

Seller Property Condition Disclosure Statement

The following is a disclosure statement, made by the SELLER, of information concerning the condition of the Property during ownership of the Property, on the date on which it is signed. It is not a warranty of any kind by the SELLER(S) or any Agent representing any principal in this transaction, and should not be accepted as a substitute for any inspections or warranties the BUYER may wish to obtain. The information provided in this statement is the representation of the SELLER and not the representation of any Agent. The information contained herein is not intended to be part of any Contract between the SELLER and BUYER.

This disclosure statement concerns the real property situated at:

419 N. Nelson IN THE CITY OF Bennington
COUNTY OF OTTAWA, STATE OF KANSAS.

SELLER ☐ IS ☒ IS NOT currently occupying the property.

SELLER has owned property since: 1970.

SELLER'S INFORMATION

The SELLER discloses the following information with the knowledge that even though this is not a warranty, prospective BUYERS may rely on this information in deciding whether, and on what terms, to purchase the subject real property. SELLER hereby authorizes any Agent(s) representing any principal(s) in this transaction to provide a copy of this statement to any person or entity in connection with any actual or possible sale of the real property.

Indicate the condition of the following items by marking the appropriate box. Check only one box per item. If negotiable, so indicate by writing "NEGOTIABLE" next to the item.

SECTION A - APPLIANCES		Working	Not Working	Do Not Know if Working	N/A - Not Included
1.	Built-in Vacuum System.....	☐	☐	☐	☒
	☐ Attachments Included ☐ Pre-Plumbed only ☐ Other				
2.	Clothes Dryer.....	☒	☐	☐	☐
	☐ Gas ☒ Electric				
3.	Clothes Washer.....	☒	☐	☐	☐
4.	Dishwasher.....	☒	☐	☐	☐
5.	Disposal.....	☐	☐	☐	☒
6.	Freezer - Free Standing.....	☐	☐	☐	☒
7.	Refrigerator.....	☒	☐	☐	☐
8.	Microwave Oven.....	☐	☐	☐	☒
	☐ Built in ☐ Free Standing				
9.	Wall Oven.....	☐	☐	☐	☒
	☐ Gas ☐ Electric ☐ Single ☐ Double ☐ Other				
10.	Cook Top.....	☐	☐	☐	☒
	☐ Gas ☐ Electric				
11.	Range/Stove.....	☒	☐	☐	☐
	☐ Gas ☒ Electric ☐ Free Standing ☐ Drop-in ☐ Other				
12.	Range Ventilation System.....	☐	☐	☐	☒
13.	Trash Compactor.....	☐	☐	☐	☒
14.	Exterior Grill - Built in.....	☐	☐	☐	☒
15.	TV Antenna/Satellite Dish.....	☐	☐	☐	☒
16.	Other:.....	☐	☐	☐	☐
17.	Other:.....	☐	☐	☐	☐

Comments/Explanations from Section A:

SELLER'S initials and date: CH 4-26-15
SELLER'S initials and date: CH 4-26-15

BUYER'S initial and date: _____
BUYER'S initial and date: _____



SECTION B – ELECTRICAL SYSTEMS

	Working	Not Working	Do Not Know if Working	N/A - Not Included
1. Electrical Service Panel.....	☒	☐	☐	
Capacity: _____ AMPS (helpful hint – see main breaker panel)				
☒ Circuit Breakers ☐ Fuses				
2. Type of Electrical Wiring: ☐ Copper ☐ Aluminum ☒ Unknown				
3. 220 Volt Service (ie, stove, a/c, dryer).....	☐	☐	☐	☐
4. Cable TV wiring & Jacks: Number of Jacks _____	☐	☐	☐	☐
5. Telephone Wiring & Jacks: Number of Jacks _____	☐	☐	☐	☐
6. Ceiling Fans: Number of Ceiling Fans _____	☐	☐	☐	☐
7. Doorbell.....	☐	☐	☐	☐
8. Electrical Outlets & Switches.....	☒	☐	☐	☐
9. Bathroom Vent Fan(s).....	☐	☐	☐	☐
10. Light Fixtures.....	☒	☐	☐	☐
11. Intercom System – Built-in.....	☐	☐	☐	☐
12. Sound System – Built-in.....	☐	☐	☐	☐
☐ Speakers – Built-in; ☐ Wiring – Built-in.....	☐	☐	☐	☐
13. High Speed Internet Wiring.....	☐	☐	☐	☐
☐ Cable ☐ DSL ☐ Satellite ☐ Other				
Number of Jacks: _____				
14. Security System (☐ Pre-Wired Only).....	☐	☐	☐	☒
15. Smoke/Fire Alarm.....	☐	☐	☐	☒
Number of Smoke/Fire/Heat Detectors: _____				
16. Sauna (☐ Steam ☐ Dry).....	☐	☐	☐	☒
17. Garage Door Opener(s): Number of Remotes _____	☐	☐	☐	☒
Garage Door Keyless Entry.....	☐	☐	☐	☒
18. Other: _____	☐	☐	☐	☐

Comments/Explanations from Section B: _____

SECTION C – HEATING AND COOLING SYSTEMS

1. Furnace.....	☐	☒	☐
☐ Forced Air Gas ☐ Forced Air Electric ☒ Forced Air Propane			
☐ Radiant ☐ Gravity Flow ☐ Specify Other _____			
Age _____; ☐ Zoned Number of Units _____			
Humidifier.....	☐	☐	☒
2. Heat Pump.....	☐	☐	☒
Age _____; ☐ Zoned Number of Units _____			
3. Air Conditioning.....	☒	☐	☐
☒ Central Air; Age _____; ☐ Zoned; No. of Units _____			
☐ Electric ☐ Other (comment) _____			
4. Propane Tank (☐ Leased ☐ Owned).....	☐	☐	☒
Leased From _____			
5. Air Purifier (Electronic Air Filter).....	☐	☐	☒
6. Solar Heating (Panels & Plumbing).....	☐	☐	☒
7. Whole House Fan.....	☐	☐	☒
8. Attic Ventilation System (attic only).....	☐	☐	☒
9. Fireplace.....	☒	☐	☐
☒ Masonry ☐ Insert ☐ Wood Burning ☐ Direct Vent			
Gas Fireplace Logs.....	☐	☐	☒
Gas Fireplace Starter.....	☐	☐	☒
10. Free Standing Heating Stove.....	☐	☐	☒
Fuel Source: ☐ Wood ☐ Pellet ☐ Corn ☐ Other (comment) _____			
11. Other: _____	☐	☐	☐

Comments/Explanations from Section C: _____

SELLER'S initials and date: C H 4-26-28
 SELLER'S initials and date: C H 4-26-28

BUYER'S initial and date: _____
 BUYER'S initial and date: _____



SECTION D - WATER SYSTEMS

	Working	Not Working	Do Not Know If Working	N/A - Not Included
1. Water Supply.....	☒	☐	☐	
Connected to Treated Water System: ☒ City ☐ Rural				
☐ Well ☐ Cistern ☐ Other: _____				
Rural Water District # _____ Phone # _____				
2. Sewage System.....	☐	☐	☐	☐
Property is connected to: ☒ City Sanitary Sewer System				
☐ Septic System ☐ Lagoon ☐ Other: _____				
3. Plumbing				
Water/Supply Lines.....	☒	☐	☐	☐
Sewer/Waste Lines.....	☒	☐	☐	☐
Plumbing Fixtures & Faucets.....	☒	☐	☐	☐
Grinder Pit / Lift Station.....	☐	☐	☐	☒
4. Jetted Tub.....	☐	☐	☐	☒
5. Hot Tub.....	☐	☐	☐	☒
6. Sump Pump.....	☒	☐	☐	☐
Discharges to _____				
Number of Sump Pumps _____				
7. Swimming Pool.....	☐	☐	☐	☒
☐ Above Ground ☐ In Ground				
8. Underground Sprinkler System.....	☐	☐	☐	☒
Installed: ☐ Professionally ☐ Homeowner ☐ Unknown				
9. Water Heater.....	☐	☐	☒	☐
☐ Natural Gas ☐ Propane ☒ Electric ☐ Other				
Number of Water Heaters _____; Age _____; Gals. _____				
10. Water Purifier.....	☐	☐	☐	☒
11. Water Softener (☐ Leased ☐ Owned).....	☐	☐	☐	☒
12. Other: _____	☐	☐	☐	☐

Comments/Explanations from Section D: _____

SECTION E - STRUCTURAL CONDITIONS

	Yes	No	Unknown
1. Age of Roof <u>3 to 6 years</u>			☐
☒ Composition ☐ 3-D Composition ☐ Wood ☐ Other: _____			
2. Has the roof ever leaked?	☒	☐	☐
3. Is there present damage to the roof?	☐	☐	☐
4. Are you aware of any adverse conditions regarding the exterior siding of the structure(s)?	☒	☐	☐
5. Is there a history of infestation of termites, carpenter ants, fleas, rodents, etc?.....	☐	☒	☐
6. Has the property been treated for infestation?	☐	☒	☐
7. Unrepaired damage from previous infestation?	☐	☒	☐
8. Is the property currently under warranty or other coverage by a licensed pest control company?	☐	☒	☐
9. Have any of the windows ever leaked?	☐	☐	☒
10. Are there any windows that have broken thermo-pane seals? (moisture between panes)	☐	☐	☒
11. Is there any damage to the chimney which requires repair?	☐	☐	☒
12. Has there ever been leakage/seepage in the basement/crawlspace?	☒	☐	☐
13. Are there any structural problems with the improvements?	☐	☐	☐
14. Have any corrections been made to stabilize the foundation or retaining walls?	☐	☐	☐
15. Have you experienced any moving or settling of the following?			
a. Foundations.....	☐	☐	☒
b. Floors.....	☐	☐	☒
c. Walls.....	☐	☐	☒
d. Driveways	☐	☐	☒
e. Sidewalks.....	☐	☐	☒
f. Patios.....	☐	☐	☒
g. Retaining Walls.....	☐	☐	☒
h. Other.....	☐	☐	☐

SELLER'S initials and date: CH 4-26-25
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Section E – Continued

- | | Yes | No | Unknown |
|---|-------------------------------------|-------------------------------------|-------------------------------------|
| 16. Has there ever been damage to the real property or any of the improvements due to fire, flood, wind, hail, or other acts of nature? | ☐ | ☐ | ☒ |
| 17. Have you ever had a leak from any plumbing line/fixture or appliance? | ☒ | ☐ | ☐ |
| 18. Have you had the property inspected for the existence of any types of mold? | ☐ | ☒ | ☐ |
| If Yes, attach copy of any inspection report. | | | |
| 19. Have you received any insurance proceeds or filed any insurance claim on the property? | ☐ | ☒ | ☐ |

If yes, please comment and include any/all reports: _____

SECTION F – HAZARDOUS CONDITIONS: Are you (SELLER), to the best of your knowledge, aware of any of the following substances, materials, or products on the real property which may be an environmental hazard?

- | | Yes | No | Unknown |
|---|--------------------------|-------------------------------------|--------------------------|
| 1. Radon..... | ☐ | ☒ | ☐ |
| ☐ Pre-Plumbed ☐ Operating Mitigation System | | | |
| 2. Mold | ☐ | ☒ | ☐ |
| 3. Lead-Based Paint..... | ☐ | ☒ | ☐ |
| 4. Contaminated soil or water | ☐ | ☒ | ☐ |
| 5. Toxic Materials..... | ☐ | ☒ | ☐ |
| 6. Asbestos..... | ☐ | ☒ | ☐ |
| 7. Landfill or buried materials..... | ☐ | ☒ | ☐ |
| 8. Underground fuel or chemical storage tanks..... | ☐ | ☒ | ☐ |
| 9. Other (specify): | ☐ | ☒ | ☐ |

If yes, please comment and include any/all reports: _____

SECTION G – TITLE DISCLOSURES: Are you (SELLER), to the best of your knowledge, aware of any of the following which could affect the real property? FOR INFORMATION CONCERNING SPECIAL ASSESSMENTS, CONTACT BOTH THE CITY CLERK AT 832-3201, AND THE COUNTY TREASURER AT 832-5178.

For online tax info visit: http://www.douglas-county.com/online_services/valuestaxes/disclaimer.asp.

For Pending/Certified Special Assessment info visit: <http://www.lawrenceks.org/specialassessment/>

- | | Yes | No | Unknown |
|---|--------------------------|-------------------------------------|--------------------------|
| 1. Any Covenants and Restrictions or other deed restrictions or obligations..... | ☐ | ☒ | ☐ |
| 2. Do you have a copy of a property survey..... | ☐ | ☒ | ☐ |
| 3. Any lot-line disputes or other unusual claims against the real property..... | ☐ | ☒ | ☐ |
| 4. Any encroachments..... | ☐ | ☒ | ☐ |
| 5. Any zoning violations..... | ☐ | ☒ | ☐ |
| 6. Any non-conforming uses of property..... | ☐ | ☒ | ☐ |
| 7. Any violations of "set back" requirements..... | ☐ | ☒ | ☐ |
| 8. Easements other than normal utility easements | ☐ | ☒ | ☐ |
| 9. Any planned road or street expansions or improvements adjacent to the property..... | ☐ | ☒ | ☐ |
| 10. Any notices from any governmental, or quasi-governmental agency (HOA) affecting this real property..... | ☐ | ☒ | ☐ |
| 11. Any Pending/Certified assessments on the real estate, including but not limited to those for sidewalks, streets, sewers and waterlines..... | ☐ | ☐ | ☐ |

Total balance of remaining special taxes: \$ _____

Certified Special Taxes: please itemize below:

Special Assessment 1 Description: _____	Amount \$ _____	Pay Off Year: _____
Special Assessment 2 Description: _____	Amount \$ _____	Pay Off Year: _____
Special Assessment 3 Description: _____	Amount \$ _____	Pay Off Year: _____
Special Assessment 4 Description: _____	Amount \$ _____	Pay Off Year: _____

Pending (estimated) Special Taxes or Benefit Districts: \$ _____ (principal only); Type of Assessment _____

SELLER'S initials and date: CH 4-26-25
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