



SELLER DISCLOSURE OF PROPERTY CONDITION



PROPERTY ADDRESS: 742 Cloverdale Avenue, Waterloo, IA 50703

NAME OF OWNER(S). PLEASE PRINT: Jeremy Schlampp

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.

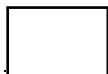
SELLER(S) DISCLOSURE: THE SELLER(S) HAVE OWNED THE PROPERTY SINCE 05/04/2020 **(DATE).**

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

Adopted by NEIRBR (Revised 05/24)

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ALL APPLIANCES & 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 checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unk <input type="checkbox"/>	
Furnace Humidifier	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unk <input type="checkbox"/>	
Garage Door Opener	NA <input type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Unk <input type="checkbox"/>	Number Remote Controls: 1
Garbage Disposal	NA <input checked="" type="checkbox"/>	Yes <input 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 checked="" type="checkbox"/>	Yes <input 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 checked="" type="checkbox"/>	Yes <input 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 type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Unk <input type="checkbox"/>	
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 type="checkbox"/>	
Smoke Alarm	NA <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unk <input 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 checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Unk <input type="checkbox"/>	
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"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



Seller

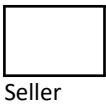
Buyer

Buyer

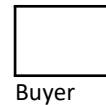
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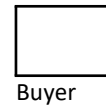
12. WINDOWS: Any known problems?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Describe: _____	
Repairs/Replacement/Date: _____	
13. PEST INFESTATION: Any known problems?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Describe: _____	
Repairs/Replacement/Date: _____	
14. ASBESTOS/LEAD PAINT: Any known Asbestos OR Lead Based Paint Present?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Describe: _____	
Repairs/Replacement/Date: _____	
15. RADON: Any known test(s) for the presence of radon gas?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Describe: _____	
Repairs/Replacement/Date: _____	
16. FUNGI/MOLD: Any known fungus or mold?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Describe: _____	
Repairs/Replacement/Date: _____	
17. GROUNDWATER HAZARD STATEMENT: Are there any known:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Describe: _____	
20. FLOOD PLAIN/FLOODWAY: Is the property located in a flood plain or floodway?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Flood plain/floodway designation: _____	
21. ZONING: Zoning of this property is _____ Unknown <input type="checkbox"/>	
Any proposed changes in zoning, including variances?	
Describe: _____	
22. REAL ESTATE DISTRICT: Is the property located in a Historical Preservation District?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
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 <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
D. Any known modifications, remodeling, alterations, or repairs, etc. made without necessary permits or licensed contractors?	
Describe: _____	



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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: _____

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.

Jeremy Schlamp
dotloop verified
10/08/25 1:30 PM CDT
MYDS-KJ6J-VOIW-UOQ9

Seller

Date

Seller

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