



## DISCLOSURE OF INCLUSIONS/EXCLUSIONS, LEASED ITEMS, AND UTILITIES ADDENDUM

UPON EXECUTION BY BUYER AND SELLER, THIS DOCUMENT WILL BECOME AN **ADDENDUM** TO THE CONTRACT OF SALE

SELLER'S DISCLOSURE made on April 5, 2023 ■ ADDENDUM to Contract of Sale dated \_\_\_\_\_

between Buyer \_\_\_\_\_

and Seller Gregg Noha, Cheryl Mullin

and Broker ExecuHome Realty Peggy Fancher

for Property known as 6420 Dalston St., Middle River, MD 21220

**1. INCLUSIONS/EXCLUSIONS.** Included in the purchase price are all permanently attached fixtures, including all smoke detectors (and, carbon monoxide detectors, as applicable). Certain other **now existing items** which may be considered personal property, whether installed or stored upon the property, **are included if box below is checked.**

- |                                                                 |                                                                 |                                                                |                                                            |
|-----------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Alarm System                           | <input checked="" type="checkbox"/> Exist. W/W Carpet           | <input type="checkbox"/> Playground Equipment                  | <input type="checkbox"/> TV Antenna                        |
| <input checked="" type="checkbox"/> Ceiling Fan(s) # <u>4</u>   | <input type="checkbox"/> Fireplace Screens/Doors                | <input type="checkbox"/> Pool, Equipment & Cover               | <input checked="" type="checkbox"/> Trash Compactor        |
| <input type="checkbox"/> Central Vacuum                         | <input type="checkbox"/> Fireplace Equipment                    | <input checked="" type="checkbox"/> Refrigerator(s) # <u>1</u> | <input checked="" type="checkbox"/> Wall Mount TV Brackets |
| <input checked="" type="checkbox"/> Clothes Dryer               | <input type="checkbox"/> Freezer                                | <input checked="" type="checkbox"/> w/ Ice Maker(s) # <u>1</u> | <input type="checkbox"/> Wall Oven(s) # _____              |
| <input checked="" type="checkbox"/> Clothes Washer              | <input type="checkbox"/> Furnace Humidifier                     | <input type="checkbox"/> Satellite Dish                        | <input type="checkbox"/> Water Filter                      |
| <input type="checkbox"/> Cooktop                                | <input checked="" type="checkbox"/> Garage Opener(s) # <u>1</u> | <input checked="" type="checkbox"/> Screens                    | <input type="checkbox"/> Water Softener                    |
| <input checked="" type="checkbox"/> Dishwasher                  | <input checked="" type="checkbox"/> Garage remote(s) # <u>2</u> | <input checked="" type="checkbox"/> Shades/Blinds              | <input type="checkbox"/> Window A/C Unit(s) # _____        |
| <input checked="" type="checkbox"/> Drapery/Curtain Rods        | <input checked="" type="checkbox"/> Garbage Disposal            | <input type="checkbox"/> Storage Shed(s) # _____               | <input type="checkbox"/> Window Fan(s) # _____             |
| <input checked="" type="checkbox"/> Draperies/Curtains          | <input type="checkbox"/> Hot Tub, Equipment & Cover             | <input type="checkbox"/> Storm Doors                           | <input type="checkbox"/> Wood Stove                        |
| <input type="checkbox"/> Electronic Air Filter                  | <input type="checkbox"/> Intercom                               | <input type="checkbox"/> Storm Windows                         |                                                            |
| <input checked="" type="checkbox"/> Exhaust Fan(s) # <u>ALL</u> | <input checked="" type="checkbox"/> Microwave                   | <input checked="" type="checkbox"/> Stove or Range             |                                                            |

ADDITIONAL INCLUSIONS (SPECIFY): \_\_\_\_\_

ADDITIONAL EXCLUSIONS (SPECIFY): \_\_\_\_\_

**2. LEASED ITEM(S) INCLUDED:**

- |                                                 |                                      |
|-------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Fuel Tank(s)           | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Solar Panels           | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Alarm System           | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Water Treatment System | <input type="checkbox"/> Other _____ |

ADDITIONAL TERMS AND/OR INFORMATION REGARDING LEASED ITEM(S): \_\_\_\_\_

**3. UTILITIES: WATER, SEWAGE, HEATING AND CENTRAL AIR CONDITIONING: (check all that apply)**

- |                   |                                            |                                              |                              |                                    |                                      |
|-------------------|--------------------------------------------|----------------------------------------------|------------------------------|------------------------------------|--------------------------------------|
| Water Supply:     | <input checked="" type="checkbox"/> Public | <input type="checkbox"/> Well                |                              |                                    |                                      |
| Sewage Disposal:  | <input checked="" type="checkbox"/> Public | <input type="checkbox"/> Septic              |                              |                                    |                                      |
| Heating:          | <input checked="" type="checkbox"/> Gas    | <input type="checkbox"/> Electric            | <input type="checkbox"/> Oil | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Other _____ |
| Hot Water:        | <input checked="" type="checkbox"/> Gas    | <input type="checkbox"/> Electric            | <input type="checkbox"/> Oil |                                    | <input type="checkbox"/> Other _____ |
| Air Conditioning: | <input type="checkbox"/> Gas               | <input checked="" type="checkbox"/> Electric |                              |                                    | <input type="checkbox"/> Other _____ |

**All other terms and conditions of the Contract of Sale remain in full force and effect.**

Buyer Signature \_\_\_\_\_ Date \_\_\_\_\_

Seller Signature Gregg Noha Date 4/6/2023

Gregg Noha

Buyer Signature \_\_\_\_\_ Date \_\_\_\_\_

Seller Signature Cheryl Mullin Date 4-5-23

Cheryl Mullin

