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 01/19

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SELLER'S DISCLOSURE STATEMENT

70 - L	e completed by SELLER concerning 5215 Doon Ford Roan (Property Address)
	ted in the municipality of A (if incorporated), County of FRANKUN, Missouri.
Note to bu	: If a Seller knows or suspects some condition which might lower the value of the property being sold or adversely affect the Buyer's decision by the property, then the Seller needs to disclose it. This statement will assist a Buyer in evaluating the property being considered. Real estate ers and agents involved in the sale do not inspect the property for defects, and they cannot guarantee the accuracy of the information in this
your and/ defect shou may cove healt	THE SELLER: Your truthful disclosure of the condition of your property gives you the best protection against future charges that you violated legal obligation to a Buyer by concealing a material defect(s), lead-based paint, use as a site for methamphetamine production or storage or any other disclosure required by law. Your knowledge of the property prior to your ownership may be relevant. In the case of a material ct, for example, if information that you possess indicates some persistent pattern of a problem not completely remedied, such information ld be included in this disclosure in order to achieve full and honest disclosure. Your answers or the answers you fail to provide, either way, have legal consequences, even after the closing of the sale. This questionnaire should help you meet your disclosure obligation, but it may not r all aspects of your property. If you know of or suspect some condition which would substantially lower the value of the property, impair the th or safety of future occupants, or otherwise affect a Buyer's decision to buy your property, then use the space at the end of this form to ribe that condition.
CON will cont	THE BUYER: THIS INFORMATION IS A DISCLOSURE ONLY AND IS NOT INTENDED TO BE A PART OF ANY STRACT BETWEEN BUYER AND SELLER. If you sign a contract to purchase the property, that contract, and not this disclosure statement, provide for what is to be included in the sale. So, if you expect certain items, appliances, or equipment included, you must specify them in the ract.
the S your insu	e these disclosures are based on the Seller's knowledge, you cannot be sure that there are, in fact, no problems with the property simply because Seller is not aware of them. The answers given by the Seller are not warranties of the condition of the property. Thus, you should condition offer on a professional inspection of the property. You may also wish to obtain a home protection plan/warranty. Due to the variety of rance, requirements, products, and arrangements Buyer should contact appropriate party to determine insurance coverage needed.
Conmak	ditions of the property that you can see on a reasonable inspection should either be taken into account in the purchase price or you should e the correction of these conditions by the Seller a requirement of the sale contract.
SUI (a)	BDIVISION, CONDOMINIUM, VILLA, CO-OP OR OTHER SHARED COST DEVELOPMENT (if applicable) Development NamePhone
(0)	Type of Property: (check all that apply) Single-Family Residence Multi-Family Condominium Townhome
	□ Villa □ Co-Op
(c)	Mandatory Assessment: #1\$per: □ month □ quarter □ half-year □ year
	Mandatory Assessment. #2\$per: □ month □ quarter □ half-year □ year
	Mandatory Assessment(s) include: centrance sign/structure common ground common area snow removal of common area landscaping specific to this dwelling landscaping of common area landscaping specific to this dwelling clubhouse pool tennis court exercise area reception facility water sewer trash removal coorman cooling heating security elevator other common facility
	□ assigned parking space(s): how many identified as □ some insurance □ real estate taxes
	□ other specific item(s):
	☐ Exterior Maintenance of this dwelling covered by Assessment:
(e)	Optional Assessment(s)/Membership(s). Please explain
(f)	Are you aware of any existing or proposed special assessments? Yes No
(g)	Are you aware of any special taxes and/or district improvement assessments? Yes No
(h)	Are you aware of any condition or claim which may cause an increase in assessment or fees? Yes No
(i)	Are you aware of any material defects in any common or other shared elements? Yes No
(j)	Are you aware of any existing indentures/restrictive covenants? Yes No
(k)	Are you aware of any violation of the indentures/restrictions by yourself or by others? Yes No
(1)	Is there a recorded street/road maintenance agreement?
(m)	Please explain any "yes" answer you gave for (e), (f), (g), (h), (i), (j) or (k) above

UTI Util	LITIES ity Current Provider						
	Propage: w/A if Propage, is tank \(\text{IOwned} \) \(\text{Leased} \)						
	etric: CRAWFORD ELECTRIC						
	er: WELL						
	er: SEPTIC						
	sh: A/A ycle: A/A						
	rnet: V/A						
Pho	ne: NA						
	ATING, COOLING AND VENTILATING (Seller is not agreeing that all items checked are being offered for sale.)						
75	Heating Equipment: ☐ Forced Air ☐ Hot Water Radiators ☐ Steam Radiators ☐ Radiant ☐ Baseboard						
	o) Source of heating: Electric Natural Gas Propane Fuel Oil Other						
(c)	(c) Type of air conditioning: Central Electric Central Gas Window/Wall (Number of window units ONE)						
(d)	Areas of house not served by central heating/cooling, ALL						
(e)	Additional: Flumidifier Electronic Air Filter Media Filter Attic Fan Other: DE HUMID I FI ER						
(f)	Are you aware of any problems or repairs needed with any item in this section? Yes No If "yes", please explain						
(g)	Other details:						
FIR	EPLACE(S)						
(a)	Type of fireplace: Wood Burning Vented Gas Logs Vent Free Gas Logs Wood Burning Stove Natural Gas Propane						
100	Type of flues/venting:						
	Functional: (properly vented for wood burning and vented gas logs) Number of fireplace(s) DNE Location(s) LIVING ROOM						
	□ Non-Functional: Number of fireplace(s) Location(s) Please explain						
(c)	Are you aware of any problems or repairs needed with any item in this section? Yes No If "yes", please explain						
(a) (b) (c) (d)	Water Heater: Electric Natural Gas Propane Tankless Other: Ice maker supply line: Yes No Jet Tub: Yes No Swimming Pool/Spa/Hot Tub: Yes No (If Yes, attach Form #2180, Pool/Spa/Pond/Lake Addendum to Seller's Disclosure Statement)						
(e)	Lawn Sprinkler System: Yes No If yes, date of last backflow device inspection certificate:						
(f)	Are you aware of any problems or repairs needed in the plumbing system? Yes No If "yes", please explain						
WA	ATER (If well exists, attach Form #2165, Septic/Well Addendum to Seller's Disclosure Statement)						
	What is the source of your drinking water? Public Community Well Other (explain)						
(c)	If Public, identify the utility company:						
	Are you aware of any problems relating to the water system including the quality or source of water or any components such as the curb						
(u)	stop box? Yes No If "yes", please explain						
SE	WERAGE (If Septic or Aerator exists, attach Form #2165, Septic/Well Addendum to Seller's Disclosure Statement)						
(a)	What is the type of sewerage system to which the house is connected? \square Public \square Private \square Septic \square Aerator \square Other. If other						
(b)	please explain						
(c)	When was the septic/aerator system last serviced? 2018						
(d)	When was the septic/aerator system last serviced?						
	/Initials BUYER and SELLER acknowledge they have read this page/						

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APF	PLIANCES (Seller is not agreeing that all items checked are being offered for sale.)						
(a)	Electrical Appliances and Equipment: Electric Stove/Range/Cook top Oven Built-in Microwave Oven						
	Dishwasher Garbage Disposal Trash Compactor Wired smoke alarms Electric dryer (hook up)						
	Ceiling Fan(s)						
(b)	Gas Appliances & Equipment: ☐ Natural Gas ☐ Propane						
	☐ Oven ☐ Gas Stove/Range/Cook top ☐ Exterior Lights ☐ Barbecue ☐ Water heater ☐ Tankless Water Heater						
	☐ Gas dryer (hook up) ☐ Other						
(c) Other Equipment: ☐ TV Antenna ☐ Cable Wiring ☐ Phone Wiring ☐ Network/Data Wiring ☐ Electric Garage Door Opener(s) Number of controls							
	☐ Security Alarm System ☐ Owned ☐ Leased /Lease information:						
	□ 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						
ELI	ECTRICAL						
	e of service panel: Fuses Circuit Breakers Other:						
(a)	Type of wiring: Copper Aluminum Knob and Tube Unknown						
(b)	Are you aware of any problems or repairs needed in the electrical system? Yes No If "yes", please explain						
RO	OF, GUTTERS AND DOWNSPOUTS						
(a)	What is the approximate age of the roof? 2005 Years. Documented? Yes No						
	Has the roof ever leaked during your ownership? Yes No If "yes" please explain WE FIXED LEAK BY INSTALLING RUBBERIZED MATERIAL & SFEET BACK FROM 1200F LINE & VENTS 17						
(c)	Has the roof been repaired, recovered or any portion of it replaced or recovered during your ownership? Let's Do If "yes", please						
(d)	explain Are you aware of any problems with the roof, gutters or downspouts? Yes No If "yes", please explain						
	NSTRUCTION						
(a)	Are you aware of any problems with the footing, foundation walls, sub-floor, interior and exterior walls, roof construction, decks/porches or other load bearing components? Yes No 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 describe the						
	location, extent, date and name of the person/company who did the repair or control effort.						
(c) (d)	Are you aware that any of the work in (b) above was completed without required permits? Yes No I Yes No NETALCED						
	NEW KITCHEN APPLIANCES AND FLOORING IN KAND ENTRANCE HALL						
(e)	Were required permits obtained for the work in (d) above? ☐ Yes ☐ No						
RA	SEMENT AND CRAWL SPACE (Complete only if applicable)						
EPCE							
	☐ Sump pit ☐ Sump pit and pump						
(a)	Type of foundation: Concrete Stone Cinder Block Wood						

', please describe the location, extent, date and name of the person/company who did the repair or control effort					
OOD DESTROYING INSECTS					
sts or termites/wood destroying insects impacting the property and improvements? Yes No					
corrected damage to the property caused by pests or termites/wood destroying insects? Yes					
y under a warranty contract by a licensed pest/termite control company? Yes You					
st/termite control reports for the property? Yes No					
you aware of any pest/termite control treatments to the property? Yes No					
Please explain any "yes" answers you gave in this section					
l, expansive soil or sinkholes on the property or that may affect the property? Yes No					
oil, earth movement, flood, drainage or grading problems on the property or that may affect the property?					
ast, present or proposed mining, strip-mining, or any other excavations on the property or that may affect the					
st-construction Stormwater Best Management Practices (BMPs) on the property? (BMPs are private stormwate hich include a recorded formal Maintenance Agreement with the Metropolitan Sewer District,					
gardens, sand filters, permeable pavement) Yes No					
answers you gave in this section					
Paint Hazards, form #2049.) The presence of any lead hazards (such as paint, water supply lines, etc.) on the property? ☐ Yes ☑ No that has ever been covered or removed? ☐ Yes ☑ No					
the property has been tested for lead? Yes No If "yes", please give date performed, type of test and te					
e property has been tested for lead? The res to the first and te					
"yes" answers you gave in this section					
Asbestos Materials					
e presence of asbestos materials on the property, such as roof shingles, siding, insulation, ceiling, flooring, pip					
ny asbestos material that has been encapsulated or removed? Yes No					
e property has been tested for the presence of asbestos? Yes No If "yes", please give date performed					
results					
"yes" answers you gave in this section					
Mold					
ne presence of any mold on the property? Yes No					
nything with mold on the property that has ever been covered or removed? Yes No					
(3) Are you aware if the property has ever been tested for the presence of mold? The Yes In No If "yes", please give date perform					
type of test and test results					
"yes" answers you gave in this section					

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	YER SIGNATURE er printed Name	DATE	BUYER SIGNATURE Buyer Printed Name	DATE			
P -	A A A A A A A A A A A A A A A A A A A	1 3 A 1 1 1					
	LIDD OLONATIVED	DAME	DUMED CICAL DUE				
exp	ert at detecting or repairing physical defects in property	У.					
thro	ugh the Multiple Listing Service) by an independent,	professional					
	er's Disclosure Statement, and any other important inf						
_	er acknowledges having received and read this Seller closure Statement is limited to information of which Se						
	YER'S ACKNOWLEDGEMENT:						
Sell	er Pfinted Name		Seller Printed Name				
En	uly Greedy Michael Grady	1	DENNIS & BONTA COLEM	21			
	LER SIGNATURE	DATE	SELLER SIGNATURE	DATE			
3	uly GrahMielial & Jung		Vini Otel O Colema	8/3/19			
uici		oute Dayers	O Bolle Do				
	er agrees to immediately notify listing broker in writing licensees to furnish a copy of this statement to prospe	7		orizes all brokers and			
	er acknowledges that he has carefully examined this st			The second state of the se			
	LER'S ACKNOWLEDGEMENT:						
	er attaches the following document(s):						
C-11	ou attacked the following do amount (a)						
Ada	litional comments:						
(m)	Please explain any "yes" answers you gave for (i), (j),	(k), or (l) al	bove				
(1)	Are you aware of any consent required of anyone other	er than the sig	gner(s) of this form to convey title to the pro	perty? Yes No			
(k)							
(j)							
(i)	Are you aware of any inoperable windows or doors, be			CALL TO THE STATE OF THE STATE			
(h)	Is the Buyer being offered a protection plan/home war	ranty at clos	ing at Seller's expense? Yes No (If "	ves", please attach)			
(g)	PRIOR OWNER	ne property:	Tes in No II yes please explain De	J6-3 K			
(f)	Is property tax abated? Yes No Expiration date. Are you aware of any pets having been kept in or on the	an area artis?	Attach documentation	from taxing authority.			
(e)	Is the property designated as a historical home or located in a historic district? Yes No If "yes", please explain						
	Is the property located in an area that requires any specific disclosure(s) from the city or county? Yes Yes If "yes", please explain						
(d)	is the property located in all area that requires any spec						