



## SELLER DISCLOSURE OF PROPERTY CONDITION



PROPERTY ADDRESS: 1020 Nancy Road, Waterloo, IA 50701

NAME OF OWNER(S). PLEASE PRINT: Robert Thompson and Diane Thompson

**PURPOSE OF STATEMENT:** The State of Iowa requires the Seller(s) of certain property to disclose information about the property to be sold. Completion of this form shall satisfy the requirements of Chapter 558A of Iowa Code which mandates the Seller(s) disclose the condition of and information about the property the Seller(s) is about to sell.

**THIS STATEMENT SHALL NOT BE A WARRANTY OF ANY KIND BY THE SELLER(S) OR SELLER(S) AGENT AND SHALL NOT BE INTENDED AS A SUBSTITUTE FOR ANY INSPECTION OR HOME WARRANTY INSURANCE THE PURCHASER MAY WISH TO OBTAIN.**

**SELLER(S) DISCLOSURE:** As Seller(s), I/We disclose the following information regarding the property and certify that this information is true and accurate to the best of my/our knowledge as of the date signed. Seller(s) authorizes the agent to provide a copy of this statement to any person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. The following are representations made by Seller(s) and are not the representations of the Licensee, who has no knowledge of the condition of the property and Seller(s) agrees to identify and hold Licensee harmless. If attached to a Purchase Agreement, this Seller Disclosure of Property Condition shall be fully incorporated therein, and shall be made a part thereof, as if fully set forth at length therein. The following representations shall survive any closing and shall not merge into any deed for the property.

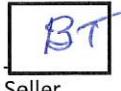
**INSTRUCTIONS TO SELLER(S):**

1. Respond to all questions or attach reports allowed by Iowa Code Section 558A.4(1).
2. Disclose all known conditions materially affecting this property.
3. If an item does not apply to this property, indicate it is not applicable (NA).
4. Additional pages or reports may be attached.
5. If the required information is unknown or is unavailable following a reasonable effort, use an approximation of the information, or indicate that the information is **unknown (UNK)**. All approximations must be **identified as (AP)**.

In no event shall the parties hold the Licensee(s) liable for any representations not directly made by the Seller(s) Agent or Broker.

**SELLER(S) DISCLOSURE: THE SELLER(S) HAVE OWNED THE PROPERTY SINCE JANUARY 1993 (DATE).**  
The Seller(s) will state the history and condition of all the items based solely on the information known to the Seller(s).

**IN THE EVENT ANY CHANGES OCCUR IN THE REPRESENTATIONS HEREIN, FROM THE DATE OF THIS FORM TO THE TIME OF CLOSING, SELLER(S) SHALL IMMEDIATELY DISCLOSE SUCH CHANGES IN WRITING TO BUYER(S).**



Seller



Seller



Buyer



Buyer

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ALL APPLIANCES &amp; SYSTEMS INCLUDED IN THE TRANSACTION ARE IN WORKING ORDER EXCEPT AS NOTED.

Item		Good Working Order	Comments
Alarm System	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Attic Fan	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Carbon Monoxide Detector	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Central Vac System	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Ceiling Fan	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Dishwasher (Built In)	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Furnace Humidifier	NA <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	<i>not at</i>
Garage Door Opener	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	Number Remote Controls:
Garbage Disposal	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Gas Grill (Built In)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Generator (Hardwired)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Hood/Fan	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Hot Tub (Built In)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Intercom (Built In)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Lawn Sprinkler System	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Microwave (Built In)	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Pool System	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Range/Oven (Built In)	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Refrigerator (Built In)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>	<i>dt BT</i>
Satellite Dish System	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Sauna (Built In)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input checked="" type="checkbox"/>	
Smoke Alarm	NA <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input checked="" type="checkbox"/>	
Sound System (Built In)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Sump Pump (Built In)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Trash Compactor (Built In)	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Water Filtration System	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	Rented <input type="checkbox"/> Owned <input type="checkbox"/>
Water Heater	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Water Softener	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	<i>New</i>
Jetted Tub	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>	
Other:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Seller

Seller

Buyer

Buyer

## PROPERTY ADDRESS: 1020 Nancy Road, Waterloo, IA 50701

## PROPERTY CONDITIONS, IMPROVEMENTS AND ADDITIONAL INFORMATION:

## 1. BASEMENT / CRAWL SPACE / SLAB: Any known water, seepage, or other problems?

Describe: *had problem w/driveway slope years ago - OR see*Yes  No  Unk 

Repairs/Replacement/Date: \_\_\_\_\_

## 2. FOUNDATION(S): Any known foundation damage or settlement?

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

## 3. ROOF: Any known problems?

Describe: \_\_\_\_\_

Repairs/Replacement/Date: *2023*

## 4. WELL WATER SYSTEM: Any known problems?

Describe: \_\_\_\_\_

Type of Well \_\_\_\_\_ Location: \_\_\_\_\_ Age: \_\_\_\_\_

Has the water been tested? \_\_\_\_\_

If yes, date of last report and results: \_\_\_\_\_

Any known plans to bring city or rural water to your area and/or requirements to connect to city or rural water lines when available? \_\_\_\_\_

## 5. CITY SEWER/SEPTIC TANKS/DRAIN FIELDS/OTHER DISPOSAL SYSTEMS: Any

problems? Describe: \_\_\_\_\_

Has the Septic System ever been pumped? Date last pumped. \_\_\_\_\_

Any known plans to bring city sewer to your area and/or requirements to connect to city sewer? Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

Is the property in compliance with local city ordinances requiring that perimeter tile lines do not drain into the city sanitary sewer? \_\_\_\_\_

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

## 6. HEATING SYSTEM(S): Any known problems? Describe: \_\_\_\_\_

Yes  No  Unk 

Repairs/Replacement/Date: \_\_\_\_\_

If you have an LP gas tank, is it Rented  Owned 

Comments: \_\_\_\_\_

## 7. CENTRAL COOLING SYSTEM(S): Any known problems?

Yes  No  Unk 

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

## 8. SOLAR SYSTEM(S): Any known problems?

Yes  No  Unk 

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

## 9. FIREPLACE(S)/WOOD BURNING STOVE(S): Any known problems?

Yes  No  Unk Describe: \_\_\_\_\_ Date last used: *20 yrs +*

Repairs/Replacement/Date: \_\_\_\_\_

## 10. PLUMBING SYSTEM(S): Any known problems?

Yes  No  Unk 

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

## 11. ELECTRICAL SYSTEM(S): Any known problems?

Yes  No  Unk 

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

*BT*

Seller

*JK*

Seller

Buyer

Buyer

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**12. WINDOWS:** Any known problems?

Yes  No  Unk

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

**13. PEST INFESTATION:** Any known problems?

Yes  No  Unk

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

**14. ASBESTOS/LEAD PAINT:** Any known Asbestos OR Lead Based Paint Present?

Yes  No  Unk

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

**15. RADON:** Any known test(s) for the presence of radon gas?

Yes  No  Unk

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

**16. FUNGI/MOLD:** Any known fungus or mold?

Yes  No  Unk

Describe: \_\_\_\_\_

Repairs/Replacement/Date: \_\_\_\_\_

**17. GROUNDWATER HAZARD STATEMENT:** Are there any known:

Yes  No  Unk

A. Wells and/or Geothermal System(s)    B. Solid Waste Disposal    C. Hazardous Waste

D. Underground Storage Tanks    E. Private Burial Site.

If applicable, Seller(s) will file Groundwater Hazard Statement at closing.

Describe/Location: \_\_\_\_\_

**18. COVENANTS:** Is the property subject to restrictive covenants?

Yes  No  Unk

If YES, attach a copy or state where a true, current copy can be obtained.

Location of Covenant: \_\_\_\_\_

**19. ENVIRONMENTAL CONCERNs:** Any known environmental concerns?

Yes  No  Unk

Describe: \_\_\_\_\_

**20. FLOOD PLAIN/FLOODWAY:** Is the property located in a flood plain or floodway?

Yes  No  Unk

Flood plain/floodway designation: \_\_\_\_\_

**21. ZONING:** Zoning of this property is R Unknown

Any proposed changes in zoning, including variances?

Yes  No  Unk

Describe: \_\_\_\_\_

**22. REAL ESTATE DISTRICT:** Is the property located in a Historical Preservation District?

Yes  No  Unk

**23. OTHER ITEMS:** Are you aware of any of the following:

A. Any known features of the property shared in common with adjoining landowners (Example: walks, fences, roads, driveways, well water system, etc.) whose use or responsibility for maintenance may have an effect on the property?

Yes  No  Unk

Describe: \_\_\_\_\_

B. Any known encroachments, easements, common areas (Example: facilities like pools, tennis courts, walkways or other areas co-owned with others), zoning violations, non-conforming uses, or homeowners association which has any authority over the property?

Yes  No  Unk

Describe: \_\_\_\_\_

C. Any known fees and/or dues? (Example: homeowner association fees, land lease fees, maintenance fees or other financial obligations to owner?) Describe fee and state amount

Yes  No  Unk

D. Any known modifications, remodeling, alterations, or repairs, etc. made without necessary permits or licensed contractors?

Yes  No  Unk

Describe: \_\_\_\_\_



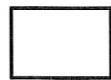
Seller



Seller



Buyer



Buyer

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E. Any known physical problems? (Example: settling, flooding, drainage or grading problems, etc.)

Yes  No  Unk

Describe:

F. Has there been a property/casualty loss, an insurance claim, OR major damage to the property OR other conditions? (e.g. fire, wind, hail, flood, landslides.)

Yes  No  Unk

If Yes, has the damage been repaired/replaced?

Describe: Roof hail damage

**Additional Remarks:** \_\_\_\_\_

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

You must **explain** any "YES" response(s) to the above. Use the back of this form or additional sheets as necessary.



Seller

8-5-25

Date



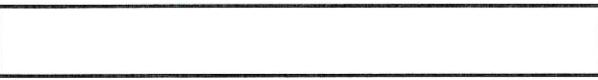
Seller

8/5/25

Date

**BUYER(S) ACKNOWLEDGEMENT:**

Buyer(s) Acknowledge receipt of a copy of this Seller Disclosure of Property Condition. This statement is not intended to be a warranty or to substitute for any inspection Buyer(s) may wish to obtain. Buyer(s) acknowledge receipt of the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.



Buyer

Date



Buyer

Date