

**DISCLOSURE OF INFORMATION AND ACKNOWLEDGMENT:
LEAD-BASED PAINT AND/OR LEAD-BASED PAINT HAZARDS**

Address: 87217 590th Waterbury, NE

Lead Warning Statement

Every purchaser of any interest in residential real 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 (initial)

- X S.S. (a) Presence of lead-based paint and/or lead-based paint hazards (check one below):
 Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

 Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.
- X S.S. (b) Records and Reports available to the Seller (check one below):
 Seller has provided the Purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

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

PURCHASER'S ACKNOWLEDGEMENT (initial)

- ____ (c) Purchaser has received copies of all information listed above.
or, No Records or Reports were available (see (b) above).
- ____ (d) Purchaser has received the pamphlet *Protect Your Family from Lead in Your Home, Lead Poisoning: How to Protect Iowa Families*, or a similarly approved booklet.
- ____ (e) Purchaser has (check one below):
 Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or
 Waived the opportunity to conduct a risk assessment or inspection for the presence of lead based paint and/or lead-based paint hazards.

AGENT'S ACKNOWLEDGEMENT (initial)

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

CERTIFICATE OF ACCURACY

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate:

X <u>Steve Stewart</u>	<u>11/19/09</u>	_____	_____
Seller	Date	Purchaser	Date
X <u>Brenda Stewart</u>	<u>11/19/09</u>	_____	_____
Seller	Date	Purchaser	Date
<u>[Signature]</u>	<u>11/19/09</u>	_____	_____
Seller's Agent	Date	Purchaser's Agent	Date

NEBRASKA REAL ESTATE COMMISSION
SELLER PROPERTY CONDITION DISCLOSURE STATEMENT
Residential Real Property

THIS DISCLOSURE STATEMENT IS BEING COMPLETED AND DELIVERED IN ACCORDANCE WITH NEBRASKA LAW. NEBRASKA LAW REQUIRES THE SELLER TO COMPLETE THIS STATEMENT (NEB. REV. STAT. § 76-2,120).

Seller X is is not occupying the real property.

How long has Seller owned the real property? 10 year(s)

This Disclosure Statement concerns the real property located at 87217 590 Ave

in the City of Waterbury County of Dixon State of Nebraska and legally described as

LEGAL DESCRIPTIONS
PART ONE
TRACT OF LAND LOCATED BY THE THE SOUTHEAST 1/4 OF SECTION 28, TOWNSHIP 23 NORTH RANGE 6 EAST OF THE 6TH P.M., DIXON COUNTY, NEBRASKA. ALL DIMENSIONS AND BOUNDARIES ARE SET OR FOUND ACCORDING TO THE OFFICIAL PLAT RECORDED ON 02-15-2000 HEREINAFTER BEING A PART OF THE DESCRIPTION BY SAID SURVEYOR AND ON FILE AT THE DIXON COUNTY COURTHOUSE, IN THE COUNTY SURVEYOR'S OFFICE, SAID TRACT BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS: BEGINNING AT THE SOUTHEAST CORNER OF THE SOUTHEAST 1/4, THENCE N80°00'00"E BY THE EAST LINE OF THE SOUTHEAST 1/4, A DISTANCE OF 1188.43 FEET; THENCE S89°00'00"E BY THE EAST LINE OF SAID TRACT, A DISTANCE OF 340.66 FEET; TO A POINT THAT IS 338.04 FEET FROM THE EAST LINE; THENCE S00°01'00"W, PARALLEL WITH SAID EAST LINE, TO A POINT ON THE SOUTH LINE OF THE SOUTHEAST 1/4, A DISTANCE OF 1000.59 FEET; THENCE S89°21'28"E, ON THE SOUTH LINE OF THE SOUTHEAST 1/4, A DISTANCE OF 338.04 FEET; THENCE BACK TO THE POINT OF BEGINNING, SAID TRACT CONTAINING 0.66 ACRES MORE OR LESS.

THIS STATEMENT IS A DISCLOSURE OF THE CONDITION OF THE REAL PROPERTY KNOWN TO THE SELLER. THIS STATEMENT IS NOT A WARRANTY OF ANY KIND BY THE SELLER OR ANY AGENT REPRESENTING THE REAL PROPERTY. ANY AGENT REPRESENTING A PRINCIPAL IN THE TRANSACTION IN CONNECTION WITH ANY ACTUAL OR POSSIBLE SALE OF THE REAL PROPERTY, THROUGH THE SELLER AND NOT THE REPRESENTATION OF ANY AGENT, AND IS NOT INTENDED TO BE A WARRANTY.

Seller please note: You are required to complete this Disclosure Statement in full. If any particular item is not applicable, insert "N/A".

SELLER STATES THAT, TO THE BEST OF SELLER'S BELIEF AND KNOWLEDGE AS OF THE DATE THIS DISCLOSURE STATEMENT IS COMPLETED AND SIGNED BY THE SELLER, THE CONDITION OF THE REAL PROPERTY IS:

PART I - If there is more than one of any item in this Part, the statement made applies to each and all of such items unless otherwise noted in the Comments section, PART III of this Disclosure Statement. If an item in this Part is not on the property or will not be included in the sale, check only the "None/Not Included" column for that item.

Section A. Appliances.	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED
	1. Built-in vacuum system and equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	9. Microwave oven	<input type="checkbox"/>
2. Clothes dryer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	10. Oven	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Clothes washer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	11. Range	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Dishwasher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12. Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	13. Room air conditioner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Freezer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	14. TV antenna/satellite dish	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Gas grill	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Trash compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Range ventilation systems	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section B. Electrical Systems.	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED
	1. Electric service panel (capacity, <u>200</u> amp, if known) fuse _____ circuit breakers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	7. Smoke/fire alarm	<input checked="" type="checkbox"/>
2. Ceiling fan(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Room vent fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Garage door opener/remote controller(s) (number of controllers, if included _____)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. 220 volt service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Telephone wiring and jacks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Security system _____ owned _____ leased _____ central station monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Cable TV wiring and jacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Intercom or sound system wiring and built-in speakers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	12. Have you experienced any problems with the electrical system or its components? <u>no</u> yes _____ If yes, explain the condition in the Comments section, PART III of this Disclosure Statement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section C. Heating and Cooling Systems.	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED
	1. Air purifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	7. Gas log	<input type="checkbox"/>
2. Attic fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Gas starter (fireplace)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Whole house fan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Heat pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Central air conditioning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Humidifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Fireplace/fireplace insert	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Propane tank (<u>rent</u> own)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Heating system (<u>gas</u> electric other, specify)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12. Woodburning stove	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					13. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section D. Water Systems.	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED
	1. Hot tub/hotpool	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	5. Water heater	<input checked="" type="checkbox"/>
2. Plumbing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Water purifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Swimming pool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Water softener (<u>rent</u> own)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Underground sprinkler backflow preventer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Well system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					9. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section E. Sewer Systems.	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED	WORKING	NOT WORKING	DO NOT KNOW IF WORKING	NONE/NOT INCLUDED
	1. Plumbing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	3. Septic system	<input checked="" type="checkbox"/>
2. Sump pump (discharges to _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					5. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PART II - In this part, in Sections A, B, and C, if the answer to any item is "Yes", explain the condition in the Comments section, PART III of this Disclosure Statement.
Section A. Structural Conditions. If there is more than one of any item listed in this Section, the statement made applies to each and all of such items unless otherwise noted in the Comments section, PART III of this Disclosure Statement.

1. Age of roof (if known) _____ years	YES	NO	DO NOT KNOW	8. Is there presently damage to the chimney?	YES	NO	DO NOT KNOW
	2. Does the roof leak?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	9. Are there any windows which presently leak, or do any insulated windows have broken seals?	<input type="checkbox"/>
3. Has the roof leaked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10. Have you experienced any moving or settling of the following:			
4. Is there presently damage to the roof?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	foundation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Has there been leakage/seepage in the basement or crawl space?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	floor?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Has there been any damage to the real property or any of the structures thereon due to the following occurrences including, but not limited to, wind, hail, fire, flood, wood-destroying insects, or rodents?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	wall?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Are there any structural problems with the structures on the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	sidewalk?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				patio?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				driveway?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				retaining wall?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Section B. Environmental Conditions. Have any of the following substances, materials, or products been on the real property? If tests have been conducted for any of the following, provide a copy of all test results, if available.

	YES	NO	DO NOT KNOW		YES	NO	DO NOT KNOW
1. Asbestos	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7. Underground fuel, chemical or other type of storage tank	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Contaminated soil or water (including drinking water)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8. Have any other hazardous substances, materials, or products identified by the Environmental Protection Agency or its authorized Nebraska designee been on the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Landfill or buried materials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
4. Lead-based paint	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
5. Radon gas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
6. Toxic materials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				

Section C. Title Conditions. Do any of the following conditions exist with regard to the real property?

	YES	NO	DO NOT KNOW		YES	NO	DO NOT KNOW
1. Any features, such as walls, fences, and driveways, which are shared?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9. Any lawsuits regarding this property during the ownership of the seller?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Any easements, other than normal utility easements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10. Any notices from any governmental or quasi-governmental agency affecting the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Any encroachments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11. Any planned road or street expansions, improvements or widenings adjacent to the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Any zoning violations, non-conforming uses, or violations of "setback" requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12. Any unpaid bills or claims of others for labor and/or materials furnished to or for the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Any lot-line disputes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	13. Any deed restrictions or other restrictions of record affecting the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Have you been notified, or are you aware, of any work planned or to be performed by a utility or municipality close to the real property including but not limited to sidewalks, streets, sewers, water, power, or gas lines?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	14. Any unsatisfied judgments against Seller?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Any condominium, homeowners', or other type of association which has any authority over the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	15. Any dispute regarding a right of access to the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Does ownership of the property entitle the owner to use any "common area" facilities such as pools, tennis courts, walkways, or other common use areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	16. Any other title conditions which might affect the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Section D. Other Conditions.

	YES	NO	DO NOT KNOW		YES	NO	DO NOT KNOW
1. Are the dwelling and the improvements connected to a public water system? Is the system operational?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7. Is trash removal service provided to the real property? If so, the trash service is public, private	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Are the dwelling and the improvements connected to a public sewer system? Is the system operational?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Have the structures been mitigated for radon? If yes, when?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are the dwelling and the improvements connected to a private or community (non-public) water system? Is the system operational? Year last tested _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9. Is the property connected to a natural gas system?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Are the dwelling and the improvements connected to a private or community (non-public) sewer system? Is the system operational?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10. Has a pet been domiciled in the dwelling? type(s) _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Are the dwelling and the improvements connected to a septic system? Is the system operational?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If the answer to any of the following items is "Yes", explain in the Comment section, PART III of this Disclosure Statement.	YES	NO	DO NOT KNOW
6. Is the real property in a: flood plain? floodway?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Are any trees or shrubs on the real property diseased or dead? Are any trees or shrubs scheduled to be removed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				12. Are there any flooding, drainage, or grading problems in connection with the real property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				13. Have you made any insurance or manufacturer claims with regard to the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				14. Are you aware of any problem to the exterior wallcovering of the structure including, but not limited to, siding, synthetic stucco, masonry, or other materials?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Section E. Cleaning/Service Conditions. Have you ever performed or had performed the following? State the most recent year:

	YEAR	YES	NO	DO NOT KNOW	NONE/NOT INCLUDED		YEAR	YES	NO	DO NOT KNOW	NONE/NOT INCLUDED
1. Servicing of air conditioner		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Treatment for wood-destroying insects or rodents		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Cleaning of fireplace, including chimney	2008	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Tested well water	1999	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Servicing of furnace	2008	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Serviced/treated well water		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Servicing of septic system		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
5. Cleaning of woodburning stove, including chimney		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

PART III - Comments. Please reference comments on items responded to above by PART I or II, Section letter and item number. Use additional pages if necessary.

If checked here _____, PART III is continued on a separate page(s).

SELLER'S CERTIFICATION

Seller hereby certifies that this Disclosure Statement, which consists of _____ pages, has been completed by Seller; that Seller has completed this Disclosure Statement to the best of Seller's belief and knowledge as of the date hereof, which is the date this Disclosure Statement is completed and signed by Seller.

Seller: Steve Alexander Date: 11-23-09
 Seller: Brandi Stewart Date: 11-23-09

ACKNOWLEDGMENT OF RECEIPT OF DISCLOSURE STATEMENT, UNDERSTANDING AND CERTIFICATION

I/we acknowledge receipt of a photocopy of the above Seller Property Condition Disclosure Statement; understand that such Disclosure Statement is not a warranty of any kind by the Seller or any agent representing any principal in the transaction; understand that such Disclosure Statement should not be accepted as a substitute for any inspection or warranty that I/we may wish to obtain; understand the information provided in this Disclosure Statement is the representation of the Seller and not the representation of any agent, and is not intended to be part of any contract between the Seller and Purchaser; and certify that such Disclosure Statement was delivered to me/us or my/our agent on or before the effective date of any contract entered into by me/us relating to the real property described in such Disclosure Statement.

Purchaser: _____ Receipt Date: _____
 Purchaser: _____ Receipt Date: _____

Effective January 1, 2003.

Address: _____

Inspection Addendum Acknowledgement

Before you make an offer to purchase a Property, please read and consider the following:

If this is a pre-owned home, it is not in new condition, and you should not expect it to be perfect in every respect.

1. If you have specific concerns about the property, such as, but not limited to, the condition of the roof, basement, furnace, air conditioning, plumbing or electrical service, structural integrity, the lot size or whether it has a septic or sewer system, it is recommended that you obtain an inspection by a qualified professional trained in your specific area of concern.
2. It is recommended that you obtain a **General Home Inspection** from a qualified inspector to determine the integrity of the internal and external components of the dwelling. An appraisal is not intended to be a substitute for such an inspection.
3. Buyers are hereby notified and understand that radon gas and some molds have the potential to cause serious health problems. It is also recommended that if you have a concern about radon or mold in the property, you obtain tests from qualified inspectors to determine if they are present in the property.

Radon is an invisible and odorless gaseous radioactive element.

Mold is a general term for visible growth of fungus, whether it is visible directly or is visible when barriers, such as building components (for example, walls) or furnishings (for example, carpets), are removed.

The following is a partial list of Home Inspectors who can perform a general home inspection, mold test or radon test for you.

See your local directory

4. All inspections should be completed and reports returned within 10 days after the final acceptance or the allotted time period specified in the purchase agreement, and any deficiencies or repairs should be noted and sent to sellers within this same period.
5. Although a Realtor should generally try to relate to you whatever he or she knows about a property, you should not simply rely upon that information as a guarantee against defects and malfunctions. You should understand that such information may be merely a recital of what the Realtor has been told by others.
6. Information on the Sellers Property Disclosure form has not been verified. If any items on this disclosure are of concern to you, you should seek professional advice. Additionally, you may wish to consider purchasing a home warranty plan.
7. If any of the following are important factors in your decision to purchase a particular property, you are urged to make an independent investigation to satisfy yourself:
 - a. The school district in which the property is located,
 - b. The specific school which your child would attend,
 - c. The location of known sex offenders at: www.familywatchdog.us.
 - d. the zoning of the property or potential future zoning,
 - e. whether there are any code violations on the property,
 - f. whether the property is in a flood plainYou should not solely rely on what you may have been told.
8. Prior to closing you will have an opportunity to conduct a walk-through inspection of the property. If you feel the condition of the property, the condition of any built-in appliances, or the condition of the heating, air conditioning, water heating, sewer, plumbing or electrical systems are not in accordance with the terms of the purchase agreement, you should consider:
 - a. Requiring that appropriate repairs are made prior to closing,
 - b. Requiring sufficient funds be withheld from the Sellers at closing and designated for such repairs, or
 - c. Refusing to close until a satisfactory written agreement is reached to address these concerns.

I/we have read and understand the above information and acknowledge receiving a copy of it. I/we the undersigned, acknowledge that I/we have been advised and encouraged to have the property inspected and also tested for mold and radon. I/we have been given the opportunity to review this Agreement with the buyer's attorney or any other representative of our choosing. I/we do hereby release, indemnify, hold harmless and forever discharge the broker, agents and real estate companies involved in this transaction from any and all claims, liabilities, or causes of action of any kind that the buyers may now have or at any time in the future may have resulting from any and all of the issues covered in this Inspection Addendum Acknowledgement.

Buyer

Date

Buyer

Date