



## Pool/Hot Tub Disclosure Rider

*This document has legal consequences. If you do not understand it, consult your attorney. It should be attached to and is made part of DSC-8000 ("Seller's Disclosure Statement for Residential Property").*

This Disclosure Rider is made by the undersigned Seller concerning the following property (the "Property"):

2715 east hwy 32                      salem                      MO 65560                      dent                      County  
Street Address                      City                      Zip Code                      County

**Note:** Seller may not frequently use the pool/hot tub, if at all. If underutilized, it may falsely appear to be problem free. Even if heavily utilized, problems may surface that were previously not known or detectable.

**POOL:** (Indicate if any information is approximate)

(1) Age 2018                      (2) Shape round                      (3) Size (length x width) 24'

(4) Depth 52"                      (5) Volume (gallons) 14000

(6) Type ☒ Above ground (please check type) ☒ Vinyl liner ☐ Other

☐ In ground (please check type) ☐ Concrete ☐ Stainless ☐ Gunite ☐ Fiberglass ☐ Vinyl liner

☐ Other

(7) Pool Builder

(8) Type of chemical sanitizer ☒ Chlorine ☐ Copper/Silver Ionizer ☐ Bacquacil ☐ Ozonator ☐ Saltwater

☐ Other

(9) Cover ☒ Yes ☐ No If "Yes", is it ☐ Automatic ☐ Manual

(10) Pool service provider                      Last serviced                      (date)

(11) Last opened by                      Last closed by

(12) Age of heater                      Heating source

(13) Age of pump 2018

(14) Age of filter 2018                      Type of filter ☒ Sand ☐ DE ☐ Other

(15) Specify if any repairs have been performed during your ownership on the Pool or any related equipment, including but not limited to the above and any visual components, deck equipment or mechanical equipment. (Include any available repair history and attach additional pages if needed)

**Are you aware of any leak, defect or other problem or repair needed for any item above?**

Please explain if "Yes" and attach additional pages if needed:

**HOT TUB:** (Indicate if any information is approximate)

(1) Age 2006                      (2) Volume (gallons) 300                      (3) Manufacturer

(4) Construction (e.g., fiberglass, plastic, cement) fiberglass

(5) Type of chemical sanitizer? ☒ Chlorine ☐ Copper/Silver Ionizer ☐ Bacquacil ☐ Ozonator ☐ Saltwater

☐ Other

(6) Spa service provider                      Last serviced                      (date)

(7) Age of heater 2016                      Heat source electric

(8) Age of pump 2016                      (9) Age of filter 2022                      (10) Number of jets 42

(11) Specify if any repairs have been performed during your ownership on the Hot Tub or any related equipment, including but not limited to the items above (Include any available repair history and attach additional pages if needed)

**Are you aware of any leak, defect or other problem or repair needed for any item above?** ☐ Yes ☒ No

Please explain if "Yes" and attach additional pages if needed:

BUYER'S INITIALS 

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 (date)                      SELLER'S INITIALS 

MSW	JAW
07/14/23 11:07 AM CDT	07/18/23 2:18 PM CDT

 (date)  
dotloop verified dotloop verified

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