

# FOR SALE

*2181 Paynes Mill Road  
Versailles, Kentucky*

**KENTUCKY.....THE HORSE CAPITAL OF THE WORLD!**



Wonderfully located 10 acre property with a gorgeous 5,260 square foot, 5 bedroom, 6 bath residence. This property offers beautiful horse farm views, mature landscaping with formal garden, and lovely pool and entertainment area. The Residence includes 10 ft ceilings, hardwood floors, sunroom, a newly renovated kitchen with granite and tile, newly renovated master bath, two newly renovated full baths on the 2nd floor, many recently installed new windows, an attractive functional paneled home office, a 5 car drive thru garage and large unfinished basement. The grounds are wonderfully landscaped with dozens of trees, flowering shrubs, flowering annuals, and a winding asphalt driveway. Other property amenities include a propane-powered electric generator system, views of WinStar Farm, and other rural properties. An incredible Woodford County location.

***Listing Price: \$1,295,000***



**TOM BIEDERMAN, BROKER**  
**859.312.0606**

**859.277.2030**  
1076 WELLINGTON WAY  
LEXINGTON, KY 40513

**BIEDERMANREALESTATE.COM**





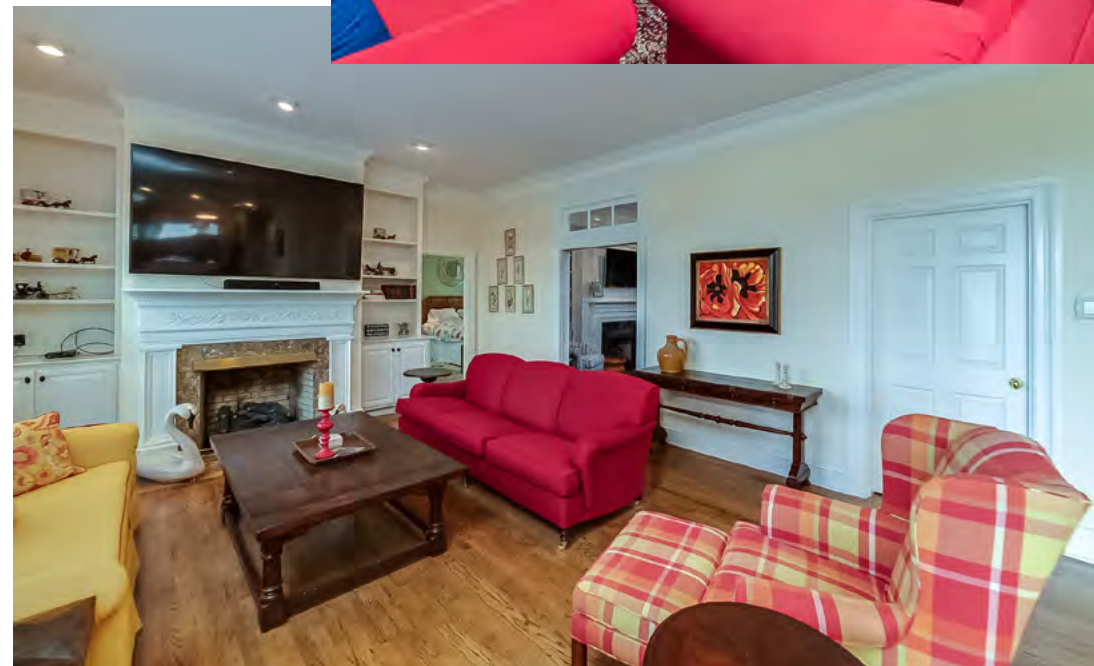
Dramatic entry with  
gorgeous archways

Formal Living Room  
with cozy fireplace



Formal Dining  
Room with  
beautiful crown  
moulding detail

Family room with  
built-in bookcases  
and fireplace



Great Room  
with fireplace





Gourmet Kitchen  
with Granite and Tile



Sunroom with  
gorgeous views and  
tons of natural light

Paneled Home Office



First Floor  
Master Bedroom







Newly renovated Master Bath  
with large, tiled shower



Second floor landing



Guest Bedrooms



Back View of Home  
and in-ground pool





PROPERTY ADDRESS: 2181 Paynes Mill Road, Versailles, KY 40383

SELLER’S DISCLOSURE OF PROPERTY CONDITION

This form applies to residential real estate sales and purchases. This form is **not required** for:

- 1. Residential purchases of new construction homes if a written warranty is provided;
- 2. Sales of real estate at auction; or
- 3. A court supervised foreclosure.

The information in this form is based upon the undersigned’s observation and knowledge about the property during the period beginning on the date of his or her purchase of the property on 08/06/2013, and ending on 02/21/2019.

(Date of purchase)

(Date of this form)

PROPERTY ADDRESS: 2181 Paynes Mill Road, Versailles, KY 40383

PURPOSE OF DISCLOSURE FORM: Completion of this form shall satisfy the requirements of KRS 324.360 that mandates the seller's disclosure of information about the property he or she is about to sell. This disclosure is based solely on the seller's observation and knowledge of the property's condition and the improvements thereon. This disclosure form shall not be a warranty by the seller or seller's real estate agent and shall not be used as a substitute for an inspection or warranty that the purchaser may wish to obtain. This form is a statement of the conditions and other information about the property known by the seller. Unless otherwise advised, the seller does not possess any expertise in construction, architectural, engineering, or any other specific areas related to the construction or condition of the improvements on the property. Other than having lived at or owned the property, the seller possesses no greater knowledge than that which could be obtained upon a careful inspection of the property by the potential buyer. Unless otherwise advised, the seller has not conducted any inspection of generally inaccessible areas such as the foundation or roof. It is not a warranty of any kind by the seller or by any real estate agent representing any seller in this transaction. It is not a substitute for any inspections. The purchaser is encouraged to obtain his or her own professional inspections.

INSTRUCTIONS TO THE SELLER: (1) Complete all numbered items. (2) Report all known conditions affecting the property. (3) Attach additional pages, if necessary, with your signature and the date and time of signing. (4) Complete this form yourself or sign the authorization at the end of this form to authorize the real estate agent to complete this form on your behalf in accordance with KRS 324.360(9). (5) If some items do not apply to your property, mark "not applicable." (6) If you do not know the answer to a question, mark "unknown."

SELLER'S DISCLOSURE: As seller, I/we disclose the following information regarding the property. This information is true and accurate to the best of my/our knowledge as of the date signed. Seller authorizes the real estate 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. The following information is not the representation of the real estate agent.


Please answer all questions. If the answer is yes, please explain. If additional space is needed, use the reverse side or make attachments.

1. HOUSE SYSTEMS	N/A	YES	NO	UNKNOWN
Any past or current problems affecting:				
(a) Plumbing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(b) Electrical system	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(c) Appliances	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(d) Floors and walls	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(e) Doors and windows	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(f) Ceiling and attic fans	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(g) Security system	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(h) Sump pump	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(i) Chimneys, fireplaces, inserts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(j) Pool, hot tub, sauna	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(k) Sprinkler system	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(l) Heating.....age	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(m) Cooling/air conditioning.....age	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(n) Water heater.....age	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Explain:

2. FOUNDATION/STRUCTURE/BASEMENT	N/A	YES	NO	UNKNOWN
(a) Any defects or problems, current or past, to the foundation or slab?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(b) Any defects or problems, current or past, to the structure or exterior veneer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explain:				
(c) Has the basement leaked at any time since you have owned or lived at the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) When was the last time the basement leaked?				
(e) Have you ever had any repairs done to the basement?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) If you have had basement leaks repaired, when was the repair performed?				

Explain:

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- (g) If the basement presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.)
- (h) Have you experienced, or are you aware of, any water or drainage problems with regard to the crawl space?


3. ROOF	N/A	YES	NO	UNKNOWN
(a) Age of the roof covering?				
(b) 1. Has the roof leaked at any time since you have owned or lived at the property?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2. When was the last time the roof leaked?				
(c) 1. Have you ever had any repairs done to the roof? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. If you have ever had the roof repaired, when was the repair performed?				
(d) 1. Have you ever had the roof replaced?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. If you have had the roof replaced, when was the replacement performed?				
(e) If the roof presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.)				
(f) 1. Have you ever had roof repairs that involved placing shingles on the roof instead of replacing the entire roof covering?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. If yes, when was the repair performed?				
Explain:				

4. LAND/DRAINAGE	N/A	YES	NO	UNKNOWN
(a) Any soil stability problems?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(b) Has the property ever had a drainage, flooding, or grading problem?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(c) Is the residence located within a Special Flood Hazard Area (SFHA) mandating the purchase of flood insurance for federally backed mortgages?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, what is the flood zone?				
(d) Is there a retention/detention basin, pond, lake, creek, spring, or water shed on or adjoining this property? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explain:				

5. BOUNDARIES	N/A	YES	NO	UNKNOWN
(a) 1. Have you ever received a staked or pinned survey of the property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are the boundaries marked in any way?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Do you know the boundaries? If yes, provide description below.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explain:				
(b) Are there any encroachments or unrecorded easements relating to the property of which you are aware? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain:				

6. WATER	N/A	YES	NO	UNKNOWN
(a) 1. Source of water supplyWood ford county				
2. Are you aware of below normal water supply or water pressure? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Is there a water purification system or softener remaining with the house?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Has your water ever been tested? If yes, provide results below.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explain:				

7. SEWER SYSTEM	N/A	YES	NO	UNKNOWN
(a) Property is serviced by:				
1. Category I. Public Municipal Treatment Facility.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Category II. Private Treatment Facility.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Category III. Subdivision Package Plant.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Category IV. Single Home Aerobic Treatment System (“Home Package Plant”)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Category V. Septic Tank with drain field, lagoon, wetland, other onsite dispersal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Category VI. Septic Tank with dispersal to an offsite, multi-property cluster treatment system.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Category VII. No Treatment/Unknown.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Name of Servicer (if known):				
(b) For properties with Category IV, V, or VI systems:				
Date of last inspection (sewer):				
Date of last inspection (septic):				
Date last cleaned (septic):				
(c) Are you aware of any problems with the sewer system?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explain:				

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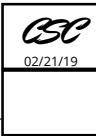
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8.	CONSTRUCTION/REMODELING	N/A	YES	NO	UNKNOWN
(a)	Have there been any additions, structural modifications, or other alterations made?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(b)	Were all necessary permits and government approvals obtained?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explain: _____					
9.	HOMEOWNER'S ASSOCIATION	N/A	YES	NO	UNKNOWN
(a)	1. Is the property subject to rules or regulations of a homeowner's association?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	2. If yes, what is the yearly assessment? \$ _____				
	3. Homeowner's Association Name: _____				
	HOA Primary Contact Name: _____				
	HOA Primary Contact Phone No. _____				
(b)	Are you aware of any condition that may result in an increase in taxes or assessments?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c)	Are any features of the property shared in common with adjoining landowners such as: walls, fences, driveways, etc?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explain: _____					
10.	MISCELLANEOUS	N/A	YES	NO	UNKNOWN
(a)	Was this house built before 1978? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(b)	Are you aware of any use of urea formaldehyde, asbestos materials, or lead based paint in or on this home?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c)	1. Are you aware of any testing for radon gas?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	2. Results, if tested _____				
(d)	Are you aware of any underground storage tanks, old septic tanks, field lines, cisterns or abandoned wells on the property?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e)	Are there any other environmental hazards known to seller? (e.g., carbon monoxide, hazardous waste, water contamination or methamphetamine contamination).....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

METHAMPHETAMINE CONTAMINATION DISCLOSURE REQUIREMENT

A property owner who chooses **NOT** to decontaminate a property used in the production of methamphetamine **MUST** make written disclosure of methamphetamine contamination pursuant to KRS 224.1-410(10) and 902 KAR 47:200. Failure to properly disclose methamphetamine contamination is a Class D Felony under KRS 224.99-010.

(f)	Are you aware of any present or past wood infestation (e.g., termites, borers, carpenter ants, fungi, etc.)?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(g)	Are you aware of any damage due to wood infestation?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(h)	1. Has the house or other improvements ever been treated for wood infestation?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	2. If yes, when, by whom, and any warranties? _____				
(i)	Are you aware of any existing or threatened legal action affecting this property?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(j)	Are there any assessments other than property assessments that apply to this property (e.g., sewer assessments)?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(k)	Are you aware of any violations of local, state, or federal laws, codes, or ordinances relating to this property?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(l)	Are you aware of any other conditions that are defective with regard to this property?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(m)	Are there any environmental hazards known to seller? E.g., methamphetamine contamination? .....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(n)	Are there any warranties to be passed on?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(o)	Has this house ever been damaged by fire or other disaster (e.g., tornado, hail, etc.)?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	If yes, please explain: _____				
(p)	Are you aware of the existence of mold or other fungi on the property?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(q)	Has this house ever had pets living in it? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If yes, Explain Dogs _____				
(r)	Is the property in a historic district?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>



Initials (Seller) \_\_\_\_\_ Date/Time \_\_\_\_\_



Initials (Buyer) \_\_\_\_\_ Date/Time \_\_\_\_\_

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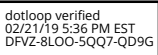
SPACE FOR ADDITIONAL INFORMATION

Seller states that the information contained in this Disclosure of Property Condition Form is complete and accurate to the best of his/her/their knowledge and belief. Seller agrees to immediately notify Buyer of any changes that may become known to Seller prior to closing by providing a written addendum hereto.

\_\_\_\_\_  
Seller Date

\_\_\_\_\_  
Seller Date

\*\*\*\*\*  
THE REAL ESTATE AGENT NAMED HERE, \_\_\_\_\_, HAS BEEN REQUESTED BY THE OWNER TO COMPLETE THIS FORM AND HAS DONE SO. SELLER HEREBY AGREES TO HOLD HARMLESS THE NAMED REAL ESTATE AGENT FOR ANY REPRESENTATIONS THAT APPEAR ON THIS FORM IN ACCORDANCE WITH KRS 324.360(9).

Seller:   \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*  
THE SELLER REFUSES TO COMPLETE THIS FORM AND ACKNOWLEDGES THAT THE REAL ESTATE AGENT SHALL SO INFORM THE BUYER.

Seller: \_\_\_\_\_ Date: \_\_\_\_\_  
Seller: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*  
THE SELLER HAS REFUSED TO COMPLETE THIS FORM AND HAS REFUSED TO ACKNOWLEDGE HIS FAILURE TO COMPLETE THE FORM

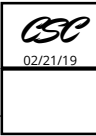
Broker/Real estate agent: \_\_\_\_\_ Date: \_\_\_\_\_

THE BUYER ACKNOWLEDGES RECEIPT OF THIS FORM.

\_\_\_\_\_  
Buyer Date

\_\_\_\_\_  
Buyer Date

THIS FORM PROVIDES THE MINIMUM DISCLOSURES REQUIRED BY LAW. SELLER MAY DISCLOSE ADDITIONAL INFORMATION NOT REQUESTED ON THIS FORM AND MAY RESPOND TO ADDITIONAL INQUIRIES OF THE BUYER.



Initials (Seller) \_\_\_\_\_ Date/Time \_\_\_\_\_



Initials (Buyer) \_\_\_\_\_ Date/Time \_\_\_\_\_

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*Biederman Real Estate will strive to represent our clients, both buyers and sellers, with the utmost responsibility. Our representatives will always work to our highest abilities to provide successful transactions for all parties.*

*We Get it Done!*

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