



# SELLER'S PROPERTY DISCLOSURE STATEMENT

## EXHIBIT "A"

Georgia  
Association  
of REALTORS

2008 Printing

This Exhibit is part of the Agreement with an Offer Date of \_\_\_\_\_ for the purchase and sale of that certain  
Property known as: 365 Grant Park Place SE, Atlanta, Georgia 30315.

**NOTICE TO BUYER AND SELLER:** This disclosure statement is designed to assist Seller in disclosing to prospective buyers material adverse facts relating to the physical condition of Property that may not be readily observable, disclosing historical information and past problems with Property, and identifying those fixtures/items that are included with the sale of Property. **All answers are to be answered with respect to the above referenced property. IF THE ANSWERS TO ANY OF THE QUESTIONS LISTED BELOW ARE "YES" SELLER SHALL FULLY EXPLAIN THE ANSWER TO THE QUESTION IN THE BLANK CORRESPONDING TO THE QUESTION AND/OR IN THE ADDITIONAL EXPLANATIONS PARAGRAPH.**

- |  | Yes                                 | No                                  | Don't Know |
|--|-------------------------------------|-------------------------------------|------------|
| <b>1. OCCUPANCY:</b>   |                                     |                                     |            |
| (a) Is Property vacant?  |                                     | <input checked="" type="checkbox"/> |            |
| If yes, how long has it been since Seller occupied Property?   |                                     |                                     |            |
| (b) Are there any leases, written or verbal, on Property or any part thereof?  |                                     | <input checked="" type="checkbox"/> |            |
| <b>2. SOIL, TREES, SHRUBS AND BOUNDARIES:</b>  |                                     |                                     |            |
| (a) Are there any landfills (other than foundation backfill), graves, mine shafts, trash dumps or wells (in use or abandoned) on Property?   |                                     | <input checked="" type="checkbox"/> |            |
| (b) Is there any sliding, settling (other than normal settling), earth movement, sinkholes, upheaval, or earth stability/expansive soil problems?  |                                     | <input checked="" type="checkbox"/> |            |
| (c) Are there any diseased or dead trees on Property?  |                                     | <input checked="" type="checkbox"/> |            |
| (d) Are there any encroachments (known or recorded), leases, unrecorded easements, or boundary line disputes?  |                                     | <input checked="" type="checkbox"/> |            |
| <b>3. TERMITES, DRY-ROT, PESTS, AND WOOD-DESTROYING ORGANISMS:</b>   |                                     |                                     |            |
| (a) Is there any past or present damage to Property caused by infiltrating pests, termites, dry-rot, or other wood-destroying organisms?   | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |            |
| (b) Is your Property currently under a transferable bond, warranty or other coverage for termites or other wood destroying organisms by a licensed pest control company?   | <input checked="" type="checkbox"/> |                                     |            |
| If yes, check type of coverage: <input type="checkbox"/> re-treatment and repair; or <input checked="" type="checkbox"/> re-treatment  |                                     |                                     |            |
| (c) Is there a cost to transfer the bond, warranty or other coverage?  |                                     | <input checked="" type="checkbox"/> |            |
| If yes, what is the cost? \$ _____   |                                     |                                     |            |
| (d) Is there a cost to maintain the bond, warranty or other coverage?  | <input checked="" type="checkbox"/> |                                     |            |
| If yes, what is the annual cost? \$ <u>125.00</u>  |                                     |                                     |            |
| (e) Have any termite/pest control reports or treatments for Property been done in the last five (5) years?   | <input checked="" type="checkbox"/> |                                     |            |
| (f) Does any dwelling or garage on Property have any untreated wood or exterior siding/cladding, such as rigid board insulation, foam plastic, synthetic stucco, hard coat stucco, wood or masonry siding (excluding brick), below grade or within six inches of finished grade? |                                     | <input checked="" type="checkbox"/> |            |
| <b>4. STRUCTURAL ITEMS, ADDITIONS AND ALTERATIONS:</b>   |                                     |                                     |            |
| (a) What year was the main residential dwelling constructed? <u>1905-1920</u>  |                                     |                                     |            |
| (b) Has there been any movement, shifting, settling (other than normal settling), cracking, deterioration, or other structural problems with any dwelling or garage on Property?   |                                     | <input checked="" type="checkbox"/> |            |
| (c) Has there been any additional structural bracing, underpinning, or other structural reinforcement added to any dwelling or garage on Property?   | <input checked="" type="checkbox"/> |                                     |            |
| (d) Are there any problems with driveways, walkways, patios, or retaining walls on Property?   |                                     | <input checked="" type="checkbox"/> |            |
| (e) Have there been any additions, structural changes, or any other major alterations to the original improvements on the Property?  | <input checked="" type="checkbox"/> |                                     |            |
| (f) Has there been any work done on the Property where required permits and/or approvals (public or private) were not obtained?  |                                     | <input checked="" type="checkbox"/> |            |
| (g) Has any work been done to Property that was not in compliance with building codes or zoning regulations?   |                                     | <input checked="" type="checkbox"/> |            |
| (h) Does any part of the exterior siding or cladding of any dwelling or garage on Property consist of synthetic stucco?  |                                     | <input checked="" type="checkbox"/> |            |
| <b>5. LEAD-BASED PAINT:</b> Was any part of the residential dwelling on Property constructed prior to 1978?  |                                     |                                     |            |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> No  |                                     |                                     |            |

If you have answered "Yes" or "Don't Know" the Lead-Based Paint Exhibit F54 must be executed by the parties and the Lead-Based Paint Pamphlet F55 must be provided to the buyer.

|  | Yes                                 | No                                  | Don't Know                          |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| <b>6. ROOF, GUTTERS AND DOWNSPOUTS:</b>  |                                     |                                     |                                     |
| (a) Approximate age of roof: <u>4</u> years.   |                                     |                                     |                                     |
| (b) Has the roof, or any part thereof, been repaired during Sellers ownership?   | <input checked="" type="checkbox"/> |                                     |                                     |
| (c) Are there any roof leaks or other problems with the roof, roof flashing, gutters or downspouts?  |                                     | <input checked="" type="checkbox"/> |                                     |
| <b>7. DRAINAGE, FLOODING AND MOISTURE:</b>   |                                     |                                     |                                     |
| (a) Has there been any water leakage, water accumulation, or dampness within the basement, crawl space or other parts of the main dwelling at or below grade?  |                                     | <input checked="" type="checkbox"/> |                                     |
| (b) Have any repairs been made to control any water or dampness problems in the basement, crawl space, or other parts of the main dwelling at or below grade?  |                                     | <input checked="" type="checkbox"/> |                                     |
| (c) Is the Property or any improvements thereon located in a flood zone?   |                                     | <input checked="" type="checkbox"/> |                                     |
| (d) Does water regularly stand on Property for more than 1 (one) day after it has rained?  |                                     | <input checked="" type="checkbox"/> |                                     |
| (e) Has there been any past flooding on Property?  |                                     | <input checked="" type="checkbox"/> |                                     |
| (f) Are there any problems with siding or exterior cladding, swelling, chipping, delaminating or retaining moisture?   |                                     | <input checked="" type="checkbox"/> |                                     |
| (g) Does mold appear on interior heated and cooled portions of any dwelling on Property other than on the walls, floors or ceilings of showers, sinks, and bathtubs?   |                                     | <input checked="" type="checkbox"/> |                                     |
| <b>8. PLUMBING RELATED ITEMS:</b>  |                                     |                                     |                                     |
| (a) What is your drinking water source: <input checked="" type="checkbox"/> public <input type="checkbox"/> private <input type="checkbox"/> well on property  |                                     |                                     |                                     |
| (b) If your drinking water is from a well, has it been tested within the past 12 (twelve) months?  |                                     |                                     |                                     |
| (c) Do you have a water softener, filter or purifier? If yes, <input type="checkbox"/> leased <input type="checkbox"/> owned   |                                     |                                     |                                     |
| (d) What is the type of sewage system: <input checked="" type="checkbox"/> public <input type="checkbox"/> private <input type="checkbox"/> septic tank  |                                     |                                     |                                     |
| (e) Is the main dwelling served by sewage pump or lift system?   |                                     |                                     |                                     |
| (f) Do you know if any septic tank or cesspool on Property has ever been professionally serviced? If yes, please give the date of last service: _____  |                                     |                                     |                                     |
| (g) Do you know of any past or present leaks, backups, or other similar problems relating to any of the plumbing, water and/or sewage-related items?   |                                     | <input checked="" type="checkbox"/> |                                     |
| (h) Is there any polybutylene plumbing, other than primary service line, on Property?  |                                     |                                     | <input checked="" type="checkbox"/> |
| (i) Are any of the plumbing fixtures in the Property not low water flow fixtures? If yes, please describe in the Additional Explanations paragraph which fixtures are not low water flow fixtures.   |                                     | <input checked="" type="checkbox"/> |                                     |
| <b>9. OTHER SYSTEMS AND COMPONENTS:</b>  |                                     |                                     |                                     |
| (a) What type of heating system(s) serve the main dwelling? <input type="checkbox"/> gas <input checked="" type="checkbox"/> electric <input type="checkbox"/> water pump <input type="checkbox"/> other   |                                     |                                     |                                     |
| (b) What is the approximate age of heating system(s): <u>4</u> years   |                                     |                                     |                                     |
| (c) What type of air conditioning system(s) serve the main dwelling? <input type="checkbox"/> gas <input checked="" type="checkbox"/> electric <input type="checkbox"/> other  |                                     |                                     |                                     |
| (d) What is the approximate age of air conditioning system(s): <u>4</u> years  |                                     |                                     |                                     |
| (e) Is any portion of the main dwelling not served by a central or zoned heating and/or air conditioning system?   |                                     | <input checked="" type="checkbox"/> |                                     |
| (f) How is water heated in the main dwelling? <input checked="" type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> solar   |                                     |                                     |                                     |
| (g) What is the approximate age of water heater: <u>4</u> years  |                                     |                                     |                                     |
| (h) Does the main dwelling have aluminum wiring other than the primary service line?   |                                     |                                     | <input checked="" type="checkbox"/> |
| (i) Is there any system or appliance which is leased or for which the buyer must pay a transfer fee to continue to use? If yes, what is the transfer fee? \$ _____<br>If yes, what is the current use fee to be paid by the Buyer? \$ _____                                |                                     | <input checked="" type="checkbox"/> |                                     |
| (j) Are any fireplaces not working or in need of repair?   | <input checked="" type="checkbox"/> |                                     |                                     |
| (k) When was each fireplace, wood stove or chimney/flue last cleaned? Date(s): <u>NA</u>   |                                     |                                     |                                     |
| <b>10. TOXIC SUBSTANCES:</b>   |                                     |                                     |                                     |
| (a) Are there any underground tanks, toxic or hazardous substances on Property (structure or soil) such as asbestos, urea-formaldehyde, methane gas, radioactive material, radon, mold, benzene or other environmental contaminants?                                       |                                     | <input checked="" type="checkbox"/> |                                     |
| (b) Has Property ever been tested for radon, lead, mold or any other potentially toxic substances?   |                                     | <input checked="" type="checkbox"/> |                                     |
| <b>11. COVENANTS, FEES AND ASSESSMENTS:</b>  |                                     |                                     |                                     |
| (a) Is Property part of a condominium, community association or subject to covenants, conditions and restrictions (CC & Rs)?   |                                     | <input checked="" type="checkbox"/> |                                     |
| (b) Is there a mandatory community association fee or assessment?<br>If yes, what is the amount? \$ _____ per _____<br>Is there an initiation fee? If yes, what amount? \$ _____   |                                     | <input checked="" type="checkbox"/> |                                     |
| (c) Are there any recreational facilities in the community for which the obligation to pay and the right to use are optional? If yes, the nature of the facilities should be described in the Additional Explanations paragraph and the optional fee or charge is \$ _____ |                                     | <input checked="" type="checkbox"/> |                                     |
| (d) In purchasing Property, will any initiation, transfer, or other similar fee be owed to the Association? If yes, what is the amount? \$ _____   |                                     | <input checked="" type="checkbox"/> |                                     |
| (e) Are there any special assessments approved by but yet not owing or due to a community Association that are not yet owed or due?  |                                     | <input checked="" type="checkbox"/> |                                     |

## 12. OTHER MATTERS:

Yes No Don't Know

- (a) Have there been any inspections of Property in the past year?  
If yes, by whom and of what type? \_\_\_\_\_
- (b) Does Property contain any building products which are or have been the subject of class action lawsuits, litigation or legal claims alleging that the product is defective? If yes, please identify in the Additional Explanations the product or products and the general location of each on Property.
- (c) Is there or has there been in the past any litigation involving Property or any improvement therein alleging negligent or improper construction defects, termites, and/or title problems?
- (d) Has there been any award or payment of money in lieu of repairs for such a defective building product?
- (e) Has any release been signed that would limit a future owner from making any claims in connection with Property?
- (f) Has there been any fire, flood or wind damage which required repairs to Property in excess of \$500.00?
- (g) Approximately how many insurance claims have been filed on Property since you owned it? 0
- (h) Are any fixtures or appliances included in the sale in need of repair?
- (i) Have any repairs been made to the electrical, plumbing, or heating and air condition systems, or any part thereof?
- (j) Was any dwelling on Property or portion thereof (excluding mobile, modular and manufactured dwelling) moved to the site from another location?
- (k) Are there any other adverse, material facts pertaining to the physical condition of the Property that have not otherwise been disclosed?

## 13. FIXTURES/ITEMS: (Check (✓) only those fixtures/items below that are included in the sale of Property. Unless otherwise indicated, if there is more than one item (such as a second refrigerator or two chandeliers or three smoke detectors), all such fixtures/items checked are included in the sale of Property. Those fixtures/items listed below that are not checked shall not be included in the sale of Property.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Air Conditioning Window Unit                               | <input type="checkbox"/> Gas Grille   | <input checked="" type="checkbox"/> Smoke Detector                                  |
| <input type="checkbox"/> Air Purifier   | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            | <input checked="" type="checkbox"/> Battery Operated <input type="checkbox"/> Hard  |
| <input checked="" type="checkbox"/> Alarm System (Burglar)                          | <input type="checkbox"/> Gates  | Wired <input type="checkbox"/> Speakers (Built-In)                                  |
| <input type="checkbox"/> Leased <input checked="" type="checkbox"/> Owned           | <input type="checkbox"/> Gazebo   | <input type="checkbox"/> Sprinkler System   |
| <input type="checkbox"/> Alarm System (Smoke/Fire)                                  | <input type="checkbox"/> Hot Tub  | <input type="checkbox"/> Statuary   |
| <input type="checkbox"/> Leased <input checked="" type="checkbox"/> Owned           | <input type="checkbox"/> Humidifier   | <input checked="" type="checkbox"/> Stepping Stones                                 |
| <input type="checkbox"/> Arbor  | <input checked="" type="checkbox"/> Ice Maker                                       | <input type="checkbox"/> Storage Building   |
| <input type="checkbox"/> Attic Fan (Whole House Fan)                                | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            | <input checked="" type="checkbox"/> Stove   |
| <input type="checkbox"/> Attic Ventilator Fan                                       | <input type="checkbox"/> Intercom   | <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric           |
| <input type="checkbox"/> Awning   | <input checked="" type="checkbox"/> Jetted Tub                                      | <input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing |
| <input type="checkbox"/> Basketball Post & Goal                                     | <input type="checkbox"/> Landscaping Lights   | <input type="checkbox"/> Sump Pump  |
| <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            | <input type="checkbox"/> Light Bulbs Fixtures                                       | <input checked="" type="checkbox"/> Surface Unit Cook Top                           |
| <input type="checkbox"/> Birdhouses   | (Except Chandeliers)  | <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric           |
| <input type="checkbox"/> Boat Dock  | <input checked="" type="checkbox"/> Light Fixtures                                  | <input type="checkbox"/> Swimming Pool  |
| <input type="checkbox"/> Carbon Monoxide Detector                                   | (Except Chandeliers)  | <input type="checkbox"/> Above Ground   |
| <input checked="" type="checkbox"/> Ceiling Fan                                     | <input checked="" type="checkbox"/> Mailbox   | <input type="checkbox"/> Swimming Pool Equipment                                    |
| <input checked="" type="checkbox"/> Chandelier                                      | <input checked="" type="checkbox"/> Microwave Oven                                  | (List below)  |
| <input checked="" type="checkbox"/> Closet Shelving System                          | <input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Swing Set  |
| <input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Mirror (Attached)  | <input checked="" type="checkbox"/> Switch Plate Covers                             |
| <input type="checkbox"/> Dehumidifier   | <input type="checkbox"/> Outbuilding  | <input type="checkbox"/> Telephone Jacks/Wires                                      |
| <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            | <input type="checkbox"/> Outdoor Bench  | <input type="checkbox"/> Television Antenna   |
| <input checked="" type="checkbox"/> Dishwasher                                      | <input type="checkbox"/> Playhouse  | <input checked="" type="checkbox"/> Television Cable/Jacks                          |
| <input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Porch swing  | <input checked="" type="checkbox"/> Thermostat (Programmable)                       |
| <input type="checkbox"/> Dog House  | <input type="checkbox"/> Propane Gas Tanks  | <input type="checkbox"/> Trash Compactor  |
| <input checked="" type="checkbox"/> Door & Window Hardware                          | <input type="checkbox"/> Above ground <input type="checkbox"/> Buried               | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            |
| <input checked="" type="checkbox"/> Dryer   | <input type="checkbox"/> Leased <input type="checkbox"/> Owned                      | <input type="checkbox"/> Tree House   |
| <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric           | <input type="checkbox"/> Propane in Tank  | <input type="checkbox"/> Trellis  |
| <input type="checkbox"/> Fence (Invisible)  | <input type="checkbox"/> Radio (Built-In)   | <input type="checkbox"/> Vacuum System (Built-In)                                   |
| <input type="checkbox"/> Fence Pet Collar   | <input checked="" type="checkbox"/> Refrigerator                                    | <input type="checkbox"/> Vacuum Attachments   |
| <input checked="" type="checkbox"/> Fireplace                                       | <input type="checkbox"/> Safe   | <input type="checkbox"/> Vent Hood  |
| <input checked="" type="checkbox"/> Gas Logs  | <input type="checkbox"/> Satellite Dish/Receiver                                    | <input checked="" type="checkbox"/> Washing Machine                                 |
| <input type="checkbox"/> Screen/Door  | <input type="checkbox"/> Sauna  | <input type="checkbox"/> Water Purification System                                  |
| <input type="checkbox"/> Wood Burning Insert  | <input type="checkbox"/> Septic Pump  | <input type="checkbox"/> Water Softener System                                      |
| <input type="checkbox"/> Flag Pole  | <input type="checkbox"/> Shelving Unit & System                                     | <input type="checkbox"/> Weather Vane   |
| <input type="checkbox"/> Garage Door Opener   | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            | <input type="checkbox"/> Well Pump  |
| <input type="checkbox"/> Remote Control   | <input checked="" type="checkbox"/> Shower Head/Sprayer                             | <input type="checkbox"/> Window Screens   |
| <input checked="" type="checkbox"/> Garbage Disposal                                |   | <input type="checkbox"/> Window Treatments  |
|   |   | <input type="checkbox"/> Wine Cooler  |

Other fixtures/items included in the sale of Property shall be: \_\_\_\_\_

Other fixtures/items not included in the sale of Property shall be: BAZON

The common law of fixtures shall apply to fixtures not addressed herein. Those fixtures/items that are not included in the sale of Property shall remain Property of Seller and shall be removed prior to closing or the transfer of possession of Property to Buyer, whichever is later. Seller shall lose the right to remove any such fixtures/items not timely removed. In removing all fixtures/items, Seller shall use reasonable care to prevent damage and, if necessary, to restore Property to its original condition.

14. **AGRICULTURAL DISCLOSURE:** Is Property within, partially within, or adjacent to any property zoned or identified on an approved county land use plan as agricultural or forestry use? ☐ Yes ☒ No ☐ Don't Know

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.

15. **ADDITIONAL EXPLANATIONS FOR ALL QUESTIONS ANSWERED "YES":** [Explanations should reference the number of the question for which more detailed information is being provided.]

3. Termite damage was discovered during home renovation in 2004. All termite damage has been repaired and termites are no longer present. Home is treated annually.
4. Additional bracing was added to new roof structure in 2004. An addition of approximated 360 square feet was added in 2005 and includes the master bedroom, walk-in closet, + hall closet.
6. The porch roof was repaired for leaks twice in 4 years.
9. (2) of the (5) fireplaces operated w/ gas (gas logs), other (3) fireplaces are decorative only.
12. Coils were replaced on AC unit in 2007.
- ☐ MARK BOX IF ADDITIONAL PAGES ARE ATTACHED.

#### SELLER'S REPRESENTATION:

To the best of Seller's knowledge and belief, the information contained in this Seller's Property Disclosure Statement is accurate and complete as of the date signed by Seller. It should not be a substitute for Buyer inspecting Property or obtaining any warranties with regard to Property that Buyer may wish to obtain. Seller hereby authorizes Broker to provide this Seller's Property Disclosure Statement to prospective buyers of Property and to real estate Brokers and their affiliated Licensees. **Seller agrees to promptly update this Seller's Property Disclosure Statement and to provide any Buyer and Broker with a revised copy of the same if there are any material changes in the answers to the questions contained herein.**

Is each individual named below a U.S. Citizen or resident alien?

☐ Yes ☐ No

Has each individual named below been a Georgia resident for the past two years?

☐ Yes ☐ No

Has Property been Seller's primary residence for at least two of the last five years?

☐ Yes ☐ No

Seller: [Signature]

Date: \_\_\_\_\_

Seller: [Signature]

Date: \_\_\_\_\_

#### RECEIPT AND ACKNOWLEDGMENT BY BUYER:

I acknowledge receipt of this Seller's Property Disclosure Statement. I understand that, except as stated in the Purchase and Sale Agreement, Property is being sold in its present condition, without warranties or guarantees of any kind by Seller or Brokers. No representations concerning the condition of Property are being relied upon by Buyer except as disclosed herein or stated in the Purchase and Sale Agreement.

Buyer: \_\_\_\_\_

Date: \_\_\_\_\_

Buyer: \_\_\_\_\_

Date: \_\_\_\_\_



# LEAD-BASED PAINT EXHIBIT " B "

Georgia  
Association  
of REALTORS

2008 Printing

This Exhibit is part of the Agreement with an Offer Date of \_\_\_\_\_ for the purchase and sale of that certain  
Property known as: 365 Grant Park Place SE, Atlanta, Georgia 30315.

## 1. Purchase and Sale or Lease Transaction Lead Warning Statement.

Every purchaser of any interest in residential property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young 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.

## 2. Seller's/Lessor's Disclosure. [Seller/Lessor to initial section A and B below]

728 A. Presence of lead-based paint and/or lead paint hazard (check one below):  
☐ Known lead-based paint and/or lead-based paint hazards are present in the housing (explain below):  
\_\_\_\_\_  
☒ Seller/Lessor has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

Seller/Lessor  
Initials

728 B. Records and Reports available to the Seller/Lessor (check one below):  
☐ Seller/Lessor has provided the Buyer/Lessee with all the available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list document below):  
\_\_\_\_\_  
☒ Seller/Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Seller/Lessor  
Initials

## Buyer's/Lessee's Acknowledgment. [Buyer/Lessee to initial section C, D, and E below]

☐ C. Buyer/Lessee has received copies of all information listed above.  
☐ D. Buyer/Lessee has read and understands the above lead warning statement and has received the pamphlet "Protect Your Family From Lead in Your Home".  
☐ E. Buyer/Lessee has (check one below):  
☐ Received a ten (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; or  
☐ Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

Buyer/Lessee  
Initials

Buyer/Lessee  
Initials

Buyer/Lessee  
Initials

## Broker's Acknowledgment. [Broker to initial below]

☐ F. Broker has informed the Seller/Lessor of the Seller's/Lessor's obligations under 42 U.S.C. § 4852(d) and is aware of his/her responsibility to ensure compliance.

Broker's Initials

## 3. Certification of Accuracy.

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.

[Signature]  
Seller/Lessor

Date

Buyer/Lessee

Date

[Signature]  
Seller/Lessor

Date

Buyer/Lessee

Date

Listing Broker

Date

Selling/Leasing Broker

Date

NOTE: It is the intent of this Exhibit that it be applicable to both the sale and leasing of Property. The use of terms like "Buyer/Lessee" shall mean either a Buyer or a Lessee or both as the context may indicate.