

Revised October 2012

THIS FORM HAS BEEN APPROVED BY THE
KENTUCKY REAL ESTATE COMMISSION FOR
RESIDENTIAL REAL ESTATE TRANSACTIONS.

**(THIS IS A LEGALLY BINDING CONTRACT. IF YOU DO NOT FULLY
UNDERSTAND THE TERMS OF THIS CONTRACT, CONTACT AN ATTORNEY.)**
(Note that all changes to this contract must be initialed, dated, and timed to comply with state license law.)

**RESIDENTIAL REAL ESTATE
EXCLUSIVE RIGHT TO SELL AGENCY CONTRACT**

Duncan and Associates

Real Estate Company
01/05/2024

Date
Duncan and Associates

(1) The term "Broker" as used in this contract shall refer to _____ (firm name)
William T. Duncan
with the Principal Broker being _____

_____ (address).

The term "Seller" as used in this contract refers to all owners of said property, being: (names and addresses)
David Morgan 423 N Brady St. Morganfield KY 42437

(2) In consideration of Broker's agreement to list the below-described property for sale, to use his or her best
efforts to find a purchaser, and to perform the additional duties set forth in paragraph 6 below, the Seller hereby
grants to the Broker the exclusive right to sell the property located at: (full address) _____
423 N Brady St. Morganfield KY 42437

_____ 131,900
for the gross price of \$ _____ (or any lesser amount that the Seller agrees to accept) on the
_____ 131,900 obo
following terms and conditions: _____

(3) This contract shall begin at 01/05/2024 on 8:00 and it shall terminate at midnight
04/10/2024
on _____.

(4) The Seller warrants that he or she is the owner of the property and is authorized to execute this agreement. Seller further agrees to cooperate with Broker in every way possible to bring about a sale of said property and to refer to Broker all inquiries of other brokers, agents and other persons interested in said property. Seller further agrees that all negotiations or dealings shall be with and through the Broker, and the Broker may list this property with cooperating brokers. Seller further agrees that Broker shall have no responsibility with respect to the condition of the property, its management or care.

(5) Seller authorizes Broker to place a "For Sale" sign on the property, to remove all other signs, and to otherwise advertise said property for sale.

(6) The Broker agrees to make a careful inspection of the property, to secure and compile written information with respect thereto and to make an earnest and continued effort to sell said property at the terms hereinabove set forth. Broker further agrees to promote and advertise said property for sale in the manner that in the judgment of Broker will aid in securing prospects for the Seller's property. Broker further agrees to take prospective buyers through said property at convenient times and from time to time advise Seller as to sale conditions upon Seller's request.

(7) TERMINATION:

(a) Neither Broker nor Seller may terminate this contract prior to the termination date set forth above, unless both Broker and Seller agree to the termination in writing or pursuant to the provisions of 7(b).

(b) Unless otherwise agreed in writing, Seller cannot revoke this contract until its termination date without liability for Broker's expenses incurred in promoting the property. Unless otherwise agreed in writing, the premature termination of this contract by Seller shall not operate to eliminate a commission, which accrues to the Broker under Paragraphs 8 and 9 of this agreement.

(c) This contract will be automatically terminated upon the (1) death of the Seller, (2) condemnation or destruction of property, (3) involuntary sale, by foreclosure or otherwise, of property, (4) bankruptcy of either party, or (5) abandonment of the agency by the Broker (in which event Broker may be liable for damages).

(8) COMPENSATION: If said property is sold pursuant to a contract entered into during the term of this agreement by Broker, or as provided in paragraph 9 of this agreement, by Seller or by any other person, Seller agrees to pay Broker a commission of ⁶ _____ % of the sales price or a flat fee of \$ ^{NA} _____.
Broker will offer ³ _____% of the commission to a Broker representing the Buyer(s).

(9) Broker will provide owner with a list of names of all persons with whom Broker or any other person negotiated concerning the above-described property during the period of this listing no later than ⁷ _____ working days subsequent to the termination date of this agreement. If this property is sold to any person named in this list prior to the relisting of this property, without the services of another Broker, and within ^{NA} _____ days of the termination date of this contract, Seller agrees to pay Broker a commission of ^{NA} _____ %.

(10) TITLE: In the event of sale, Seller agrees to convey to buyer by deed of General Warranty, a marketable, fee simple title, such as any title company will insure, excepting easements and restrictions of record.

(11) Broker and Seller acknowledge this property is offered to all persons without respect to race, color, sex, religion, national origin, handicap/disabilities, or familial status or any other class as protected by law.

(12) Seller states that the information provided in Paragraph 14 below is true and correct to the best of Seller's knowledge. Seller understands that Broker and Broker's Sales Associates will rely on this information in

promoting said property and agrees to hold the Broker and agents harmless for any liability they may incur for utilizing this information in the authorized promotion of Seller's property.

(13) In the event the seller has commenced negotiations with a potential buyer on the effective date of this listing contract, the seller reserves the right to revise the effective date, not to exceed ^{NA} _____ days greater than the original effective date.

(14) ESCROW DEPOSITS: Broker is authorized to accept deposits on contracts obtained pursuant to this agreement and to deposit same in his or her escrow account; said deposit to be released by Broker at closing or when otherwise authorized under Kentucky Law [KRS 324.111(4) or (6)].

(15)

423 N Brady St. Morganfield 131,900
 Street Address List Price

 City and/or County Subdivision

 Type of Construction Rooms: 1st floor/2nd floor/3rd floor

 Approx. sq. ft. Approx. Land Size

 Total No. Bedrooms: 1st floor/2nd Floor Closets: 1st floor/2nd floor

 Storm Windows Present City Tax State and County Tax

 Laundry Fireplace Foundation Roof Sep. Dining Room

 Garage/Carport No. Baths 1st floor/2nd floor

 Family Room/Den-Library Basement area-Fin./Unfin.

 Approx. age Central A/C No. A/C units Eat-in Kitchen

Elec.

220

Gas

Heating: Fuel/Type Water Heater: Fuel/Cap. Water

Encumbr. Payable to Type Loan Mo. Payment: PI/PITI

Deed Book Page No. Sewer Vacant

Schools: Elem. Middle High Parochial

(16)(a) Broker shall cooperate with all licensed brokers and agents in securing prospective purchasers, to the extent that such cooperation does not violate Broker's fiduciary duties to Seller, and shall allow other agents to be present at any showings of the property. yes no

SELLER'S INITIALS

or

(b) State the limitations on showings and Broker's cooperation with other licensed brokers and agents: _____

Four horizontal lines for handwritten input.

(17) Additional Terms: _____

Four horizontal lines for handwritten input.

DocuSigned by: [Signature]

1/6/2024

Seller

DocuSigned by: [Signature]

Principal Broker

Date of Signing Time of Signing

Address

Telephone Number

Seller

Date of Signing Time of Signing

Address

Telephone Number

Seller

Date of Signing Time of Signing

Address

Telephone Number

Date of Signing Time of Signing

Address

Telephone Number

DocuSigned by:
Authorized Agent *M. Peake*
5CFC5648F850492...

Date of Signing Time of Signing

Address

Telephone Number

©2009 Kentucky Real Estate Commission

Made Fillable by eForms

This contract has been approved by the Kentucky Real Estate Commission only as to form. No representation is made as to the legal validity or adequacy of any provision of this contract for any specific transaction.

KENTUCKY REAL ESTATE COMMISSION

Public Protection Cabinet
 Mayo-Underwood Building
 500 Mero Street 2NE09
 Frankfort, Kentucky 40601
 (502) 564-7760

SELLER'S DISCLOSURE OF PROPERTY CONDITION

This form applies to **residential real estate sales and purchases**. This form is **not required** for:

1. Residential purchases of new construction homes if a warranty is provided;
2. Sales of real estate at auction; or
3. A court supervised foreclosure

As a Seller, you are asked to disclose what you know about the property you are selling. Your answers to the questions in this form must be based on the best of your knowledge of the property you are selling, however and whenever you gained that knowledge. Please take your time to answer these questions accurately and completely.

Property Address 423 N Brady
St.

City Morganfield
KY 42437

State

Zip

PURPOSE OF DISCLOSURE FORM: Completion of this form shall satisfy the requirements of KRS 324.360 that mandates the "seller's disclosure of conditions" relevant to the listed property. This disclosure is based on the Seller's knowledge of the property's condition and the improvements thereon, however that knowledge was gained. This disclosure form shall not be a warranty by the Seller or real estate agent and shall not be used as a substitute for an inspection or warranty that the purchaser may wish to obtain. This form is a statement of the conditions and other information about the property known by the Seller. Unless otherwise advised, the Seller does not possess any expertise in construction, architecture, engineering, or any other specific areas related to the construction or condition of the property or the improvements on it. Unless otherwise advised, the Seller has not conducted any inspection of generally inaccessible areas such as the foundation or roof. The Buyer is encouraged to obtain his or her own professional inspections of this property.

INSTRUCTIONS TO THE SELLER(S): (1) Answer every question truthfully. (2) Report all known conditions affecting the property, regardless of how you know about them or when you learned. (3) Attach additional pages, if necessary, with your signature and the date and time of signing. (4) Complete this form yourself or sign the authorization at the end of this form to authorize the real estate agent to complete this form on your behalf in accordance with KRS 324.360(9). (5) If an item does not apply to your property, mark "not applicable." (6) If you truthfully do not know the answer to a question, mark "unknown." (7) If you learn any fact prior to closing that changes one or more of your answers to this form after you have completed and submitted it, immediately notify your agent or any potential buyer of the change in writing.

SELLER'S DISCLOSURE: As Seller(s), I / we disclose the following information regarding the property. This information is true and accurate to the best of my / our knowledge as of the date signed. Seller(s) authorize(s) the real estate agent to provide a copy of this statement to any person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. The following information is not the representation of the real estate agent.

Answer all questions to the best of your knowledge. Attach additional sheets as necessary.

1. PRELIMINARY DISCLOSURES		N/A	YES	NO	UN- KNOWN
a.	Have you ever lived in the house?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	List the date (month / year) you purchased the house. 10/2016				
c.	Do you own the property as (an) individual(s) or as representative(s) of a company?				
	Explain:				
d.	To the best of your knowledge, has the house been used as a rental?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	To the best of your knowledge, has this house ever been vacant (not lived-in) for more than three (3) consecutive months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	To the best of your knowledge, has this house ever been used for anything other than a residence?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Explain:				

DS
DM

PROPERTY ADDRESS:

--

2. HOUSE SYSTEMS		N/A	YES	NO	UN-KNOWN
Whether or not they have been corrected, state whether there have been problems affecting:					
a. Plumbing	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Electrical system		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Appliances		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Ceiling and attic fans		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Security system		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Sump pump		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Chimneys, fireplaces, inserts		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Pool, hot tub, sauna		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Sprinkler system		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Heating system	age of system:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Cooling/air conditioning system	age of system:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Water heater	age of system:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please explain any deficiencies noted in this Section:

3. BUILDING STRUCTURE		N/A	YES	NO	UN-KNOWN
a. Whether or not they have been corrected, state whether there have been problems affecting:					
1) The foundation or slab		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) The structure or exterior veneer		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) The floors and walls		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) The doors and windows		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. 1) To the best of your knowledge, has the basement ever leaked?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) When was the last time the basement leaked?					
3) Have you ever had any repairs done to the basement?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) If you have had basement leaks repaired, when was the repair done?					
5) If the basement presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.)					
Explain:					
h. Have you experienced, or are you aware of, any water or drainage problems in the crawl space?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Are you aware of any damage to wood due to moisture or rot?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Are you aware of any present or past wood infestation (e.g. termites, borers, carpenter ants, fungi, etc.)?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Are you aware of any damage due to wood infestation?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1) Has the house or any other improvement been treated for wood infestation?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) If yes, by whom?					
3) Is there a warranty?					

Please explain any deficiencies noted in this Section:

4. ROOF		N/A	YES	NO	UN-KNOWN
a. How old is the roof covering? (write the age of the roof if known)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Has the roof leaked at any time since you have owned or lived at the property?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. To the best of your knowledge, has the roof leaked at any time before you owned or lived at the property?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. When was the last time the roof leaked?					
e. Have you ever had any repairs done to the roof?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PROPERTY ADDRESS:

f. Have you ever had the roof replaced? No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, when?				
g. If the roof presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.)				
Explain:				
h. Have you ever had roof repairs that involved placing shingles on the roof instead of replacing the entire roof covering? If so, when?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain any deficiencies noted in this Section:				

5. LAND / DRAINAGE	N/A	YES	NO	UN-KNOWN
a. Whether or not they have been corrected, state whether there have been problems affecting:				
1) Soil stability No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Drainage, flooding, or grading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Erosion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Outbuildings or unattached structures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the house located within a Special Flood Hazard Area (SFHA) mandating the purchase of flood insurance for federally backed mortgages?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, what is the flood zone?				
c. Is there a retention / detention basin, pond, lake, creek, spring, or water shed on or adjoining this property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain any deficiencies noted in this Section:				

6. BOUNDARIES	N/A	YES	NO	UN-KNOWN
a. Have you ever had a staked or pinned survey of the property performed? No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are you in possession of a copy of any survey of the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are the boundaries marked in any way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				
d. Do you know the boundaries?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				
e. Are there any encroachments or unrecorded easements relating to the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				

7. WATER	N/A	YES	NO	UN-KNOWN
a. Source of water supply:				
b. Are you aware of below normal water supply or water pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Has your water ever been tested? If so, attach the results or explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				

8. SEWER SYSTEM	N/A	YES	NO	UN-KNOWN
a. Property is serviced by:				
1. Category I: Public Municipal Treatment Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Category II: Private Treatment Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Category III: Subdivision Package Plant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Category IV: Single Home Aerobic Treatment System (HOME PACKAGE PLANT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Category V: Septic Tank with drain field, lagoon, wetland, or other onsite dispersal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Category VI: Septic Tank with dispersal to an offsite, multi-property cluster treatment system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Category VII: No Treatment/Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of Servicer:				
b. For properties with Category IV, V, or VI systems				
Date of last inspection (sewer):				
Date of last inspection (septic):				
Date last cleaned (septic):				
c. Are you aware of any problems with the sewer system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please explain any deficiencies noted in this Section:				

DM

1/6/2024

PROPERTY ADDRESS:

9. CONSTRUCTION / REMODELING				
	N/A	YES	NO	UN-KNOWN
a. Have there been any additions, structural modifications, or other alterations made?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. If so, were all necessary permits and government approvals obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				
10. HOMEOWNER'S ASSOCIATION (HOA)				
	N/A	YES	NO	UN-KNOWN
a. 1) Is the property subject to rules or regulations of a HOA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) If yes, what is the yearly assessment?				
3) HOA Name:				
HOA Primary Contact Name:				
HOA Primary Contact Phone No.:				
b. Is the property a condominium?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, you must also complete KREC Form 404, the Condominium Seller's Certificate				
c. Are you aware of any condition that may result in an increase in taxes or assessments?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are any features of the property shared in common with adjoining landowners, such as walls, fences, driveways, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Are there any pet or rental restrictions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				
11. HAZARDOUS CONDITIONS				
	N/A	YES	NO	UN-KNOWN
a. Are you aware of any underground storage tanks, old septic tanks, field lines, cisterns, or abandoned wells on the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are you aware of any other environmental hazards? (e.g., carbon monoxide, hazardous waste, water contamination, asbestos, the use of urea formaldehyde, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LEAD BASED PAINT DISCLOSURE REQUIREMENT				
Every purchaser of any interest in residential real 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, which may cause certain health risks.				
c. Was this house built before 1978?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are you aware of the existence of lead-based paint in or on this house?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RADON DISCLOSURE REQUIREMENT				
Radon is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities, may present health risks, including lung cancer. The Kentucky Department for Public Health recommends radon testing. For more information, visit chfs.ky.gov and search "radon."				
e. 1) Are you aware of any testing for radon gas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) If yes, what were the results?				
f. 1) Is there a radon mitigation system installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) If yes, is it functioning properly?				
METHAMPHETAMINE CONTAMINATION DISCLOSURE REQUIREMENT				
A property owner who chooses NOT to decontaminate a property used in the production of methamphetamine MUST make written disclosure of methamphetamine contamination pursuant to KRS 224.1-410(10) and 902 KAR 47:200. Failure to properly disclose methamphetamine contamination is a Class D Felony under KRS 224.99-010.				
g. 1) Is the property currently contaminated by the production of methamphetamine?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) If no, has the property been professionally decontaminated from methamphetamine contamination?				
Explain:				
12. MISCELLANEOUS				
	N/A	YES	NO	UN-KNOWN
a. Are you aware of any existing or threatened legal action affecting this property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are there any assessments other than property assessments that apply to this property (e.g. sewer assessments)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are you aware of any violations of local, state, or federal laws, codes, or ordinances relating to this property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are there any warranties to be passed on?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PROPERTY ADDRESS:

Explain:				
e. Has this house ever been damaged by fire or other disaster?	NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Are you aware of the existence of mold or other fungi on the property?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Has this house ever had pets living in it?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				
h. Is this house in a historic district or listed on any registry of historic places?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. ADDITIONAL INFORMATION N/A YES NO UN-KNOWN

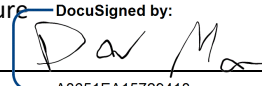
Do you know anything else about the property that that should be disclosed to the Buyer?

If yes, please provide details in the space provided, below. Attach additional sheets, as necessary.

No

14. SELLER(S) CERTIFICATION (CHOOSE ONE)

As Seller(s) I / we hereby certify that the information disclosed above is complete and accurate to the best of my / our knowledge and belief. I / we agree to immediately notify Buyer in writing of any changes that become known to me / us prior to closing.

Seller Signature	DocuSigned by: 	1/6/2024	Seller Signature	Date
X			X	

As Seller(s) I / we hereby certify that my / our Real Estate Agent, _____ (print name) has completed this form with information provided by me / us at my / our direction and request. I / we further agree to hold the above-named agent harmless for any representations that appear on this form, in accordance with KRS 324.360(9).

Seller Signature	Date	Seller Signature	Date
X		X	

As Seller(s) I / we refuse to complete this form and acknowledge that the Real Estate Agent will so inform the Buyer.

Seller Signature	Date	Seller Signature	Date
X		X	

The Seller(s) refuse(s) to complete this form or to acknowledge such refusal.

Broker / Agent Print Name	Broker / Agent Signature	Date
	X	

The Buyer(s) hereby certifies they have received a copy of this Seller's Disclosure of Property form

Buyer Signature	Date	Buyer Signature	Date
X		X	