



SELLER DISCLOSURE OF PROPERTY CONDITION

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



Property Owner(s) & Address: Jason C Johnson

Bambi Johnson

1210 S. Irene Street

Sioux City

IA 51106

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.

Property is exempt because one or more of the above exemptions apply.

If Exempt – STOP HERE and SKIP TO LAST PAGE, SIGN AND 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.**

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 Shingles
Unknown [] Date of repairs/replacement 4/2016 Unknown []
Describe: Complete Tear off and Replacement
- 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 _____
Unknown [] Age _____ Unknown []
Has the system been inspected within 2 years or pumped/cleaned within 3 years?
Yes [] No [] UNK [] Date of inspection _____ UNK [] Date tank last cleaned/pumped _____ UNK []
- Sewer:** Any known problems? Yes [] No] Any known repairs/replacement? Yes [] No []
Date of repairs _____

Buyer Initials _____

Sellers Initials BJ

- 6. **Heating system(s):** Any known problems? Yes [No] Any known repairs/replacement? Yes [] No []
Date of repairs 4/20 New Board
- 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 5/2021
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? less than 4
Date of last report 5/2017 Self test
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?

Has the lead disclosure form and pamphlet been provided? Yes [] No []
- 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? _____
- 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):

Buyer Initials _____ Seller Initials AA
BJ

II. Appliances/Systems/Services (Note: Section II is for the convenience of Buyer/Seller and is not mandatory):

Notice: Items marked "included" are intended to remain with the property after sale. However, included items may be negotiable between Buyer and Seller, and requested items should be in writing as either included or excluded in any Offer to Buy/Purchase Agreement. The Offer to Buy/Purchase Agreement shall be the final terms of any agreement.

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

Exceptions/Explanations for "NO" responses above:

ALL HOUSEHOLD APPLIANCES, IF INCLUDED, ARE NOT UNDER WARRANTY BEYOND DATE OF CLOSING. Warranties may be available for purchase from independent warranty companies.

Buyer Initials _____ Seller Initials *BS*

III. Additional Non-Mandatory Requested Items: Are you as the Seller aware of any of the following:

- Any significant structural modification or alteration to property? Yes No Unknown Please explain:
Roof and Decks \$11,000
- 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

Buyer Initials _____ Seller Initials *BS*

- 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 Blown 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: _____

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

Built Decks, Replaced Roof, Painted Rooms, Put Pool in and retaining wall in 2015, Dimmer switches in up stairs and downstairs, In wall wiring upstairs for solar.

12. 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)

New Windows Main Floor in 2017, approx 18,000. New sink in Bathroom 2020
Gas Fireplace upstairs (Never used). Warrant for Windows Transfer (50 year)

Seller has owned the property since 3/1/2006 (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.**

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

Seller [Signature] Seller Bambi Johnson Date 3-26-2021
Jason C Johnson Bambi Johnson

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 acknowledges receipt of the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.

Buyer _____ Buyer _____ Date _____