



HOMEOWNER DISCLOSURE STATEMENT

Homeowner(s) Name(s): LISA A. BERKEYPILE

Property Address: 74011 HWY 283, Elwood NE 68937

Current Date: 07/13/20

Date Purchased: Built 2008

In connection with my/our relocation, I/we make the following disclosures to the best of my/our knowledge regarding my/our property with the knowledge that even though this is not a warranty, prospective buyers may rely on this information in deciding whether or on what terms to purchase the property. I/we further understand that an offer to purchase will not be made until this disclosure is completed.

1 HOUSE SYSTEMS

Are there any problems affecting:

- | | Y | N | | Y | N |
|-------------------------------------|--------------------------|-------------------------------------|-------------------------|--------------------------|-------------------------------------|
| (a) Electrical Wiring | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (f) Appliances | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Air conditioning/cooling system | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (g) Floors | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Plumbing | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (h) Water system (well) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) Heating | <input type="checkbox"/> | <input checked="" type="checkbox"/> | (i) Sprinkler system | <input type="checkbox"/> | <input type="checkbox"/> |
| (e) Pool/Hot tubs/Spa | <input type="checkbox"/> | <input type="checkbox"/> | (j) Chimneys/Fireplaces | <input type="checkbox"/> | <input type="checkbox"/> |

Further Explanation:

2 LAND/FOUNDATION

- | | Y | N |
|--|--------------------------|-------------------------------------|
| (a) Is the property located on filled or expansive soil? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Has any sliding, settling, earth movement, upheaval, or earth stability problems occurred on your property or in the immediate neighborhood? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Are there any defects or problems relating to the foundation/basement? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) Has a water or dampness condition ever existed in your basement/crawlspace? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (e) Is the property a mobile, manufactured, or modular home? If yes, please note details below. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (f) Is this property considered an Earth-berm home? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Further explanation:

3 ROOF

- | | Y | N |
|---|--------------------------|-------------------------------------|
| (a) Age of current roof? | <u>12</u> Years | |
| (b) Is it an overlay? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Has the roof ever leaked during your ownership? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) Has the roof been replaced or repaired during your ownership? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (e) Are there any problems with the roof? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Further explanation:

4 EXTERIOR SIDING

- | | Y | N |
|---|--------------------------|-------------------------------------|
| (a) Is any surface of the residence exterior clad with Synthetic Stucco, EIFS (Exterior Insulation Finish System), or dryvit? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Is Louisiana Pacific Siding (LP Siding) present on the exterior of your residence? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Further explanation:

5 SEWAGE

- | | Y | N |
|---|-------------------------------------|-------------------------------------|
| (a) Is the property connected to a public sewer system? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Is there a septic tank/cesspool system serving this property? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |



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If yes, when was it last serviced or pumped?

_____ Date

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- (c) Do you know of any problems relating to the septic tank/cesspool/sewer system? Y N
- (d) Does the Septic tank/cesspool system meet all required city and county requirements? Y N

Further explanation: _____

6 DRAINAGE/WATER

Y N

- (a) Is this property located in a flood plain zone? Y N
- (b) Is this property located near a pond? (Please explain below any ownership rights to the pond) Y N
- (c) Has the property ever had drainage or flooding problems? Y N
- (d) Have any properties in the immediate neighborhood ever had drainage or flooding problems? Y N

Further explanation: _____

7 BOUNDARIES

Y N

- (a) Have you ever had a survey of your property done? Y N
- (b) Do you have a current survey? (If yes, please provide a copy to your Capital Relocation Manager) Y N
- (c) Are the boundaries of your property marked in any way? Y N
- (d) Are you aware of any encroachments, easements & right of ways on the property line? Y N
- (e) Are you aware of any boundary disputes regarding the property? Y N
- (f) Do you share a driveway, road, airstrip, well or septic system with a neighbor? (Note details below and include a copy of the shared agreement) Y N

Further explanation: _____

8 ADDITIONS/REMODELS

Y N

- (a) Are you aware of any structural additions, changes, or repairs to the property made without obtaining all necessary permits and government approvals? Y N
- (b) Have you made any structural additions, changes, or repair to the property? Y N
- (c) Do you have the required building permits for these changes you did to the property? (If no, please explain below) Y N

Further explanation: _____

9 HOMEOWNERS ASSOCIATION

Y N

- (a) Is the property subject to rules and regulations of any homeowner's association? Y N
- (b) Are there any problems relating to any common area? Y N
- (c) Are there any conditions which may result in an increase in taxes or assessments? Y N
- (d) Are there any pending or threatened claims or law suits against the Homeowners Association? Y N

Further explanation: _____

10 NEIGHBORHOOD

Y N

- (a) Any unusual amount of noise from any source (i.e. airplanes, traffic, schools, or business) that Y N



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affects the property?

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- (b) Are there any other neighborhood conditions or problems affecting the property? (please explain)

Further explanation: _____

11 MISCELLANEOUS

- | | Y | N |
|--|-------------------------------------|-------------------------------------|
| (a) Does the property now contain or has it ever contained any mold, toxic substances, UFFI, asbestos or lead paint? If yes, where? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (b) Has the property been mitigated for mold or had water leaks resulting in mold? If yes, please explain below. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (c) Does the property now contain or has it ever contained any underground tanks? If so, where? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (d) Are there any violations of local, state or federal government laws or regulations relating to this property? | <input type="checkbox"/> | <input type="checkbox"/> |
| (e) Have any termite/pest control reports on the property been prepared in the last 5 years? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (f) Are there any encroachments, overlaps, boundary line disputes, unrecorded or recent liens (2nd, 3rd, equity mortgages or other services) or unrecorded easements relating to this property? If yes, explain below & please attach deed of trust. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (g) Are there existing or threatened legal actions affecting the property? Yes, explain below | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (h) Are there any past or present problems with driveways, walkways, patios, seawalls, fences, retaining walls, party walls on the property or adjacent properties? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (i) Is the property located on an earthquake fault? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (j) Are there any bonds or assessments affecting this property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (k) Does the house have central air conditioning? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (l) Is the residence equipped with an operable smoke detector? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (m) Is there a security system on the premises? (if yes, answer the following 3 questions) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1. Is the system <input type="checkbox"/> owned <input type="checkbox"/> leased | | |
| 2. Is monitoring being provided contractually? (If no, skip the third question) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are there special provisions in the contract for cancelling or transferring services? | <input type="checkbox"/> | <input type="checkbox"/> |
| (n) Have there been any significant repairs made to the property or to any of its systems or components within the last five years? (If yes, please describe using additional sheets if necessary) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1. Do you have the required building permits for these changes you did to the property? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If no, please explain below. | | |
| (o) Is the property located next to or in close proximity of a dump, junk yard or toxic disposal site? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (p) Has the property been tested for radon gas? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (q) Is the well &/or septic tank placement within the boundary lines of the property. (If no, please explain) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (r) Are all parties that have an interest in the subject property (vested, marital or homestead) U.S. Citizens? (if no, provide names: _____) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Further explanation: _____

12 REPORTS

Please attach copies of all existing reports and documents now in your possession relating to this property including:

- | | |
|----------------------------------|--|
| (a) Surveys | (j) Homeowner's Associations Documents |
| (b) Structural Inspection Report | 1. Conditions, Covenants & Restrictions (CC&R's) |
| (c) Building Permits | 2. Articles |
| (d) Septic | 3. Bylaws |
| (e) Soil Report | 4. Financial Statements of Homeowner's Association |
| (f) Termite/Pest Control | 5. Statement re: Assessments |

