



# SELLER'S PROPERTY DISCLOSURE STATEMENT

## EXHIBIT " \_\_\_\_\_ "



2026 Printing

This Seller's Property Disclosure Statement ("Statement") is an exhibit to the Purchase and Sale Agreement with an Offer Date of \_\_\_\_\_ for the Property (known as or located at: Tract 2 - 12321 Highway 185

St. George, Charlton \_\_\_\_\_, Georgia, 31562 \_\_\_\_\_. This Statement is intended to make it easier for Seller to fulfill Seller's legal duty to disclose hidden defects in the Property of which Seller is aware. Seller is obligated to disclose such defects even when the Property is being sold "as-is."

### A. INSTRUCTIONS TO SELLER IN COMPLETING THIS STATEMENT.

In completing this Statement, Seller agrees to:

- (1) answer all questions in reference to the Property and the improvements on the Property;
- (2) answer all questions fully, accurately and to the actual knowledge and belief of all Sellers (hereinafter, collectively "Knowledge");
- (3) provide additional explanations to all "yes" answers in the corresponding Explanation section below each group of questions (including providing to Buyer any additional documentation in Seller's possession), unless the "yes" answer is self-evident;
- (4) if prior to Closing there are any material changes in the answers to any of the questions, Seller shall promptly revise the Statement and provide it to the Buyer and any Broker involved in the transaction.

**B. HOW THIS STATEMENT SHOULD BE USED BY BUYER.** Caveat emptor or "buyer beware" is the law in Georgia. Buyer should conduct a thorough inspection of the Property. If Seller has not occupied or recently occupied the Property, Seller's Knowledge of the Property's condition may be limited. Buyer is expected to use reasonable care to inspect the Property and confirm that it is suitable for Buyer's purposes. If an inspection of the Property reveals problems or areas of concern that would cause a reasonable Buyer to investigate further, Buyer should investigate further. A "yes" or "no" answer to a question means "yes" or "no" to the actual Knowledge and belief of all Sellers of the Property. In other words, if a Seller answers "no" to a question, it means Seller either affirmatively knows that the answer to the question is "no" or has no Knowledge whether such condition exists on the Property. As such, Seller's answers should not be taken as a warranty or guaranty of the actual condition of the Property, nor a substitute for Buyer doing its own due diligence.

### C. SELLER DISCLOSURES.

|                                                                                                                                                                                                                                                                                                                                       | YES                                 | NO                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|
| <b>1. GENERAL:</b>                                                                                                                                                                                                                                                                                                                    |                                     |                                     |
| (a) What year was the main residential dwelling constructed? 2020                                                                                                                                                                                                                                                                     |                                     |                                     |
| (b) Is the Property vacant?                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| If yes, how long has it been since the Property has been occupied?                                                                                                                                                                                                                                                                    |                                     |                                     |
| (c) Is the Property or any portion thereof leased?                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| (d) Has the Property been designated as historic or in a historic district where permission must be received to make modifications and additions?                                                                                                                                                                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <b>EXPLANATION:</b>                                                                                                                                                                                                                                                                                                                   |                                     |                                     |
|                                                                                                                                                                                                                                                                                                                                       |                                     |                                     |
| <b>2. COVENANTS, FEES, and ASSESSMENTS:</b>                                                                                                                                                                                                                                                                                           |                                     |                                     |
| (a) Is the Property subject to a recorded Declaration of Covenants, Conditions, and Restrictions ("CC&Rs") or other similar restrictions?                                                                                                                                                                                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| (b) Is the Property part of a condominium or community in which there is a community association?<br><b>IF YES, SELLER TO COMPLETE AND PROVIDE BUYER WITH A "COMMUNITY ASSOCIATION DISCLOSURE EXHIBIT" GAR F322.</b>                                                                                                                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <b>EXPLANATION:</b>                                                                                                                                                                                                                                                                                                                   |                                     |                                     |
|                                                                                                                                                                                                                                                                                                                                       |                                     |                                     |
| <b>3. LEAD-BASED PAINT:</b>                                                                                                                                                                                                                                                                                                           |                                     |                                     |
| (a) Was any part of the residential dwelling on the Property or any painted component, fixture, or material used therein constructed or manufacture prior to 1978? <b>IF YES, THE "LEAD-BASED PAINT EXHIBIT" GAR F316 MUST BE EXECUTED BY THE PARTIES AND THE "LEAD-BASED PAINT PAMPHLET" GAR CB04 MUST BE PROVIDED TO THE BUYER.</b> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

| 4. STRUCTURAL ITEMS, ADDITIONS AND ALTERATIONS:                                                                                                                                                    | YES                      | NO                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Has there been any settling, movement, cracking or breakage of the foundations or structural supports of the improvements?                                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Have any structural reinforcements or supports been added?                                                                                                                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Have there been any additions, structural changes, or any other major alterations to the original improvements or Property, including without limitation pools, carports or storage buildings? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) Has any work been done where a required building permit was not obtained?                                                                                                                      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (e) Are there violations of building codes, housing codes, or zoning regulations (not otherwise grandfathered)?                                                                                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (f) Have any notices alleging such violations been received?                                                                                                                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (g) Is any portion of the main dwelling a mobile, modular or manufactured home?                                                                                                                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (h) Was any dwelling or portion thereof (excluding mobile, modular and manufactured dwelling) moved to the site from another location?                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**EXPLANATION:**

| 5. SYSTEMS and COMPONENTS:                                                                                                                                                    | YES                      | NO                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Has any part of the HVAC system(s) been replaced during Seller's ownership?                                                                                               | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Date of last HVAC system(s) service: _____                                                                                                                                |                          |                                     |
| (c) Is any heated and cooled portion of the main dwelling not served by a central heating and cooling system?                                                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) Is any portion of the heating and cooling system in need of repair or replacement?                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (e) Does any dwelling or garage have aluminum wiring other than in the primary service line?                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (f) Are any fireplaces decorative only or in need of repair?                                                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (g) Have there been any reports of damaging moisture behind exterior walls constructed of synthetic stucco?                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (h) Is there any Spray Polyurethane Foam (SPF) insulation in the Property?                                                                                                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (i) Are any systems/components subject to a lease or rental payment plan (i.e. HVAC, security system, appliances, alternate energy source systems, propane/fuel tanks, etc.)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (j) Are there any remotely accessed thermostats, lighting systems, security camera, video doorbells, locks, appliances, etc. servicing the Property?                          | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**EXPLANATION:**

| 6. SEWER/PLUMBING RELATED ITEMS:                                                                                                                                       | YES                                 | NO                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|
| (a) Approximate age of water heater(s): 6 _____ years                                                                                                                  |                                     |                                     |
| (b) What is the drinking water source: <input type="checkbox"/> public <input type="checkbox"/> private <input checked="" type="checkbox"/> well                       |                                     |                                     |
| (c) If the drinking water is from a well, give the date of last service: unknown                                                                                       |                                     |                                     |
| (d) If the drinking water is from a well, has there ever been a test the results of which indicate that the water is not safe to drink? If yes, date of testing: _____ | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| (e) What is the sewer system: <input type="checkbox"/> public <input type="checkbox"/> private <input type="checkbox"/> septic tank                                    |                                     |                                     |
| (f) If the Property is served by a septic system, how many bedrooms was the septic system approved for by health department or other governmental authority?           |                                     |                                     |
| (g) Is the main dwelling served by a sewage pump?                                                                                                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| (h) Has any septic tank or cesspool on Property ever been professionally serviced?                                                                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| If yes, give the date of last service: _____                                                                                                                           |                                     |                                     |
| (i) Are there any leaks, backups, or other similar problems with any portion of the plumbing, water, or sewage systems or damage therefrom?                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| (j) Is there presently any polybutylene plumbing, other than the primary service line?                                                                                 | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| (k) Has there ever been any damage from a frozen water line, spigot, or fixture?                                                                                       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

**EXPLANATION:**

| 7. <b>ROOFS, GUTTERS, and DOWNSPOUTS:</b>                                                            | YES                      | NO                                  |
|------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Approximate age of roof on main dwelling: <u>6</u> years.                                        |                          |                                     |
| (b) Has any part of the roof been repaired during Seller's ownership?                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Are there any roof leaks or other problems with the roof, roof flashing, gutters, or downspouts? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**EXPLANATION:**

| 8. <b>FLOODING AND WATER INTRUSION:</b>                                                                                                                                                                                          | YES                      | NO                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Excluding water intrusion caused by plumbing, has there been any water intrusion or physical damage to the Property and/or its improvements and/or contents caused by water from the exterior of the improvements ("Flood")? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Has there been any insurance claim covered under the National Flood Insurance Program or a private flood insurance policy?                                                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Have any repairs been made to the Property or improvements located on such Property as a result of a Flood (regardless of whether any insurance claim was filed)?                                                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) Have you received any notification regarding the designation of the Property as a Repetitive Loss Property or Severe Repetitive Loss Property?                                                                               | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (e) Has there been any material erosion affecting the Property?                                                                                                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (f) Has Seller received notification to obtain and maintain flood insurance under federal law (such as because of a previous form of disaster assistance received by any owner of the Property)?                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (g) Is flood insurance required by current mortgagee?                                                                                                                                                                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (h) Does any part of the Property fall within a 100-year or 500-year floodplain as designated by the Federal Emergency Management Agency?                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (i) Are there any retention ponds, detention ponds or similar facilities on the Property?                                                                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (j) Are there any streams, springs, or ponds on the Property that only flow or are only visible during certain times of the year?                                                                                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**EXPLANATION:**

| 9. <b>SOIL AND BOUNDARIES:</b>                                                                                                                                                     | YES                      | NO                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Are there any landfills (other than foundation backfill), graves, burial pits, caves, mine shafts, trash dumps or wells (in use or abandoned)?                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Is there now or has there ever been any visible soil settlement or movement?                                                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Are there any shared improvements which benefit or burden the Property, including, but not limited to a shared dock, septic system, well, driveway, alleyway, or private road? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) Are there presently any encroachments, unrecorded easements, unrecorded agreements regarding shared improvements, or boundary line disputes with a neighboring property owner? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (e) Are there any underground pipelines crossing the Property that do not serve the Property?                                                                                      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

**EXPLANATION:**

| 10. TERMITES, DRY ROT, PESTS, and WOOD DESTROYING ORGANISMS:                                                                                                   | YES                      | NO                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Are you aware of any wildlife accessing the attic or other interior portions of the residence?                                                             | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Is there any damage or hazardous condition resulting from such wildlife intrusion; from insects (such as termites, bees and ants); or by fungi or dry rot? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Is there presently a bond, warranty or service contract for termites or other wood destroying organisms by a licensed pest control company?                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes, what is the cost to transfer? \$ _____ What is the annual cost? _____                                                                                  |                          |                                     |
| If yes, company name/contact: _____                                                                                                                            |                          |                                     |
| Coverage: <input type="checkbox"/> re-treatment and repair <input type="checkbox"/> re-treatment <input type="checkbox"/> periodic inspections only            |                          |                                     |
| Expiration Date _____ Renewal Date _____                                                                                                                       |                          |                                     |
| <b>EXPLANATION:</b>                                                                                                                                            |                          |                                     |
|                                                                                                                                                                |                          |                                     |

| 11. ENVIRONMENTAL, HEALTH, and SAFETY CONCERNS:                                                                                             | YES                      | NO                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Are there any underground tanks or toxic or hazardous substances such as asbestos?                                                      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Has Methamphetamine ("Meth") ever been produced on the Property?                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Have there ever been adverse test results for radon, lead, mold or any other potentially toxic or environmentally hazardous substances? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>EXPLANATION:</b>                                                                                                                         |                          |                                     |
|                                                                                                                                             |                          |                                     |

| 12. LITIGATION and INSURANCE:                                                                                                             | YES                      | NO                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Is there now or has there been any litigation therein alleging negligent construction or defective building products?                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Has there been any award or payment of money in lieu of repairs for defective building products or poor construction?                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Has any release been signed regarding defective products or poor construction that would limit a future owner from making any claims? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) During Seller's ownership have there been any insurance claims for more than 10% of the value of the Property?                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (e) Is the Property subject to a threatened or pending condemnation action?                                                               | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (f) How many insurance claims have been filed during Seller's ownership? _____                                                            |                          |                                     |
| <b>EXPLANATION:</b>                                                                                                                       |                          |                                     |
|                                                                                                                                           |                          |                                     |

| 13. OTHER HIDDEN DEFECTS:                                                      | YES                      | NO                                  |
|--------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (a) Are there any other hidden defects that have not otherwise been disclosed? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>EXPLANATION:</b>                                                            |                          |                                     |
|                                                                                |                          |                                     |

**1. Directions on How to Generally Fill Out Fixtures Checklist.** REGARDLESS OF WHETHER AN ITEM IS A FIXTURE OR NOT, SELLER SHALL HAVE THE RIGHT TO REMOVE ALL ITEMS ON THE FIXTURES CHECKLIST BELOW THAT ARE LEFT BLANK. THE ITEMS ON THE CHECKLIST BELOW THAT ARE CHECKED OR MARKED SHALL REMAIN WITH THE PROPERTY. Unless otherwise indicated, if an item is left blank, the Seller may remove all of that item from the Property. For example, if "Refrigerator" is left blank, Seller shall remove all Refrigerators on the Property, unless otherwise noted. Similarly, if "Refrigerator" is checked or marked in the Fixtures Checklist, then all refrigerators shall remain with the Property unless otherwise noted. This Fixtures Checklist is intended to supersede the common law of fixtures with regard to the items identified below. The common law of fixtures shall apply to all items not identified on this Fixtures Checklist.

**2. Items Not Remaining with the Property.** Items identified as not remaining with the Property that are physically attached to the Property shall be carefully removed from the Property in a manner designed to do minimal damage, but such items do not need to be replaced with a similar item. Seller shall make reasonable efforts to repair areas damaged by the removal of an item. Reasonable efforts to repair damage shall not extend to painting newly exposed areas that do not match the surrounding paint color. (Seller is encouraged, but shall not be required, to remove fixtures not remaining with the Property prior to marketing the Property for sale). Seller shall remove all items left blank below prior to Closing or the transfer of possession, whichever is later. Seller shall lose the right to remove those items not timely removed but shall be liable to Buyer for the reasonable cost of disposing such items provided that Buyer disposes of them within 30 days after Closing or the transfer of possession, which is later.

**3. Items Remaining with Property.** Items identified as remaining with the Property shall mean those specific items, including any solely necessary or required controller, as they existed in the Property as of the Offer Date. No such item shall be removed from the Property unless it is broken or destroyed. In the event such item is removed, it shall be replaced with a substantially identical item, if reasonably available. If not reasonably available, it shall be replaced with a substantially similar item of equal quality and value, or better. The same or newer model of the item being replaced in the same color and size and with the same functions or better shall be considered substantially identical. Once the Seller's Property is under contract, the items that may be removed and taken by the Seller, as reflected in this Seller's Property Disclosure Statement, may only be amended with the written consent of the Buyer of the Property.

**Appliances**

- ☐ Clothes Dryer
- ☐ Clothes Washing Machine
- ☒ Dishwasher
- ☐ Garage Door Opener
- ☐ Garbage Disposal
- ☐ Ice Maker
- ☐ Microwave Oven
- ☒ Oven
- ☐ Range
- ☐ Refrigerator w/o Freezer
- ☒ Refrigerator/Freezer
- ☐ Free Standing Freezer
- ☐ Surface Cook Top
- ☐ Trash Compactor
- ☐ Vacuum System
- ☐ Vent Hood
- ☐ Warming Drawer
- ☐ Wine Cooler

**Home Media**

- ☐ Amplifier
- ☐ Cable Jacks
- ☐ Cable Receiver
- ☐ Cable Remotes
- ☐ Intercom System
- ☐ Internet HUB
- ☐ Internet Wiring
- ☐ Satellite Dish
- ☐ Satellite Receiver
- ☐ Speakers
- ☐ Speaker Wiring
- ☐ Switch Plate Covers

- ☐ Television (TV)
- ☐ TV Antenna
- ☐ TV Mounts/Brackets
- ☐ TV Wiring

**Interior Fixtures**

- ☐ Ceiling Fan
- ☐ Chandelier
- ☐ Closet System
- ☐ Fireplace (FP)
- ☐ FP Gas Logs
- ☐ FP Screen/Door
- ☐ FP Wood Burning Insert
- ☐ Light Bulbs
- ☐ Light Fixtures
- ☐ Mirrors
  - ☐ Wall Mirrors
  - ☐ Vanity (hanging)
- ☐ Shelving Unit & System
- ☐ Shower Head/Sprayer
- ☐ Storage Unit/System
- ☐ Window Blinds (and Hardware)
- ☐ Window Shutters (and Hardware)
- ☐ Window Draperies (and Hardware)
- ☐ Unused Paint

**Landscaping / Yard**

- ☐ Arbor
- ☐ Awning
- ☐ Basketball Post and Goal

- ☐ Birdhouses
- ☐ Boat Dock
- ☐ Fence - Invisible
- ☐ Dog House
- ☐ Flag Pole
- ☐ Gazebo
- ☐ Irrigation System
- ☐ Landscaping Lights
- ☐ Mailbox
- ☐ Out/Storage Building
- ☐ Porch Swing
- ☐ Statuary
- ☐ Stepping Stones
- ☐ Swing Set
- ☐ Tree House
- ☐ Trellis
- ☐ Weather Vane

**Recreation**

- ☐ Aboveground Pool
- ☐ Gas Grill
- ☐ Hot Tub
- ☐ Outdoor Furniture
- ☐ Outdoor Playhouse
- ☐ Pool Equipment
- ☐ Pool Chemicals
- ☐ Sauna

**Safety**

- ☐ Alarm System (Burglar)
- ☐ Alarm System (Smoke/Fire)
- ☐ Security Camera
- ☐ Carbon Monoxide Detector
- ☐ Doorbell
- ☐ Door & Window Hardware

- ☐ Fire Sprinkler System
- ☐ Gate
- ☐ Safe (Built-In)
- ☐ Smoke Detector
- ☐ Window Screens

**Systems**

- ☐ A/C Window Unit
- ☐ Air Purifier
- ☐ Whole House Fan
- ☐ Attic Ventilator Fan
- ☐ Ventilator Fan
- ☐ Car Charging Station
- ☐ Dehumidifier
- ☐ Generator
- ☐ Humidifier
- ☐ Propane Tank
- ☐ Propane Fuel in Tank
- ☐ Fuel Oil Tank
- ☐ Fuel Oil in Tank
- ☐ Sewage Pump
- ☐ Solar Panel
- ☐ Sump Pump
- ☐ Thermostat
- ☐ Water Purification System
- ☐ Water Softener System
- ☐ Well Pump

**Other**

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |
| <input type="checkbox"/> |  |

**Clarification Regarding Multiple Items.** Items identified above as remaining with Property where Seller is actually taking one or more of such items shall be identified below. For example, if "Refrigerator" is marked as staying with the Property, but Seller is taking the extra refrigerator in the basement, the extra refrigerator and its location shall be described below. This section shall control over any conflicting or inconsistent provisions contained elsewhere herein.

|  |
|--|
|  |
|--|

**Items Needing Repair.** The following items remaining with Property are in need of repair or replacement:

**RECEIPT AND ACKNOWLEDGEMENT BY BUYER**

Buyer acknowledges receipt of this Seller's Property Disclosure Statement.

**1 Buyer's Signature**

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Date

**2 Buyer's Signature**

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Date

☐ Additional Signature Page (F267) is attached.

**SELLER'S REPRESENTATION REGARDING THIS STATEMENT**

Seller represents that the questions in this Statement have been answered to the actual knowledge and belief of all Sellers of the Property

*Chris Danese*

dotloop verified  
02/25/26 10:34 AM EST  
BOOP-TAPL-SB2W-F4RN

**1 Seller's Signature**

Chris Danese  
\_\_\_\_\_  
Print or Type Name

02/25/2026  
\_\_\_\_\_  
Date

**2 Seller's Signature**

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Date

☐ Additional Signature Page (F267) is attached.