Yes", please describe the location, extent, date and name of the person/company who did the repair or co					
	effort					
PES	TS OR TERMITES/WOOD DESTROYING INSECTS					
(a)	Are you aware of any pests or termites/wood destroying insects impacting the property and improvements? Yes No					
(b)	Are you aware of any uncorrected damage to the property caused by pests or termites/wood destroying insects? Yes Ves					
	Is your property currently under a warranty contract by a licensed pest/termite control company? Yes VNo					
	Are you aware of any pest/termite control reports for the property? Yes Voo					
(e)	Are you aware of any pest/termite control treatments to the property? Yes Vo					
(f)	Please explain any "Yes" answers you gave in this section					
SOI	L AND DRAINAGE					
	Are you aware of any fill, expansive soil or sinkholes on the property or that may affect the property? Yes Vo					
(a)	Are you aware of any soil, earth movement, flood, drainage or grading problems on the property or that may affect					
(a) (b)						
· /						
(b)	property? □Yes ☑No					
(b)	property? ☐ Yes ☑ No Are you aware of any past, present or proposed mining, strip-mining, or any other excavations on the property or that may a					
(b) (c)	property? \square Yes \blacksquare No Are you aware of any past, present or proposed mining, strip-mining, or any other excavations on the property or that may a the property? \square Yes \blacksquare No					
(b)	property? \Box Yes \blacksquare No Are you aware of any past, present or proposed mining, strip-mining, or any other excavations on the property or that may a the property? \Box Yes \blacksquare No Are you aware of any Post-construction Stormwater Best Management Practices (BMPs) on the property? (BMPs are pr					
(b) (c)	property? \Box Yes \blacksquare No Are you aware of any past, present or proposed mining, strip-mining, or any other excavations on the property or that may a the property? \Box Yes \blacksquare No Are you aware of any Post-construction Stormwater Best Management Practices (BMPs) on the property? (BMPs are pr stormwater management facilities which include a recorded formal Maintenance Agreement with the Metropolitan Sewer Dis					
(b) (c) (d)	property? \Box Yes \blacksquare No Are you aware of any past, present or proposed mining, strip-mining, or any other excavations on the property or that may a the property? \Box Yes \blacksquare No Are you aware of any Post-construction Stormwater Best Management Practices (BMPs) on the property? (BMPs are pr					

169 HAZARDOUS SUBSTANCES/OTHER ENVIRONMENTAL CONCERNS 170 (a) Lead: (Note: Production of lead-based paint was banned in 1978. See Disclosu

	Lead: (Note: Production of lead-based paint was banned in 1978. See Disclosure of Information and Acknowledgement Lead Based
	Paint and/or Lead-Based Paint Hazards, form #2049.)
	 Are you aware of the presence of any lead hazards (such as paint, water supply lines, etc.) on the property? □Yes ☑No Are you aware if it has ever been covered or removed? □Yes ☑No
	(3) Are you aware if the property has been tested for lead? Yes No If "Yes", please give date performed, type of test and test results
	results (4) Please explain any "Yes" answers you gave in this section
b)	Asbestos Materials
	(1) Are you aware of the presence of asbestos materials on the property, such as roof shingles, siding, insulation, ceiling, flooring,
	pipe wrap, etc.? 🗖 Yes 🗹 No
	(2) Are you aware of any asbestos material that has been encapsulated or removed? \Box Yes \blacksquare No
	(3) Are you aware if the property has been tested for the presence of asbestos? ☐Yes ☑No If "Yes", please give date performed, type of test and test results
	type of test and test results (4) Please explain any "Yes" answers you gave in this section
• •	Mold
	(1) Are you aware of the presence of any mold on the property? \Box Yes \blacksquare No
	(1) Are you aware of anything with mold on the property that has ever been covered or removed? \Box Yes \blacksquare No
	(2) Are you aware of anything with mold on the property that has ever been covered of removed? \square res \blacksquare to (3) Are you aware if the property has ever been tested for the presence of mold? \square Yes \blacksquare No If "Yes", please give date performed,
	 (4) Please explain any "Yes" answers you gave in this section
Ð	Radon
1)	(1) Are you aware if the property has been tested for radon gas? \Box Yes \blacksquare No If "Yes", please give date performed, type of test
	and test results
	(2) Are you aware if the property has ever been mitigated for radon gas? Yes No If "Yes", please provide the date and name
、	of the person/company who did the mitigation
e)	Methamphetamine
	Are you aware if the property is or was used as a lab, production or storage site for methamphetamine or was the residence of
	a person convicted of a crime related to methamphetamine or a derivative controlled substance related thereto? Yes No If "Yes", Section 442.606 RSMo requires you to disclose such facts in writing, please explain
	Tes M No II Tes , Section 442.000 KSM0 requires you to disclose such facts in writing, please explain
)	Waste Disposal Site or Demolition Landfill (permitted or unpermitted)
	Are you aware of any permitted or unpermitted solid waste disposal site or demolition landfill on the property? 🗌 Yes 🗹 No
	If "Yes", Section 260.213 RSMo requires you to disclose the location of any such site on the property. Please provide such
	information.
	Note: If Seller checks "Yes", Buyer may be assuming liability to the State for any remedial action at the property.
g)	Radioactive or Hazardous Materials
	Have you ever received a report stating affirmatively that the property is or was previously contaminated with radioactive
	material or other hazardous material? Tyes No If "Yes", Section 442.055 RSMo requires you to disclose such knowledge
	in writing. Please provide such information, including a copy of such report, if available.
h)	Other Environmental Concerns
	Are you aware of any other environmental concerns that may affect the property such as polychlorinated biphenyls (PCB's),
	electro-magnetic fields (EMF's), underground fuel tanks, unused septic or storage tanks, etc.? 🗌 Yes 🗹 No If "Yes", please
	explain
	RVEY AND ZONING
	Are you aware of any shared or common features with adjoining properties? \Box Yes \blacksquare No Are you aware of any rights of way, unrecorded easements, or encroachments, which affect the property? \Box Yes \blacksquare No
	Is any portion of the property located within the 100-year flood hazard area (flood plain)? \Box Yes \Box No
	Do you have a survey of the property? \Box Yes \Box No (If "Yes", please attach) Does it include all existing improvements on the
	property? Yes No
	Are you aware of any violations of local, state, or federal laws/regulations, including zoning, relating to the property? Yes Xeo
(f)	Please explain any "Yes" answers you gave in this section
	Page 4 of 6
	BUYER BUYER

228 INSURANCE

- Are you aware of any claims that have been filed for damages to the property? \square Yes \square No If "Yes", please provide the following information: date of claim, description of claim, repairs and/or replacements completed
- 231 hail damage to roof; replaced
- 232 233

234 MISCELLANEOUS

- (a) The approximate age of the residence is 52 years. The Seller has occupied the property from 1998 to 2022.
 (b) Has the property been continuously occupied during the last twelve months? Yes No If "No", please explain
- (c) Is the property located in an area that requires any compliance inspection(s) including municipality, conservation, fire district or any other required governmental authority? Yes No If "Yes", please explain
- (d) Is the property located in an area that requires any specific disclosure(s) from the city or county? Yes No If "Yes", please explain
- (e) Is the property designated as a historical home or located in a historic district? Yes No If "Yes", please explain_
- 245 (f) Is property tax abated? Yes No Expiration date
- (i) Is property tax abated 7 → res → two Expiration date _______ Attach documentation from taxing autionty
 (g) Are you aware of any pets having been kept in or on the property? ✓ Yes □ No If "Yes" please explain ______
 (a) Current owner has dogs
- 248 (h) Is the Buyer being offered a protection plan/home warranty at closing at Seller's expense? Yes Mo (If "Yes", please attach)
- (i) Are you aware of any inoperable windows or doors, broken thermal seals, or cracked/broken glass? \square Yes \square No
- 250 (j) Are you aware if carpet has been laid over a damaged wood floor? \Box Yes \blacksquare No
- 251 (k) Are you aware of any existing or threatened legal action affecting the property? \Box Yes \blacksquare No
- (1) Are you aware of any consent required of anyone other than the signer(s) of this form to convey title to the property? Yes No
 (m) Please explain any "Yes" answers you gave for (i), (j), (k), or (l) above
- broken seal on window in family room; older windows do not open

255 Additional Comments:

256 257 258 259 260

261 Seller attaches the following document(s):



Attach documentation from taxing authority.

SELLER'S ACKNOWLEDGEMENT: 262

263 Seller acknowledges that he has carefully examined this statement and that it is complete and accurate to the best of Seller's knowledge.

Seller agrees to immediately notify listing broker in writing of any changes in the property condition. Seller authorizes all brokers and 264 their licensees to furnish a copy of this statement to prospective Buyers. 265

266 267	Bonnie Nordwald SELLER SIGNATURE	dotloop verified 04/29/22 12:42 PM CDT ZSNO-JPBO-A66N-6YOU DATE	SELLER SIGNATURE	DATE
268 269	Bonnie Nordwald Seller Printed Name		Seller Printed Name	

270 **BUYER'S ACKNOWLEDGEMENT:**

271 Buyer acknowledges having received and read this Seller's Disclosure Statement. Buyer understands that the information in this Seller's Disclosure Statement is limited to information of which Seller has actual knowledge. Buyer should verify the information contained in 272 this Seller's Disclosure Statement, and any other important information provided by either Seller or broker (including any information 273 obtained through the Multiple Listing Service) by an independent, professional investigation of his own. Buyer acknowledges that broker 274

is not an expert at detecting or repairing physical defects in property. 275

276 277 BUYER SIGNATURE

278

DATE

BUYER SIGNATURE

DATE

Buyer Printed Name 279

Buyer Printed Name

SELLER