



SELLER DISCLOSURE OF PROPERTY CONDITION

(To be delivered prior to buyer making Offer to Buy Real Estate)



Property Owner(s) & Address:
Elliott, Denny & JoAnn

Purpose of Disclosure: Completion of Section I this form is required under Chapter 558A of the Iowa code which mandates the Seller(s) disclose condition and information about the property, unless exempt:

Exempt Properties: Properties exempted from the Seller's disclosure requirement include (IA Code 558A): Bare ground; property containing 5 or more dwellings units; court ordered transfers; transfers by a power of attorney; foreclosures; lenders selling foreclosed properties; fiduciaries in the course of an administration of an decedent's estate, guardianship, conservatorship, or trust; between joint tenants, or tenants in common; to or from any governmental division; quit claim deeds; intra family transfers; between divorcing spouses; commercial or agricultural property which has no dwellings.
Seller(s) certifies that the property is exempt from the requirement(s) of Iowa Code 558A because one of the above exemptions apply. If claiming an exemption, sign here and stop.

Denny Elliott
Seller

Date

JoAnn Elliott
Seller

Date

Buyer

Date

Buyer

Date

Instructions to the Seller: (1) Complete this form yourself. (2) Report known conditions materially affecting the property and utilize ordinary care in obtaining the information. (3) Provide information in good faith and make a reasonable effort to ascertain the required information. (4) Additional pages or reports may be attached. (5) If some items do not apply to your property, write "NA" (not applicable). (6) All approximations must be identified "AP". If you do not know the facts, write or check UNKNOWN. (7) Keep a copy of this statement.

Seller's Disclosure Statement: Seller discloses the following information regarding the property and certifies this information is true and accurate to the best of my/our knowledge as of the date signed. Seller authorizes 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. This statement shall not be a warranty of any kind by Seller or Seller's Agent and shall not be intended as a substitute for any inspection or warranty the purchaser may wish to obtain. The following are representations made by Seller and are not by any Agent acting on behalf of the Seller. **The Agent has no independent knowledge of the condition of the property except that which is written on this form. Seller advises Buyer to obtain independent inspections relevant to Buyer.**

Seller initials D.E.

Buyer initials _____

I. Property Conditions, Improvements and Additional Information: (Section I is Mandatory)

- Basement/Foundation:** Has there been known water or other problems? Yes ☐ No ☒ Unknown ☐ If yes, please explain: _____
- Roof:** Any known problems? Yes ☐ No ☒ Unknown ☐ Type _____
Unknown ☐ Date of repairs/replacement _____ Unknown ☐
Describe: _____
- Well and pump:** Any known problems? Yes ☐ No ☒ Unknown ☐ Type of well (depth/diameter), age and date of repair: _____ Has the water been tested? Yes ☐ No ☐ Unknown ☐
If yes, date of last report/results: _____
- Septic tanks/drain fields:** Any known problems? Yes ☐ No ☐ Unknown ☐ Location of tank S
Unknown ☐ Age 8 Unknown ☐
Has the system been pumped and inspected within the last 2 years?
Yes ☐ No ☒ UNK ☐ Date of inspection _____ UNK ☐ Date tank last cleaned/pumped _____ UNK ☐ N/A ☐

5. **Sewer:** Any known problems? Yes ☐ No ☒ Any known repairs/replacement? Yes ☐ No ☐
Date of repairs _____
6. **Heating system(s):** Any known problems? Yes ☒ No ☒ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
7. **Central Cooling system(s):** Any known problems? Yes ☒ No ☐ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
8. **Plumbing system(s):** Any known problems? Yes ☐ No ☒ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
9. **Electrical system(s):** Any known problems? Yes ☐ No ☒ Any known repairs/replacement? Yes ☐ No ☒
Date of repairs _____
10. **Pest Infestation:** (wood-destroying insects, bats, snakes, rodents, destructive/troublesome animals, etc.)
Any known problems? Yes ☐ No ☒ Unknown ☐ Date of treatment _____
Previous Infestation/Structural Damage? Yes ☐ No ☒ Date of repairs _____
11. **Asbestos:** Is asbestos present in any form in the property? Yes ☐ No ☒ Unknown ☐ If yes, explain: _____
12. **Radon:** Any known tests for the presence of radon gas? Yes ☐ No ☒ If yes, test results? _____
Date of last report _____
Seller Agrees to release any testing results. If not, Check here ☐
13. **Lead Based Paint:** Known to be present or has the property been tested for the presence of lead based paint?
Yes ☐ No ☒ Unknown ☐ If yes, what were the test results? _____
14. **Any known** encroachments, easements, "common areas" (facilities like pools, tennis courts, walkways or other areas co-owned with others), zoning matters, nonconforming uses, or a Homeowners Association which has any authority over the property? Yes ☐ No ☒ Unknown ☐
15. **Features** of the property known to be shared in common with adjoining landowners, such as walls, fences, roads and driveways whose use or maintenance responsibility may have an effect on the property?
Yes ☒ No ☐ Unknown ☐
16. **Structural Damage:** Any known structural damage? Yes ☐ No ☒ Unknown ☐
17. **Physical Problems:** Any known settling, flooding, drainage or grading problems? Yes ☐ No ☒ Unknown ☐
18. **Is the property located in a flood plain?** Yes ☐ No ☒ Unknown ☒ If yes, flood plain designation _____
19. **Do you know the zoning classification of this property?** Yes ☒ No ☐ Unknown ☐
What is the zoning? Rural Dwelling/ Building/ Land
20. **Covenants:** Is the property subject to restrictive covenants? Yes ☐ No ☒ Unknown ☐
If yes, attach a copy OR state where a true, current copy of the covenants can be obtained:
☐ On file at County Recorder's office or: _____

You **MUST** explain any "Yes" responses above (Attach additional sheets if necessary): _____

Seller initials 17. E. JF Buyer initials _____

	Included	Working?		OR N/A	Rented?			Included	Working?		OR N/A
		Yes	No		Yes	No			Yes	No	
Range/Oven	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Lawn Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Dishwasher	<input checked="" type="checkbox"/> *	<input checked="" type="checkbox"/> *	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Solar Heating System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Refrigerator	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Pool Heater, Wall liner & equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Hood/Fan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Well & Pump	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Smoke Alarm	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
TV receiving Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Septic Tank & Drain field	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Sump Pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			City Water System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Alarm System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			City Sewer System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Central AC	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Plumbing System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Window AC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Central Heating System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Central Vacuum		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Water Heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Gas Grill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Windows	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Attic Fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Fireplace/Chimney	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Intercom		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Wood Burning System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Microwave	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Furnace Humidifier	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Sauna/Hot tub	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Ceiling Fan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Locks and Keys	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Water Softener/ Conditioner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dryer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
LP Tanks		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Keys & Locks	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Storage Shed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Swing Set	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Underground "Pet fence"	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Basketball Hoop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Boat Dock	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Boat Hoist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>							
Pet Collars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	# of collars _____						
Garage door opener	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	# of remotes _____						

Seller initials DEQE Buyer initials _____

2. Has there been a property/casualty loss over \$5,000, an insurance claim over \$5,000, OR major damage to the property from fire, wind, hail, flood(s) or other conditions? Yes ☐ No ☒ Unknown ☐ If yes, has the damage been repaired/replaced? Yes ☐ No ☐

3. Are there any known current, preliminary, proposed or future assessments by any governing body or owner's association of which you have knowledge? Yes ☐ No ☒ Unknown ☐
4. Mold: Does property contain toxic mold that adversely affects the property or occupants? Yes ☐ No ☒ Unknown ☐
5. Private burial grounds: Does property contain any private burial ground? Yes ☐ No ☒ Unknown ☐
6. Neighborhood or Stigmatizing conditions or problems affecting this property? Yes ☐ No ☒ Unknown ☐
7. Energy Efficiency Testing: Has the property been tested for energy efficiency? Yes ☐ No ☒ Unknown ☐
If yes, what were the test results? _____
8. Attic Insulation: Type N/A Unknown ☒ Amount _____ Unknown ☒
9. Are you aware of any area environmental concerns? Yes ☐ No ☒ Unknown ☐ If yes, please explain: _____
10. Are you related to the listing agent? Yes ☐ No ☒ If yes, how? _____
11. Where survey of property may be found: County Recorder
12. Wind Farms: Is the subject property encumbered by certain Wind Energy rights? Yes ☐ No ☒
If yes, rights by: Lease ☐ , Easement ☐ , Other ☐ Define Other: _____
Wind Farm Company, Owner: _____

If the answer to any item is yes, please explain. Attach additional sheets, if necessary: _____

13. Repairs: Any repair(s) to property not so noted: (Date of repairs, Name of repair company if utilized.) (Note: Repairs are not normal maintenance items) (Attach additional sheets, if necessary) _____

NEEDING RETAINING WALL ON BACK PORCH NEEDS ADJUST

IV. Radon Fact Sheet & Form Acknowledgement

Seller acknowledges that Buyer be provided with and the Buyer acknowledges receipt of the "Iowa Radon Home-Buyers and Sellers Fact Sheet", prepared by the Iowa Department of Public Health.

Seller Danny Elliott Seller Glenn Elliott Date _____

Seller has owned the property since 2016 (date). Seller has indicated above the history and condition of all the items based solely on the information known or reasonably available to the Seller(s). If any changes occur in the structural/mechanical/appliance systems of this property from the date of this form to the date of closing, Seller will immediately disclose the changes to Buyer. In no event shall the parties hold Broker liable for any representations not directly made by Broker or Broker's affiliated licensees (brokers and salespersons). Seller hereby acknowledges Seller has retained a copy of this statement.

Buyer hereby acknowledges receipt of a copy of this statement. This statement is not intended to be a warranty or to substitute for any inspection the buyer(s) may wish to obtain.

Buyer _____ Buyer _____ Date _____