



SELLER'S PROPERTY CONDITION DISCLOSURE

This is a legally binding document. If not understood, consult an attorney.

SELLER'S AGENT – COMPLETE THIS SECTION ONLY!

SELLER NAME: Karl L Brown and Karina Andelin Brown ("Seller")

PROPERTY ADDRESS: 5331 Sleepy Hollow Lane, Nibley UT 84321 ("Property")

SELLER'S BROKERAGE: Engel & Völkers Logan ("Seller's Brokerage")

NOTICE

Buyer and Seller are advised that the Seller's Brokerage and its agents are trained in the marketing of real estate. Neither the Seller's Brokerage nor its agents are trained or licensed to provide Buyer or Seller with professional advice regarding the physical condition of any property or regarding legal or tax matters. The Seller's Brokerage and its agents strongly recommend that in connection with any offer to acquire the Property, Buyer retain the professional services of legal and/or tax advisors, property inspectors, surveyors, and other professionals to satisfy Buyer as to any and all aspects of the physical and legal condition of the Property.

If the Buyer's agent/brokerage are providing this document to an unrepresented Seller, the Seller acknowledges and agrees that the Buyer's agent/brokerage represent solely the interests of the Buyer. The Seller acknowledges that the Buyer's agent/brokerage have advised the Seller that the Seller is entitled to be represented by a real estate agent that will represent the Seller exclusively. The Seller has however, elected not to be represented by a real estate agent in this transaction. The Seller further acknowledges and agrees that all actions of the Buyer's agent/brokerage, even those that assist the Seller in performing or completing any of the Seller's contractual or legal obligations, are intended for the benefit of the Buyer exclusively.

INSTRUCTIONS TO SELLER

SELLER IS OBLIGATED UNDER LAW AND UNDER REPC SECTION 7(a), REGARDLESS OF OCCUPANCY, TO DISCLOSE TO BUYERS DEFECTS IN THE PROPERTY AND FACTS KNOWN TO SELLER THAT MATERIALLY AND ADVERSELY AFFECT THE USE AND VALUE OF THE PROPERTY THAT CANNOT BE DISCOVERED BY A REASONABLE INSPECTION BY AN ORDINARY PRUDENT BUYER. This disclosure form is designed to assist Seller in complying with these disclosure requirements.

Please thoroughly disclose your actual knowledge regarding the condition of the Property. The Seller's Brokerage, other real estate agents, and buyers will rely on this disclosure form.

- Complete the remainder of this form.
- Please be specific when describing any past or present problems, malfunctions or defects (location, nature of problem, etc.).
- Use an additional addendum if necessary.
- If a question does not apply to your Property, CHECK THE "N/A" BOX NEXT TO THE QUESTION.

<i>KLB</i>	<i>KAB</i>
11/17/22 4:26 PM MST	11/16/22 10:02 PM MST
dotloop verified dotloop verified	

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1. OWNERSHIP	YES	NO	N/A
A. How long has the Seller owned the Property? <u>10</u> Years and <u>4</u> Months			
B. Does the Seller currently occupy the Property?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i. If No, when did the Seller last occupy the Property? _____ (Date)			<input checked="" type="checkbox"/>
OR			
<input type="checkbox"/> The Seller never occupied the Property			<input checked="" type="checkbox"/>
ii. If the Seller has occupied the Property, approximately how long did the Seller occupy the Property? <u>10</u> Years and <u>4</u> Months			<input checked="" type="checkbox"/>
C. Is the Property or any portion of it, currently being used as a rental?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", to your knowledge does that use comply with local zoning and restrictive covenants, if any?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ii. If "No", please explain: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>
iii. During the time the Seller has owned the Property, has the Property ever been rented or leased?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
iv. If "Yes" to your best knowledge, approximately how long was the property rented or leased? <u> </u> Years and <u> </u> Months			<input checked="" type="checkbox"/>

2. ADDITIONS/REMODELS/COMPLETIONS	YES	NO	N/A
A. With the exceptions of cosmetic upgrades to the Property (such as carpet, paint, wallpaper, etc.), have you remodeled, made any room additions, made structural modifications or other alterations or improvements to the Property?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such remodel/alteration work, were any permits issued, were any permits closed, and who completed the remodel/alteration work: <div style="border: 1px solid black; padding: 5px;">We tore down the back deck and constructed a new one. I (Karl Brown) did the work. There were no permits required. We had a leaky balcony that soaked the ceiling sheetrock on the very first time it rained after we bought the house in 2021. We fixed the leak and patched the ceiling. I (Karl Brown) did the work, and no permits were required.</div>			<input type="checkbox"/>
B. To your knowledge, did any former owners make any additions, structural changes, or alterations to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature of any such remodel/alteration work, were any permits issued, were any permits closed, and who completed the remodel/alteration work: <div style="border: 1px solid black; height: 80px; width: 100%;"></div>			<input checked="" type="checkbox"/>

C. To your knowledge, did any property managers or tenants make additions, structural changes, or alterations to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature of any such remodel/alteration work, were any permits issued, were any permits closed, and who completed the remodel/alteration work:			<input checked="" type="checkbox"/>

3. USE OF THE PROPERTY	YES	NO	N/A
A. Are you aware of any past or present non-conforming or illegal uses of the Property (such as renting the Property in violation of local zoning laws, or renting the Property without a business license where such license is required)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such non-conforming or illegal use(s):			<input checked="" type="checkbox"/>
B. Are you aware of any existing or threatened legal action affecting the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such legal action:			<input checked="" type="checkbox"/>
C. Are you aware of any past or present violations of any local, state, or federal law or regulation, or of any restrictive covenants relating to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such violations:			<input checked="" type="checkbox"/>
D. To your knowledge, is any portion of the Property presently assessed, for property tax purposes, as "Greenbelt"?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

4. ROOF	YES	NO	N/A
A. Are you aware of any past or present leaks in the roof?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature and location of any past or present leaks:			<input checked="" type="checkbox"/>
B. Other than leaks, are you aware of any past or present problems or defects with the roof, for example, structural issues, dry rot, moisture and/or ice damage, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature and location of any past or present problems or defects with the roof:			<input checked="" type="checkbox"/>

C. Has all or any portion of the roof been repaired or replaced during your ownership?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, when any roof repairs/replacements took place, the nature of any roof repairs/replacements, were any permits issued, were any permits closed, and who completed the roof repairs/replacements: <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div>			<input checked="" type="checkbox"/>
D. To your knowledge, are there any written warranties presently in place for the roof?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please attach copies of any warranties in your possession.			<input checked="" type="checkbox"/>

5. NATURAL GAS, ELECTRICITY, PHONE, TV, INTERNET	YES	NO	N/A
A. Are you aware of any past or present problems with utility service to the Property or with any of the utility service systems, for example, poor phone reception, internet, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any past or present problems with utility service or utility systems: <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div>			<input checked="" type="checkbox"/>

6. CULINARY WATER	YES	NO	N/A
Culinary water service for the Property is provided by (check applicable box below):			
<input type="checkbox"/> Governmental Entity (city, town, water district, etc.).			
A. Name of Governmental Entity water service provider: _____			
B. Are you aware of any past or present problems with any water service provided to the Property by the Governmental Entity, i.e., water quality, inadequate or excessive water pressure, etc.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems: <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div>			<input checked="" type="checkbox"/>
<input type="checkbox"/> Water Company.			
A. Name of Water Company: _____			
B. Contact information for Water Company: _____			
C. Please attach a copy of any water share certificates in your possession.			
D. To your knowledge, are water share assessments paid in full?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
E. Are you aware of any past or present problems with any water service provided to the Property by the Water Company, i.e., water quality, inadequate or excessive water pressure, etc.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems: <div style="border: 1px solid black; height: 80px; margin-top: 5px;"></div>			<input checked="" type="checkbox"/>

<input checked="" type="checkbox"/> Private Water Right (Well, Spring, ect.).			
A. Is a well, spring, or other water source presently located on the Property?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
B. Do you share a well, spring, or other water source with any other person or entity? If "Yes," please attach a copy of any sharing agreement.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
C. To your knowledge, what is the State Engineer's assigned water right number for your water right? <u>25</u> - <u>8880</u>			
D. To your knowledge, is your water right represented by a contract with a water conservancy district or other district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", what is the district name and what is the number of the contract? <input type="text"/>			<input checked="" type="checkbox"/>
E. Are you aware of any past or present problems with the water source or water system (for example, water quality, inadequate water pressure, faulty pump, well issues, etc.)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems: <input type="text" value="The well pump was replaced in October 2022."/>			<input checked="" type="checkbox"/>

7. IRRIGATION/SECONDARY WATER			
Irrigation/secondary water service for the Property is provided by (check applicable box below):	YES	NO	N/A
<input type="checkbox"/> Governmental Entity (city, town, water district, etc.).			
A. Name of Governmental Entity water service provider: <input type="text"/>			
B. Are you aware of any past or present problems with any water service provided to the Property by the Governmental Entity, i.e., water quality, inadequate or excessive water pressure, etc.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems: <input type="text"/>			<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Water Company.			
A. Name of Water Company: <u>Millville Irrigation Company</u>			
B. Contact information for Water Company: <u>Mike Callahan 435-265-5691</u>			
C. Please attach a copy of any water share certificates in your possession.			
D. To your knowledge, are water share assessments paid in full?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
E. Are you aware of any past or present problems with any water service provided to the Property by the Water Company, i.e., water quality, inadequate or excessive water pressure, etc.?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems: <input type="text" value="Yes, the irrigation company guaranteed us that they would install a head gate for us. They are planning on doing that in the spring of 2023. We are allowed to pump out of the canal during our watering schedule times until the head gate is in place."/>			<input type="checkbox"/>

<input checked="" type="checkbox"/> Private Water Right (Well, Spring, ect.).			
A. Is a well, spring, or other water source presently located on the Property?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
B. Do you share a well, spring, or other water source with any other person or entity? If "Yes," please attach a copy of any sharing agreement.	<input type="checkbox"/>	<input type="checkbox"/>	
C. To your knowledge, what is the State Engineer's assigned water right number for your water right? <u>25</u> - <u>8880</u>			
D. To your knowledge, is your water right represented by a contract with a water conservancy district or other district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", what is the district name and what is the number of the contract? <input type="text"/>			<input type="checkbox"/>
E. Are you aware of any past or present problems with the water source or water system (for example, water quality, inadequate water pressure, faulty pump, well issues, etc.)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems: <input type="text"/> The well pump was replaced in October 2022.			<input type="checkbox"/>

8. SEWER/SEPTIC TANK	YES	NO	N/A
A. Sewer for the Property will be provided by (check applicable box): <input type="checkbox"/> Public Sewer <input checked="" type="checkbox"/> Septic/Holding Tank			<input type="checkbox"/>
B. If Public Sewer, who is the Public Sewer provider? <input type="text"/>			<input checked="" type="checkbox"/>
C. Are you aware of any past or present problems with the sewer or septic/holding service or components, for example, broken sewer lines, consistently slow or clogged drains, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems: <input type="text"/>			<input checked="" type="checkbox"/>
D. To your knowledge, has the sewer lateral line or septic/holding tank been repaired or replaced?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of the repair or replacement, when it was repaired or replaced, and who performed the repair or replacement: <input type="text"/>			<input checked="" type="checkbox"/>
E. If the Property is serviced by a septic/holding tank, to your knowledge, has the tank been inspected and/or pumped within the past five years?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, how many times the septic/holding tank has been inspected and/or pumped within the past five years? <u>1 time pumped</u>			<input type="checkbox"/>
ii. Please provide the name, address, and phone number of the person and/or company that last serviced the septic/holding tank. (Name) <u>Hancey's Back-Hoe Services</u> (Address) <u>1050 East. 2900 South, Millville, Utah</u> (Phone) <u>435-752-8363</u>			<input type="checkbox"/>
F. If the Property is serviced by a septic/holding tank, please describe the location of the septic tank and where it may be accessed to be inspected/pumped: <u>Front of house, north side lawn in the middle of the yard.</u>			<input type="checkbox"/>

9. HEATING/COOLING		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the heating or air-conditioning equipment, components or systems, for example, baseboard heating unit doesn't work, inadequate forced air from specific vent, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
B.	Has the evaporative cooling system been winterized? (water shut off, drained, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i.	If "Yes", explain what has been done: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
C.	Are any of heating/cooling equipment in place on the Property not owned by Seller (i.e. leased or tenant owned)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i.	If "Yes", please describe what equipment is not owned by Seller: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>

10. EQUIPMENT		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the following: air purifier, audio system, central vacuum, computer network, fire sprinkling system, automatic garage door opener, humidifier, intercom, media system, satellite dish & components, security system, smart home system, smoke alarm, tv antenna, water heater, water purifier, water softener, range hood, attic vent fans, bathroom vent fans, or propane tanks?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems, for example, audio system doesn't work, central vacuum doesn't work, etc? <div style="border: 1px solid black; padding: 5px;">Intercom is in place with all the equipment also still in place, but currently is not hooked up. Main fire alarm back up battery needs replaced. One of two on demand water heaters does not work (there are two of them, and one is a back up that is not working, but is not needed for hot water throughout the house). Currently, the house has all the hot water needed without the secondary water heater.</div>			<input type="checkbox"/>
B.	Is any of the equipment in place on the Property listed in Section 10 (A) not owned by Seller (i.e. leased or tenant owned) or being financed by Seller?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe which equipment is not owned or being financed by Seller: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input type="checkbox"/>

11. APPLIANCES		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the following: dishwasher, disposal, dryer, freezer, indoor grill, microwave, oven, range, refrigerator, trash compactor, ice machine, or washer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems, for example, disposal doesn't work, etc.? <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
B.	Are any of the appliances in place on the Property listed in Section 11 (A) not owned by Seller (i.e. leased or tenant owned)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe which appliances are not owned by Seller: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>

12. FIREPLACES/STOVES		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the following: fireplace insert, gas fireplace, gas fireplace starter, woodburning fireplace, potbelly/wood stove, or pellet stove?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems, for example, gas fireplace starter doesn't work, damper not working, etc.? <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
B.	Are any of the fireplaces/stoves in place on the Property listed in Section 12 (A) not owned by Seller (i.e. leased or tenant owned)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe which equipment is not owned by Seller: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>

13. INTERIOR FEATURES		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the interior features, including but not limited to, ceiling fans, dumb waiter, elevator, flooring (stone, marble, hardwood, etc.), jetted bathtub(s), indoor pool, spa/hot tub, sauna, skylights, steam room/shower, or wet bar?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such problems, for example, jetted bathtub doesn't work, skylights leak, etc.? <div style="border: 1px solid black; padding: 5px;">Water temperature adjustor for the master bathroom walk in shower does not work, temperature is fixed and can be adjusted by removing the knob and manually turning the temperature valve.</div>			<input type="checkbox"/>
B.	Are any of the interior features in place on the Property not owned by Seller (i.e. leased or tenant owned)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe which interior features are not owned by Seller: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>

14. EXTERIOR & EXTERIOR FEATURES		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the exterior features, including but not limited to, gas barbeque, propane tank(s), heated driveway or walkway, lawn sprinkler system, pool, spa/hot tub, roof heat tape, or rain gutters?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such problems, for example, spa/hot tub leaks, heated driveway only works on portion of driveway, etc.: <div style="border: 1px solid black; padding: 5px;">Lawn sprinkler system is in place and does work, but is in disrepair with many sprinklers missing or broken and it gets clogged easily with irrigation water. There is a valve that switches the system to well water and it could be used with well water.</div>			<input type="checkbox"/>
B.	With the exception of regular maintenance of the exterior surfaces of the Property (painting, staining, etc.), are you aware of any past or present problems with any portion of the exterior, for example, moisture damage behind stucco, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes" please describe, to your knowledge, the nature of any such problems: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>

C. Has the outdoor sprinkler system been winterized? (water shut off, pipes drained, etc.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe what has been done: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
D. Are any of the exterior features not owned by Seller (i.e. leased or tenant owned)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe which exterior features are not owned by Seller: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>

15. TERMITES/DRY ROT/PESTS	YES	NO	N/A
A. Are you aware of any past or present problems with termites, dry rot, rodents, or pests on or affecting the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature and location of any such problems: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
B. Are you aware of any damage to the Property caused by termites, dry rot, rodents, or pests?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes" please describe, to your knowledge, the nature and location of any such damage, and any efforts to mitigate such damage: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
C. To your knowledge, are there any written warranties or other termite or pest control coverage presently in place for the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes" please attach any copies of such warranties in your possession.			<input checked="" type="checkbox"/>

16. STRUCTURAL ITEMS & SOILS	YES	NO	N/A
A. Are you aware of any settlement or heaving of soil on the Property or on any adjoining Property (collapsible or expansive soils, poorly compacted fill)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature and location of any settlement or heaving of soil: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
B. Are you aware of any sliding or earth movement on the Property or on any adjoining Property (landslides, falling rocks, debris or mud flows)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature and location of any such shifting, problems, etc: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
C. Are you aware of any past or present movement, shifting, deterioration, or other problems with the walls or foundation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature and location of any such shifting, problems, etc: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>

To your knowledge, does any portion of the Property contain any subsurface debris that has been buried, covered or abandoned, including, but not limited to, any discarded or abandoned construction materials, concrete, footings or foundations, underground tanks, trash, etc? D.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	i. If "Yes", please describe the nature and location of such subsurface debris: _____		<input checked="" type="checkbox"/>
E. Please describe, to your knowledge, any action taken to repair or mitigate any of the issues described in 16A through 16D: _____			<input checked="" type="checkbox"/>
F. Are you aware of any geologic, soils, or engineering reports that have been prepared for the Property? i. If "Yes", please attach a copy of any such reports in your possession.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
			<input checked="" type="checkbox"/>

17. BOUNDARIES & EASEMENTS			YES	NO	N/A
A. Do you know if anything on your Property (such as a fence, deck, or any other improvement) encroaches (extends) onto any adjoining property? i. If "Yes", please describe, to your knowledge, the nature and approximate location of any such encroachment: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
			<input checked="" type="checkbox"/>		
B. Do you know if anything on any adjoining property (such as a fence, deck, or any other improvements) encroaches onto your Property? i. If "Yes", please describe, to your knowledge, the nature and approximate location of any such encroachment: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
			<input checked="" type="checkbox"/>		
C. Are you aware of any boundary disputes or conflicts involving your Property and any adjoining property or properties? i. If "Yes" please describe, to your knowledge, the nature and location of any such boundary disputes or conflicts: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
			<input checked="" type="checkbox"/>		
D. Are you aware of any unrecorded easements affecting the Property? i. If "Yes" please describe, to your knowledge, the nature and approximate location of any such easement: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
			<input checked="" type="checkbox"/>		

18. ELECTRICAL			YES	NO	N/A
A. Are you aware of any past or present problems with any electrical switches, outlets, and/or any portion of the electrical system? i. If "Yes", please describe, to your knowledge, the nature of any such problems: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
			<input checked="" type="checkbox"/>		

19. MOLD		YES	NO	N/A
A.	With the exception of any occasional accumulation of mold and mildew in bathroom shower, tub and sink areas, are you aware of any past or present mold on walls, ceilings, floors, or any other interior portion of the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such mold: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
B.	Have you had the Property inspected for the existence of any mold?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the results of the inspection, and attach copies of any inspection reports in your possession: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>

20. OTHER MOISTURE CONDITIONS		YES	NO	N/A
A.	In reference to the basement and/or crawlspace, are you aware of any past or present water leakage, water accumulation or dampness?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any past or present water leakage, water accumulation or dampness: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
B.	Are you aware of any past or present water or moisture-related damage caused by: flooding; lot drainage; moisture seepage or condensation; sewer overflow/backup; leaking or broken pipes, pipe fittings, or plumbing fixtures; or leaking appliances, fixtures, or equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any such water or moisture-related damage: <div style="border: 1px solid black; padding: 2px;">The back patio concrete is cracked due to water damage (likely multifactorial). There is a leaky pipe from an upstairs bathtub drain - no water related damage has occurred that we are aware of.</div>			<input checked="" type="checkbox"/>
C.	To your knowledge, has the main water line been repaired or replaced?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of the repair or replacement, when the main water line was repaired or replaced, and who performed the repair or replacement: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
D.	Please describe, to your knowledge, any attempts to repair any moisture-related damage and/or to prevent any recurrence of water and moisture-related problems on the Property: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>
E.	Are you aware of any wetlands located on the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any wetlands on the Property: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input checked="" type="checkbox"/>

F. Are you aware of any attempts to mitigate any wetland issues through the Army Corps of Engineers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>
G. To your knowledge, is the Property located in a floodplain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
H. To your knowledge, is any portion of the Property subject to standing water or flooding?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>

21. HAZARDOUS CONDITIONS	YES	NO	N/A
A. With the exception of methamphetamines (see Section 21.C below), are you aware of any past or present hazardous conditions, substances, or materials on the Property, such as asbestos, lead-based paint, methane gas, radon gas, radioactive or toxic materials, or ureaformaldehyde foam insulation, buried storage tanks and lines?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such hazardous conditions: <div style="border: 1px solid black; padding: 2px;">We think we remember being told there was radon in the basement (theater room) when we bought the house, but we are uncertain. We have not tested it since that time.</div>			<input checked="" type="checkbox"/>
B. Please describe, to your knowledge, any attempts to mitigate any such hazardous condition(s): <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>
C. To your knowledge, is the Property currently contaminated from the use, storing, or manufacturing of methamphetamines?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

22. HOMEOWNERS ASSOCIATION	YES	NO	N/A
A. Is the Property part of a condominium or other homeowner's association (HOA)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", to your knowledge, is the Property part of multiple HOAs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. Please describe the HOA payment amount, frequency, and what utilities and/or services are included: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>
C. Does the HOA(s) levy dues or assessments for maintenance of common areas and/or other common expenses?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D. Some HOAs, special improvement districts and/or other specially planned areas, under their governing documents, charge a fee that is due to such entity as a result of the transfer of title to the Property from Seller to Buyer. Such change of ownership fees are sometimes referred to as transfer fees, community enhancement fees, HOA reinvestment fees, etc. Regardless of what the change of ownership fee is titled, to your knowledge, does the HOA charge such a fee?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the HOA change of ownership amount: _____			<input checked="" type="checkbox"/>
E. For questions regarding the HOA(s), including past, present or future dues or assessments, or regarding financial statements, bylaws, HOA meetings and minutes, information may be obtained from the following: (Name) _____ (Phone) _____ (Website) _____ (Email) _____			<input checked="" type="checkbox"/>
F. Are you aware if the HOA(s) has been involved any past or ongoing lawsuits or litigation?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. If "Yes", please describe, to your knowledge, any information regarding the timing and nature of the lawsuit(s): <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<input checked="" type="checkbox"/>

23. PUBLIC INFRASTRUCTURE DISTRICT				YES	NO	N/A
A. Are you aware if the Property is located within a public infrastructure district (PID)?				<input type="checkbox"/>	<input checked="" type="checkbox"/>	
B. Are you aware of any ongoing property tax obligations because of the PID's issuance of a limited tax bond?				<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature and amount owed on a annual basis:						<input checked="" type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>						

24. UNPAID ASSESSMENTS				YES	NO	N/A
A. Are you aware of any HOA, municipal, special improvement district, PID or other assessments that are presently owing against the Property?				<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature and amount owed:						<input checked="" type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>						
B. Are you aware of any potential HOA, municipal, special improvement district or PID assessments that may be pending approval?				<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the pending special assessments that have not yet been approved:						<input checked="" type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>						
C. Are you aware of any HOA, municipal, special improvement district or PID assessments that have been approved but not yet levied against the Property?				<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature and amount of any such approved, but not yet levied, assessments:						<input checked="" type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>						

25. INSURANCE				YES	NO	N/A
A. During your ownership of the Property, have you filed any insurance claims based on loss or damage to the Property? Buyer is advised to seek a comprehensive loss underwriting exchange (CLUE) report regarding any insurance claims made on the Property.				<input checked="" type="checkbox"/>	<input type="checkbox"/>	
B. If the Property is part of a condominium or other homeowner's association, do you know if the HOA has filed any insurance claims for loss or damage to any portion of the development?				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature of any such claims:						<input checked="" type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>						

26. ENERGY EFFICIENCY				YES	NO	N/A
A. During your ownership of the Property, have you had an independent energy efficiency assessment of the Property conducted by an individual or entity that specializes in such assessments?				<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please attach a copy of the assessment if available.						<input checked="" type="checkbox"/>

B. During your ownership of the Property have any energy efficiency improvements (such as added insulation, sealing air leaks, efficient lighting, efficient windows, or efficient heating or cooling systems) been made to the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the general nature of the improvements: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			<input checked="" type="checkbox"/>

27. SOLAR PANEL SYSTEM	YES	NO	N/A
A. To your knowledge, does the Property have a Solar Panel System ("System") that supplies power to the Property? If "Yes", please respond to Sections 27 (B) through (H) below as applicable.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
B. To your knowledge, when was the System installed? _____ (year)			<input checked="" type="checkbox"/>
C. The contact information for the solar company is as follows: (Name) _____ (Address) _____ (Phone) _____ (Website) _____			<input checked="" type="checkbox"/>
D. The financial status of the System is (check applicable box): <input type="checkbox"/> Owned free and clear <input type="checkbox"/> Subject to an existing lease agreement ("Lease") <input type="checkbox"/> Subject to a power purchase agreement ("PPA") <input type="checkbox"/> Financed by an unpaid load ("System Financing")			<input checked="" type="checkbox"/>
E. If subject to a Lease, PPA, or System Financing please attach a copy of the applicable documentation.			<input checked="" type="checkbox"/>
F. If subject to a Lease, PPA or System Financing, the contact information for the company servicing the financing is as follows: (Name) _____ (Phone) _____ (Address) _____			<input checked="" type="checkbox"/>
G. Are you aware of any past or present problems with the System and its individual components (including, but not limited to, solar panels, inverters, charge controllers, batteries, battery charge controller, backup generator, solar array disconnect, power meter, and/or power converter and cables)? i. If "Yes," please describe the nature of the problem(s), including when you experienced such problem, the component(s) affected, any information you received, attempt(s) made to remediate the problem, and whether, to your knowledge, the problem has been resolved: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
H. Please provide any information in your possession on any maintenance or repairs that have been completed on the System, including dates, the company performing any services, any components that have been replaced, and a brief description of any work performed. <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>			<input checked="" type="checkbox"/>

28. ALTERNATE/ADDITIONAL POWER SYSTEMS (OTHER THAN SOLAR)	YES	NO	N/A
A. To your knowledge, does the Property have an alternate/additional power system (other than solar) that supplies power to the Property or power company such as wind or generator?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", what type(s) of alternate power source(s) do you have? <input type="checkbox"/> Wind <input type="checkbox"/> Generator <input type="checkbox"/> Other _____			<input checked="" type="checkbox"/>

<p>B. Are you aware of any past or present problems with the alternate/additional power system(s) and its individual components? If "Yes," please describe the nature of the problem(s), including when you experienced such problem, the component(s) affected, any information you received, attempt(s) made to remediate the problem, and whether, to your knowledge, the problem has been resolved:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<p>C. Is the equipment for the alternate/additional power system(s) leased or financed?</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>D. For questions regarding the alternate/additional power system(s), information may be obtained from the following: (Name) _____ (Phone) _____ (Address) _____</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>E. A copy of the documentation for the alternate/additional power system lease, power purchase agreement, or financing, if applicable, is attached.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

29. ADDITIONAL DISCLOSURES

A. Please disclose any additional material information that you are aware of and/or please clarify any disclosures made above:

SQUARE FOOTAGE/ACREAGE

The source(s) of the square footage figures used in marketing of the house and related improvements at the Property is/are the following (check applicable box):

- County Records
- Appraisal
- Building Plans
- Other (explain) _____.

County Records are not intended to be used by Buyer as the primary source of information regarding the square footage of the house and related improvements. Seller represents that any figures provided by Seller in any documents regarding the square footage or acreage of the Property are not based on any personal measurement by Seller. If the square footage or acreage of the Property is of material concern to Buyer, Buyer is advised to verify the square footage or acreage through any independent sources or means deemed appropriate by Buyer. BUYER IS ADVISED NOT TO RELY ON SELLER, THE SELLER'S BROKERAGE, OR ANY AGENTS OF THE SELLER'S BROKERAGE FOR A DETERMINATION REGARDING THE SQUARE FOOTAGE OR ACREAGE OF THE PROPERTY.

FOREIGN INVESTMENT IN REAL PROPERTY TAX ACT ("FIRPTA")

The sale or other disposition of a U.S. real property interest by a foreign person is subject to income tax withholding under FIRPTA. A "foreign person" may include a non-resident alien individual, foreign corporation, foreign partnership, foreign trust and foreign estate. If FIRPTA applies to you as the Seller of the Property described in this disclosure form, the Buyer or other qualified substitute may be legally required to withhold a substantial percentage of the total purchase price for the Property, as required by law, at closing and remit that amount to the IRS. Seller warrants and represents to Buyer that Seller IS NOT a "foreign person" as defined in the Internal Revenue Code and its associated regulations, unless checked below.

Seller warrants and represents to Buyer that Seller IS a "foreign person" as defined in the Internal Revenue Code and its associated regulations.

VERIFICATION BY SELLER

Seller verifies that Seller has prepared this disclosure form and that the information contained herein is accurate and complete to the best of Seller's actual knowledge as of the date signed by Seller below. SELLER UNDERSTANDS AND AGREES THAT SELLER WILL UPDATE THIS DISCLOSURE FORM IF ANY INFORMATION CONTAINED HEREIN BECOMES INACCURATE OR INCORRECT IN ANY WAY. Seller authorizes the Seller's Brokerage to provide copies of this disclosure form to prospective buyers, and to real estate brokers and agents. This disclosure form is not a warranty of any kind. If Buyer and Seller enter into a sales contract for the Property, and such sales contract includes, excludes, or warrants the condition of any item referenced herein, then to the extent there is a conflict between the sales contract and any representations contained herein, the terms of the sales contract shall control.

Seller: Karl L Brown Date: _____ Seller: Karina Andelin Brown Date: _____

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ACKNOWLEDGEMENT OF RECEIPT BY BUYER

Buyer's signature below acknowledges Buyer's receipt of a copy of this disclosure form.

BUYER IS ADVISED NOT TO RELY ON THE SELLER'S BROKERAGE, OR ON ANY AGENTS OF THE SELLER'S BROKERAGE, FOR A DETERMINATION REGARDING THE PHYSICAL OR LEGAL CONDITION OF THE PROPERTY, including, but not limited to, legal uses of the Property, the condition of any appliances, heating/cooling equipment and systems, plumbing and electrical fixtures and equipment, moisture or other problems in the roof or foundation, sewer problems, the availability and location of utilities, the exact square footage or acreage of the Property, or the location of property lines.

Buyer: _____ Date: _____ Buyer: _____ Date: _____

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