ECIAR 14 Pg 1/4

By Client ONLY

Seller(s) Initials

MLS#

lowa - Residential Property Seller Disclosure Statement

(To be completed by Seller at time of listing; completed form to be provided to Buyer prior to Buyer making a written

to	purchase.)			,	oc provided i	to Buye	r prior to Buyer ma	king a written offer	TREAST C	CENTRAL IOWA
P	roperty A	ddress:5	08 1st Avenue W	net Consode Y	4 50000				Servic	CENTRAL IOWA ofe Listing ce, Inc.
			(Sellers(s): pla	ease print prope	A 52033 erty address i	ncludin	g City, State and Zi	Codel		
P	roperty O	wner: Er	ic A. DeSousa and	l Amber I. Des	Sousa		6 orty, State and Zij	o code)		
	urpose:		(Sellers(s): pre	ease print prope	erty ownershi	p)				
th dis th	se this statem at includes at sclosures are e condition o	f the proper	ty; the Agent's k	nowledge is li	acting on be mited to the	half of e discl	the Seller(s). The	equires certain Se the property to be Agent has no inc e Seller(s) on this e for any matters	e sola. The fol	llowing
	any Agent involved in the sale or purchase of the property or any such Agent's broker be liable for any matters subject to this disclosure. Exempt Properties: Exempt Properties:									
d b n ein	roperties exelwellings units y a fiduciary i ot apply to a fistate at any time common; to gricultural project one of Seller acknowns	mpted from s; court order the course transfer of reime within the or from any operty which the above of the deges required	the Seller's disclared transfers; transfers; transfers; transfers; transfers; transfers of the administrate in which he twelve consecutions apply that but that but that but the consecutions apply the consec	ation of a dece h the fiduciary utive months i vision; quit cla s. Seller(s) cert ver be provid	edent's esta is a living namediately im deeds; in ifies that the	te, gua latural prece ntra fa e prop	rdianship, conser- person and was a ding the date of t mily transfers; be erty is exempt fro	round; property of the selling foreclos of the selling foreclos of the selling foreclos of the selling	sed properties st. This exemp ssession of the joint tenants, spouses; comp ent(s) of lowe	s; transfers tion shall e real , or tenants mercial or
	by the lowa	Department	of Public Health					yers and sellers	ract Sneet" pi	repared
		Seller			Date	1	Buyer			Data
										Date
		Seller			Date	1	Buyer			
IN:	STRUCTIO	INS TO S	ELLER(S):							Date
4. IT 5. P 6. K SEL	f an item does lease provide nformation is nformation is eep a copy of	own conditions not apply to information unknown of unknown (f this statem	ons materially afform the property, in in good faith and is unavailable for UNK). All approxent with your other states.	ecting this producate that it d make a reas ollowing a reas imations muster important	perty. Addition of the second	tional able (rt to as ort, use ed as a	scertain the requies an approximations (may be attached; red information. I on of the informat AP);	If the required tion, or indicat	te that the
may	wish to obtai	in. The follow	wing are represen	tations made	be intended by the Selle	las a s rand a	ubstitute for any	s true and accurat a copy of this stat law. This stateme inspection or war sentations of Ager	ranty the pur	e a chaser
1116-	APPINI DOC D	O INNORAM	dent knowledge ain independer	P - 1				it which is writt	en on this fo	rm.
		State of	lowa mand	ates ALL C)uestion	c in c	Section 1 NA.	ist be Answe		
SE	CTION 1	SISCLOSI	JRES:		6 m m 60 60 8 60 8 8	~ 161 F	Section T IAIT			
			ned the proper	ty since.	2017			Circle On	ly One Re	sponse:
2.	Basement	/Foundati	on: Any known	water or or	<u> </u>					
3.	Roof: Any I	known pro	oblems?	water or o	ther probl	ems:		 Y	es□No □N,	/A □UNK
	Any known	repairs?		• • • • • • • • • • • • • • • • • • • •	************	••••••	*******************	Ŷ□	esizivo 🗆 N	/A DUNK
	If yes, date	of repairs	/ replacemen	t (circle one	١٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠		······································		es□No □ N	/A DUNK
4.	Sewer Syst	tem. Any I	(nown problem	165 165	١٠					
	Any known	repairs?	problem	13:		*******	****************		es No IN	A 🗆 UNK
	If yes, date	of renaire	/ replacement	· lainala	١				es No □N/	A DUNK
To b	e completed	1 0	/ replacement	(circle one): 					

Buyer(s) Initials

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_	AD	DRESS	
5.	Septic Tanks/Drain Fields: Has the system been inspected by an Iowa DNR		
	certified inspector within 2 years, or pumped/cleaned within the last 3 years?	TVOCINION STALLA	
	***************************************	LITESKINO DAIN/A	
	Date talik last cleaned:		DUNK
6.	well allu Pump: Any known problems?	TV . Tobal Toballa	DUNK
	1	- //	
	If Yes, date of repairs / replacement (circle one): Any known water tests? If yes, date of last report: and results:	LYesLINO DIN/A	
	Any known water tests?	D. D. A.	
	If yes, date of last report: and results:	LI YesLINO BALA	DUNK
7.	Heating System(s): Any known problems?		
	Heating System(s): Any known problems? Any known repairs? If Yes, date of repairs / replacement (circle and).	·····□ Yes ⊠N/A	DUNK
	If Yes, date of repairs / replacement (circle one): Central Cooling System(s): Any known problems? Any known repairs?	Yes⊠No □N/A	DUNK
8.	Central Cooling System(s): Any known problems?		
	Any known repairs?	□ Yes⊠No □N/A	□ UNK
	Any known repairs?	□. Yes⊠No □ N/A	□UNK
9.	Plumbing System(s): Any known problems?		
	If Yes, date of repairs / replacement (circle one): Plumbing System(s): Any known problems? Any known repairs?	D.Yes \(\omega\) O \(\omega\) A	DUNK
	Any known repairs?	□ Yes☑No□N/A	□ UNK
10.	Electrical System(s): Any known problems?		
	If Yes, date of repairs / replacement (circle one): Electrical System(s): Any known problems? Any known repairs?	□Yes \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	DUNK
	Any known repairs?	□Yes⊠No □N/A	DUNK
11.	If Yes, date of repairs / replacement (circle one): Pest Infestation (wood destroying insects): Any known current or past problems? If yes, date(s) of treatment:		
	If yes, date(s) of treatment:	□Yes No □N/A	DUNK
	Any known structural dames == 2		
	Any known structural damage? If Yes, date of repairs / replacement (circle one): Asbestos: Any known to be present in the structure?	□YestAvo □N/A	DUNK
12	Ashestos: Any known + Diacement (circle one):		
13	Radon: Any known to be present in the structure?	□Yes XNo □N/A	DUNK
	Radon: Any known tests for the presence of radon gas?	·····□Yes⊠No □N/A	TUNK
15 1	Lead Based Paint: Any known to be present in the structure?	Yes No DN/A	TUNK
	. , , and a mode plum;	□Yes⊠No □N/A	TUNK
	L. G. COMINGIONI		
17 9	Coning: What is the zoning classification of the property? Shared or Co-Owned Features: Any features of the property known to be a control of the property.		TUNK
	The state of the property known to ho charad in		
	common with adjoining landowners, such as walls, fences, roads and drivous walls		
C	ise of maintenance responsibility may have an effect on the property?		TIINK
	and a such as books. Letting colling mallanava on other		
v	The others, of a nomeowner's Association which has any authority avente		THINK
	" The state of the	Property and the second	
19.5	tructural Damage: Any known structural damage?as there been a property/casualty loss resulting in an income.	TYes MIO DN/A D	JUNK
	in the state of the particular	DI Vegano DIVA C	TOME
		THE TOWN A L	TOMK
	completed		
by Cli	Buyer(s) In Buyer(s) In	itials /	

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21. Covenants: Is the property subject to restrictive cove If yes, a true, current copy of the covenants can be of	nants? btained:	☐ Yes No!	□N/A □UNK
☐ Attached to this property disclosure ☐ At th ☐ Other:			orders office
You MUST explain any "YES" response(s) for above quest	ions. Use additional sheets a	oc nococcom	
2 dryer their will be a trickle of water #3 2020 Stight leak in the SW vall	erated the north be	vall behin	d washer to the drain o repair.
SECTION 2, OPTIONAL INFORMATION: This inform for the convenience of Buyer/Seller and is not made to	otion is such and		
for the convenience of Buyer/Seller and is not mandatory		quired by statute.	Section II is
22. Appliances/Systems/Services (check all that apply): Working?			
Included? Yes No Unk			orking?
Refrigerator Range/Oven Microwave Dishwasher Disposal Trash Comp.	Lawn Sprinkler System Pool Heater Wall liner & Equipment Satellite Dish Window Treatments Smoke Alarms Gar. Door Opener	Included? Yes	No Unk
Hood/Fan Washer Dryer Gas Grill Window A/C Sauna/Hot Tub Attic Fan Landscap. Lites	Gar. Opener Remotes Intercom Furn. Humidifier Central Vacuum Water Heater Fireplace/Chimney Windows		
Ceiling Fan(s) Water Filter Sys. Leased Y/N Leased Y/N Leased Y/N Leased Y/N Leased Y/N	Alarm System Sump Pump Is sump pump properly discharged? Is Cable TV available in the area? Invisible Dog Fence Transmitter		
All Household Appliances are sald in			
All Household Appliances are sold in working order except of closing. Warranties may be available for purchase from it	as noted and are not under	r warranty beyon	d the date
of closing. Warranties may be available for purchase from in	ndependent warranty compa	anies.	
23. Roof: Type of Exterior Roofing: #sphail+	Please Check Mark or Cit	rcle Where Appro	priate
1 /1 /h dadis in 1 1 - 1	or UNK	Age:	or UNK
Amount: Spray Foam	***************************************		UNK
R-Value:	***************************************		UNK
25. Water Supply: Type: Public Community P	rivate Well Shared Wel		UNK
Any known problems?	/	□Yes Avo □	N/A TIINK
Sy Client ONLY Seller(s) Initials	Buyer(s) Initials		// [_]()

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	ADDRESS			
26. Sewer Type: Public Community Private 27. Septic Tank: Location of Tank:				
Tank Age:				
28. Mold : Has property been tested for the presence of mold?				
If yes, date of test: (attach results)	·······□Yes ☐No □N/A □UN			
29. Heating System(s): Type: Gas Forces Aiv				
30. Cooling System(s): Type. Oas Torce Hiv	or UNK D Age: 2012 or UNI			
30. Cooling System(s): Type: Central Air	or UNK D Age: 2017 or UN			
31. Radon System: Is a radon system installed?				
If yes, is the Radon System: Passive Active	,			
32. Any improvements made by seller since purchase?	Wes INO IN/A TINE			
	1 1 A 1			
A TOWN COME INTO A TOWN	1400			
Complete remodel on baganunt Fam	ily many			
	- TVCCVC			
33. Is seller or seller's representative related to the listing agent or broker 34. Has the Seller received any notice of assessment, or bour activities.	? WVoc DNI DNI/A THINK			
and incline of assessing it. Of liave differencing	200000000000000000000000000000000000000			
The strong and the st	TV With a government			
35. Received notice of code or zoning violations from any municipality? If yes, please explain:				
If yes, please explain:	············□Yes ⊠No □N/A □UNK			
36. Association Fees: monthly \$				
List items covered by fees:				
37. In the last 12 months has the dwelling been or is it currently infect.				
37. In the last 12 months has the dwelling been or is it currently infested w etc.?	ith bats, bed bugs, cock roaches, rodents,			
38. Electric Service Provider / MAII	□Yes \\\\ \O \o \o \N/A \o \UNK			
38. Electric Service Provider (MU Gas/Propane Sage Security System United States Service Provider Gas/Propane Sage Security System United States Service States Security System United States States Security System United States States Security System United States	ervice Provider_ (Mu			
39. Any Transferable Contracts? (e.g. Security System, Home Warranty, CR	P, Pest Treatment, etc.)			
Disclosures must be signed by all parties to the transaction				
SELLER(S) DISCLOSURE: Seller(s) disclose the information regarding the				
SELLER(S) DISCLOSURE: Seller(s) disclose the information regarding this property based available to the Seller(s). The Seller(s) certifies that as of the date signed, this information is knowledge. If any changes occur between the date Seller(s) completes this formation is	on information known or reasonably			
knowledge. If any changes occur between the date Sollarich completes the first information is	true and accurate to the best of my/our			
the above disclosures being inaccurate, Seller(s) shall immediately disclose such changes to that Buyer be provided with the "lowa Radon Home-Buyers and Sellers Fact Shark"	The of closing which would result in any of			
that Buyer be provided with the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepar	ed by the lowa Department of Duly in the			
	Cowa Department of Public Health.			
Seller Jesus 80/10/20 ANUM	APROUS 8/11/20			
Date	Date			
BUYER(S) ACKNOWLEDGEMENT: Buyer(s) acknowledges receipt of				
BUYER(S) ACKNOWLEDGEMENT: Buyer(s) acknowledges receipt of a copy of this Real is not intended to be a warranty or to substitute for any inspection the Buyer(s) may wish to of a copy of this Real Estate Disclosure Statement. This statement is not intended to be	Estate Disclosure Statement. This statement			
of a copy of this Real Estate Disclosure Statement This statement is not interest in the Buyer (5) Irlay Wish to	optain. Buyer hereby acknowledges receipt			
buyer(s) may wish to obtain. Buyer acknowledges receipt of the "lowa Radon Home-Buyer lowa Department of Public Health.	arranty or substitute for any inspection the			
Iowa Department of Public Health.	ond Jellers ract Sneet" prepared by the			
Buyer				
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