



(To be completed by Seller)

Sunflower Association of REALTORS®, Inc.

Date: 8-9-22

Date Purchased: _____

1. APPLIANCES		Working	Not Working	None/Not Included
Please note that personal property items listed on this form are not included unless specified in the contract.)				
a.	Built-in vacuum system			
b.	Clothes dryer			
c.	Clothes washer			
d.	Dishwasher			
e.	Disposal			
f.	Freezer			
g.	Gas grill			
h.	Built-in microwave			
i.	Built-in oven			
j.	Kitchen cook top/range			
k.	Kitchen refrigerator			
l.	Room air conditioner	# of units _____		
m.	Trash compactor			
n.	TV antenna/dish			
o.	Vent hood			
p.	Other			
Comments/explanations:				

[illegible]

— DS

Seller's initials

3. HEATING & COOLING SYSTEMS		Working	Not Working	None/Not Included
a.	Attic fan	✓		✓
b.	Central air conditioning	✓		
c.	Electronic air cleaner			✓
d.	Heat pump			✓
e.	Heating system type(s) (check all that apply): <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Propane <input type="checkbox"/> Other	✓		
f.	Humidifier			✓
g.	Propane tank # of gallons <u>unknown</u> <input checked="" type="checkbox"/> Own <input type="checkbox"/> Lease If leased, company name:	✓		
h.	Fireplace - wood # of units <u> </u>			
i.	Fireplace - gas # of units <u>1</u>	Unknown		
j.	Fireplace - gas starter # of units <u> </u>			
k.	Wood burning stove			
j.	Other			
Comments/explanations:				
4. PLUMBING / CLEAN WATER SYSTEMS		Working	Not Working	None/Not Included
a.	Plumbing pipes	✓		
b.	Plumbing fixtures	✓		
c.	Water heater type(s) (check all that apply): # of units <u>1</u> <input type="checkbox"/> Gas # of gallons <u> </u> <input checked="" type="checkbox"/> Electric # of gallons <u>40</u> <input type="checkbox"/> Propane # of gallons <u> </u> <input type="checkbox"/> Other # of gallons <u> </u>			
d.	Water purifier			✓
e.	Water softener <input type="checkbox"/> Own <input type="checkbox"/> Lease If leased, company name:			✓
f.	Jet tub			✓
g.	Hot tub			✓
h.	Pool			✓
i.	Pool equipment			✓
j.	Sauna			✓
k.	Underground sprinkler			✓
l.	Sump pump	✓		
Check all that apply below:				
m.	<input checked="" type="checkbox"/> Septic <input type="checkbox"/> Lagoon			
n.	<input type="checkbox"/> Well <input checked="" type="checkbox"/> Cistern			
o.	Other <u>Not Potable</u>			
Comments/explanations: <u>PM has been inspected by county recently</u>				

Buyer's initials

Buyer's initials

Property Address: 26769 S. Ratner

Date: _____

8. BOUNDARIES / LAND / RESTRICTIONS / COVENANTS	Yes	No	Do Not Know
a. Do you have a copy of a (check all that apply)? <input checked="" type="checkbox"/> Pin survey <input type="checkbox"/> Mortgage title inspection <u>by closing</u>			
b. Are the property survey pins visible or marked? <u>upon completion of survey.</u>	<input checked="" type="checkbox"/>		
c. Are there any encroachment and/or boundary disputes? If yes, explain below.		<input checked="" type="checkbox"/>	
d. Is there fencing on the property?		<input checked="" type="checkbox"/>	
If yes, does the fencing belong to the property?		<input checked="" type="checkbox"/>	
e. Are there property features shared in common with adjoining landowners, such as walls, fences, roads, and/or driveways?		<input checked="" type="checkbox"/>	
If yes, who has responsibility for the maintenance?			
f. Do you know of any sliding, settling, earth movement, upheaval, and/or earth stability problems that have occurred on the property? If yes, explain below.		<input checked="" type="checkbox"/>	
g. Are there any zoning, building, and/or restrictive covenant violations? If yes, explain below.		<input checked="" type="checkbox"/>	
h. Is the property subject to rules or regulations of a homeowners association?		<input checked="" type="checkbox"/>	
If yes, what are the dues? Amount _____ per _____ Contact information: _____			
i. Are you aware of any conditions that may result in an increase in association assessments? If yes, explain below.		<input checked="" type="checkbox"/>	
j. Are you aware of any pending action(s) by any governmental or quasi-governmental agencies affecting the property (i.e., street widening, zoning changes, annexation, school district changes, etc.)? If yes, explain below.		<input checked="" type="checkbox"/>	
k. Are you aware of any special assessments on this property? (See attached document required by KSA 12-601.)		<input checked="" type="checkbox"/>	
l. Are you aware of any pending bonds or assessments that apply to this property? If yes, explain below.		<input checked="" type="checkbox"/>	
m. Is the property in the city limits?		<input checked="" type="checkbox"/>	

COMMENTS:

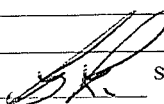
9. ENVIRONMENTAL DISCLOSURES	Yes	No	Do Not Know
a. Are you aware of the following hazardous or questionable environmental conditions on the property (check all that apply)? <input type="checkbox"/> Lead paint <input type="checkbox"/> Asbestos/urea formaldehyde foam insulation or products <input checked="" type="checkbox"/> Underground storage tanks <input type="checkbox"/> Gas, oil, and/or water wells <input type="checkbox"/> Methane gas <input type="checkbox"/> Radon gas <input type="checkbox"/> Radioactive material <input type="checkbox"/> Landfill <input type="checkbox"/> Mineshaft <input type="checkbox"/> Expansive soil <input type="checkbox"/> Toxic materials <input type="checkbox"/> Discoloration of soil or vegetation <input type="checkbox"/> Oil sheers in wet areas			
b. Are you aware of any noxious weeds or plants (i.e., poison ivy, poison oak, thistles, etc.)?			<input checked="" type="checkbox"/>
c. Are you aware of any other condition that you deem to be a hazardous and/or questionable environmental condition? If yes, please identify and explain below.			<input checked="" type="checkbox"/>
<u>Mold and mildew occur in practically all residential properties and certain types can cause health problems to certain people.</u>			
d. Has mold and/or mildew created any problems for occupants of the structure during your ownership?		<input checked="" type="checkbox"/>	
e. Have you had inspections for mold or mildew?		<input checked="" type="checkbox"/>	
f. Have you received any reports pertaining to mold and/or mildew on or within the structure?		<input checked="" type="checkbox"/>	

COMMENTS:

Underground gasoline Storage Tank with working Filling Station Pump.

10. OTHER DISCLOSURES	Yes	No	Do Not Know
a. Are you aware of any additions and/or alterations on the property without a building permit? If yes, explain below.		<input checked="" type="checkbox"/>	
b. Is the present use a non-conforming use? If yes, explain below.		<input checked="" type="checkbox"/>	
c. Do any bedrooms have non-conforming fire egress window(s)? If yes, explain below.		<input checked="" type="checkbox"/>	
d. Have you kept pets in the dwelling?		<input checked="" type="checkbox"/>	
e. Have you ever smoked on the premises during your ownership? If yes, explain below.		<input checked="" type="checkbox"/>	
f. When were the following last cleaned? Fireplace _____ Wood stove _____ Chimney <u>unknown</u> Flue _____			

COMMENTS:

	DS		
Seller's initials	JB	Seller's initials	Buyer's initials
			Buyer's initials

Property Address: 26769 S. Ratner.

Date: _____

11. DAMAGE DISCLOSURES	Yes	No	Do Not Know
a. Are there any trees and/or shrubs diseased or dead?			<input checked="" type="checkbox"/>
b. Do you have any knowledge of termites, other wood destroying insects, and/or dry rot on or affecting the property?	<input checked="" type="checkbox"/>		
c. Are you aware of any damage to the property caused by termites, other wood destroying insects, and/or dry rot?			<input checked="" type="checkbox"/>
d. Have you had termite and/or pest control reports and/or treatments for the property?	<input checked="" type="checkbox"/>		
If yes, name of company: <u>McKenzie Pest Control.</u>			
e. Is property currently under contract by a licensed pest control company for termites and/or other wood destroying insects?	<input checked="" type="checkbox"/>		
If yes, name of company: <u>McKenzie Pest Control.</u>			
f. Are you aware of any past and/or present damage due to wind, fire, flood, rodents, and/or pets?	<input checked="" type="checkbox"/>		
If yes, were repairs made? <u>yes.</u>	<input checked="" type="checkbox"/>		
If yes, name of company: <u>Trak Roofing</u> Date: <u>7/22</u>			
g. Have you had insurance claims during your ownership?	<input checked="" type="checkbox"/>		
If yes, were repairs made? If yes, explain below.			
h. Are you presently or have you ever been involved in any litigation or received benefit from any class action suit regarding materials and/or workmanship for this property? If yes, explain below.		<input checked="" type="checkbox"/>	
i. Are you aware of any other facts, conditions, and/or circumstances that may affect the value, beneficial use, and/or desirability of this property? If yes, explain below.			<input checked="" type="checkbox"/>
COMMENTS:			
<u>We are acting as Co. Executors Never resided on property</u>			
<u>answer are to best of our knowledge.</u>			

Check One:

- ☐ Seller certifies that the information herein is true and correct to the best of Seller's knowledge as of the date signed by Seller. Seller agrees to notify Buyer of any additional items that may become known to the Seller before closing. Seller further agrees to hold the Real Estate Broker(s) harmless from any liability incurred as a result of any third-party reliance on the disclosure contained herein and acknowledges receipt of a copy of this statement.
- ☒ Seller (or Seller's representative) has not occupied or personally managed this property in the past Never! years and may not be familiar with all conditions represented in this form. Seller, therefore, may be unable to make representation as to all conditions.

SELLER
Grand Rose Co. Executors

8/9/22
 Date

SELLER:

Jack Bowen
 BC06CA6C80E14B6...

Date

Buyer is urged to carefully inspect the property and, if desired, have the property inspected by a qualified inspector. Buyer understands that there are areas of the property of which Seller has no knowledge and that this disclosure statement does not encompass those areas. Buyer acknowledges that neither the Seller nor any Broker(s) or Agent(s) involved in this transaction is an expert at detecting or repairing physical defects in the property. Buyer also acknowledges that he has read and received a signed copy of this statement from Seller or Seller's Agent.

Seller does not intend this Disclosure Statement to be a warranty or guarantee of any kind. Buyer agrees to purchase the property in its present condition only, without warranties or guarantees of any kind by Seller or any Broker(s) concerning the condition or value of the property. There are no representations concerning the condition or value of the property made by Seller or Broker(s) on which I am relying except as may be fully set forth in writing and signed by them.

BUYER

BUYER

Date

Date