

**SELLER DISCLOSURE OF PROPERTY CONDITION**

(To be delivered prior to buyer making Offer to Buy Real Estate)

Property Owner(s) & Address: 9099 263 Highway, Indianola, IA 50125**Purpose of Disclosure:** Completion of Section I this form is required under Chapter 558A of the Iowa code which mandates the Seller(s) disclose condition and information about the property, unless exempt:**Exempt Properties:** Properties exempted from the Seller's disclosure requirement include (IA Code 558A): Bare ground; property containing 5 or more dwellings units; court ordered transfers; transfers by a power of attorney; foreclosures; lenders selling foreclosed properties; fiduciaries in the course of an administration of an decedent's estate, guardianship, conservatorship, or trust; between joint tenants, or tenants in common; to or from any governmental division; quit claim deeds; intra family transfers; between divorcing spouses; commercial or agricultural property which has no dwellings.

Seller(s) certifies that the property is exempt from the requirement(s) of Iowa Code 558A because one of the above exemptions apply. If so, you may stop here.

Seller	Date
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Seller	Date
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Buyer	Date
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Buyer	Date
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Instructions to the Seller: (1) Complete this form yourself. (2) Report known conditions materially affecting the property and utilize ordinary care in obtaining the information. (3) Provide information in good faith and make a reasonable effort to ascertain the required information. (4) Additional pages or reports may be attached. (5) If some items do not apply to your property, write "NA" (not applicable). (6) All approximations must be identified "AP". If you do not know the facts, write or check UNKNOWN. (7) Keep a copy of this statement.**Seller's Disclosure Statement:** Seller discloses the following information regarding the property and certifies this information is true and accurate to the best of my/our knowledge as of the date signed. Seller authorizes Agent to provide a copy of this statement to any person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. This statement shall not be a warranty of any kind by Seller or Seller's Agent and shall not be intended as a substitute for any inspection or warranty the purchaser may wish to obtain. The following are representations made by Seller and are not by any Agent acting on behalf of the Seller. **The Agent has no independent knowledge of the condition of the property except that which is written on this form. Seller advises Buyer to obtain independent inspections relevant to Buyer.**Seller initials DP 2Buyer initials

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I. Property Conditions, Improvements and Additional Information: (Section I is Mandatory)

1. **Basement/Foundation:** Has there been known water or other problems? Yes ☐ No ☒ Unknown ☐ If yes, please explain: MOORED WALLS 2019
2. **Roof:** Any known problems? Yes ☐ No ☒ Unknown ☐ Type
Unknown ☐ Date of repairs/replacement Unknown ☐
Describe:
3. **Well and pump:** Any known problems? Yes ☐ No ☒ Unknown ☐ Type of well (depth/diameter), age and date of repair: Has the water been tested? Yes ☐ No ☒ Unknown ☐
If yes, date of last report/results:
4. **Septic tanks/drain fields:** Any known problems? Yes ☐ no ☒ Unknown ☐ Location of tank
Unknown ☐ Age Unknown ☒
Has the system been inspected within 2 years or pumped/cleaned within 3 years?
Yes ☐ No ☒ UNK ☐ Date of inspection UNK ☒ Date tank last cleaned/pumped UNK ☒

5. **Sewer:** Any known problems? Yes ☐ No ☒ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
6. **Heating system(s):** Any known problems? Yes ☐ No ☒ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
7. **Central Cooling system(s):** Any known problems? Yes ☐ No ☒ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
8. **Plumbing system(s):** Any known problems? Yes ☐ No ☒ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
9. **Electrical system(s):** Any known problems? Yes ☐ No ☒ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
10. **Pest Infestation:** (wood-destroying insects, bats, snakes, rodents, destructive/troublesome animals, etc.)
Any known problems? Yes ☐ No ☒ Unknown ☐ Date of treatment TREATED MONTHLY MILLER PEST
Previous Infestation/Structural Damage? Yes ☐ No ☒ Date of repairs _____
11. **Asbestos:** Is asbestos present in any form in the property? Yes ☐ No ☒ Unknown ☐ If yes, explain: _____
12. **Radon:** Any known tests for the presence of radon gas? Yes ☐ No ☒ If yes, test results? _____
Date of last report _____
Seller Agrees to release any testing results. If not, Check here ☐
13. **Lead Based Paint:** Known to be present or has the property been tested for the presence of lead based paint?
Yes ☐ No ☒ Unknown ☐ If yes, what were the test results? _____
Has the lead disclosure form and pamphlet been provided? Yes ☐ No ☐
14. **Any known encroachments, easements, "common areas"** (facilities like pools, tennis courts, walkways or other areas co-owned with others), zoning matters, nonconforming uses, or a Homeowners Association which has any authority over the property? Yes ☒ No ☐ Unknown ☐ HAVE ACCESS TO SOUTH DRIVEWAY - EASEMENT
15. **Features** of the property known to be shared in common with adjoining landowners, such as walls, fences, roads and driveways whose use or maintenance responsibility may have an effect on the property?
Yes ☒ No ☐ Unknown ☐ SEE ABOVE
16. **Structural Damage:** Any known structural damage? Yes ☐ No ☒ Unknown ☐
17. **Physical Problems:** Any known settling, flooding, drainage or grading problems? Yes ☐ No ☒ Unknown ☐
18. **Is the property located in a flood plain?** Yes ☐ No ☒ Unknown ☐ If yes, flood plain designation _____
19. **Do you know the zoning classification of this property?** Yes ☒ No ☐ Unknown ☐
What is the zoning? REL.
20. **Covenants:** Is the property subject to restrictive covenants? Yes ☐ No ☒ Unknown ☐
If yes, attach a copy OR state where a true, current copy of the covenants can be obtained:
☐ On file at County Recorder's office or: _____

You **MUST** explain any "Yes" responses above (Attach additional sheets if necessary):

Seller initials DR W Buyer initials

	Included	Working?			Rented?		Working?			
		Yes	No	OR Unknown	Yes	No	Included	Yes	No	OR Unknown
Range/Oven	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Lawn Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dishwasher	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Solar Heating System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refrigerator	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Pool Heater, Wall liner & equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hood/Fan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Well & Pump	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disposal	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Smoke Alarm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TV receiving		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Septic Tank &	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Drain field	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sump Pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			City Water System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			City Sewer System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Central AC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Plumbing System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Window AC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Central Heating System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Central Vacuum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Water Heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas Grill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Windows	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attic Fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Fireplace/Chimney	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intercom		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Wood Burning System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microwave	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Furnace Humidifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Sauna/Hot tub	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ceiling Fan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Locks and Keys	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Softener/Conditioner	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dryer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LP Tanks	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Washer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keys & Locks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Storage Shed	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Swing Set	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Basketball Hoop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Underground "Pet fence"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Boat Dock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pet Collars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	# of collars		Boat Hoist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Garage door opener	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	# of remotes					

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Seller initials DR sn Buyer initials

1. Any significant structural modification or alteration to property? Yes ☒ No ☐ Unknown ☐ Please explain: EAST + SOUTH SIDE OF HOUSE + BASEMENT

2. Has there been a property/casualty loss or insurance claim over \$5,000, or major damage to the property from fire, wind, hail, flood(s) or other conditions? Yes ☐ No ☒ Unknown ☐ If yes, has the damage been repaired/replaced? Yes ☐ No ☐

3. Are there any known current, preliminary, proposed or future assessments by any governing body or owner's association of which you have knowledge? Yes ☐ No ☒ Unknown ☐
4. Mold: Does property contain toxic mold that adversely affects the property or occupants? Yes ☐ No ☒ Unknown ☐
5. Private burial grounds: Does property contain any private burial ground? Yes ☐ No ☒ Unknown ☐
6. Neighborhood or Stigmatizing conditions or problems affecting this property? Yes ☐ No ☒ Unknown ☐
7. Energy Efficiency Testing: Has the property been tested for energy efficiency? Yes ☐ No ☒ Unknown ☐
If yes, what were the test results? _____
8. Attic Insulation: Type YES - BLOWN IN Unknown ☐ Amount _____ Unknown ☐
9. Are you aware of any area environmental concerns? Yes ☐ No ☒ Unknown ☐ If yes, please explain: _____
10. Are you related to the listing agent? Yes ☐ No ☒ If yes, how? _____
11. Where survey of property may be found: WITH ABSTRACT

If the answer to any item is yes, please explain. Attach additional sheets, if necessary: _____

12. **Repairs:** Any repair(s) to property not so noted: (Date of repairs, Name of repair company if utilized.) (Note: Repairs are not normal maintenance items) (Attach additional sheets, if necessary)

Seller has owned the property since 1968. Seller has indicated above the history and condition of all the items based solely on the information known or reasonably available to the Seller(s). If any changes occur in the structural/mechanical/appliance systems of this property from the date of this form to the date of closing, Seller will immediately disclose the changes to Buyer. In no event shall the parties hold Broker liable for any representations not directly made by Broker or Broker's affiliated licensees (brokers and salespersons). **Seller hereby acknowledges Seller has retained a copy of this statement.**

Seller acknowledges requirement that Buyer be provided with the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.

Seller Dennis Rippinger Seller Sharon Rippinger

Buyer hereby acknowledges receipt of a copy of this statement. This statement is not intended to be a warranty or to substitute for any inspection the buyer(s) may wish to obtain.

Buyer acknowledges receipt of the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.

Buyer _____ Buyer _____