

Seller's Real Property Disclosure Statement



SELLER(S) NAME(S): Calvin Tran Karyna Tran ("Seller" or "you")

Property Address: 16313 Hidden Oak Loop ("Property")

IMPORTANT NOTICE TO SELLER AND BUYER

Florida law requires sellers of residential real estate to disclose to a buyer all known facts that materially affect the value or desirability of the property being sold that are not readily observable by, or known to, the buyer. This Disclosure Statement is designed to assist you in complying with those disclosure requirements and to assist the buyer in evaluating the Property. The listing and selling real estate brokers and their respective representatives (collectively, "Brokers") will also rely upon this information when they market and present the Property to prospective buyers.

This is a disclosure of Seller's knowledge of the conditions below as of the date signed by Seller and is not a substitute for any inspections or warranties that buyer may wish to obtain. Buyer agrees that the information contained below is not a warranty or representation of any kind by the Brokers (none of whom has made any independent verification of the information contained herein) and buyer agrees not to rely on it as such. By signing below, Buyer agrees to hold Brokers harmless from any non-disclosure, omission, or misrepresentation of seller or any other party.

- | | <u>YES</u> | <u>NO</u> | <u>UNKNOWN</u> |
|--|-------------------------------------|-------------------------------------|----------------|
| 1. <u>OCCUPANCY</u> | | | |
| (a) Do you reside in the Property? If not, when did you last? _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| (b) Is the Property currently leased? If YES, when does the lease expire? _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| (c) If your answers to (a) and (b) are NO, is the Property vacant? | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. <u>LIVING AREA / SQUARE FOOTAGE</u> | | | |
| (a) # of Bedrooms: <u>5</u> # of Bathrooms: <u>4.5</u> | | | |
| (b) Total livable square footage of Property that is under air: <u>3,443</u> | | | |
| (c) Source of the information provided in (b) above: _____ | <input type="checkbox"/> | <input type="checkbox"/> | |
| (d) Are you aware of any discrepancy between the information provided in (a) or (b) above and the public records (e.g., property appraiser website, building department)? If YES, explain: _____ | | | |

Notice to Buyer: The information provided above may be different from the information shown in the MLS or public records, and it may not reflect the actual number of rooms or square footage. If this information is important or material to your decision to purchase or value the Property, you agree to (a) review the property information that is available on the County's Property Appraiser's website, (b) personally verify the information and resolve any discrepancies by having the Property measured by an appraiser or other qualified professional (Brokers have not measured the Property), and (c) not rely on any information provided by Brokers regarding the square footage, including the information in the MLS.

- | | | | |
|---|-------------------------------------|-------------------------------------|--------------------------|
| 3. <u>LAND CONDITIONS</u> | | | |
| (a) Are you aware of any fill or expansive soil on the Property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| (b) Are you aware of any existing or prior sinkholes, sliding, settling, earth movement, or earth stability problems on the Property or adjoining properties? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| (c) Has any insurance company paid any amounts on a claim relating to a sinkhole affecting the Property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (d) If your answer to (c) is YES, were the full amounts of the proceeds utilized to repair the sinkhole damage? (Seller responses to (c) and (d) required by §627.7073(c), Florida Statutes). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (e) Is the Property (or any part thereof) located in a flood zone or wetlands area? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (f) Are you aware of any existing or prior drainage or flood problems or damage affecting the Property or adjoining properties? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| (g) Have you ever filed a claim with an insurance provider or received federal assistance for flood damage to the Property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| (h) If any answer in (a) – (g) above is YES, explain: _____ | | | |
| (i) Is the Property partially or totally seaward of the Coastal Construction Control Line? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (j) Does your lender require you to maintain flood insurance? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 4. <u>DEED RESTRICTIONS / SUBSURFACE RIGHTS / BOUNDARIES</u> | | | |
| (a) Are there any deed restrictions, covenants, or declarations (including, but not limited to, rental or pet restrictions) affecting the Property? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) Are any driveways, walls, fences, or other features shared with adjoining property owners? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Have any subsurface rights (as defined by section 689.29(3)(b), Florida Statutes), or rights of entry been severed or retained by a third party or prior owner/developer? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

	<u>YES</u>	<u>NO</u>	<u>UNKNOWN</u>
(d) Are you aware of any encroachments, boundary disputes, or easements on or affecting the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(e) If any answer in (a) – (d) above is YES, explain: <u>q: HOA Guidelines</u>			
5. STRUCTURAL ITEMS			
(a) Are you aware of any past or present movement, shifting, deterioration or other problems with the walls or foundations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(b) Have you ever filed an insurance or manufacturer's claim for defective or damaged construction or materials?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(c) Are you aware of any past or present structural cracks or flaws in the walls, floors, or foundations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(d) Are you aware of any defects or problems with driveways, walkways, patios, or retaining walls?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(e) If any answer in (a) – (d) above is YES, explain: _____			
6. ADDITIONS / REMODELS / WINDOWS / DOORS			
(a) Have there been any additions, structural changes, or other alterations made to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) If your answer to (a) is YES, were all necessary permits / approvals obtained and was all work done in compliance with the applicable zoning and building codes? If NO, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Does the Property have hurricane or impact windows and doors? If YES, if there are any windows or doors that are not, identify which are not: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Are any improvements built below the base flood elevation level?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Do any improvements violate applicable local, state, or federal flood regulations or guidelines?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) If your answer to (d) or (e) is YES, explain: _____			
7. ELECTRICAL SYSTEMS			
(a) Are you aware of any knob and tube wiring on the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(b) Are you aware of any aluminum wiring on the Property other than the primary service line?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(c) Are you aware of any problems or conditions that affect the operation, safety, or desirability of the electrical wiring or systems? If YES, explain: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
8. HEATING AND AIR CONDITIONING (Check all that apply)			
(a) <u>Air Conditioning:</u> <input checked="" type="checkbox"/> Central Electric <input type="checkbox"/> Central Gas <input type="checkbox"/> Window Approximate Age: _____			
(b) <u>Heating:</u> <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Other _____			
(c) <u>Water Heating:</u> <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Solar <input type="checkbox"/> Other _____			
(d) Is each item checked above in good working order (i.e., operating in the manner that it was intended to operate)? If NO, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. APPLIANCES			
(a) Is each appliance that is being sold with the Property in working condition (i.e., operating in the manner that it was intended to operate)? If NO, explain: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Are any of the appliances leased? If YES, which: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. PLUMBING RELATED ITEMS			
(a) Drinking water source? <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private System <input type="checkbox"/> Well			
(b) If your drinking water is from a well, when was the last water safety check and what was the result of the test? _____			
(c) Do you have a water softener? If YES, is it: <input type="checkbox"/> leased OR <input type="checkbox"/> owned	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Are you aware of any polybutylene or cast-iron pipes on the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(e) Water source for your sprinkler system, if applicable? _____			
(f) Type of sewage system: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Septic Tank <input type="checkbox"/> Cesspool			
(g) If septic tank, when was it last serviced? _____			
(h) Is there a sewage or sump pump?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. ROOF / SOLAR PANELS			
(a) Approximate roof age: <u>2</u> years			
(b) Are there any leased or financed solar panels on the Property? If YES, explain: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(c) Has the roof ever leaked or been damaged?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

YES NO UNKNOWN

- (d) Has the roof (or solar panels, if any) been replaced or repaired during your ownership? YES NO UNKNOWN
- (e) Have you ever filed an insurance or manufacturer's claim for roof or solar panel defects/damage? YES NO UNKNOWN
- (f) Are there any existing problems or defects with the roof, solar panels, fascia, soffits, flashings, or rain gutters? YES NO UNKNOWN
- (g) If any answer in (c) – (f) above is YES, explain: _____

12. TERMITES, WOOD DESTROYING ORGANISMS ("WDO"), RODENTS, PESTS

- (a) Are there termites or other WDO's (e.g., powder-posts beetles, old house borers, wood decaying fungi), rodents, or pest infestations on or affecting the Property? YES NO UNKNOWN
- (b) If your answer to (a) is YES, is there any existing damage to the Property? YES NO UNKNOWN
- (c) Do you know of any termite, WDO or pest control reports or treatments for the Property in the last 5 years? YES NO UNKNOWN
- (d) If any answer in (a) – (c) above is YES, explain: HOME TEAM PEST MONTHLY
- (e) Is the Property currently under warranty or other coverage by a licensed pest control company? If YES, state the name of the company: Home team pest defense YES NO UNKNOWN
- (f) Does the warranty cover (check all that apply): repairs treatment regular pest control
- (g) Is the warranty transferable to the Buyer? If YES, Buyer should check for transfer procedures and costs, if any. YES NO UNKNOWN

13. DOCKS, DAVITS, PIERS AND SEAWALLS

- (a) Approximate size of seawall / waterfront: _____ linear feet
- (b) Is the Property owner responsible for maintenance and/or repair of the seawall? YES NO UNKNOWN
- (c) Are you aware of any repairs or renovations to the seawall in the last 5 years? If YES, explain: _____
- (d) Is there a boat lift on the Property? YES NO UNKNOWN
- (e) Boat lift capacity: _____ lbs. _____ feet
- (f) Is the boat lift and its systems in good working order? YES NO UNKNOWN
- (g) If your answer to (f) is NO, explain: _____
- (h) Maximum size boat that can be legally docked at the Property: _____
- (i) Are there any conditions, such as low tides, that may interfere with the ability to navigate to and from the dock or to access or utilize the boat lift? If YES, explain: _____
- (j) Are there any restrictions to accessing (ingress and egress) the body of adjoining water, if any? YES NO UNKNOWN
- (k) Are there any conditions that may affect the desirability, use, or function of any dock, boat lift, davits, pier, or seawall? If YES, explain: _____
- (l) Were all permits required for the construction or maintenance of the dock, boat lift, davits, pier, or seawall obtained? YES NO UNKNOWN
- (m) If your answer to (l) is No, explain: _____

14. MOLD, ENVIRONMENTAL, AND LEAD BASED PAINT

- (a) Is there now, or has there been in the past, any:
 - (i) water leakage, intrusion, accumulation, or dampness in or affecting the Property? YES NO UNKNOWN
 - (ii) instances of mold, moisture, or dampness in or affecting the Property? YES NO UNKNOWN
 - (iii) damage to the Property that resulted from any of the conditions in (i) or (ii) above? YES NO UNKNOWN
- (b) If any answer to (i), (ii) or (iii) above is YES, explain: _____
- (c) Was the Property built before 1978? If YES, Seller must provide buyer with a Lead Based Paint Disclosure Statement prior to being bound by a sales contract in compliance with federal law. YES NO UNKNOWN
- (d) Are there any environmental hazards or contaminants on or affecting the Property including, but not limited to: lead based paint, formaldehyde, asbestos, radon gas, PCB's, methamphetamine contamination, defective or contaminated drywall, contaminated soil or water, active or abandoned storage tanks (fuel, propane or chemical)? YES NO UNKNOWN
- (e) Has the Property been tested for any of the items listed in (d) above? If YES, explain: _____
- (f) Are there archeological sites, mangroves, or other environmentally sensitive or protected areas located on the Property? If YES, explain: _____

	<u>YES</u>	<u>NO</u>	<u>UNKNOWN</u>
15. POOLS; HOT TUBS; SPAS			
Notice to Buyer: The Florida Residential Swimming Pool Safety Act ("Act") requires a "swimming pool" with a certificate of completion on or after October 1, 2000, to have at least one safety feature specified in §515.27(1) of the Act. The Act defines a "swimming pool" as "any structure, located in a residential area, that is intended for swimming or recreational bathing and contains water over 24" deep including, but not limited to, in-ground, aboveground, and on-ground swimming pools; hot tubs; and nonportable spas."			
(a) If the property has a "swimming pool" as defined by the Act, does it comply with the Act?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Has any in-ground pool, hot tub or spa on the property been demolished and/or filled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Are any of the following heated? <u>Pool:</u> Yes <input type="checkbox"/> OR No <input type="checkbox"/> <u>Hot Tub/ Spa:</u> Yes <input type="checkbox"/> OR No <input type="checkbox"/>			
(d) Is the pool and hot tub/spa equipment (including, but not limited to, any heater, vacuum system, chlorinator, or waterfall feature) in good working condition? If NO, explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) Is any of the equipment servicing the pool or hot tub/spa leased? If "Yes", explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Are you aware of any structural or other defects with the pool, hot tub, spa, or related equipment? If YES, explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	
16. HOMEOWNERS' ASSOCIATION			
Notice to Buyer: If the Property is governed by a homeowner's association (HOA), Buyer should read the HOA's official records, by-laws, restrictions, covenants, declarations, and meeting minutes ("HOA Records") prior to making an offer. The HOA Records may include information on any proposed changes or assessments, the HOA's financial condition; any recurring dues/fees; periodic and/or special assessments; capital contributions; restrictions on construction, architectural modifications, landscaping, parking, vehicles, pets, and leasing; or threatened or pending litigation.			
(a) Is membership in a HOA mandatory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Are you aware of any existing or threatened lawsuits or other legal or administrative actions against the HOA? If YES, explain: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Are you aware of any potential assessments from the HOA (including, but not limited to, any that have been voted on but not yet levied)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Are the access roads: <input checked="" type="checkbox"/> HOA owned OR <input type="checkbox"/> publicly owned (e.g., city, county)?			
17. NEIGHBORHOOD			
(a) Are you aware of any existing conditions or proposed changes in the immediate neighborhood that may materially affect the value or desirability of the Property such as noise or other nuisances, electric or magnetic field levels, or threat of condemnation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Is the Property located within a historic district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Are you aware of any restrictions affecting the Property as a result of it being located within a historic district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(d) Do you have any open applications with the historic district governing body relating to the use of the Property, permits, or proposed renovations or modifications?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
(e) Are there any unresolved violations relating to the Property being located within a historic district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) If any of your answers in (a) --(e) above are YES, explain: _____			
Notice to Buyer: The Florida Department of Law Enforcement maintains a public database of sexual offenders and where they may reside. For more information, or to conduct a search of a neighborhood, visit https://offender.fdle.state.fl.us/offender/sops/home.jsf			
18. FOREIGN INVESTMENT IN REAL PROPERTY TAX ACT ("FIRPTA")			
Is Seller subject to FIRPTA withholding under §1445 of the IRS Code? If YES, Buyer and Seller should consult with tax and legal professionals regarding any tax and withholding obligations.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
19. OTHER MATTERS			
(a) Are there any existing or threatened legal actions against the Property (including, but not limited to, any unrecorded liens)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Is the Property subject to any Property Assessed Clean Energy (PACE) assessment pursuant to §163.08, Florida Statutes?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(c) Are there any violations of any laws or regulations relating to the Property (e.g., zoning or code violations, nonconforming uses, setback violations)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Have you ever had any claims filed against your homeowner's insurance policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

