

COMMUNITY ASSOCIATION DISCLOSURE

EXHIBIT “ _____ ”



2024 Printing

This Exhibit is part of the Agreement with an Offer Date of _____ for the purchase and sale of that certain Property known as: 2110 WHITTINGHAM CT, ROSWELL, Georgia 30075 (“Property”).

Directions for Filling Out This Community Association Disclosure (“Disclosure”). Seller must fill out this Disclosure accurately and completely. If new information is learned by Seller which materially changes the answers herein, Seller must immediately update and provide Buyer with a revised copy of this Disclosure up until Closing (see Section B for Seller’s payment obligations related to initial and updated Disclosures). Seller should ensure the disclosures being made are accurate by confirming the same with the Community Association (“Association”) and/or Association Manager(s).

Buyer’s Use of Disclosure. While this Disclosure is intended to give the Buyer basic information about the community in which Buyer is purchasing, Buyer should read the covenants and other legal documents for the community (“Covenants”) to fully understand Buyer’s rights and obligations therein. This Disclosure does not address all issues that may affect Buyer as the owner of a residence in the community. Assessments in community associations tend to increase over time. The Covenants can normally be amended to reflect the changing preferences in the community.

A. KEY TERMS AND CONDITIONS

1. TYPE OF ASSOCIATION IN WHICH BUYER WILL OR MAY BECOME A MEMBER (Select all that apply. The boxes not selected shall not be a part of this Exhibit)

- | | |
|--|--|
| <input type="checkbox"/> Mandatory Membership Condominium Association | <input type="checkbox"/> Mandatory Membership Age Restricted Community |
| <input checked="" type="checkbox"/> Mandatory Membership Community Association | <input type="checkbox"/> All units are occupied by person 62 or older. |
| <input type="checkbox"/> Mandatory Membership Master Association | <input type="checkbox"/> At least 80% of the occupied units are occupied by at least one person who is 55 years of age or older |
| <input type="checkbox"/> Optional Voluntary Association | <input type="checkbox"/> Voluntary Transitioning to Mandatory (Buyer shall be a <input type="checkbox"/> voluntary or <input type="checkbox"/> mandatory member) |

2. CONTACT INFORMATION FOR ASSOCIATION(S)

a. Name of Association: Whittingham Park HOA
Contact Person / Title: Brian Nickerson/Treasurer
Association Management Company: N/A
Telephone Number: 404-313-1233 Email Address: whittingham.park.hoa@gmail.com
Mailing Address: 1105 Whittingham Pl. Roswell, GA 30075 Website: _____

b. Name of Master Association: _____
Contact Person / Title: _____
Association Management Company: _____
Telephone Number: _____ Email Address: _____
Mailing Address: _____ Website: _____

3. ANNUAL ASSESSMENTS

The total annual assessments paid to the above Association(s) is \$440.00 per calendar or fiscal year, depending on how it is collected (hereinafter “Year”) and shall be paid in installments as follows: (Select all of that apply. The boxes not selected shall not be a part of this Agreement) Monthly Quarterly Semi-Annually Annually Other: _____

4. SPECIAL ASSESSMENTS

- a. Buyer’s total portion of all special assessments Under Consideration is \$ 0.00.
- b. Buyer’s total portion of all approved special assessments is \$ 0.00.
- c. Approved Special Assessments shall be paid as follows: (Select all that apply. The boxes not selected shall not be a part of this Agreement) Monthly Quarterly Semi-Annually Annually Other: N/A at this time
- d. Notwithstanding the above, if the Buyer’s portion of any and all special assessment(s) that are passed or Under Consideration after the Binding Agreement Date is \$ _____ or more, Buyer shall have the right, but not the obligation to terminate the Agreement upon notice to Seller, provided that Buyer terminates the Agreement within five (5) days from being notified of the above, after which Buyer’s right to terminate shall be deemed waived.

5. TRANSFER, INITIATION, AND ADMINISTRATIVE FEES

To the extent Transfer, Initiation, and Administrative Fees are fully and accurately disclosed by Seller, Buyer shall pay \$0.00 for all Transfer, Initiation, and Administrative Fees.

6. OTHER ASSOCIATION EXPENSES

- a. A fee for _____ is currently \$_____ per Year and is paid in _____ installments. This fee does not include any Transfer, Initiation, and Administrative Fees.
b. Utility Expenses. Buyer is required to pay for utilities which are billed separately by the Association and are in addition to any other Association assessments. The Association bills separately for: Electric Water/Sewer Natural Gas Cable TV Internet Other: _____

7. ASSESSMENTS PAY FOR FOLLOWING SERVICES, AMENITIES, AND COSTS. The following services, amenities, and costs are included in the Association annual assessment. (Select all which apply. Items not selected in Section 7.a. and/or Section 7.b. shall not be part of this Agreement).

- a. For Property costs include the following: Cable TV, Electricity, Heating, Internet Service, Natural Gas, Water, Hazard Insurance, Flood Insurance, Pest Control, Termite Control, Dwelling Exterior, Yard Maintenance, Other: _____
b. Common Area / Element Maintenance costs include the following: Concierge, Gate Attendant, All Common Area Utilities, All Common Area Maintenance, Internet Service, Pool, Tennis Court, Golf Course, Playground, Exercise Facility, Equestrian Facility, Marina/Boat Storage, Hazard Insurance, Flood Insurance, Pest Control, Termite Control, Dwelling Exterior, Grounds Maintenance, Trash Pick-Up, Road Maintenance, Other: _____

8. LITIGATION. There IS or IS NOT any threatened or existing litigation relating to alleged construction defects in the Association in which the Association is involved. If there is such threatened or existing litigation, please summarize the same below:

Check if additional pages are attached.

9. VIOLATIONS. Seller HAS or HAS NOT received any notice or lawsuit from the Association(s) referenced herein alleging that Seller is in violation of any rule, regulation, or Covenant of the Association. If Seller has received such a notice of violation or lawsuit, summarize the same below and the steps Seller has taken to cure the violation.

Check if additional pages are attached.

B. FURTHER EXPLANATIONS TO CORRESPONDING PARAGRAPHS IN SECTION A

1. TYPE OF ASSOCIATION IN WHICH BUYER WILL OR MAY BECOME A MEMBER

- a. Defined: The primary purpose of a Community Association is to provide for the community, business, and governance aspects of the Association. The Association administers and maintains operation of the community as provided in the deed, Covenants and restrictions, rules and regulations, declaration, and/or other Community Association documents.
b. Examination: Buyer acknowledges that ownership of the Property is subject to declarations, certain restrictions (including the ability to rent the Property), and by-laws, which may include additional costs as a member of a mandatory membership Association. Restrictions are subject to change by actions of the Association.
c. Owner Limitations: If repairs and/or replacement of defects in any common element(s) are the exclusive responsibility of the Association, the owner of the Property is unable to make such replacements and/or repairs.

2. CONTACT INFORMATION FOR ASSOCIATION(S)

- a. Consent of Buyer to Reveal Information to Association(s). Buyer hereby authorizes closing attorney to reveal to the Association from whom the closing attorney is seeking a Closing Letter the Buyer's name and any contact information the closing attorney has on the Buyer such as telephone numbers, e-mail address, etc. The closing attorney may rely on this authorization.

3. ANNUAL ASSESSMENTS

- a. **Disclosure Regarding Fees.** Owners of property in communities where there is a Mandatory Membership Community Association are obligated to pay certain recurring fees, charges, and assessments (collectively "Fee") to the Association. Fees can and do increase over time and, on occasion, there may be the need for a special assessment. The risk of paying increased Fees is assumed by the Buyer in living in a community with a Mandatory Membership Community Association.
- b. **Buyer shall pay** a) any pre-paid regular assessment (excluding Special Assessments) due at Closing for a period of time after Closing; and b) move-in fees, including fees and security deposits to reserve an elevator as these fees are not considered Transfer, Initiation, and Administrative Fees.
- c. **Seller shall pay** a) all Fees owing on the Property which come due before the Closing so that the Property is sold free and clear of liens and monies owed to the Association; b) any Seller move-out Fees, foreclosure Fees or other fees specifically intended by the Association to be paid by Seller; and c) any Fee in excess of the sum disclosed in Section A(3) above for the remainder of the Year in which the Property was contracted to be sold.
- d. **Account Statement or Clearance Letter.** Seller shall pay the cost of any Association account statement or clearance letter ("Closing Letter") including all amounts required by the Association or management company to be pre-paid in order to obtain such Closing Letter. Seller shall not be reimbursed at Closing for any amounts prepaid in order to obtain the Closing Letter. Within two (2) days of notice from the closing attorney, Seller shall pay for the Closing Letter as instructed by the closing attorney. Seller's failure to follow the instructions of the closing attorney may cause a delay in Closing and/or result in additional fees being charged to Seller.

4. SPECIAL ASSESSMENTS

- a. **Under Consideration:** For all purposes herein, the term "Under Consideration" with reference to a special assessment shall mean that a notice of a meeting at which a special assessment will be voted upon, has been sent to the members of the Association. If a special assessment(s) has been voted upon and rejected by the members of the Association, it shall not be deemed to be Under Consideration by the Association. Seller warrants that Seller has accurately and fully disclosed all special assessment(s) passed or Under Consideration to Buyer. This warranty shall survive the Closing. ALL PARTIES AGREE THAT NEITHER SELLER NOR BROKER SHALL HAVE ANY OBLIGATION TO DISCLOSE ANY POSSIBLE SPECIAL ASSESSMENT IF IT IS NOT YET UNDER CONSIDERATION, AS THAT TERM IS DEFINED HEREIN.
- b. **Liability for Undisclosed Special Assessments:** With respect to special assessment(s) Under Consideration or approved before Binding Agreement Date that are either not disclosed or are not disclosed accurately by Seller to Buyer, Seller shall be liable for and shall reimburse Buyer for that portion of the special assessment(s) that was either not disclosed or was not disclosed accurately.
- c. **Seller Pays for Undisclosed Special Assessments:** With respect to special assessments, Under Consideration or approved and accurately disclosed above, if an unpaid special assessment is due but may be paid in installments, it shall be deemed to be due in installments for purposes of determining whether it is to be paid by Buyer or Seller. Installment payments due prior to or on Closing shall be paid by the Seller; and installment payments due subsequent to Closing shall be paid by the Buyer. Otherwise the special assessment shall be paid by the party owning the Property at the time the special assessment is first due.
- d. **Special Assessments Arising after Binding Agreement Date:** With respect to special assessments that are only Under Consideration after the Binding Agreement Date and are promptly disclosed by Seller to Buyer:
 - i. If the special assessment(s) is adopted and due, in whole or in part, prior to or on Closing, that portion due prior to or on Closing shall be paid by the Seller; and
 - ii. If the special assessment(s) is adopted and due in whole or part subsequent to Closing, that portion due subsequent to Closing shall be paid by Buyer.

5. TRANSFER, INITIATION, AND ADMINISTRATIVE FEES

- a. **Buyer Pays:** Buyer shall pay any initial fee, capital contribution, new member fee, transfer fee, new account set-up fee, fees similar to the above but which are referenced by a different name, one-time fees associated with closing of the transaction and fees to transfer keys, gate openers, fobs and other similar equipment (collective, "Transfer, Initiation, and Administrative Fees) to the extent the total amount due is accurately disclosed above. Advance assessments due at Closing for a period of time after Closing, shall not be Transfer, Initiation, and Administrative Fees and shall be paid by Buyer.
- b. **Seller Pays:** Seller shall pay any amount in excess of the sum disclosed in Section A(5), even in the event of any later disclosures made by the Seller of increase in such Transfer, Initiation, and Administrative Fees. In the event Seller fills in the above blank with "N/A", or anything other than a dollar amount, or is left empty, it shall be the same as Seller filling in the above blank with \$0.00.
- c. **Fees Defined:** All Transfer, Initiation, and Administrative Fees paid by Seller pursuant to this section are considered actual Seller fees and are not a Seller concession or contribution to the Buyer's cost to close.

Nadine Terry

1 Buyer's Signature

Nadine Terry for Weichert Workforce Mobility

Print or Type Name

3/15/24

Date

2 Buyer's Signature

Print or Type Name

Date

Additional Signature Page (F267) is attached.

Bradley Michael Weiss

1 Seller's Signature

Bradley Michael Weiss

Print or Type Name

3/11/2024

Date

2 Seller's Signature

Jayne Weiss

Print or Type Name

3/11/2024

Date

Additional Signature Page (F267) is attached.

Radon Safeguard Program (RSP) – PREMIER / Purchaser Letter

2110 Whittingham Ct, Roswell GA 30075

Certificate # 3054542

This letter will provide a brief overview of our Radon Safeguard Program™ (RSP). As a prepaid benefit offered by **Weichert Workforce Mobility**, Fidelity Inspection & Consulting Services, Inc. (FICS) is providing this RSP to the ultimate Purchaser(s) of the above referenced property. This program covers or supplements remediation costs incurred in the event the property is tested for and discovered to have an elevated radon level during the program coverage period. An elevated radon level is currently defined as 4.0 picocuries per liter (4.0 pCi/L) or above by the U.S Environmental Protection Agency (EPA). The chart below illustrates the coverage our RSP Premier offers:

RSP PREMIER	
1 Year Coverage	Begins at date of closing
Testing Paid by	Test kit placed in home by Purchaser
Test Type	Long term Test (91+ days)
Coverage Period ¹	Test and Request for Mitigation within 12 months of closing date
Test Results Provided by	Independent Lab
Testing device sent to Purchaser	Automatically
Mitigation Limits ²	\$10,000

It is not necessary for the Purchaser(s) to complete a short term radon test on this property at the time of inspection. A long term test of 91+ days is recommended and the Purchaser(s) will receive the testing device automatically in the mail after closing has taken place. If during the coverage period valid test results reveal an elevated radon level and Purchaser(s) has submitted a claim for mitigation, FICS will select an independent radon mitigation company to install a mitigation system and conduct post installation testing until a radon level below a 4.0pCi/L is achieved. Once this result has been achieved, FICS's liability under this program shall terminate. **The total cost of mitigation is not to exceed \$10,000¹. Per the program, if FICS is required to provide radon mitigation services, installation of any/all such mitigation systems will occur after property closing.**

_____/_____
Purchaser Initials
Acknowledged

At FICS' discretion the following mitigation limitations may apply:

1. Property must have a concrete foundation/floor with no open-dirt areas;
2. No on-going moisture/water intrusion into the basement; and
3. Any suspect or confirmed asbestos must be abated by the homeowner with proper clearance before installation of the radon mitigation system.

Purchaser(s) has 12 months from the date of closing to conduct testing and submit a request for mitigation. Purchaser(s) must present valid test results and a closing confirmation to document the closing date in order for request to be processed. If you have any questions regarding this information, please call FICS at 215.347.2984 and ask to speak with an RSP coordinator.

¹ This program is intended to provide one radon test during the 12 months following closing and does not provide multiple tests. Once a radon level below 4.0pCi/L is achieved from any one test during the 12 month coverage period following closing, FICS's liability under this program shall terminate.

² Any costs associated with the mitigation that are aesthetic in nature, including compliance with HOA regulations, and are not directly related to the actual mitigation system itself will not be covered by this program. Requests for modifications to the proposed mitigation system will be considered at the discretion of FICS in consult with the Purchaser(s).



FICS Radon Safeguard Program™ Purchaser Obligations

2110 Whittingham Ct, Roswell GA 30075 Certificate # 3054542

The Fidelity Inspection & Consulting Services, Inc. (FICS) Radon Safeguard Program™ provides the Purchaser(s) a program that will cover or supplement mitigation costs in the event the above referenced property is tested for, and discovered to have, an elevated radon level during the program coverage period.

Our program’s coverage period is effective 12 months from the day you close on your home.

In the event testing shows an Elevated Radon Level, a claim must be made directly to FICS within twelve months from your closing date. To start the claim process, please call the FICS mitigation line at 215.347.2984.

Per the program, if FICS is required to provide radon mitigation services, installation of any/all such mitigation systems will occur after property closing.

_____/_____
Purchaser Initials
Acknowledged

In order to verify the effective date on the Radon Safeguard Program™, the Purchaser(s) will be asked to submit this document along with any required test results to FICS for mitigation of elevated levels of radon in the home.

This program is intended to provide one radon test during the 12 months following date of closing. This program does not provide for multiple tests. Once a radon level below 4.0pCi/L is achieved from any one test during the 12 month coverage period following closing, FICS’s liability under this program shall terminate.

Legal Notice / Responsibilities -

The Purchaser(s) understand(s) the rights and responsibilities described herein and hereby acknowledge that FICS has no control over the level of radon gas in the home located at the above property address. Further, the Purchaser(s) hereby release FICS and any other parties involved in the property transaction from: 1) any and all liabilities for the possible existence of radon in the property; 2) for personal property damage or personal injury, diminished value of real estate; incidental, consequential, special or exemplary damages from radon exposure (whether direct or indirect); and, 3) for Purchaser’s failure to test for radon levels at the above referenced property within the 12 month coverage period as indicated above.

This document must be signed and dated by the Purchaser(s) as provided below. By virtue of your signature below, you affirm your understanding of the Radon Safeguard Program coverage and limitations as described in the Purchaser Letter provided to you.

Purchaser Signature Signature Date

Purchaser Signature Signature Date



Stucco Moisture Assessment

Weichert Workforce Mobility
1625 State Route 10
Morris Plains, NJ 07950

02/14/2024
Client File # M-C-184966-2
FICS File # 3054542

Inspection Address

Bradley Weiss
2110 Whittingham Ct
Roswell, GA 30075

In accordance with your request a Stucco Moisture Assessment was conducted on **02/13/2024** at the above captioned property. The following is a summary of the inspector's findings.

Stucco Location	Front Rear Left Right
Floor Level	1 2 3
Stone Location	Front
Floor Level	1
Weather Conditions	Sunny
Temperature	43
Age of Home	26 Years
Age of System	26 Years
Name of Installer	Unknown
Name of Builder	Unknown
Type of Windows	Wood
Type of Substrate	Wood
Type of Stucco/Stone	MSVHard coat

MOISTURE SURVEY READINGS

See attached Structural Evaluation Document. The inspection has determined that deficiencies exist in the stucco/stone installation and moisture readings are greater than 20%. This level of moisture indicates a high potential for structural damage. **PERFORM STRUCTURAL INVESTIGATION AS DESCRIBED IN THE ATTACHED STRUCTURAL EVALUATION, REPAIR ALL SOURCES OF WATER ENTRY AND CORRECT THE INSTALLATION DEFICIENCIES.**

MOISTURE READINGS (RIGHT SIDE ELEVATION)

Location	<ul style="list-style-type: none"> • 30% moisture and firm substrate is present at the left side of the first-floor right side elevation left window. • 23% moisture and firm substrate is present at the right side of the first floor right side elevation left window.
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EVALUATION OF STUCCO/STONE

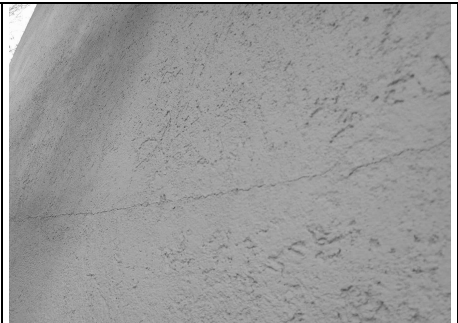
Does the stucco/stone terminate above grade?	Acceptable
Are all terminations properly back-wrapped?	Not Applicable
Does the stucco terminate above hardscape?	Acceptable
Are there any areas with cracking or surface damage?	Cracks and holes were observed at the left, right and front elevations.
Corrective Action	Contractor to properly repair all cracked areas and all damaged surface areas of the stucco/stone in accordance with the manufacturer's standard procedure.



Cracking



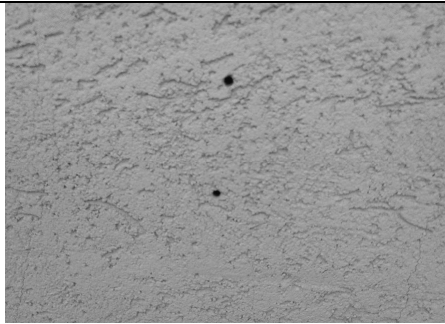
Overview



Cracking



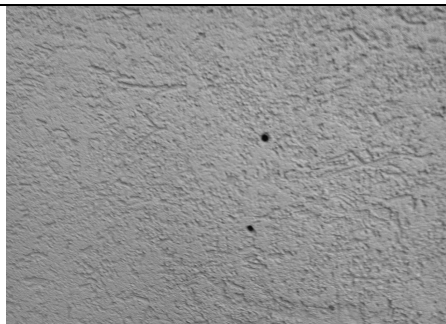
Overview



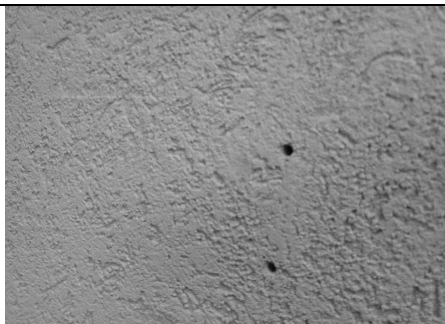
Holes



Overview



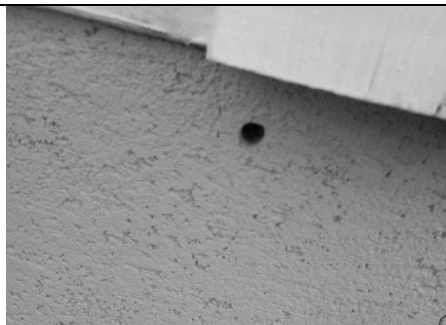
Holes



Holes



Holes



Holes



Cracking



Overview



<p>Are sealant joints present at windows and doors?</p>	<p>Sealant-Expansion joints have not been properly installed at the windows and doors. Sealant joints are required at the intersection of the stucco/stone and all dissimilar construction materials and must be of a standard design method. The function of this joint is to provide a weather-seal and to accommodate movement between the two materials.</p>
<p>Corrective Action</p>	<p>Contractor to install properly designed sealant joints utilizing compatible caulk-sealant at all exterior penetrations.</p>
<p>Are sealant joints present at all intersections of stucco/stone and dissimilar materials (ie windows, doors, trim, fixtures)?</p>	<p>Sealant-expansion joints have not been properly installed at trims and siding junctures. Sealant joints are required around all breaches made through the stucco/stone. The function of</p>

	this joint is to provide a weather-seal and to accommodate movement between the two materials.
Corrective Action	Contractor to install properly designed sealant joints utilizing compatible caulk-sealant at all exterior penetrations.

		
Lack of sealant	Lack of sealant	Lack of sealant
		
Lack of sealant	Lack of sealant	Lack of sealant

Does the stucco/stone terminate two inches above the roofing?	Not Applicable
Are kick-out diverter flashings properly installed?	Not Applicable
Are downspouts properly installed?	Acceptable
Are window and door flashings installed properly?	Acceptable
Is chimney flashing installed properly?	Acceptable
Are all exterior fixtures and utility penetrations properly installed and sealed?	Sealant-expansion joints have not been properly installed at the surface penetrations.
Corrective Action	Contractor to install properly designed sealant joints utilizing compatible caulk-sealant at all applicable locations on the

exterior.



Lack of sealant



Lack of sealant



Lack of sealant

Are all decks properly installed and flashed?

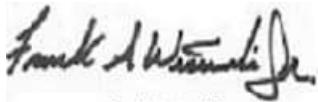
Not Applicable

Are all trim elements properly sloped?

Not Applicable

If you should have any questions, please do not hesitate to contact me.

Sincerely,



Frank Waniowski Jr.
Director of Account Management

STRUCTURAL VALIDATION

The purpose of this document is to provide a **procedural guideline** to the **qualified repair contractor** involved in completing the structural validation/investigation and repair to the stucco/stone structure. The investigation of wood components can be conducted in a systematic and progressive manner as follows to determine the extent of structural damage or deterioration:

Caution must be observed: active electrical wiring may be present in the exterior wall.

Phase 1

In areas of measured moisture 20% or greater, additional confirmation of failing substrate is recommended. The wall should be probed with an “ice pick” or similar tool of small diameter rigid material of sufficient length (6 inches or more) to fully penetrate the cladding surface and make contact with the house substrate/sheathing. Penetrations created by the moisture probes can be utilized to insert the ice pick but must be resealed. If upon probing with moderate force the ice pick penetrates the sheathing, stud and/or band joists, it is probable that deterioration has occurred and further investigation is recommended (see phase 2 below). Probe a wide area surrounding all high moisture areas. If probing reveals sound sheathing, then further action is unnecessary beyond repair of the discovered source of water entry.

Phase 2

Areas of deterioration should be further investigated by removal of portions of the Stucco cladding to view the condition of the substrate. All deteriorated sheathing shall be removed in order to allow an inspection of the supporting framing. Supporting framing having significant deterioration will typically be removed and replaced with new members of equal size. New sheathing shall then be installed. In all cases of such deterioration of the framing, it is recommended that the services of a qualified builder, professional architect, or engineer be obtained. A qualified contractor shall perform repairs/replacement of the affected stucco/stone claddings.

SELLER'S PROPERTY DISCLOSURE STATEMENT

EXHIBIT " _____ "



2024 Printing

This Seller's Property Disclosure Statement ("Statement") is an exhibit to the Purchase and Sale Agreement with an Offer Date of _____ for the Property (known as or located at: 2110 WHITTINGHAM CT
ROSWELL, Georgia, 30075). This Statement is intended to make it easier for Seller to fulfill Seller's legal duty to disclose hidden defects in the Property of which Seller is aware. Seller is obligated to disclose such defects even when the Property is being sold "as-is."

A. INSTRUCTIONS TO SELLER IN COMPLETING THIS STATEMENT.

In completing this Statement, Seller agrees to:

- (1) answer all questions in reference to the Property and the improvements thereon;
- (2) answer all questions fully, accurately and to the actual knowledge and belief of all Sellers (hereinafter, collectively "Knowledge");
- (3) provide additional explanations to all "yes" answers in the corresponding Explanation section below each group of questions (including providing to Buyer any additional documentation in Seller's possession), unless the "yes" answer is self-evident;
- (4) promptly revise the Statement if there are any material changes in the answers to any of the questions prior to Closing and provide a copy of the same to the Buyer and any Broker involved in the transaction.

B. HOW THIS STATEMENT SHOULD BE USED BY BUYER. Caveat emptor or "buyer beware" is the law in Georgia. Buyer should conduct a thorough inspection of the Property. If Seller has not occupied the Property or has not recently occupied the Property, Seller's Knowledge of the Property's condition may be limited. Buyer is expected to use reasonable care to inspect the Property and confirm that it is suitable for Buyer's purposes. If an inspection of the Property reveals problems or areas of concern that would cause a reasonable Buyer to investigate further, Buyer should investigate further. A "yes" or "no" answer to a question means "yes" or "no" to the actual Knowledge and belief of all Sellers of the Property. In other words, if a Seller answers "no" to a question, it means Seller has no Knowledge whether such condition exists on the Property. As such, Seller's answers should not be taken as a warranty or guaranty of the accuracy of such answers, nor a substitute for Buyer doing its own due diligence.

C. SELLER DISCLOSURES.

1. GENERAL:	YES	NO
(a) What year was the main residential dwelling constructed? _____		
(b) Is the Property vacant? If yes, how long has it been since the Property has been occupied? _____		✓
(c) Is the Property or any portion thereof leased?		✓
(d) Has the Property been designated as historic or in a historic district where permission must be received to make modifications and additions?		✓
EXPLANATION:		

2. COVENANTS, FEES, and ASSESSMENTS:	YES	NO
(a) Is the Property subject to a recorded Declaration of Covenants, Conditions, and Restrictions ("CC&Rs") or other similar restrictions?		✓
(b) Is the Property part of a condominium or community in which there is a community association? IF YES, SELLER TO COMPLETE AND PROVIDE BUYER WITH A "COMMUNITY ASSOCIATION DISCLOSURE EXHIBIT" GAR F322.		✓
EXPLANATION:		

3. LEAD-BASED PAINT:	YES	NO
(a) Was any part of the residential dwelling on the Property or any painted component, fixture, or material used therein constructed or manufacture prior to 1978? IF YES, THE "LEAD-BASED PAINT EXHIBIT" GAR F316 MUST BE EXECUTED BY THE PARTIES AND THE "LEAD-BASED PAINT PAMPHLET" GAR CB04 MUST BE PROVIDED TO THE BUYER.		✓

4. STRUCTURAL ITEMS, ADDITIONS AND ALTERATIONS:	YES	NO
(a) Has there been any settling, movement, cracking or breakage of the foundations or structural supports of the improvements?		✓
(b) Have any structural reinforcements or supports been added?		✓
(c) Have there been any additions, structural changes, or any other major alterations to the original improvements or Property, including without limitation pools, carports or storage buildings?		✓
(d) Has any work been done where a required building permit was not obtained?		✓
(e) Are there violations of building codes, housing codes, or zoning regulations (not otherwise grandfathered)?		✓
(f) Have any notices alleging such violations been received?		✓
(g) Is any portion of the main dwelling a mobile, modular or manufactured home?		✓
(h) Was any dwelling or portion thereof (excluding mobile, modular and manufactured dwelling) moved to the site from another location?		✓

EXPLANATION:

5. SYSTEMS and COMPONENTS:	YES	NO
(a) Has any part of the HVAC system(s) been replaced during Seller's ownership?		✓
(b) Date of last HVAC system(s) service: _____		
(c) Is any heated and cooled portion of the main dwelling not served by a central heating and cooling system?		✓
(d) Is any portion of the heating and cooling system in need of repair or replacement?		✓
(e) Does any dwelling or garage have aluminum wiring other than in the primary service line?		✓
(f) Are any fireplaces decorative only or in need of repair?		✓
(g) Have there been any reports of damaging moisture behind exterior walls constructed of synthetic stucco?		✓
(h) Are any systems/components subject to a lease or rental payment plan (i.e. HVAC, security system, appliances, alternate energy source systems, etc.)?		✓
(i) Are there any remotely accessed thermostats, lighting systems, security camera, video doorbells, locks, appliances, etc. servicing the Property?	✓	

EXPLANATION:

Moisture Inspection done on Hard Stucco (not synthetic stucco) and correct action take with no impact to underlying substate. Remote Ring Doorbell

6. SEWER/PLUMBING RELATED ITEMS:	YES	NO
(a) Approximate age of water heater(s): _____ years		
(b) What is the drinking water source: <input type="checkbox"/> public <input type="checkbox"/> private <input type="checkbox"/> well		
(c) If the drinking water is from a well, give the date of last service: _____		
(d) If the drinking water is from a well, has there ever been a test the results of which indicate that the water is not safe to drink? If yes, date of testing: _____		
(e) What is the sewer system: <input type="checkbox"/> public <input type="checkbox"/> private <input type="checkbox"/> septic tank		
(f) If the Property is served by a septic system, how many bedrooms was the septic system approved for by local government authorities? _____		
(g) Is the main dwelling served by a sewage pump?		✓
(h) Has any septic tank or cesspool on Property ever been professionally serviced?		✓
If yes, give the date of last service: _____		
(i) Are there any leaks, backups, or other similar problems with any portion of the plumbing, water, or sewage systems or damage therefrom?		✓
(j) Is there presently any polybutylene plumbing, other than the primary service line?		✓
(k) Has there ever been any damage from a frozen water line, spigot, or fixture?		✓

EXPLANATION:

7. ROOFS, GUTTERS, and DOWNSPOUTS:	YES	NO
(a) Approximate age of roof on main dwelling: _____ years.		
(b) Has any part of the roof been repaired during Seller's ownership?		✓
(c) Are there any roof leaks or other problems with the roof, roof flashing, gutters, or downspouts?		✓
EXPLANATION:		

8. FLOODING, DRAINING, MOISTURE, and SPRINGS:	YES	NO
(a) Is there now or has there been any water intrusion into the basement, crawl space or other interior parts of any dwelling or garage or damage therefrom from the exterior?		✓
(b) Have any repairs been made to control water intrusion into the basement, crawl space, or other interior parts of any dwelling or garage from the exterior?		✓
(c) Is any part of the Property or any improvements thereon presently located in a Special Flood Hazard Area?		✓
(d) Has there ever been any flooding?		✓
(e) Are there any streams that do not flow year round or underground springs?		✓
(f) Are there any dams, retention ponds, storm water detention basins, or other similar facilities?		✓
EXPLANATION:		

9. SOIL AND BOUNDARIES:	YES	NO
(a) Are there any landfills (other than foundation backfill), graves, burial pits, caves, mine shafts, trash dumps or wells (in use or abandoned)?		✓
(b) Is there now or has there ever been any visible soil settlement or movement?		✓
(c) Are there any shared improvements which benefit or burden the Property, including, but not limited to a shared dock, septic system, well, driveway, alleyway, or private road?		✓
(d) Are there presently any encroachments, unrecorded easements, unrecorded agreements regarding shared improvements, or boundary line disputes with a neighboring property owner?		✓
EXPLANATION:		

10. TERMITES, DRY ROT, PESTS, and WOOD DESTROYING ORGANISMS:	YES	NO
(a) Are you aware of any wildlife accessing the attic or other interior portions of the residence?	✓	
(b) Is there any damage or hazardous condition resulting from such wildlife intrusion; from insects (such as termites, bees and ants); or by fungi or dry rot?		✓
(c) Is there presently a bond, warranty or service contract for termites or other wood destroying organisms by a licensed pest control company?	✓	
If yes, what is the cost to transfer? \$ <u>0.00</u> What is the annual cost? <u>335.16</u>		
If yes, company name/contact: <u>Active/770-954-9941</u>		
Coverage: <input checked="" type="checkbox"/> re-treatment and repair <input type="checkbox"/> re-treatment <input type="checkbox"/> periodic inspections only		
Expiration Date <u>7/2/2024</u> Renewal Date <u>7/3/2024</u>		
EXPLANATION:		
Had a squirrel in the attic in ~2021, house then completed exclusion service, warranty in place. No wildlife since		

11. ENVIRONMENTAL, HEALTH, and SAFETY CONCERNS:	YES	NO
(a) Are there any underground tanks or toxic or hazardous substances such as asbestos?		✓
(b) Has Methamphetamine ("Meth") ever been produced on the Property?		✓
(c) Have there ever been adverse test results for radon, lead, mold or any other potentially toxic or environmentally hazardous substances?		✓
EXPLANATION:		

12. LITIGATION and INSURANCE:	YES	NO
(a) Is there now or has there been any litigation therein alleging negligent construction or defective building products?		✓
(b) Has there been any award or payment of money in lieu of repairs for defective building products or poor construction?		✓
(c) Has any release been signed regarding defective products or poor construction that would limit a future owner from making any claims?		✓
(d) During Seller's ownership have there been any insurance claims for more than 10% of the value of the Property?		✓
(e) Is the Property subject to a threatened or pending condemnation action?		✓
(f) How many insurance claims have been filed during Seller's ownership? _____		
EXPLANATION:		

13. OTHER HIDDEN DEFECTS:	YES	NO
(a) Are there any other hidden defects that have not otherwise been disclosed?		✓
EXPLANATION:		

14. AGRICULTURAL DISCLOSURE:	YES	NO
(a) Is the Property within, partially within, or adjacent to any property zoned or identified on an approved county land use plan as agricultural or forestry use?		✓
(b) Is the Property receiving preferential tax treatment as an agricultural property?		✓
<p>It is the policy of this state and this community to conserve, protect, and encourage the development and improvement of farm and forest land for the production of food, fiber, and other products, and also for its natural and environmental value. This notice is to inform prospective property owners or other persons or entities leasing or acquiring an interest in real property that property in which they are about to acquire an interest lies within, partially within, or adjacent to an area zoned, used, or identified for farm and forest activities and that farm and forest activities occur in the area. Such farm and forest activities may include intensive operations that cause discomfort and inconveniences that involve, but are not limited to, noises, odors, fumes, dust, smoke, insects, operations of machinery during any 24-hour period, storage and disposal of manure, and the application by spraying or otherwise of chemical fertilizers, soil amendments, herbicides, and pesticides. One or more of these inconveniences may occur as the result of farm or forest activities which are in conformance with existing laws and regulations and accepted customs and standards.</p>		

3. Items Remaining with Property. Items identified as remaining with the Property shall mean those specific items, including any solely necessary or required controller, as they existed in the Property as of the Offer Date. No such item shall be removed from the Property unless it is broken or destroyed. In the event such item is removed, it shall be replaced with a substantially identical item, if reasonably available. If not reasonably available, it shall be replaced with a substantially similar item of equal quality and value, or better. The same or newer model of the item being replaced in the same color and size and with the same functions or better shall be considered substantially identical. Once the Seller's Property is under contract, the items that may be removed and taken by the Seller, as reflected in this Seller's Property Disclosure Statement, may only be amended with the written consent of the Buyer of the Property.

Appliances

- Clothes Dryer
- Clothes Washing Machine
- Dishwasher
- Garage Door Opener
- Garbage Disposal
- Ice Maker
- Microwave Oven
- Oven
- Range
- Refrigerator w/o Freezer
- Refrigerator/Freezer
- Free Standing Freezer
- Surface Cook Top
- Trash Compactor
- Vacuum System
- Vent Hood
- Warming Drawer
- Wine Cooler

Home Media

- Amplifier
- Cable Jacks
- Cable Receiver
- Cable Remotes
- Intercom System
- Internet HUB
- Internet Wiring
- Satellite Dish
- Satellite Receiver
- Speakers
- Speaker Wiring
- Switch Plate Covers

- Television (TV)
- TV Antenna
- TV Mounts/Brackets
- TV Wiring

Interior Fixtures

- Ceiling Fan
- Chandelier
- Closet System
- Fireplace (FP)
- FP Gas Logs
- FP Screen/Door
- FP Wood Burning Insert
- Light Bulbs
- Light Fixtures
- Mirrors
 - Wall Mirrors
 - Vanity (hanging) Mirrors
- Shelving Unit & System
- Shower Head/Sprayer
- Storage Unit/System
- Window Blinds (and Hardware)
- Window Shutters (and Hardware)
- Window Draperies (and Hardware)
- Unused Paint

Landscaping / Yard

- Arbor
- Awning
- Basketball Post and Goal

- Birdhouses
- Boat Dock
- Fence - Invisible
- Dog House
- Flag Pole
- Gazebo
- Irrigation System
- Landscaping Lights
- Mailbox
- Out/Storage Building
- Porch Swing
- Statuary
- Stepping Stones
- Swing Set
- Tree House
- Trellis
- Weather Vane

Recreation

- Aboveground Pool
- Gas Grill
- Hot Tub
- Outdoor Furniture
- Outdoor Playhouse
- Pool Equipment
- Pool Chemicals
- Sauna

Safety

- Alarm System (Burglar)
- Alarm System (Smoke/Fire)
- Security Camera
- Carbon Monoxide Detector
- Doorbell
- Door & Window Hardware

- Fire Sprinkler System
- Gate
- Safe (Built-In)
- Smoke Detector
- Window Screens

Systems

- A/C Window Unit
- Air Purifier
- Whole House Fan
- Attic Ventilator Fan
- Ventilator Fan
- Car Charging Station
- Dehumidifier
- Generator
- Humidifier
- Propane Tank
- Propane Fuel in Tank
- Fuel Oil Tank
- Fuel Oil in Tank
- Sewage Pump
- Solar Panel
- Sump Pump
- Thermostat
- Water Purification System
- Water Softener System
- Well Pump

Other

- _____
- _____
- _____
- _____

Clarification Regarding Multiple Items. Items identified above as remaining with Property where Seller is actually taking one or more of such items shall be identified below. For example, if "Refrigerator" is marked as staying with the Property, but Seller is taking the extra refrigerator in the basement, the extra refrigerator and its location shall be described below. This section shall control over any conflicting or inconsistent provisions contained elsewhere herein.

Items Needing Repair. The following items remaining with Property are in need of repair or replacement:

N/A

RECEIPT AND ACKNOWLEDGEMENT BY BUYER

Buyer acknowledges receipt of this Seller's Property Disclosure Statement.

Nadine Terry

1 Buyer's Signature

Nadine Terry for Weichert Workforce Mobility

Print or Type Name

3/15/24

Date

2 Buyer's Signature

Print or Type Name

Date

Additional Signature Page (F267) is attached.

SELLER'S REPRESENTATION REGARDING THIS STATEMENT

Seller represents that the questions in this Statement have been answered to the actual knowledge and belief of all Sellers of the Property

Bradley Michael Weiss

1 Seller's Signature

Bradley Michael Weiss

Print or Type Name

3/11/2024

Date

Jayne Weiss

2 Seller's Signature

Jayne Weiss

Print or Type Name

3/11/2024

Date

Additional Signature Page (F267) is attached.



Ehrlich/Rentokil
ATTN: Accounts Receivable
PO Box 740608
Cincinnati, OH 45274
770.954-9941 *PHONE*
770.954.9842 *FAX*

3/11/24

Location: **1714843**

BRAD WEISS

2110 WHITTINGHAM CT

ROSWELL, GA 30075-
8101

This letter is verification that the above listed property is currently under a Retreat and Repair Termite warranty with Active Pest Control and is renewable at \$335.16 per year. The warranty is currently in place until July 2, 2024. If you have any questions, please feel free to give us a call at 866-574-1338.

Thank you for choosing Active!

Sincerely,

Dana King

Active Pest Control

866-574-1338

www.activepestcontrol.com

"Where Relationships Matter"



DOCUMENT VERIFICATION

Version 20070808

Acct# 7638712 Customer Maria Frascarelli

Table with columns: DOCUMENTS, Sales verifies Included (Yes/No/N/A), Sales Mgr/OP Mgr 1st Review (Pass/Fail), OP Mgr /Gen Mgr 2nd Review (Pass/Fail), General Mgr Final Review (Pass/Fail). Rows include Service Agreement, Form II, Treatment Graph, Spec Sheet, Worksheet, Pictures.

Explanation and Correction of Missing or Incomplete Paperwork:

The following items are not completed:

DOCUMENT REVIEW CHECKLIST

- 1. Look for and compare signatures on all documents.
2. Look for all necessary documents.
3. Look for any changes on documents that would cause legal issues...
4. On basement construction, check for "depth to footer" measurement...
5. Look for down payment of at least 50% or information as to why down payment will not be collected...
6. Look for payment arrangements to be indicated.
7. BASEMENTS-Form II needed when not drilling basement walls and/or slabs.

AGREEMENTS

- In GA - Comprehensive, Defined or partial noted or checked
□ In FLA - Control or Prevention marked or checked
□ In ALA - All Branch address info
□ Chemical to be used marked
□ All Blanks Filled
□ Complete General Information
□ Legible, Neat & Clean
□ Dated
□ Signed by Customer
□ Proper Billing Information
□ Multiple Phone Numbers
□ Payment Terms Clearly Stated
□ Credit Card Information as Needed
□ Treatment Type Identified
□ Structure Type Identified
□ Warranty Type Identified
□ Untreated Areas Excluded

FORM II

- All Blanks Filled
□ Complete General Information
□ Legible, Neat & Clean
□ Dated
□ Signed by Customer
□ Detailed written explanation what areas do not meet minimum treatment standards
□ Detailed written explanation why it was not possible to treat to minimum treatment standards

TREATMENT GRAPHS

- All Blanks Filled
□ Complete General Information
□ Legible, Neat & Clean
□ Dated
□ Signed by Customer
□ Treatment Type Identified
□ Treatment Information Included
□ Inspection Findings Summary
□ Conducive Conditions Detailed
□ Construction Elements Identified
□ Scale Included
□ Graph Detailed
□ Treatment Specs Adequate
□ Untreated Areas Marked (Form II)
□ Inspection Key Utilized
□ Infestation/Damage located with multiple TTT and XXX
□ Areas Excluded from Warranty clearly identified

SPEC SHEETS/ WORKSHEETS

- Complete General Information
□ Legible, Neat & Clean
□ Dated
□ Code Double Checked
□ Special Directions as Needed
□ Gallons needed shown and accurate
□ Depth to footer shown and accurate

SENTRICON WORKSHEET (Revised 05/01/2011) Reps to fill out all items except office use and tech check

Customer Name Maria Frascarelli

Map Coordinate _____

Installation Types:

- Standard (Used rarely - reconsider before using)
- New Construction
- Existing Customer/ Relationship
- Real Estate
- Other Installation-Type 1 (Angie's List, Jax/Chattanooga)
- Site Transfer/ Conversions
- Reactivation
- Liquid Upgrade

Total Linear Feet 226

Product Type - Sentricon - Always Active

Application Type:

- Preventative
- Curative

Stories 2

Construction Year 1996

Termite Treatment History:

- Never Treated
- Less than 5 years ago
- More than 5 years ago

Building Type:

- | | |
|--|---|
| <input type="checkbox"/> Church | <input type="checkbox"/> Government |
| <input type="checkbox"/> Hospital/Medical | <input type="checkbox"/> Multi Family |
| <input type="checkbox"/> Office | <input type="checkbox"/> Other Commercial |
| <input type="checkbox"/> Other Residential | <input checked="" type="checkbox"/> Single Family |
| <input type="checkbox"/> School | <input type="checkbox"/> Temple |

Lead Source - OL Referral

Prenotify Type for Future Monitoring:

- Just Go
- Call ahead

Name: Maria Frascarelli

Phone: (678) 576-8898

- | | | |
|-------|------------------------------|--|
| Fence | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Gates | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Infestation Status:

- | | | |
|--------------------|------------------------------|--|
| Active Infestation | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Prev. Infestation | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Liquid Application Yes No

Use Termidor

Premise

Stored Items: Yes No

Moved by: Techs

Customer

Core Stations: Yes # _____

No

Sales Rep Jim Farley 104688

Emp ID 104,688 Date Sold 07/16/2020

Office Use Only

Account# 7638712

Install Date 07/20/2020

Install Route/ Tech _____

Monitoring Route _____

1st Monitoring Date _____

Additional info: _____

Installation Scheduling:

- Schedule with Customer
- Just Go
- Call & Go

Installation Notes:

Straight Install

Monitoring Notes:

The following information is included on the graph:

- | | |
|---|-------------------------------------|
| Scale | <u>2:1</u> |
| Location of Infestation | <input type="checkbox"/> |
| Construction Elements Infested | <input type="checkbox"/> |
| Conditions Conducive to Infestation | <input checked="" type="checkbox"/> |
| Type of Construction(s) | <input checked="" type="checkbox"/> |
| Type of Slab(s) | <input checked="" type="checkbox"/> |
| Type of Porch(s) | <input checked="" type="checkbox"/> |
| Decks/ Patios | <input checked="" type="checkbox"/> |
| Fences/ Gates | <input type="checkbox"/> |
| Sidewalks/ Driveways | <input checked="" type="checkbox"/> |
| Stumps | <input type="checkbox"/> |
| Distance* to Bodies of Water such as Pools, Creeks, Lakes, Ponds, etc. | <input type="checkbox"/> |
| *Must conform to Allgood standards | |
| Sale Rep Initials | <u>JK</u> |
| <input type="checkbox"/> Technician Checked Property Prior To Treatment - Tech Initials _____ | |

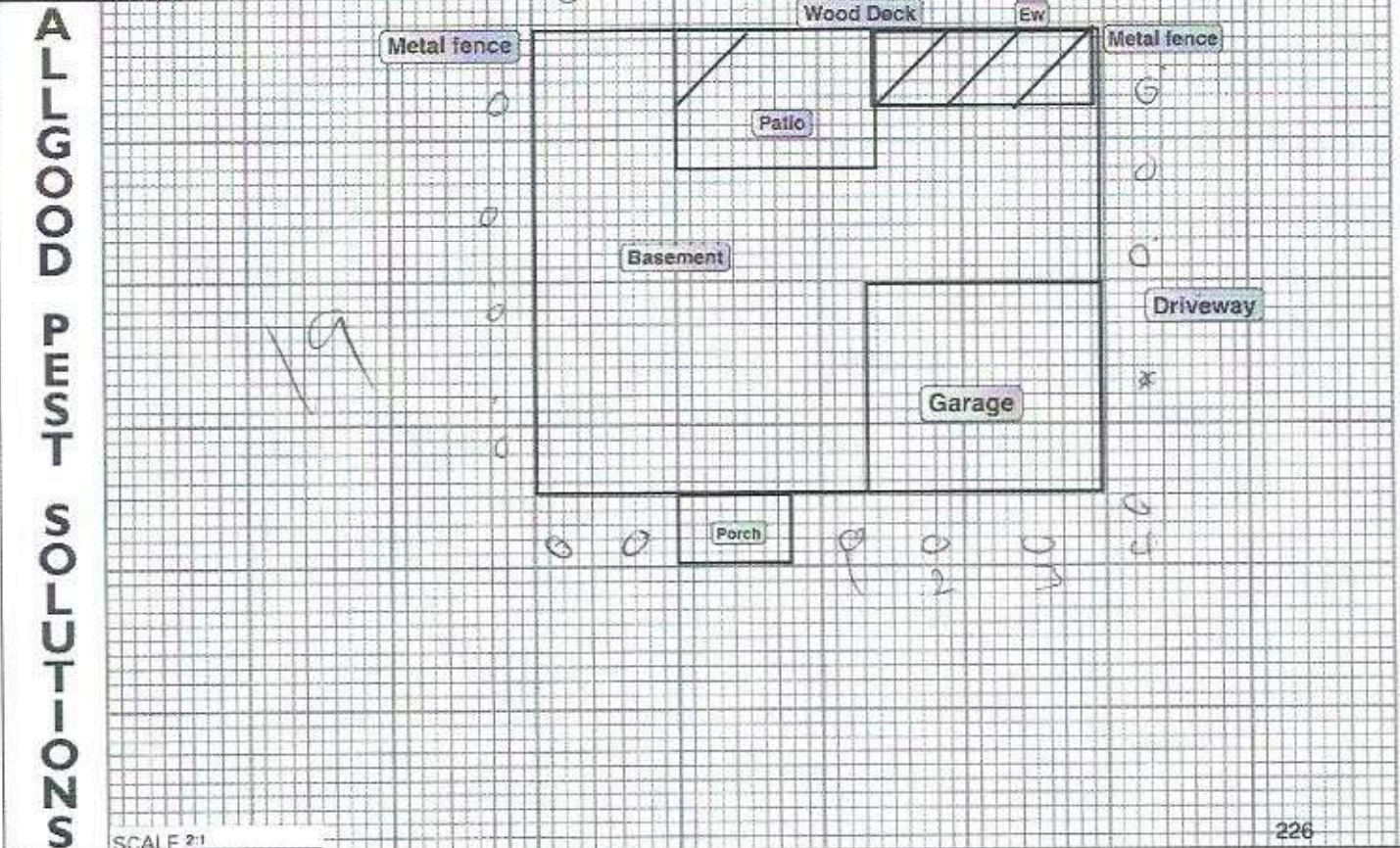
INSPECTION DATE: 07/20/2020 INSPECTOR: Jim Farley 104688 TREATMENT TYPE: Sentricon
 PROPERTY ADDRESS: 2110 Whittingham Ct. CITY: Roswell GA ZIP: 30075
 OWNER: Maria Frascarelli H# (678) 576-8898 W# _____ OTHER# _____
 OTHER: _____ H# _____ W# _____ OTHER# _____

- TREATMENT INFORMATION**
- Power On Water On
 - Floor Covering:
 - Carpet / Linoleum / Tile
 - Tackboard / Glue
 - Qtr. Round / Baseboard / Cove Base
 - Other _____
 - Stored Items Moved By Homeowner / Techs
 - Bushes Trimmed By Homeowner / Techs
 - Cellulose Debris:
 - Stacked _____
 - Hauled Away _____
 - # Vents _____ # Wells _____
 - Vent Color: _____
 - Special Mortar Mix: _____
 - Official Waiver

INSPECTION FINDINGS / REMARKS:

- CONDUCTIVE CONDITIONS - PRESENT / DESCRIPTION:**
- Earth to Wood Contact Wood deck touching soil
 - Wood within 6" of soil _____
 - Formboards / Grade Stakes / Cellulose Debris _____
 - Excessive Moisture _____
 - Insufficient Ventilation _____
 - Other _____

- CONSTRUCTION TYPE:** Crawl Slab Other _____
- SLAB TYPE:** Monolithic Floating Supported Suspended Unknown _____
- FOUNDATION WALLS:** Poured Poured / 8" HB HB / BV Other _____



INSPECTION KEY	226 LF	INFESTATION LOCATION	
	INFESTED AREA	TYPE	LOCATION
T = Subterranean Termites	Sills / Bands _____ <input type="checkbox"/>		
P = Powder Post Beetles	Joists / Beams _____ <input type="checkbox"/>		
W = Wood Boring Beetles	Subfloor _____ <input type="checkbox"/>		
D = Drywood Termites	Posts / Supports _____ <input checked="" type="checkbox"/>	Ew	Wood deck touching soil
F = Wood Decaying Fungus	Forms, Debris, Etc. _____ <input type="checkbox"/>		
M = Excess Moisture	Siding / Ext. Trim / Foam _____ <input type="checkbox"/>		
X = Damage Present	Garage Door Frame _____ <input type="checkbox"/>		
C = Cellulose Debris	Wood Floor / Floor Covering ... <input type="checkbox"/>		
E → W = Earth To Wood Contact	Studs / Plates _____ <input type="checkbox"/>		
V = Existing Vent	Drywall / Paneling _____ <input type="checkbox"/>		
NV = Cut & Install New Vent	Baseboards / Trim _____ <input checked="" type="checkbox"/>		
RV = Replace Vent	Window, Door Frame _____ <input type="checkbox"/>		
VW = Vent with Well	Masonry / Ex. Joint _____ <input type="checkbox"/>		
..... = Vertical Drilling	Other: _____ <input type="checkbox"/>		
→ = Short Rodding			
→ = Long Rodding			

CUSTOMER: Maria Frascarelli INSPECTOR: Jim Farley Jim Farley 104688

ADDITIONAL SPECIFICATIONS AND COMMENTS _____

<input checked="" type="checkbox"/> PLAN I: Subterranean Termite Repair and Retreatment.	THIS CONTRACT PROVIDES FOR RETREATMENT OF A STRUCTURE AND REPAIR OF DAMAGE CAUSED BY WOOD DESTROYING ORGANISMS WITHIN THE LIMITS STATED IN THIS CONTRACT.
<input type="checkbox"/> PLAN II: Subterranean Termite Retreatment Only.	THIS CONTRACT PROVIDES FOR RETREATMENT OF A STRUCTURE BUT DOES NOT PROVIDE FOR THE REPAIR OF DAMAGES CAUSED BY WOOD DESTROYING ORGANISMS.



ALLGOOD
PEST SOLUTIONS®

An Ehrlich Company

Office: Cobb
Street: 1190 Kennestone Circle
City, State Zip: Marietta, GA 30066
Phone: (800) 843-1349

**Wood Destroying Insect Solution Agreement
Allgood Termite Baiting System with Sentricon®**

Customer: Maria Frascarelli Home # (678) 576-8898 Work # _____ # _____
Service Address: 2110 Whittingham Ct. Roswell GA 30075
Billing Address: Same
Email Address: Mariafrascarelli@yahoo.com
Main Structure: SFD/ Basement Other Structure(s): _____

In accordance with your request, we are pleased to submit this Agreement for the treatment of subterranean termites –including Formosans (“Termites”) by installation and maintenance of a Sentricon® System (the “System”) with Always Active™ technology.

Service Commitment

Allgood Pest Solutions (the “Company”) shall, in compliance with all applicable federal, state, and local laws and recommendations contained in literature provided by Dow AgroSciences:

1. Install Sentricon® stations (the “Stations”) containing termite bait (the “Bait”) in the soil around the outside perimeter of the Structure(s). The Company may utilize above ground Stations as deemed appropriate for interior areas;
2. Service those Stations for a period of one year from the date hereof or for as long as extended by prepaid renewals; and
3. During that year or for as long as extended by prepaid renewals replace “Bait” as necessary.

Customer Understanding of the Performance of the System

The Customer understands the following provisions:

1. The System involves inspection, installation of Stations, and colony reduction or elimination with Bait. Subsequent inspection and servicing the stations is required due to new termite colonies;
2. Intervals of several months or more should be expected between installation of the Stations and elimination of the colony;
3. During the intervals between installation of Stations and complete elimination of existing colonies, termite feeding within the Structures, possibly including additional structural damage, should be expected to occur. Additional services such as targeted applications of termiticides are available to combat termite activity on a localized, short-term basis if desired; and
4. The active ingredient in the System is an insect growth regulator that prevents worker termites from successfully molting. The resulting disruption of development causes a decline in the termite colony to the point where the colony can no longer sustain itself.

Special or Additional Terms and Conditions: _____
Sentricon Always Active System

Official Waiver. If checked, an Official Waiver is an integral part of this Agreement and explains deviation from minimum treatment standards¹.

All treatment materials will be applied to conform to product labeling. Prior to service delivery, the Customer agrees to notify the Company in writing regarding allergies, respiratory conditions or other sensitivities of individuals located at the service address that may be aggravated by any application.

\$ <u>550.00</u> Install	<input type="checkbox"/> GreenSky Finance	\$ <u>285.00</u> ANNUAL RENEWAL FEE
\$ _____ Prepaid Renewals	<input type="checkbox"/> Amount Collected or Financed	<u>07/16/2021</u> 1ST RENEWAL DATE
\$ <u>550.00</u> TOTAL DUE	\$ <u>550.00</u>	Service & Plan may be renewed on an annual basis by payment of the Annual Renewal Fee that is due and payable on or before the 1st Renewal Date of this Agreement.
\$ _____ Balance Due	OTHER: <u>Paid with cc on file</u>	

If fees are not paid as agreed, a late fee of 1.5% of the unpaid balance will be added to the unpaid balance each month.

SEE REVERSE SIDE FOR ADDITIONAL TERMS AND CONDITIONS WHICH ARE AN INTEGRAL PART OF THIS AGREEMENT.

This agreement is contingent on the approval of the Designated Certified Operator. By signing below the Customer and the Company agree to comply with all terms and conditions contained in this Agreement. The Customer may cancel this transaction at any time prior to midnight on the third (3rd) business day after the date of this transaction.

Rep: Jim Farley Customer: X Maria Frascarelli Date: 07/20/2020
Jim Farley 104688

¹ As established by the Georgia Structural Pest Control Commission

®™ Trademarks of Dow AgroSciences

General Terms and Conditions

By specific reference hereto the Customer understands that the Terms and Conditions of this Agreement and warranty Plan(s) are hereby made an integral part of this Agreement and apply without exception.

1. This Agreement is transferable to a subsequent owner provided that all Fees are paid on a consecutive, timely basis from the date of initial service.
2. This Agreement covers the Structure(s) (see attached graph) identified herein as of the date of the initial service. Exterior fences, decks, lattice, supports, stairs landscape timbers, and RR ties are excluded unless specified as other Structures on the front of this Agreement.
3. The Customer warrants full cooperation with the Company during the term of this Agreement, and agrees to correct (at the Customer's expense) any factors contributing to infestation, such as wood, trash, lumber, or other cellulosic materials (including construction elements) in direct wood-soil contact, standing water, faulty grades, or other conditions conducive to termite infestation. The Customer understands rigid board insulation, foamboard and other similar materials such as polystyrene and polyisocyanurate (collectively referred to as RBI) may exist in visible or hidden areas of the structure(s) and that RBI's are conducive to infestation, particularly in areas below grade and/or subject to moisture penetration. The Customer agrees to correct (at the Customer's expense) any RBI discovered in the Structure(s) below grade and/or retaining moisture. Failure of the Customer to cooperate may void this Agreement.
4. It is further understood that moisture in the Structure(s) above the ground from sources such as roof, gutter, or plumbing leaks, improperly sealed door, window, and exterior trim, or penetration into Exterior Insulation Finish Systems, RBI or other construction could support termite colonies and therefore, it is the responsibility of the Customer to correct (at the Customer's expense) any such condition(s). The Customer agrees that the Company shall have no liability for treatment of infestation or repair of damage caused by infestation sustained by above ground moisture conditions.
5. The obligation of the Company under this Agreement is conditioned upon the Customer's payment in full of the Fees as set forth and failure to pay the same in full shall cancel this Agreement in its entirety and discharge the Company of any liability and any amount paid shall become the property of the Company. Liability of the Company is limited to the life of the Agreement. The Company reserves the right to refer this account to an attorney if any payment is more than 60 days past due and the responsibilities of the Company under this Agreement will be suspended until outstanding balances are paid. The Customer shall become liable for all costs of collection, including 15% attorney's fee, if collected by law or through an attorney.
6. The Georgia Structural Pest Control Act requires all pest control companies to maintain insurance coverage. Information about this coverage is available from this pest control company.
7. Any claim for breach of any warranty shall be made forthwith in writing to Rentek North America, Inc. d/b/a Allgood Pest Solutions, 2540 Lawrenceville Hwy, Lawrenceville, Ga. 30044
8. The Company's liability shall be terminated should the Company be prevented from fulfilling its responsibilities under the terms of this Agreement by reasons of act of war, whether declared or undeclared, acts of duly constituted government authority, strike, acts of God, natural disasters or refusal of the Customer to allow the Company access to the property for the purpose of carrying out the terms and conditions of this Agreement.
9. Any dispute, other than one relating to collection on account, arising out of or relating to this Agreement or the services provided under this Agreement or tort based claims for personal or bodily injury or damage to real or personal property shall be finally resolved by arbitration administered under the commercial arbitration rules of the American Arbitration Association. This Agreement involves interstate commerce; furthermore, the Company and the Customer agree that the Federal Arbitration Act shall control their mutual rights and obligations and the conduct of any arbitration proceeding. The award of the arbitrator shall be final, binding, non-appealable and may be entered and enforced in any court having jurisdiction in accordance with the Federal Arbitration Act. The arbitrator shall not have the power or authority to award exemplary, treble, liquidated, or any type of punitive damages.
10. THERE ARE NO OTHER WARRANTIES OR AGREEMENTS, ORAL OR OTHERWISE, EXPRESSED OR IMPLIED EXCEPT THOSE STATED HEREIN AND SPECIFICALLY THERE ARE NO IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE.

Specific Terms and Conditions -

WOOD DESTROYING INSECT SOLUTION AGREEMENT - ALLGOOD TERMITE BAITING SYSTEM WITH SENTRICON™

1. Service will be provided and the specifically agreed to Plan will be in effect for 12 months from the date of installation or for as long as extended by prepaid renewals. After this period, Service and Plan may be renewed on an annual basis for the lifetime of the treated property by payment of the Annual Renewal Fee (as disclosed on the front page). The Annual Renewal Fee is due and payable in full on or before the first renewal date and subsequent anniversary dates. Failure to pay such Annual Renewal Fee shall void this Agreement without privilege of reinstatement. The Annual Renewal Fee may be adjusted after the renewal date specified on the front of the agreement by providing notice to the Customer. However, in no event shall the average annual increase, if any, be greater than 5% or more than the annual rate of inflation (as measured by the Consumer Price Index), whichever is greater. The Company reserves the right to periodically reinspect the Structure(s) at any time (normal business hours) during the effective term of the Agreement.
2. The Customer will notify the Company in writing prior to (a) the Structure(s) being structurally modified, altered or otherwise changed, or if (b) any pesticide is applied on or close to the location of any Station, or (c) soil is removed or added around the foundation, or (d) any tampering of the Stations occurs. Failure to correct or notify the Company of the events listed above may void this Agreement. Plan I provision for repair may be temporarily suspended by the Company as a result of any of the events listed above and additional services because of any addition, alteration, or other change may be provided by the Company at the Customer's expense, and may require an adjustment in the Annual Renewal Fee. Failure of the Company's representatives to notice the points listed above during periodic inspections does not release the Customer from the stated obligations.
3. The Company reserves the right to substitute any upgraded products or ingredients.
4. The Customer agrees that all of the components of the System (the "Components") are and will remain the property of Dow AgroSciences. The Customer has no rights to any of the Components, other than the right to their use as installed by the Company on the Customer's premises under this Agreement. Upon expiration or termination of this Agreement the Company and Dow AgroSciences or its representatives are authorized by the Customer to retrieve from the Customer's premises the Stations and other Components contained therein for appropriate disposition.
5. If the Company, for any reason, ceases to represent the System, the Company will so notify the Customer and offer one of the following:
 - i. If the Customer and the Company agree on the use of an alternative form of termite prevention, a new agreement will be entered into and the Customer shall receive credit for any unearned payments; or
 - ii. If the Customer or the Company elects to discontinue the Agreement, the Customer shall receive a refund for any unearned payments.
6. **The removal of the bait or baiting system may result in a lack of termite protection.**

Plan I- Retreatment and Repair (in effect only when Plan I box is checked on front side)

1. The Company warrants that there will be no further termite infestation in the structure within 12 months from the date of completion of installation or for as long as extended by prepaid renewals. However, in the event termite infestation does occur during the term of this warranty or any renewal period thereof, the Company will perform any necessary repairs and retreatment without additional fees, subject to the following provisions and all Terms and Conditions.
2. Damage with LIVE TERMITES must be present and verified by the Company's representative after the date of installation and initial treatment.
3. The Company shall be responsible for repairs to the Structure(s) only when made with the approval and under the supervision and control of the Company. Repair shall be limited to new damages only and in no event shall the Company be responsible for any consequential damages. It is expressly agreed and understood that this Plan is strictly limited to cost of repairs.
4. Damage discovered with no verified live and active termite infestation shall not be repaired. It is to be understood that termite-damaged areas of the structure(s) may have existed in exposed and hidden areas as of the date of initial installation and/or initial treatment and that the Company assumes no responsibility to repair these preexisting damaged areas.
5. Areas of direct earth to wood (including pressure treated) contacts such as siding, trim, decks, porches, posts, stairs, lattice, fences, landscape timbers, cross ties, etc. are excluded from Plan I provisions for the repair of termite damage.

Plan II- Retreatment Only (in effect only when Plan II box is checked on front side)

1. The Company warrants that there will be no further termite infestation in the structure within 12 months from the date of completion of installation or for as long as extended by prepaid renewals. However, in the event termite infestation does occur during the term of this warranty or any renewal period thereof, the Company will perform any necessary retreatment without additional fees, subject to all Terms and Conditions.
2. Plan II does not warrant against, nor shall the Company be responsible for present or future damage to the Structure(s) or contents, nor provide for repairs or compensation thereof.
3. Plan II is issued due to factors such as nature of construction, conditions conducive to infestation, the degree or extent of termite infestation or existing damage, application restrictions, and/or other mitigating circumstances. However, if all such factors are corrected to the satisfaction of the Company, Plan II may be upgraded (at possible additional Customer's expense) to Plan I.

OFFICIAL WAIVER

of the Georgia Minimum Treatment Standards for the Control of Subterranean Termites

NOTICE TO PROPERTY OWNERS / AGENT - DO NOT SIGN THIS DOCUMENT UNTIL YOU HAVE READ AND SIGNED "CONDITIONS GOVERNING THE USE OF THE OFFICIAL WAIVER OF THE MINIMUM TREATMENT STANDARDS FOR THE CONTROL OF SUBTERRANEAN TERMITES" IN THIS DOCUMENT. THESE "CONDITIONS" MUST BE CONSIDERED PART OF THIS DOCUMENT. YOU MUST RECEIVE A COPY OF THIS REPORT AND SUPPORTING GRAPH AT TIME OF SIGNING OR SERVICE.

CONDITIONS GOVERNING THE USE OF THE OFFICIAL WAIVER OF THE MINIMUM TREATMENT STANDARDS FOR THE CONTROL OF SUBTERRANEAN TERMITES

- 1. The Official Waiver of the Minimum Treatment Standards for the Control of Subterranean Termites is intended to be used ONLY in situations where it is not possible or practical to meet the minimum treatment standards established by the Georgia Structural Pest Control Commission.
2. The Official Waiver of the Minimum Treatment Standards for the Control of Subterranean Termites is not to be used to bypass the minimum treatment standards nor is it used to notify any agency of government that a termite treatment has been completed.
3. By signing this document the property owner / agent acknowledges that the property identified will not receive a complete minimum treatment.
4. Each "NO" must be explained in detail in the area provided on the front of this document as to specifically what areas of the structure do not meet the treatment standards and why it is not possible to meet these treatment standards.
5. All sections of this document must be filled out completely.

Name of Company Allgood Pest Solutions
Address of Company 1190 Kennestone Circle Marietta, GA 30066
Owner of Property Maria Frascarelli
Inspector Name and Certification / Registration Number Jim Farley 104688 SP11054
Address of Structure Treated - Note: A separate Official Waiver is required for each individual structure.
2110 Whittingham Ct. Roswell GA 30075
Phone Number of Property Owner / Agent (678) 576-8898

Indicate with a check mark those items that do NOT meet the minimum treatment standards.

TERMITE CONTROL

SOIL TREATMENTS - Note: for defined post construction soil treatments and pre-construction soil treatments, only items #1, 2 and 3 are applicable.

Type of Treatment - Check one

- Comprehensive post construction soil treatment
Defined post construction soil treatment
Pre-construction soil treatment

Date job completed -

- 1. All debris removed
2. Wooden contacts removed or insulated
3. Crawl space clearance 18 inches or greater
4. Foundation adequately trenched / rodded and treated
5. Voids adequately drilled / treated
6. Earth filled porches adequately drilled / treated
7. Contiguous slabs adequately drilled / treated
8. Slabs at / above grade adequately drilled / treated
9. Monolithic slabs adequately treated
10. Termite tunnels removed

Non Soil Pesticide, Device, Bait or Baiting System - Note: All items pertain to both post construction and pre-construction applications.

Date Job Completed - NO

- 1. All debris removed
2. Wooden contacts removed
3. Barrier or baiting system installed consistent with label directions

Explain in detail what areas of the structure do not meet treatment standards and why it is not possible to meet these treatment standards. Also, attach a graph indicating the area(s) that were not treated to minimum standards.

Wood deck touching soil due to construction. Customer elects not to correct at this time due to cost.

Signature of Property Owner / Agent X [Signature]

Date 07/20/2020



ALLGOOD

PEST SOLUTIONS®

An Ehrlich Company

Technician Checked
Property Prior To Treatment
Tech Initials _____

TERMITE TREATING SPECIFICATIONS

- 1. Remove cellulose and other debris
- 2. Remove form boards
- 3. Scrape off termite tunnels.
- 4. Trench / treat interior foundation wall
- 5. Trench / treat soil next to piers
- 6. Trench / treat soil next to pipes
- 7. Drill / treat voids in piers
- 8. Drill / treat hollow block foundation voids
- 9. Remove moulding - drill / treat hollow block
- 10. Drill thru brick veneer / treat hollow block
- 11. Drill / treat brick veneer
- 12. Drill / treat double brick
- 13. Drill / treat triple brick
- 14. Drill / treat voids in stone wall
- 15. Drill / treat chimney voids
- 16. Drill / treat under slab / expansions
- 17. Drill / treat utility room slabs / pipes
- 18. Remove floor covering / drill / treat
- 19. Short rod under slab from exterior
- 20. Remove moulding / drill, treat under partition
- 21. Drill / treat cracks in slab
- 22. Drill thru wood floor / treat under slab / patch
- 23. Long rod soil treatment
- 24. Treat existing bath trap
- 25. Cut bath trap / treat / install door
- 26. Trench / rod soil along exterior foundation wall
- 27. Drill / treat under adjacent slabs
- 28a. Vertical drill / treat dirt filled porch
- 28b. Short rod dirt filled porch
- 28c. Long rod dirt filled porch
- 28d. Void / treat dirt filled porch
- 29. Treat planter box
- 30a. Provide access to crawl space
- 30b. Install crawl space access door
- 31a. Install vent - new opening
- 31b. Install vent - existing opening
- 31c. Install vent well
- 32. Install poly over 70% - 80% ground surface
- 33. Excavate clearance (18" inside / 6" outside)
- 34. Install floor supports
- 35. Insulate wood / earth contact at steps
- 36. Apply foam (describe on graph)
- 37. Chemical treatment - PPB
- 38. Wood treatment - borates
- 39. Pre-treat soil (liquid)
- 40. Other (describe on graph)

Rentokil North America, Inc. will provide service reports that include pesticide use after each service. This is in keeping with the Georgia Structural Pest Control Act, which requires that pesticide use records be provided each time an application is made. These pesticide use records may be made electronically at the time of application and maintained by the pest control company electronically. These records must be provided or made available electronically when application is complete. Also, the property owner, resident or custodian of the property must complete the electronic communication acknowledgement statement (*see below*). This statement must be maintained either for as long as the contract remains in effect or for two years past the expiration of the contract.

Electronic Communication Acknowledgement Statement.

In accordance with state regulations, pest control companies have a responsibility to provide you with a record every time a pesticide product and/or pest system is applied. This record is required to be provided to the property owner, resident or custodian of the property. This record may include post-application precautionary information. Licensed and regulated by the Georgia Department of Agriculture, 19 Martin Luther King, Jr. Drive, Atlanta, Georgia 30334 (404) 656-3641.

I understand and request that my pesticide use records be provided or made available to me electronically.

X



Signature of owner, resident or custodian of the property

07/20/2020

Date

Weichert Seller Disclosure

Property ID: M-C-184966-2

PROPERTY'S RECORD TITLE OWNER (Weichert SELLER) DISCLOSURE STATEMENT

This Seller Disclosure by the property's record title owner(s) ("Weichert Seller") Bradley Michael Weiss, Jayne Jay Weiss, concerns the real property and fixtures (the "Property") located at the following address: 2110 Whittingham Court, Roswell Georgia 30075 United States.

This statement is a disclosure of the conditions of the property. All representations made herein by Weichert Seller shall remain the responsibility of Weichert Seller; Weichert Seller understands that Weichert Workforce Mobility Inc. (Weichert) may show this document to buyers for informational purposes only.

INSTRUCTIONS TO THE RECORD TITLE OWNER (Weichert)

As the potential purchaser of the Property from Weichert Seller, Weichert requires the following information contained in this document. Please know that your failure to make accurate and complete disclosures will be a breach of any agreement you may sign with Weichert, regardless of any use of these disclosures by prospective buyers. **Based on the questions and your answers, provide details further in the space provided.**

TO ANY PROSPECTIVE BUYER FROM WEICHERT

As a relocation benefit to the Record Title Owner, who is the Signatory on the deed to be granted to the prospective buyer. Weichert either has acquired title to the property, will acquire title to the property, holds Title in Trust or with a designated nominee, or is the purchaser named in contract of sale with respect to the property signed by or on behalf of the property's record owner(s) and under which Seller can acquire title. As part of such purchase or trustee relationship, Weichert obtained this Seller Disclosure Statement from such prior owner. This document is a statement of Weichert Seller opinion concerning the condition of the Property, and not a statement or representation of Weichert with respect to the Property. Weichert has never occupied the Property and cannot verify whether all the information provided in this Weichert Seller Disclosure Statement is accurate and therefore makes no warranties or representations with respect to the Property of this Weichert Seller Disclosure Statement. Weichert provides such Weichert Seller Disclosure Statement to prospective buyers for whatever informational purpose(s) it may or may not have, and such document shall **NOT** be deemed to be any sort of warranty from Weichert or Weichert Seller to a prospective buyer regarding the Property and is **NOT** a substitute for a thorough inspection of the Property by a prospective buyer.

Seller starts on the next page.

Weichert Seller Disclosure

Property ID: M-C-184966-2

THE STATEMENT AND REPRESENTATION OF Weichert SELLER AS TO THE PROPERTY IS AS FOLLOWS:

PREAMBLE: The term “ever” when used herein refers to problems of which you became aware by personal observation or otherwise during your occupancy and/or by any former owner(s). *If unknown to you, please comment below each section.*

1. HOUSE SYSTEMS AND PROPERTY STRUCTURES

1(a) Are you aware of any present or past problems affecting one or more of the following - check “N/A” for any time(s) that are not applicable								
	YES	NO	N/A		YES	NO	N/A	
<u>Electrical wiring</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Exterior Walls, including any siding/other covering</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<u>Air Conditioning - Central</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Ceiling</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Air Conditioning – Other</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Windows</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Plumbing</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Doors</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Floors</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Driveways</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Well</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Fences</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Sprinkler System</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Patios</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Smoke Detector</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Interior Lighting/Fixtures</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Interior Walls</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Exterior Lighting/Fixtures</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

If “YES” to any of the above, provide details (attach additional page(s) if necessary):

Minor stucco repairs (cracks, missing sealant) and sealant applied proactively to all windows. One window identified high moisture, however, no underlying damage to the substrate. Warranty attached for all work completed upon inspection for 1 year

If “UNKNOWN” to any of the above, provide details:

HOUSE SYSTEMS AND PROPERTY STRUCTURES QUESTIONS - (continued)				YES	NO	N/A
1(b) Does the property have one (1) or more fireplaces				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If “YES”, indicate when the flue(s) were last cleaned:</i>						
1(c) Does the property have any of the following stoves:	Wood Burning	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	Coal	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	Pellet	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
1(d) If “YES” to 1(c), do all systems conform to applicable, municipal by-laws an/or fire or safety regulations:				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Weichert Seller Disclosure

Property ID: M-C-184966-2

1. HOUSE SYSTEMS AND PROPERTY STRUCTURES – (continued)

HOUSE SYSTEMS AND PROPERTY STRUCTURES - (continued)	Wood Burning	Coal	Pellet
1(e) If "NO" to 1(d), identify any non-conforming system:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	YES	NO	N/A
1(f) If "YES" to 1(b), are you aware of any present or past problem(s) with the chimney(s), firebox(es), damper(s), and/or flue(s):	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "YES", provide details:			
Chimney updated to hard stucco in 2021			
If "UNKNOWN" to any of the above, provide details:			
HOUSE SYSTEMS AND PROPERTY STRUCTURES (continued)	YES	NO	N/A
1(g) Does the property have any flue(s) for wood, coal, and/or oil stoves or furnaces:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If "YES", indicate when the flue(s) were last cleaned:			
1(h) If "YES" to 1(d), are you aware of any present or past problem(s) with the wood, coal, and/or oil stove or furnace flue(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "YES", provide details:			
1(i) Are all appliances included in the sale in working order:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "NO", provide details:			
1(j) Type(s) of siding on the exterior walls:			
Hard Stucco and Vinyl Siding			
1(k) Year the home was built:			
1996			

2. HEATING / HOT WATER / WINTERIZATION

HEATING / HOT WATER / WINTERIZATION QUESTIONS	Oil	Gas	Electric	Wood	Other	
2(a) Type(s) of heating system(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If "Other", provide details:						
2(b) Type(s) of hot-water system(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If "Other", provide details:						
HEATING / HOT WATER / WINTERIZATION QUESTIONS - (continued)				YES	NO	N/A
2(c) Are all rooms heated by the system(s) identified in 2(a):				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "NO", provide details:						
2(d) Are you aware of any heating/hot water system inspection(s) completed in the past:				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2(e) If "YES" to 2(d), do you have copies of any completed inspection(s):				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Weichert Seller Disclosure

Property ID: M-C-184966-2

2. HEATING / HOT WATER / WINTERIZATION – (continued)

HEATING / HOT WATER / WINTERIZATION QUESTIONS - (continued)				
2(f) Age of the heating system(s):				
Unknown				
2(g) Date the heating system last serviced:				
N/A				
2(h) System Ownership:				
SYSTEM:	OWNED	RENTED	NAME OF RENTAL COMPANY	N/A
Propane/gas tank(s) for furnace:	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>
Propane/gas tank(s) for kitchen stove:	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>
Hot water heater(s):	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Hot water tank(s):	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Furnace burner:	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Security System:	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>
Other(define):	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Other(define):	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.				

3. ELECTRICAL SYSTEMS

ELECTRICAL SYSTEMS QUESTIONS	YES	NO	N/A
3(a) Are you aware of any electrical additions, changes, or repairs made to this property: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3(b) If "YES" to 3(a), are you aware if all required permits and/or government approvals were obtained: <i>If "NO", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3(c) If "YES" to 3(a), did you do any of the work yourself: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3(d) If "YES" to 3(a), was any of the work done by a licensed contractor: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3(e) Are you aware of any electrical system inspection(s) completed in the past:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3(f) If "YES" to 3(e), do you have copies of any completed electrical system inspection(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Weichert Seller Disclosure

Property ID: M-C-184966-2

3. ELECTRICAL SYSTEMS (continued)

ELECTRICAL SYSTEMS QUESTIONS – (continued)	Copper	Aluminum	Knob & Tube	Other
3(g) Type of Electrical Wiring:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER:				
ELECTRICAL SYSTEMS QUESTIONS	60 amps	100 amps	125 amps	200 amps
3(h) Amperage:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.				

4. INSULATION / ASBESTOS

INSULATION / ASBESTOS QUESTIONS	YES	NO	N/A
4(a) Are you aware if the property is insulated			
<i>If "YES", please identify the type(s) of insulation or check the "Unknown" box to the right:</i>			
Fiberglass Insulation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If "NO", provide details:</i>			
4(b) Are you aware if urea formaldehyde foam insulation (UFFI) was ever present in the property:			
<i>If "YES", provide details:</i>			
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4(c) Are you aware of any air test(s) for UFFI/formaldehyde that were ever done:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4(d) If "YES" to 4(c), do you have copies of any test results for UFFI/formaldehyde:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4(e) Are you aware if asbestos-containing insulation and/or materials is present:			
<i>If "YES", provide details:</i>			
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4(f) Are you aware of any test(s) for asbestos-containing insulation or materials ever completed on the home	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4(g) If "YES" to 4(f), do you have copies of any asbestos test results on the home:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

Weichert Seller Disclosure

Property ID: M-C-184966-2

5. MOISTURE

MOISTURE QUESTIONS	YES	NO	N/A
5(a) Are you aware of any present or past water problems and/or damp conditions anywhere in the house including but not limited to roofs, floors, walls (exterior/interior and between) bathrooms, kitchens, basement, crawl space:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5(b) If "YES" to Question 5(a), are you aware if the problem(s) have been corrected? If "YES", define how the problem(s) was/were corrected or if "NO", provide details:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noted above, moisture in one window, with no underlying damage identified and stucco warranty attached			
5(c) Is there a sump pump in the home:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5(d) If "YES" to 5(c) are there now or were then any problems with the sump pump? If "YES", provide details:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5(e) Are you aware of any moisture test(s) ever completed on the home or other structure(s) on the property:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5(f) If "YES" to 5(e), do you have copies of any moisture test(s) results:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

6. INDOOR AIR QUALITY (IAQ) / MOLD / RADON GAS

INDOOR AIR QUALITY (IAQ) / MOLD / RADON GAS QUESTIONS	YES	NO	N/A
6(a) Are you aware of any present or past mold problem (visible mold and/or non-visible mold) in this property: If "YES" to either/both, provide details:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6(b) Are you aware of any present or past Indoor Air Quality (IAQ) problem(s) in this property: If "YES", provide details:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6(c) Are you aware of any IAQ test(s) ever done to determine if there is an Indoor Air Quality problem in this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6(d) If "YES" to 6(c), do you have copies of any IAQ tests done:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6(e) Are you aware of any present or past elevated Radon Gas in this property If "YES", provide details:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6(f) Is there a radon mitigation system installed in the property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6(g) Are you aware of any test(s) ever done to determine if there is a Radon Gas problem in this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6(h) If "YES" to 6(g), do you have copies of any of the tests done:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

Weichert Seller Disclosure

Property ID: M-C-184966-2

7. ADDITIONS / RENOVATIONS

ADDITIONS / RENOVATIONS QUESTIONS	YES	NO	N/A
7(a) Are you aware of any structural additions, changes, and/or repairs made to this property by former owners: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7(b) If "YES" to 7(a), are you aware if all required permits and/or government approvals were obtained: <i>If "NO", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7(c) If "YES" to 7(a) Are you aware if any work was done by a licensed contractor: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7(d) Have you made any structural additions, changes, and/or repairs to this property: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7(e) If "YES" to 7(d), are you aware if all required permits and/or government approvals were obtained: <i>If "NO", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7(f) If "YES" to 7(d) were structural additions, changes, and/or repairs completed by a licensed contractor: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7(g) If "YES" to 7(d), did you do any of the work yourself: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7(h) If "YES" to 7(a) or 7(d) do you have copies of the required permits for the completed work:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

8. LAND / FOUNDATION

LAND / FOUNDATION QUESTIONS	YES	NO	N/A
8(a) Are you aware if this property is located in a flood zone:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8(b) Are you aware if this property ever had a drainage or flooding problem: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8(c) Are you aware if this property is located on an earthquake fault:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8(d) Are you aware if the property is located on filled or expansive soil: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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8. LAND / FOUNDATION – (continued)

LAND / FOUNDATION QUESTIONS	YES	NO	N/A	
8(e) Are you aware of any present or past sliding, settling, earth movement, upheaval, or earth stability problems on your property: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8(f) Are you aware of any present or past sliding, settling, earth movement, upheaval, or earth stability problems in the immediate neighborhood: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8(g) Are you aware of any defects or problems relating to the foundation: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
LAND / FOUNDATION QUESTIONS – (continued)	Concrete	Wood	Slab	Other
8(h) Foundation Type <i>Other (identify):</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LAND / FOUNDATION QUESTIONS – (continued)	YES	NO	N/A	
8(i) Are you aware of any structural problems relating to this property: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8(j) Are you aware of any present or past underground fuel tank(s) on this property: <i>If "YES", provide details and include the fuel type(s) of the underground tank(s):</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8(k) <i>If "YES" to 8(g), are you aware of any present or past problem(s) with any underground fuel tank(s), including but not limited to leaking:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
8(l) Are you aware of any inspection(s) and/or test(s) ever completed on the underground tank(s):	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8(m) <i>If "YES" to 8(i), do you have copies of any inspections/tests completed on this property:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.				

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9. ROOF

ROOF QUESTIONS		YES	NO	N/A	
9(a) Are you aware of any present or past leaks in the roof:		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>If "YES", provide details:</i>					
Previous owner filled insurance claim on roof ~2018. New roof then installed, no further problems identified					
9(b) Are you aware of any present or past problems with the roof, other than leaks:		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<i>If "YES", provide details:</i>					
ROOF QUESTIONS – (continued)		Wood (pine/cedar)	Asphalt	Clay	Other
9(c) Roof type:		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Other (describe):</i>					
ROOF QUESTIONS – (continued)		Pitched	Flat	Other	
9(d) Roof style:		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Other (describe):</i>					
ROOF QUESTIONS – (continued)		YES	NO	N/A	
9(e) Are you aware of any repairs made to the roof:		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<i>If "YES", provide details:</i>					
9(f) Are you aware if the roof was ever replaced:		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>If "YES", provide details:</i>					
Previous owners ~2018 as noted above					
9(g) Are you aware of any roof inspection(s) ever completed on the home:		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9(h) If "YES" to 9(e), do you have copies of any inspection(s) done for this home:		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9(i) Year the roof was installed:					
2018					
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.					

10. EXTERIOR CLADDING

EXTERIOR CLADDING QUESTIONS		YES	NO	N/A
10(a) Is any part of your exterior cladding made of Stucco (any type):		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", to the best of your knowledge, please identify where the Stucco is:</i>				
3 sides (front, left, right elevation)				
10(b) If "YES" to question (10a), do you know what type of Stucco is on the home:		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>				
hardcoat stucco				

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10. EXTERIOR CLADDING – (continued)

EXTERIOR CLADDING QUESTIONS – (continued)	YES	NO	N/A
10(c) Are you aware of any Stucco repairs made to the property:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
As noted above. Repaired minor cracks and installed sealant around windows. One window identified with moisture but no underlying damage upon restoration			
10(d) Are you aware if any Synthetic Stucco (E.I.F.S. - External Insulated Finish Systems) was ever present on the property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
10(e) If Synthetic Stucco is present on this property, are you aware of any repairs ever made to it:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If "YES", provide details:</i>			
10(f) Are you aware of any Synthetic Stucco problem affecting other properties in this neighborhood:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
10(g) Are you aware if any part of the exterior cladding is made of Manufactured Stone Veneer (MSV):	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", to the best of your knowledge, identify where the Manufactured Stone Veneer is located:</i>			
Bottom of the front of the house			
10(h) Are you aware of any test(s) ever done to determine if there is Synthetic Stucco present in this property and/or that the Stucco may be a problem:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10(i) If "YES" to 10(h), do you have copies of any completed test(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10(j) Are you aware of any test(s) ever done to determine if there is Manufactured Stone Veneer present in this property and/or that the MSV may be a problem:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10(k) If "YES" to 10(j), do you have copies of any test(s) done:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

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11. SEWAGE / DISPOSAL SYSTEM

SEWAGE / DISPOSAL SYSTEM QUESTIONS	YES	NO	N/A
11(a) Is the property connected to a public system:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11(b) If "YES" to 11(a), are you aware of any sewage backup, drainage, and/or leakage problem(s) that ever existed on this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11(c) Is there a septic tank or cesspool system serving this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", when was it last serviced and where it is located on the property:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11(d) Is your property part of a community disposal system:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11(e) Are you aware of any present or past problems with the septic tank, cesspool, or community disposal system serving this property and/or neighborhood:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11(f) Are you aware of any septic tank/cesspool test(s) ever completed for the system serving this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11(g) If "YES" to 11(f), do you have copies of any test(s) done:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

12. DRAINAGE / WATER SUPPLY

DRAINAGE / WATER SUPPLY QUESTIONS	YES	NO	N/A
12(a) Are you aware if this property ever had a drainage and/or flooding problem:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12(b) Is this property connected to a public water supply:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12(c) Is this property serviced by a well:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If the well is shared, please provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12(d) If YES to 12(c) and the well is shared, is there a well agreement registered on title:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12(e) If "YES" to 12(c), are you aware of any problem that ever existed with the well:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If "YES", provide details:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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12. DRAINAGE / WATER SUPPLY – (continued)

DRAINAGE / WATER SUPPLY QUESTIONS – (continued)	YES	NO	N/A
12(f) Are you aware of any tests completed for the well water, water quality, and/or water flow or pressure:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12(g) If “YES” to 12(f), do you have copies of any tests:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Please REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

13. POOL / SPA / HOT TUB / JACUZZI

POOL / SPA / HOT TUB / JACUZZI QUESTIONS	YES	NO	N/A
13(a) Is there a swimming pool on this property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If “YES”, define what type:	Above-ground		
	<input type="checkbox"/>	In-ground	
13(b) Are you aware of problem(s), damage(s), and/or leak(s) that occurred with the pool such as structure, facing, lining, pump, heater, motor, etc.:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If “YES”, provide details:			
Liner tear in 2020, corrected and no further issues			
13(c) If the property has an in-ground pool, is there a fence completely surrounding the pool:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13(d) If “YES” to 13(c), does the fencing height and construction meet local requirements:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13(e) Is there one or more of the following on the property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If “YES”, define what type:			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13(f) Are you aware of any problem(s), damage, and/or leaks that occurred with the hot tub, spa and/or Jacuzzi such as structure, facing, lining, pump, heater, motor, etc.:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If “YES”, provide details:			
13(g) Are you aware of any tests and/or inspections completed for the pool, hot tub, spa, and/or Jacuzzi:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13(h) If “YES” to 13(g), do you have copies of any tests done:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

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14. BOUNDARIES / PROPERTY / TITLE / ZONING

BOUNDARIES / PROPERTY / TITLE / ZONING QUESTIONS	YES	NO	N/A
14(a) Are you aware if any survey of this property was ever completed:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", when was it completed:</i>			
14(b) CANADA ONLY - Quebec: Do you have the Certificate of Location;	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If "YES", what is the certification date:</i>			
14(c) CANADA ONLY - Alberta: Do you have the Real Property Report?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If "YES", what is the report date:</i>			
14(d) Are you aware if the boundaries of this property are marked in any way:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
14(e) Does your property have a retaining wall or walls and/or fencing:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
Fencing surrounding the backyard			
14(f) Are you aware of any restrictions on your title to this property such as easements and/or encroachments (recorded or unrecorded) use restrictions, lot-line disputes, covenants, liens, or attachments on the property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
14(g) Are you aware of any present or past property violations of any zoning ordinance or by-law (for example, if this property includes apartments, is this property properly zoned for apartment use)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
14(h) Is the property located on a private road:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", how many other properties exist on the private road:</i>			
<i>If "YES", who is responsible to maintain the private road:</i>			
14(i) Are you aware if there is any written documentation regarding maintenance of the private road:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>If "No", describe how the maintenance of the private road is managed:</i>			
14(h) If "YES" to 14(g), do you have a copy of the written agreement:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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14. BOUNDARIES / PROPERTY / TITLE / ZONING – (continued)

BOUNDARIES / PROPERTY / TITLE / ZONING QUESTIONS – (continued)	YES	NO	N/A
14(i) Is the property serviced by a shared driveway:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", how many other properties share the driveway:</i>			
<i>If "YES", who is responsible to maintain the shared driveway:</i>			
14(j) Are you aware if there is any written documentation regarding maintenance of the shared driveway:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14(k) If "YES" to 14(j), do you have a copy of the written agreement:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
REFER TO SECTION 23 (REPORTS) for relevant documents, including inspections and/or tests, that you should provide to Weichert.			

15. NEIGHBORHOOD

NEIGHBORHOOD QUESTIONS	YES	NO	N/A
15(a) Are you aware of any hazardous waste site and/or disposal facility within two (2) miles of the property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
15(b) Are you aware of any high and/or extremely-high voltage power lines or cell towers within two (2) miles of the property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
15(c) If "YES" to 15(b), are they visible from this property:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15(d) Are you aware of any other neighborhood conditions or environmental problems that might affect this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			

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16. VIOLATIONS / LEGAL ACTIONS / ASSESSMENTS

VIOLATIONS / LEGAL ACTIONS / ASSESSMENTS QUESTIONS	YES	NO	N/A
16(a) Are you aware of any violations of local, state, or federal government laws or regulations relating to this property	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
16(b) Are you aware of any existing or threatened legal action affecting this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
16(c) Are you aware of any bonds or assessments for betterments that apply to this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			

17. INSURANCE

INSURANCE QUESTIONS	YES	NO	N/A
17(a) Have you ever filed an insurance claim on this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details and confirm if claim(s) is/are open or closed:</i>			
17(b) Are you aware of non-availability for any flood insurance (private or government-backed) for this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
17(c) Are you aware of any present or past conditions, including but not limited to any natural disaster(s), that either may result or resulted in an increase of insurance premiums:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			
17(d) Are you aware of any present and/or past condition(s) of this property that might prevent, or prevented in the past, the issuance/renewal of locally conventional homeowner's insurance coverage for this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>If "YES", provide details:</i>			

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18. HOMEOWNER'S ASSOCIATION (HOA)/PROPERTY OWNER'S ASSOCIATION (POA)

HOMEOWNER'S ASSOCIATION (HOA)/PROPERTY OWNER'S ASSOCIATION (POA) QUESTIONS		YES	NO	N/A
18(a) Is this property subject to rules or regulations of a Homeowner's Association (HOA) or Property Owner's Association (POA):		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18(b) Identify the property type:				
Regular Condo with Covenants & Restrictions (ownership with "air rights" to interior of unit)		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Freehold Condo with Covenants & Restrictions (ownership of unit, plot of land, and/or grounds)		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Planned Unit Development with Covenants & Restrictions		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18(c) Provide contact information for the HOA, POA, or Property Management Company (as applicable):				
Development:	Name:			
	N/A			
HOA / POA:	Name:		Contact Name:	
	Whittingham Park HOA		Brian Nickerson	
	Contact Phone:		Contact Email:	
	404-313-1233		whittingham.park.hoa@gmail.com	
Managing Agent:	Company Name:		Contact Name:	
	N/A			
	Contact Phone:		Contact Email:	
HOMEOWNER'S ASSOCIATION (HOA)/PROPERTY OWNER'S ASSOCIATION (POA) QUESTIONS – (continued)		YES	NO	N/A
18(d) Are you aware of any present or past problems for any common area(s):		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If "YES", provide details:				
18(e) Are you aware of any reason to expect an increase in assessments or dues in the next twelve (12) months:		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If "YES", provide details:				

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18. HOMEOWNER'S ASSOCIATION (HOA)/PROPERTY OWNER'S ASSOCIATION (POA) – (continued)

HOMEOWNER'S ASSOCIATION (HOA)/PROPERTY OWNER'S ASSOCIATION (POA) QUESTIONS – (continued)						
18(f) Identify who is responsible for maintenance and repairs of the following:						
AREA:	INDIVIDUAL PROPERTY OWNER	HOA / POA	OTHER			
<u>Interior of Unit:</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Plot of Land:</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Unit Sidewalk(s):</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Exterior of Building(s):</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Roof of Building(s):</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Parking Areas:</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Roads:</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Grounds:</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Common Sidewalks:</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<u>Unit Decking:</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18(g) HOA/POA fees (select one):						
Monthly	<input type="checkbox"/>	\$		/month		
Annually	<input checked="" type="checkbox"/>	\$	440.00	/annually		
Other	<input type="checkbox"/>	\$				
HOMEOWNER'S ASSOCIATION (HOA)/PROPERTY OWNER'S ASSOCIATION (POA) QUESTIONS – (continued)				YES	NO	N/A
18(h) Is the complex/development FHA approved				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>Is the FHA application pending</i>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<i>Is the FHA application status unknown</i>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18(i) Total # of units in the project:		Total # of rented units:		Check if # of rented units unknown	<input type="checkbox"/>	
18(j) Are you aware of any existing or pending legal action involving the Homeowner's Association or Complex:						
If "YES", provide details:						

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18. HOMEOWNER'S ASSOCIATION (HOA)/PROPERTY OWNER'S ASSOCIATION (POA) – (continued)

HOMEOWNER'S ASSOCIATION (HOA)/PROPERTY OWNER'S ASSOCIATION (POA) QUESTIONS – (continued)	YES	NO	N/A
18(k) Do association documents contain a Right of First Refusal on sales: <i>If "YES", attach copies of the language from the HOA/POA documents</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18(l) Does the home/unit come with a garage:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18(m) Does the home/unit come with a locker:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18(n) To the best of your knowledge, you have delivered to your listing agent all pertinent documents that are in your possession relative to the HOA/POA (to include applicable Covenants, Conditions, and Restrictions; Articles, Bylaws, Financial Statements, and/or Assessments).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. MOBILE HOME

MOBILE HOME QUESTIONS	YES	NO	N/A
19(a) Is the residence a mobile home	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19(b) Is the home on a permanent foundation: <i>If "No", provide details:</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19(c) Do you own the land:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19(d) CANADA ONLY: Is the home insurable by CMHC:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

20. MISCELLANEOUS

MISCELLANEOUS QUESTIONS	YES	NO	N/A
20(a) Are you aware of any termite/pest control reports prepared for this property in the last five (5) years:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20(b) Has the property been inspected by any exterminator in the last five (5) years:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20(c) If YES to 20(a) or 20(b), do you have copies of any reports/ and/or inspections:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20(d) Have you had, or do you now have, any animals (pets) in this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20(e) Does the municipality provide trash pick-up to this property:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20(f) Is there a local trash dump or transfer station available to owners of this property:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20(g) Has this property ever been used as a grow home:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20(h) Does anyone have a right of first refusal to purchase this property: <i>If "YES", provide details:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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21. FIXTURES

FIXTURES QUESTIONS									
<p><i>The following fixtures are currently on the property and I/we acknowledge and agree that they will not be removed (mark the appropriate box). I/we understand that the appraisers will include these items when appraising my property:</i></p>									
ITEM	YES	NO	N/A	ITEM	YES	NO	N/A		
<u>Electric light fixtures</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Drapery tracks and curtain rods</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<u>Heat pump</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Attached floor coverings / broadloom where laid</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<u>Central air conditioner system</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Central vacuum system</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<u>Intercom system</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Underground sprinkler system</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<u>Storm windows and screens</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Automatic garage door openers & controls: #</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<u>Sump pump</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Security System</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
<u>Ceiling Fans</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Wood / Coal / Pellet stove</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<u>Fireplace insert</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>TV antenna / tower / rotor</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<u>Fireplace doors</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Hot Tub</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<u>Woodburning fireplace</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Humidifier system</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<u>Gas fireplace</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Dehumidifier system</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Kitchen built-ins:	Range	Oven	Vent Hood	Exhaust Fan	Microwave	Dishwasher	Gas Grill	Garbage Disposal/Garburator	Other
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If "Other" – specify:									
The following fixtures will be removed (list):									

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22. CHATELS

CHATELS QUESTIONS								
<i>The following chattels will remain in the property:</i>								
ITEMS	YES	NO	N/A	ITEMS	YES	NO	N/A	
<u>Stove</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Washer</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Refrigerator</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Dryer</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<u>Freezer</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Washer/Dryer (single unit)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<u>Microwave (not built-in)</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Water softener</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<u>Portable dishwasher</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Window air conditioner(s): #</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<u>Area carpets</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Above ground swimming pool</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<u>Storage shed</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Pool equipment</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<u>Swing set</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>Hot tub equipment</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<u>Drapes (list rooms):</u>								
<u>Blinds (list rooms):</u>								
<u>Other (itemize):</u>								

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23. REPORTS

REPORTS QUESTIONS			
<i>Attach copies of all existing reports and documents relating to this property, any type of existing warranties including home warranty and infestation warranties. (check all that apply or check NONE if no report(s) to attach):</i>			
<input type="checkbox"/> Survey	<input type="checkbox"/> General Home Inspection	<input type="checkbox"/> Septic Tank Inspection	<input type="checkbox"/> Pool Inspection
<input type="checkbox"/> Soil Report	<input checked="" type="checkbox"/> Termite/Pest Inspection/Bond	<input type="checkbox"/> Structural/Engineering Report	<input type="checkbox"/> Chimney Inspection
<input type="checkbox"/> Stucco ID/Inspection	<input type="checkbox"/> Manuf. Stone Veneer Inspect.	<input checked="" type="checkbox"/> Moisture Test(s)	<input type="checkbox"/> Lead-Based Paint Test(s)
<input type="checkbox"/> Roof Inspection	<input type="checkbox"/> Asbestos Test(s)/Abatement	<input type="checkbox"/> Radon Test(s)	<input type="checkbox"/> Insurance Claim(s) Documents
<input type="checkbox"/> Private Road Agreement	<input type="checkbox"/> Shared Driveway	<input type="checkbox"/> Shared Well Agreement	<input type="checkbox"/> NONE
<input type="checkbox"/> Building Permit(s)	<input type="checkbox"/> Builder's Home Warranty	<input type="checkbox"/> Well Inspection	
Other (Describe):			
Moisture Test and Receipt for corrective action taken with 1 year warranty			

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DISCLOSURE OF LEAD-BASED PAINT (US ONLY)

PROPERTY'S RECORD TITLE OWNER (SELLER) DISCLOSURE OF INFORMATION ON LEAD-BASED PAINT AND/OR LEAD-BASED PAINT HAZARDS AND ACKNOWLEDGEMENT (SALE).

Lead Warning Statement

Every Buyer of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead-based paint that may place your children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The Seller of any interest in residential real property is required to provide the Buyer with any information on lead-based paint hazards from risk assessments or inspections in the Seller's possession and notify the Buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

Seller's Disclosure (Seller to Initial):		BW		
Check "YES" or "No" to question (a) below:			YES	NO
(a)	Seller has knowledge of lead-based paint and/or lead-based paint hazards present in the property located at the following address:		<input type="checkbox"/>	<input checked="" type="checkbox"/>
If "YES", provide details:				
Buyer's Acknowledgement (Buyer to Initial)		NT		
Check "YES" or "No" to both questions (a) and (b) below:			YES	NO
(a)	Buyer has received copies of all information listed above.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b)	Buyer has received the U.S. EPA Pamphlet "Protect Your Family from Lead in Your Home".		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Check (c) or (d) below – using the box to the right of the line			RECEIVED	
			YES	NO
(c)	Buyer has received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.		<input type="checkbox"/>	<input type="checkbox"/>
(d)	Buyer waives the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Agent's Acknowledgement (Agent to Initial):				
Check YES or No to question (a).			YES	NO
(a)	Agent has informed the Seller of Seller's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.		<input type="checkbox"/>	<input type="checkbox"/>

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CERTIFICATION OF ACCURACY

Weichert Seller acknowledges that the information herein is true and correct to the best of the Weichert Seller knowledge as of the date signed by the Weichert Seller. Weichert Seller understands that Weichert and prospective buyer (Buyer) may rely on this information. Weichert Seller is hereby authorized to furnish the foregoing information to (1) any real estate firm with an agreement to list or sell the property; (2) any multiple listing service; (3) any prospective buyer (Buyer).

<i>Bradley Michael Weiss</i>	Bradley Michael Weiss	11-Mar-2024
Legal Owner Signature	Legal Owner Name	Date

<i>Jayne Jay Weiss</i>	Jayne Weiss	11-Mar-2024
Legal Owner Signature	Legal Owner Name	Date

Legal Owner Signature	Legal Owner Name	Date

Legal Owner Signature	Legal Owner Name	Date

WEICHERT SELLER: DO NOT WRITE BELOW THIS LINE

I/We acknowledge receipt and review of a copy of this Seller Disclosure.

Buyer:	<i>Nadine Terry</i>	By:	Nadine Terry	12-Mar-2024
	Buyer Signature		Print Name	Date:

Buyer:		By:		
	Buyer Signature		Print Name	Date:

Broker for Weichert:		By:		
	Licensee or Broker Signature		Print Name	Date:

Broker for Buyer:		By:		
	Licensee or Broker Signature		Print Name	Date:

Advanced Stucco Repair, Inc.

138 Mountain Brook Drive
 Canton, Georgia 30115
 770-592-1597
 advancedstuccorepair.com



RECIPIENT:

Brad Weiss

2110 Whittingham Court
 Roswell, Georgia 30075

Invoice #4763

Issued	Mar 12, 2024
Due	Mar 12, 2024
Paid	Mar 12, 2024

Total \$4,750.00

Account Balance \$0.00

For Services Rendered

Product/Service	Description	Qty.	Unit Price	Total
Mar 12, 2024				
Specs	Stucco Type Hard or Efis: hardcoat Stucco Finish: nst Stucco Painted: yes Caulk: white, stone	1	\$0.00	\$0.00
Caulk- Stucco sealants, pr inspection report	We will remove old caulk as needed. We will reapply a New Paintable Master Seal NP 100. The sealant joints will be approximately 1/2 inch wide and taped for a neat appearance. Windows Doors Stucco to front porch Stucco to concrete Stucco to vertical fascia boards All utility penetrations Gutter straps Corner board to stucco	1	\$0.00	\$0.00
Patch, includes grinding cracks, see inspection report	We will repair the stucco in an isolated manor by simply patching. A slight color and texture variation may be noticeable but unlikely. To include cracks holes and impacts listed below. includes cracks holes, delamination and impacts, see inspection report	1	\$0.00	\$0.00

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Product/Service	Description	Qty.	Unit Price	Total
Total System Replacement,	Right elevation, left window next to garage door, bottom of window, left and right side. We will cut and remove current stucco system as needed, inspect, framing. In the event framing is damaged we would then request a change order for repair., budget 2 to 300 for framing if needed. Reinstall substrate, water barrier, metal components, scratch coat, brown coat, fiberglass mesh, matching top coat and paint the repair area. Please be advised there will be a variation from new to old with color and texture.	1	\$0.00	\$0.00
All work to be completed		1	\$4,150.00	\$4,150.00

PAID

Advanced Stucco Repair, Inc.

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Canton, Georgia 30115
770-592-1597
advancedstuccorepair.com



Product/Service	Description	Qty.	Unit Price	Total
Residential	<p>Terms & Conditions & Guarantees:</p> <p>The following disclosure represents important details concerning payment terms: Advanced Stucco Repair, Inc, will initiate a 2.5% convenience fee when utilizing Visa, MasterCard, Discover or American Express for payment.</p> <p>Advanced Stucco Repairs guarantees all repairs, materials, and workmanship for a period of one (1) year from the date of completion. Advanced Stucco Repair hereby guarantees that if our stucco installation, repairs, kick outs, sealants, or wood replacement fails to keep repaired area moisture free, with moisture greater than 18% as determined with the use of a Delmhorst BD series meter or visually by Advanced Stucco Repair or approved inspector, as a direct and approximate result of defective repairs preformed by Advanced Stucco Repair or defective materials used by Advanced Stucco Repair in performing such repair. Advanced Stucco Repair will correct, repair, or replace any defect in the work. Advanced Stucco Repair will also repair or replace any damage to interior sheet rock, framing studs, other structural damage to the wall system and components solely to the extent such damage is directly and approximately caused by defective repairs or materials preformed or used by Advanced Stucco Repair.</p> <p>GENERAL DISCLOSURE STATEMENT Beyond Scope of Remediation: We will supply all Labor, Material, and Supervision to perform the work as described. ASR will maintain a clean and safe work environment. We will supply dumpster and portable Restroom facility if needed. Our work crews are not authorized to complete work beyond the detailed specifications above without a written change order. No repair of underlying structural framing, sheathing, mold, termite, or water damage that may be found during any remediation is included in this estimate unless specified. Color and pattern variation can be expected at kick out flashing or partial wall repairs. One area may not match other areas due to different sun exposures causing certain areas to fade differently. Color will appear not to match at all when areas of the system, especially at ground level, are stained. Dow Corning sealants cannot be painted. When structural repairs are performed there is a chance that interior drywall may crack, or small punctures may occur. We try to avoid this, but it does occur on occasion. No repair of interior drywall or</p>	1	\$0.00	\$0.00

Advanced Stucco Repair, Inc.

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advancedstuccorepair.com



Product/Service	Description	Qty.	Unit Price	Total
Change Order- Additional Wood Rot	3 brick molds @ 120 each 2 sill noses @ 120 each	1	\$600.00	\$600.00

PAID

Thank you for your business. Please contact us with any questions regarding this invoice.

Total	\$4,750.00
Paid	- \$4,750.00
Invoice balance	\$0.00
Account balance	\$0.00