



SELLER'S DISCLOSURE AND CONDITION OF PROPERTY ADDENDUM (Residential)

1 SELLER: Joseph R Klobasa
2 PROPERTY: 1426 Colorado St. Manhattan KS, 66502

1. SELLER'S INSTRUCTIONS

SELLER agrees to disclose to BUYER all material defects, conditions and facts, past and present, KNOWN TO SELLER which may materially affect the value of the Property. This disclosure statement is designed to assist SELLER in making these disclosures. Licensee(s), prospective buyers and buyers will rely on this information.

2. NOTICE TO BUYER

This is a disclosure of SELLER'S knowledge of the Property as of the date signed by SELLER and is not a substitute for any inspections or warranties. It is not a warranty of any kind by SELLER or a warranty or representation by the Broker(s) or their licensees.

3. OCCUPANCY

Approximate age of Property? 75 yrs How long have you owned? 4 years 10 months
Does SELLER currently occupy the Property? Yes [X] No []
If not, how long has it been since SELLER occupied the Property? 1 month years/months.

4. LAND (SOILS, DRAINAGE AND BOUNDARIES). (IF RURAL OR VACANT LAND, ATTACH SELLER'S LAND DISCLOSURE ALSO.)

- (a) Fill or expansive soil on the Property? Yes [] No [X]
(b) Sliding, settling, earth movement, upheaval or earth stability problems on the Property? Yes [] No [X]
(c) Is the Property in a mapped Fort Riley noise zone? Yes [] No [X]
(d) Is the Property in a mapped airport overlay district zone? Yes [] No [X]
(e) In which Unified School District (USD) is the Property located?
(f) Is the Property or any portion thereof located in a flood zone or wetlands area, as designated by FEMA or any federal, state or local governmental agency? Yes [] No [X]
(g) Do you pay flood insurance premiums? Yes [] No [X]
(h) If yes, is it required by your current mortgage lender? Yes [] No [X]
(i) Drainage or flood problems on the Property or adjacent properties? Yes [] No [X]
(j) Are the boundaries of the Property marked in any way? Yes [] No [X]
(k) Do you have a Certificate of Survey of the Property? If yes, attach copy Yes [] No [X]
(l) Encroachments, boundary line disputes, or non-utility easements affecting the Property? Yes [] No [X]
(m) Any fencing on the Property? Yes [X] No []
(n) If yes, does fencing belong to the Property? Yes [X] No []
(o) Diseased, dead, or damaged trees or shrubs on the Property? Yes [] No [X]
(p) Gas/oil wells, lines or storage facilities on Property or adjacent property? Yes [] No [X]

If any of the answers in this section are "Yes", explain in detail:
m. fencing surrounding the back yard.
n. east chain link and parking east wooden

46 **5. ROOF:**

47 (a) Approximate Age: <u>10 years</u> years Unknown

48 Type: gable

49 (b) Any problems with the roof, flashing or rain gutters? Yes No

50 If so, what was the date of the occurrence? _____

51 (c) Any repairs to the roof, flashing or rain gutters? Yes No

52 Date of and company performing such repairs _____ / _____

53 (d) Any roof replacement? Yes No

54 If yes, was it: Complete or Partial

55 (e) What is the number of layers currently in place: _____ layers, or Unknown.

56 **If any of the answers in this section are "Yes", explain in detail below: (All available warranties and**
57 **other documentation are attached)** _____

58 _____

59 _____

60 _____

61 _____

62 **6. INFESTATION – ARE YOU AWARE OF:**

63 (a) Any termites, wood destroying insects, or **other** pests on the Property? Yes No

64 (b) Any damage to the property by termites, wood destroying insects or **other**
65 pests? Yes No

66 (c) Any termite, wood destroying insects or other pest control treatments on the
67 Property in the last five years? Yes No

68 If yes, list company, *when and where* treated _____

69 (d) Any warranty, bait stations or other treatment coverage by a licensed pest
70 control company on the Property? Yes No

71 If yes, the annual cost of service renewal is \$ _____ and the time remaining on the
72 service contract is _____. **(Check One)**

73 The treatment system stays with the Property, or the treatment system is subject to
74 removal by the treatment company if annual service fee is not paid.

75 **If any of the answers in this section are "Yes", explain in detail (attach any receipts):** _____

76 NA

77 _____

78 _____

79 _____

80 **7. STRUCTURAL, BASEMENT AND CRAWL SPACE ITEMS – ARE YOU AWARE OF:**

81 (a) Movement, shifting, deterioration, or other problems with walls, foundations,
82 crawl space or slab? Yes No

83 (b) Any cracks or flaws in the walls, ceilings, foundations, concrete slab,
84 crawl space, basement floor or garage? Yes No

85 (c) Any corrective action taken including, but not limited to piercing or bracing? Yes No

86 (d) Any water leakage or dampness in the house, crawl space or basement? Yes No

87 (e) Any dry rot, wood rot or similar conditions on the wood of the Property? Yes No

88 (f) Any problems with driveways, patios, decks, fences or retaining walls on
89 the Property? Yes No

- 90 (g) Any problems with fireplace and/or chimney? Yes No
- 91 Date of last cleaning? _____
- 92 (h) Does the Property have a sump pump? Yes No
- 93 (i) Any repairs or other attempts to control the cause or effect of any problem
- 94 described above? Yes No

95 **If any of the answers in this section are "Yes", explain in detail.** When describing repairs or control
 96 efforts, describe the location, extent, date, and name of the person who did the repair or control effort and
 97 attach, if available, any inspection reports, estimates or receipts: _____

98 b. cracks in the basement foundation in the laundry room, caulked for water.
 99 e. small dry rot on the backyard window sill.
 100 _____
 101 _____

102 **8. ADDITIONS AND/OR REMODELING:**

- 103 (a) Are you aware of any additions, structural changes, or other material
- 104 alterations to the Property? Yes No

105 **If "Yes", explain:** _____
 106 _____

- 107 (b) If "Yes", were all necessary permits and approvals obtained, and was all
- 108 work in compliance with building codes? N/A Yes No

109 **If "No", explain:** _____
 110 _____

112 **9. PLUMBING RELATED ITEMS:**

- 113 (a) What is the drinking water source? Public Private Well Cistern
- 114 If well water, state type _____ depth _____
- 115 diameter _____ age _____
- 116 (b) If the drinking water source is a well, when was the water last tested and what
- 117 was the result of the test? _____
- 118 (c) Is there a water softener on the Property? Yes No
- 119 (If so, is it: Leased Owned?)
- 120 (d) Is there a water purifier system? Yes No
- 121 (If so, is it: Leased Owned?)
- 122 (e) What type of sewage system serves the Property? Public Sewer, or Private Sewer, or
- 123 Septic System, or Cesspool, or Lagoon, or Other _____
- 124 (f) If there is a septic system, is there a sewage pump on the septic system? Yes No
- 125 (g) Is there a grinder pump system? Yes No
- 126 (h) If there is a privately owned system, when was the septic tank, cesspool, or sewage system
- 127 last serviced? _____ By whom? _____
- 128 (i) Is there a sprinkler system? Yes No
- 129 Does sprinkler system cover full yard? N/A Yes No
- 130 If "No", explain: _____
- 131 (j) Is there a back flow prevention device on the lawn sprinkling system, sewer
- 132 or pool? Yes No
- 133 Are city/county compliance inspections required? Yes No
- 134 If yes, date of last inspection _____

- 135 (k) Are you aware of any leaks, backups, or other problems relating to any of the plumbing,
- 136 water, and sewage related systems? Yes No
- 137 (l) Type of plumbing material currently used in the Property:
- 138 Copper Galvanized Other _____
- 139 The location of the main water shut-off is basement laundry room behind water heater
- 140 (m) The location of the sewer line clean out trap is: back yard north east corner of the home

141 **If your answer to any of the questions in this section is "Yes", explain in detail and provide**

142 **available documentation:** _____

143 NA

144 _____

145 _____

146 _____

147 **10. HEATING AND AIR CONDITIONING:**

- 148 (a) Does the Property have air conditioning? Yes No
- 149 Central Electric Central Gas Heat Pump Window Unit(s)
- 150

Unit	Age of Unit	Leased	Owned	Location	Last Date Serviced/By Whom?
1.	28 yrs		owned	west sied	Serviced Summer of 2019
2.					
- 151
- 152
- 153 (b) Does the Property have heating systems? Yes No
- 154 Electric Fuel Oil Natural Gas Heat Pump Propane Fuel Tank Other _____
- 155

Unit	Age of Unit	Leased	Owned	Location	Last Date Serviced/By Whom?
1.	21 years		Owned	Basement	Serviced Summer 2019
2.					
- 156
- 157
- 158 (c) Are there rooms without heat or air conditioning? Yes No
- 159 If yes, which room(s)? _____
- 160 (d) Does the Property have a water heater? Yes No
- 161 Electric Gas Solar
- 162

Unit	Age of Unit	Capacity (gallons)	Location	Last Date Serviced/By Whom?
1.	2006	40 gallon	basement	Serviced Summer 2019
2.				
- 163
- 164
- 165 (e) Are you aware of any problems regarding these items? Yes No

166 **If your answer to question 10(c) and/or 10(e) in this section is "Yes", explain in detail:** _____

167 NA

168 _____

169 _____

170 _____

171 **11. ELECTRICAL SYSTEM:**

- 172 (a) Type of material used: Copper Aluminum Unknown
- 173 (b) Type of electrical panel(s): Breaker Fuse
- 174 Location of electrical panel(s): north wall of outside storage room.
- 175 Size of electrical panel (total amps), if known: _____
- 176 (c) Are you aware of any problem with the electrical system? Yes No

177 **If "Yes", explain in detail:** _____

178 _____

179 _____

180

181

182 **12. HAZARDOUS CONDITIONS:**

- 183 (a) Underground tanks on the Property? Yes No
- 184 (b) Landfill on the Property? Yes No
- 185 (c) Toxic substances on the Property, (e.g. tires, batteries, etc.)? Yes No
- 186 (d) Has the Property been tested for any of the above listed items? Yes No
- 187 (e) Have you had the property tested for radon? Yes No
- 188 (f) Have you had the property tested for mold? Yes No
- 189 (g) Are you aware of any other environmental issues? Yes No
- 190 (h) Are you aware of any methamphetamine or controlled substances ever being
- 191 used or manufactured on the Property? Yes No

192 **If your answer to any of the questions in this section is "Yes", explain in detail and attach test**
193 **results:** NA

194

195

196

197 **13. NEIGHBORHOOD INFORMATION AND HOMEOWNERS ASSOCIATIONS:**

- 198 (a) Are you aware of any current/pending bonds, assessments, or special taxes
- 199 that apply to Property? Yes No
- 200 Amount: \$ _____
- 201 (b) Are you aware or have you received any notice of any condition or proposed
- 202 change in your neighborhood or surrounding area? Yes No
- 203 (c) Is the Property subject to covenants, conditions, and restrictions of a
- 204 Homeowner's Association or subdivision restrictions? Yes No
- 205 (d) Are you aware of any violations of such covenants and restrictions? Yes No
- 206 (e) Does the Homeowner's Association impose its own transfer fee when this
- 207 Property is sold? Yes No
- 208 If "yes", what is the amount? \$ _____ .
- 209 (f) Homeowners Association dues in the amount of \$ NA are payable yearly quarterly
- 210 monthly. Homeowners Association contact name, phone number, website, or email address:
- 211 _____
- 212 (g) Are you aware of any defect, damage, proposed change or problem with any
- 213 common elements or common areas? Yes No
- 214 (h) Are you aware of any condition or claim which may result in any change to
- 215 assessments or fees? Yes No
- 216 (i) Are streets privately owned? Yes No
- 217 (j) Is Property in a historic, conservation or special review district that
- 218 requires any alterations or improvements to Property be approved by a
- 219 board or commission? Yes No
- 220 (k) Is Property subject to tax abatement? Yes No
- 221 (l) Is Property subject to a right of first refusal? Yes No

222 **If the answer to any of the above questions is "Yes" except (c), explain in detail, including**
223 **amounts, if applicable:** _____

224 NA

225

226

227 **14. OTHER MATTERS:**

- 228 (a) Are you aware of any of the following?
- 229 Party walls Common areas Easement Driveways. Yes No
- 230 (b) Are you aware of any fire damage to the Property? Yes No
- 231 (c) Are there any liens, other than mortgage(s) currently on the Property? Yes No
- 232 (d) Are there any violations of laws or regulations affecting the Property? Yes No
- 233 (e) Are you aware of any other conditions that may materially and adversely
- 234 affect the value or desirability of the Property? Yes No
- 235 (f) Are you aware of any other condition, including but not limited to financial,
- 236 that may prevent you from completing the sale of the Property? Yes No
- 237 (g) Have you had a pet in the Property? Yes No
- 238 (h) Are you aware of any general stains or pet stains to the carpet, the flooring
- 239 or sub-flooring? Yes No
- 240 (i) Do you have keys for all exterior doors, including garage doors in the
- 241 home? Yes No
- 242 List locks without keys _____
- 243 (j) Are you aware of any violation of zoning, setbacks or restrictions, or
- 244 non-conforming uses? Yes No
- 245 (k) Are you aware of any unrecorded interests affecting the Property? Yes No
- 246 (l) Are you aware of anything that would interfere with giving clear title to
- 247 the BUYER? Yes No
- 248 (m) Are you aware of any existing or threatened condemnation or other legal
- 249 action pertaining to the Property? Yes No
- 250 (n) Are you aware of any litigation or settlement of litigation pertaining to this
- 251 Property? Yes No
- 252 (o) Have you added any insulation since you have owned the Property? Yes No
- 253 (p) Have you replaced any appliances that remain with the Property in the
- 254 past five years? Yes No
- 255 (q) Are there any transferable warranties on the Property or any of its
- 256 components? Yes No
- 257 (r) Have you made any insurance or other claims pertaining to this Property
- 258 in the past 5 years? Yes No
- 259 (s) If yes, were repairs from claim(s) completed? Yes No
- 260 Are you aware of any use of synthetic stucco in the Property? Yes No

261 **If any of the answers in this section are "Yes", (except i), explain in detail:** _____

262 g. dog lived at the property p. clothes washer and dryer

263 r. dog bite insurance claim

264 **15. UTILITIES:** Identify the name and phone number for utilities listed below.

265 Electric Company Name - Evergy Phone 1-800-544-4857

266 Gas Company Name - KS Gas Phone 1-800-794-4780

267 Water Company Name - City of Manhattan Phone 785-587-2480

268 **16. PERSONAL PROPERTY, EQUIPMENT AND APPLIANCES**

269 In consideration of Buyer completing the purchase of the property set forth in #1 above and for no
270 additional value, it is agreed that the following items located in the subject property shall transfer to
271 Buyer at closing:

272
273 **Check if staying:**

- | | | | |
|-----|---|--|---|
| 275 | <input type="checkbox"/> Air Conditioning Window Units, # ___ | <input type="checkbox"/> Propane Tank | <input type="checkbox"/> Stove Vent Hood/Downdraft |
| 276 | <input type="checkbox"/> Central vac and attachments | <input type="checkbox"/> Own ___ Lease | <input type="checkbox"/> Sump Pump |
| 277 | <input checked="" type="checkbox"/> Dishwasher | <input checked="" type="checkbox"/> Refrigerator | <input type="checkbox"/> Swimming Pool & Equipment |
| 278 | <input type="checkbox"/> Fireplace insert | Location of Refrigerator <u>kitchen</u> | <input type="checkbox"/> TV Antenna/Receiver/Satellite Dish |
| 279 | <input type="checkbox"/> Garage door opener(s), # ___ | <input type="checkbox"/> Security System | <input type="checkbox"/> Own ___ Lease |
| 280 | <input type="checkbox"/> Garage Door Transmitter(s), # ___ | <input type="checkbox"/> Own ___ <input checked="" type="checkbox"/> Lease | <input type="checkbox"/> Water Softener and/or purifier |
| 281 | <input checked="" type="checkbox"/> Laundry – Washer | <input type="checkbox"/> Smart home devices (identify) _____ | <input type="checkbox"/> Own ___ Lease |
| 282 | <input checked="" type="checkbox"/> Laundry – Dryer | <input type="checkbox"/> Spa/Hot Tub/Sauna & Equipment | <input type="checkbox"/> Window curtains and drapes |
| 283 | <input type="checkbox"/> Microwave Oven | <input type="checkbox"/> Statuary/Yard Art | (identify) _____ |
| 284 | <input checked="" type="checkbox"/> Oven ___ Elec. ___ Gas <input checked="" type="checkbox"/> Convection | <input checked="" type="checkbox"/> Stovetop ___ Elec. <input checked="" type="checkbox"/> Gas | <input type="checkbox"/> Wood/pellet burning stove |
| 285 | | | |
| 286 | <input checked="" type="checkbox"/> Other <u>3 flower planters</u> | <input type="checkbox"/> Other <u>NA</u> | <input type="checkbox"/> Other <u>NA</u> |
| 287 | <input type="checkbox"/> Other <u>NA</u> | <input type="checkbox"/> Other <u>NA</u> | <input type="checkbox"/> Other <u>NA</u> |
| 288 | <input type="checkbox"/> Other <u>NA</u> | <input type="checkbox"/> Other <u>NA</u> | <input type="checkbox"/> Other <u>NA</u> |

289
290 **17. ADDITIONAL DISCLOSURES**

291 Disclose any material information or property inspections and describe any significant repairs,
292 improvements or alterations to Property not fully revealed above. If applicable, state who did the work.
293 Attach to this disclosure any repair estimates, inspection reports, invoices, notices or other documents
294 describing or referring to the matters revealed herein:

- 295 - Ceiling fixtures and lights replaced in upstairs bedrooms and bathroom.
- 296 - Junction boxes added to light fixtures in dining room and upstairs bedrooms.
- 297 - Ceiling fan mounted in dining room.
- 298 - Shed light repaired.
- 299 - Old clothes line stands removed from backyard.
- 300 - Stone walkway and patio landscaping.
- 301 - Perennial landscaping.

302 ~~There is no security system #279 field will not fill correctly~~

303 The undersigned SELLER represents that the information set forth in the foregoing Disclosure Statement
304 is accurate and complete. SELLER does not intend this Disclosure Statement to be a warranty or
305 guarantee of any kind. SELLER hereby authorizes their agent to provide this information to prospective
306 BUYER of the property and to real estate brokers and salespeople. **SELLER will promptly notify**
307 **Licensee assisting the SELLER, in writing, if any information in this disclosure changes prior to**
308 **Closing, and Licensee assisting the SELLER will promptly notify Licensee assisting the BUYER,**
309 **in writing, of such changes. (Initial and date any changes and/or attach a list of additional**
310 **changes. If attached, # _____ of pages).**

311
312 **IF NOT UNDERSTOOD, CONSULT AN ATTORNEY BEFORE SIGNING.**

313
314 DocuSigned by:
315 Joseph R. Klokasa 4/29/2021
316 **SELLER** DATE **SELLER** DATE

317 **BUYER ACKNOWLEDGEMENT AND AGREEMENT**

318

- 319 1. I understand and agree that the information in this form is limited to information of which SELLER has
 320 actual knowledge and that SELLER need only make an honest effort at fully revealing the information
 321 requested.
- 322 2. This property is being sold to me without warranties or guaranties of any kind by SELLER or Broker(s)
 323 or agents concerning the condition or value of the Property.
- 324 3. I agree to verify any of the above information, and any other important information provided by
 325 SELLER or Broker (including any information obtained through the Multiple Listing Service) by an
 326 independent investigation of my own. I have been specifically advised to have Property examined by
 327 professional inspectors.
- 328 4. I acknowledge that neither SELLER nor Broker is an expert at detecting or repairing physical defects
 329 in Property.
- 330 5. I specifically represent that there are no important representations concerning the condition or value of
 331 Property made by SELLER or Broker on which I am relying except as may be fully set forth in writing
 332 and signed by them.

333

334

335

336 **BUYER** **DATE** **BUYER** **DATE**

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