

## ADDITIONAL PROPERTY INFORMATION

Seller is requested to provide the additional property information, to assist the Buyer with the completion of inspections and due diligence.

**ADDRESS:** 3924 Granite Way, Wellington, NV 89444

**Seller, are you aware of:**

**A. RELEVANT FACTS:**

1. Whether the property is located adjacent to or in an "industrial use" zone.  
(In general, a zone or district allowing manufacturing, commercial or airport uses.)
2. Whether the property is affected by a nuisance created by an "industrial use" zone.
3. Whether the property is located within 1 mile of a former government ordinance location.
4. Insurance claims affecting the property within the past 5 years.
5. Matters affecting title of the property.

<u>YES</u>	<u>NO</u>	<u>N/A</u>	<u>Unknown</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**B. REPAIRS AND ALTERATIONS:**

1. Any remodeling, replacements or material repairs on the property.
2. Ongoing or recurring maintenance on the property (for example, drain or sewer clean-out, tree or pest control services).
3. Any part of the property being painted within the past 12 months.

<u>YES</u>	<u>NO</u>	<u>N/A</u>	<u>Unknown</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**C. STRUCTURAL, SYSTEMS AND APPLIANCES:**

1. Any cameras located on the property.
2. Defects in any of the following, (including past defects that have been repaired):  
electrical, plumbing (including the presence of polybutylene pipes), sump pumps  
roof, gutters, foundation, crawl space, attic, grading, retaining walls, interior or exterior  
doors, windows, ceilings, floors.

<u>YES</u>	<u>NO</u>	<u>N/A</u>	<u>Unknown</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**D. NEIGHBORHOOD, BOUNDARIES AND property ACCESS:**

1. Do you use any portion of a neighboring property.
2. Do any neighbors have access or use of your property.
3. Neighborhood noise, nuisance or other problems from sources such as, but not limited to the following: neighbors, traffic, parking congestion, airplanes, trains, light rail, subway, trucks, freeways, buses, schools, parks, refuse storage or landfill processing, agricultural operations, business, odor, recreational facilities, restaurants, entertainment complexes or facilities, parades, sporting events, fairs, neighborhood parties, litter, construction, air conditioning equipment, air compressors, generators, pool equipment, appliances, underground gas pipelines, cell phone towers, high voltage transmission lines, or wildlife.

<u>YES</u>	<u>NO</u>	<u>N/A</u>	<u>Unknown</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Revised 04/05/23 Seller's Initials (D.R.) ( ) ( ) ( ) Buyer's Initials ( ) ( ) ( ) ( )

## ADDITIONAL PROPERTY INFORMATION

**Seller, are you aware of:**

**E. DISASTER RELIEF, INSURANCE OR CIVIL SETTLEMENT:**

1. Financial relief or assistance, insurance, or settlement, sought or received, from any federal, state, local or private agency, insurer or private party, by past or present owners of the property, due to any actual or alleged damage to the property arising from a flood, earthquake, fire, other disaster, or occurrence of defect, whether or not any money received was actually used to make repairs.

YES	NO	N/A	Unknown
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**F. WATER-RELATED AND MOLD ISSUES:**

1. Water intrusion into any part of any physical structure on the property; leaks from or in any appliance, pipe, slab or roof; standing water, drainage, flooding, underground water, moisture, water-related soil settling or slippage, on or affecting the property.

YES	NO	N/A	Unknown
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Rivers, streams, flood channels, or underground springs affecting the property.

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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**G. PETS, ANIMALS AND PESTS:**

1. Have there ever been pets on or in the property? Types: \_\_\_\_\_

YES	NO	N/A	Unknown
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Problems with livestock, wildlife, birds, insects or pests on the property.

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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3. Past or present odors, urine, feces, discoloration, stains, spots or damage in the property, stains, spots or damage in the property due to any of the above.

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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4. Past or present treatment or eradication of pests or odors, or repair of damage due to any of the above. If so, when and by whom?

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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**H. LANDSCAPING, POOL AND SPA:**

1. Diseases or infestations affecting trees, plants or vegetation on or near the property.

YES	NO	N/A	Unknown
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Operational sprinklers on the property:

a. If yes, are they automatic operated.

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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b. If yes, are they manually operated.

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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c. If yes, are there any areas with trees or vegetation not covered by the sprinkler system.

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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3. Past or present defects, leaks, cracks, repairs or other problems with the sprinklers, pool, spa, waterfall, pond, stream, drainage or another water-related décor including any ancillary equipment such as; pumps, filters, heaters and cleaning system even if repaired.

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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**I. TITLE, OWNERSHIP AND LEGAL CLAIMS:**

1. Any other person or entity on title other than Sellers(s) signing this form?

YES	NO	N/A	Unknown
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Leases, options or claims affecting or relating to title or use of the property.

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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3. Past, present, pending or threatened lawsuits, settlements, mediations, arbitrations, tax liens, mechanics' liens, notice of default, bankruptcy or other court filings or government hearings affecting or relating to the property, Homeowner Association of neighborhood.

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Revised 04/05/23 Seller's Initials (J.A.) ( ) ( ) ( ) Buyer's Initials ( ) ( ) ( ) ( )

## ADDITIONAL PROPERTY INFORMATION

**Seller, are you aware of:**

**J. GOVERNMENTAL:**

1. Ongoing or contemplated eminent domain, condemnation, annexation or change in zoning or general plan that applies to or could affect the property.

YES	NO	N/A	Unknown
	X		

2. Existing or pending rent control, occupancy restrictions, improvement restrictions, retrofit requirements, building or use moratoriums that apply to or could affect the property.

	X		
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3. Current or proposed bonds, assessments, or fees that do not appear on the property tax bill that apply to or could affect the property.

	X		
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4. Proposed construction, reconfiguration, or closure of nearby Government facilities or amenities such as schools, parks, roadways and traffic signals.

	X		
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5. Existing or proposed Government requirements affecting the property (i) that tall grass, brush or other vegetation be cleared; (ii) that restrict trees or landscaping.

	X		
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6. Any protected habitat for plants, trees, animals or insects that apply to or could affect the property.

	X		
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7. Whether the property is historically designated or falls within an existing or proposed Historic District.

	X		
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**K. MISCELLANEOUS:**

1. Any smoking on or around the property.

YES	NO	N/A	Unknown
X			

2. Reports, inspections, disclosures, warranties, maintenance recommendations, estimates studies, surveys or other documents pertaining to (i) the condition or repair of the property or any improvement on this property in the past, now or proposed; or (ii) easements, encroachments or boundary disputes affecting the property.

X			
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3. Are you aware of a death on or in the property? (While disclosure of death on a property is not required in Nevada unless caused by the property.)  
It is important to discuss this with your agent.

X			
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4. Is the property located above the seasonal snow line or subject to excessive snow.

			X
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**L. ADDITIONAL COMMENTS:**

1. Any past or present known material facts or other significant items affecting the value or desirability of the property not otherwise disclosed to Buyer in any previous questions. EXPLAIN:

YES	NO	N/A	Unknown
			X

See Seller's Real property Disclosure Form.

## ADDITIONAL PROPERTY INFORMATION

**Seller, provide additional information below for any questions marked 'yes'. Attach additional documentation as needed.**

C2 - See Home and Pest Inspection Reports And SRPD.

F1 - Leak under Kitchen Sink in Crawlspace. Being Repaired.  
Ceiling panel damaged from moisture absorption at  
master bedroom closet.

K-1 - Smoking outside Home.

K-3 Home Inspection Report dated 4-22-2024. Pest inspection  
4-23-2024.

K-3 Death of owner on Property

1-1 property is in probate following death of prior owner. Seller is  
personal Representative.

Seller name: Doris Quijada, Per. Rep.

Signature:

*Doris Quijada* Per Rep

Date:

4-27-2024

Seller name:

Signature:

Date:

Seller name:

Signature:

Date:

Seller name:

Signature:

Date:

**Buyer acknowledges that a copy of this request was provided to the Seller and/or listing agent.**

Was the form completed by the Seller?

YES

NO

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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**Buyer, requests the following additional information or inspections:**

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By signing below, Buyer acknowledges that they have read, understand and received this form.

Buyer name:

Signature:

Date:

Buyer name:

Signature:

Date:

Buyer name:

Signature:

Date:

Buyer name:

Signature:

Date: