

Listing Agency ListwithFreedom.com

Garden City Board of REALTORS®

MLS# _____

SELLER'S PROPERTY DISCLOSURE STATEMENT

(To Be Completed by Seller)

Property Address: 414 North Prospect Avenue, Liberal, KS 67901

Date: 5/10/2024 | 4:24 PM PDT

SELLER IS IS NOT currently occupying the property or HAS NEVER occupied the property.

Approximate age of property 106

Date Purchased 12/1/24

THIS STATEMENT IS A DISCLOSURE OF THE CONDITION OF THE ABOVE DESCRIBED PROPERTY KNOWN BY THE SELLER ON THE DATE ON WHICH IT IS SIGNED. IT IS NOT A WARRANTY OF ANY KIND BY THE SELLER(S) OR ANY REAL ESTATE LICENSEE IN THIS TRANSACTION, AND SHOULD NOT BE ACCEPTED AS A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE BUYER MAY WISH TO OBTAIN. THE INFORMATION PROVIDED IN THIS STATEMENT IS THE REPRESENTATION OF THE SELLER AND NOT THE REPRESENTATION OF ANY REAL ESTATE LICENSEE.

THE INFORMATION CONTAINED HEREIN IS INTENDED TO BE PART OF ANY CONTRACT BETWEEN THE SELLER AND THE PURCHASER.

SELLER'S INFORMATION

The Seller discloses the following information with the knowledge that even though this is not a warranty, prospective Buyers may rely on this information in deciding whether, and on what terms, to purchase the subject real property. Seller hereby authorizes any real estate licensee in this transaction to provide a copy of this statement to any person or entity in connection with any actual or possible sale of the real property.

PART I- Indicate the condition of the following items by marking the appropriate box. Check only one box.

| NOT INCLUDED | | | INCLUDED | | | NOT INCLUDED | | | INCLUDED | | | | |
|--------------|--|--|----------|---------|------|--------------|--|---------|----------|---------|--|--|--|
| or | | | or | | | or | | | or | | | | |
| NONE | | | WORKING | NOT | NONE | | | WORKING | NOT | WORKING | | | |
| | | | | WORKING | | | | | | WORKING | | | |

Section A - Appliances:

- | | | | | | | |
|--|-------------------------------------|-------------------------------------|--|-------------------------------------|-------------------------------------|--------------------------|
| 1. Built-in vacuum system & equipment. <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Microwave oven | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Clothes dryer | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. Oven | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Clothes washer | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 11. Range | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Dishwasher | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 12. Refrigerator | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Disposal | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 13. TV antenna/satellite dish. <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Freezer | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 14. Trash compactor | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Gas grill | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 15. Other (specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Range ventilation system | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | | | |

Section B - Electrical Systems:

- | | | | | | | |
|--|-------------------------------------|-------------------------------------|--|-------------------------------------|-------------------------------------|--------------------------|
| 1. Electrical service panel <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 7. <input type="checkbox"/> Built-in speakers <input type="checkbox"/> Sound system wiring | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (Capacity 200 AMPS) | | | <input type="checkbox"/> Intercom | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Fuse <input type="checkbox"/> Circuit Breaker <input checked="" type="checkbox"/> Main Disconnect | | | 8. Smoke/fire alarm # 2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Ceiling fan(s) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9. Bathroom exhaust fan(s) # | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Doorbell | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. 220 volt service | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Garage Door opener/remotes # | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 11. Security system | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Telephone wiring/jacks | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Owned <input type="checkbox"/> Leased <input type="checkbox"/> Central station - monitoring | | | |
| 6. Cable TV wiring/jacks | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 12. Other (specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Section C - Heating and Cooling System:

- | | | | | | | |
|---|-------------------------------------|-------------------------------------|---|-------------------------------------|--------------------------|--------------------------|
| 1. Air purifier | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. Solar house heating | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Attic fan | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Propane tank <input type="checkbox"/> Leased <input type="checkbox"/> Own | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Whole house fan | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. Humidifier | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Central A/C | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. Fireplace/fireplace insert | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Room air conditioner(s) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> Blower <input type="checkbox"/> Factory built <input type="checkbox"/> Masonry | | | |
| 6. Heating system | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12. Gas starter (fireplace) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Gas <input type="checkbox"/> Forced air gas <input checked="" type="checkbox"/> Elec | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 13. Gas logs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Boiler (<input type="checkbox"/> Hot water <input type="checkbox"/> Steam) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 14. Woodburning stove | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Heat pump | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 15. Other (specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Section D- Water Systems:

- | | | | | | | |
|--|-------------------------------------|-------------------------------------|--|-------------------------------------|-------------------------------------|--------------------------|
| 1. Hot tub <input type="checkbox"/> Jetted tub | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 6. Waterheater <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Plumbing | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Water purifier | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sump pump | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. Water softener <input type="checkbox"/> Rent <input type="checkbox"/> Own | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Discharges to | | | 9. Well system | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Swimming pool | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10. Sewer <input type="checkbox"/> Lift <input type="checkbox"/> Direct | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Underground sprinkler | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 11. Septic | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Back Flow Preventer | <input type="checkbox"/> | <input type="checkbox"/> | 12. Leach field | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Auto timer | <input type="checkbox"/> | <input type="checkbox"/> | 13. Other (specify) _____ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Buyer's Initials

Date _____
 Date _____

Seller's Initials

Date 5/10/2024 | 4:24 PM PDT
 Date _____

Approved by Counsel for the GCBOR

PART II - Answer question TO THE BEST OF YOUR (SELLER'S) KNOWLEDGE.

MLS#

YES NO

YES NO

Section A - Structural Conditions:

- 1. Age of shingles (if known) 2 years
2. How many layers of roofing material, are currently on the roof, if known? 1
3. Does the roof leak?
4. Is there present damage to the roof?
5. Has there been any damage to the real property, or any of the improvements due to hail, wind, fire or water?
6. Have you had any insurance claims?
7. Has there ever been leakage/seepage in the basement or crawl space?
8. Are there any structural problems with the property?
9. Is there any damage to the chimney?
10. Is there any exposed wiring presently in any structures on the property?
11. Are there any windows or doors which are broken or have broken thermopane seals?
12. Is any exterior wall covering of the structure covered with synthetic stucco?
13. Are you aware of any moving/settling/problems with the following: Foundations, Floors, Walls, Sidewalks, Patios/Decks, Driveways, Retaining walls, Fences/Gates

Section B - Hazardous Conditions: Are you (Seller), TO THE BEST OF YOUR KNOWLEDGE, aware of ANY of the following substances, materials, or products on or near the real property which may be an environmental hazard?

- 1. Asbestos
2. Contaminated soil or water (including drinking water)
3. Expansive soil
4. Landfill or buried materials
5. Lead-based paint
6. Radon gas in house or well
7. Toxic materials
8. Underground fuel or chemical storage tanks
9. EMF's (Electric Magnetic Fields)
10. Gas or oil wells in area
11. Other (specify)

Section C - Title Disclosures: Are you (Seller), TO THE BEST OF YOUR KNOWLEDGE, aware of ANY of the following which could affect the real property?

- 1. Features, such as walls, fences, driveways, which are shared in common with adjoining landowners who use or have responsibility for maintenance of the feature
2. Own the fencing on this property?
3. Boundary survey performed Date
4. Easements, other than normal utility easements
5. Encroachments
6. Zoning violations, non-conforming uses, or violations of setback requirements
7. Lot-line disputes or other unusual claims against the property
8. Pending or levied assessments on the real estate including but not limited to those for sidewalks, streets, sewers, water and gas lines
9. Any pending foreclosure or short sale affecting the property?
10. Is the property in a historic district that requires any alterations or improvements to the property to be approved by a board or commission?
11. Condominium, regime or other deed restrictions or obligations, or any Homeowner's Association which has authority over the real property
12. "Common area" (facilities such as pools, tennis courts, walkways, or other areas co-owned in individual interest with others)
13. Lawsuits against Seller threatening or affecting this real property
14. Notices from any governmental or quasi-governmental agency affecting this real property
15. Planned road or street expansions, improvements or widening adjacent to the property
16. Other (specify)

Section D. - Other Disclosures: For property and improvements thereon:

- 1. Is the property connected to a public water system? Rural City
2. Is the property connected to a public sewer system? County City
3. Is the property connected to a private/community water system?
4. Is the property connected to a private/community sewer system?
5. Is the property connected to a septic system?
6. Are there any trees or shrubs diseased or dead? Scheduled to be removed?
7. Are there any flooding, drainage, or grading problems?
8. Is the property in a flood plain?
9. Trash Service Public Private
10. Was your house constructed onsite
11. Are you aware of any structural additions changes or repairs made to the property without obtaining all necessary permits?
12. Have you ever owned a pet in this property? Has there been any damage due to urine, odor, stain or other?

Buyer's Initials

Buyer's Initials box with Date fields

Seller's Initials

Seller's Initials box with Date 5/10/2024 and Time 4:24 PM

PART II - (Continued)

MLS#

YES NO

YES NO

Section E - Insert the most recent year in which the following occurred

- 1. Serviced air conditioner _____
- 2. Cleaned fireplace, including chimney _____
- 3. Serviced furnace _____
- 4. Serviced septic system _____
- 5. Cleaned woodburning stove, including Chimney _____

- 6. Tested well water _____
- 7. Serviced well water _____
- 8. Do you have a home warranty?
- Is it transferable?
- Company name(s) _____

Section F - Infestations:

- 1. Do you have any knowledge of any damage to the property caused by termites, wood infestation, or dry rot?
- Is property currently under warranty?
- If so, name company below: _____

- 2. Have you had any termite/pest control treatments for the property?
- If so, name the company & year treated. _____
- 3. Has the ground been pre-treated for termites?

PART III - Miscellaneous Matters:

- 1. Are you aware of any other facts, conditions or circumstances, on or off-site, which can affect the value, beneficial use, or desirability of property?
- If yes, explain: _____

PART IV - Additional comments and/or explanations. (Use additional pages, if necessary.) Reference comments on items responded to earlier by Part 1 or 2, Section letter and number.

If separate pages used, initial here

The information contained in this Disclosure has been furnished by the Seller, who certifies to the truth thereof to the best of Seller's belief and knowledge, as of the date signed by the Seller. (Any substantive changes will be disclosed by the Seller to the Purchaser prior to closing).

Seller Henry Niebe Date 5/10/2024 | 4:24 PM PDT Seller _____ Date _____

21B0591D574D48D... _____

CAREFULLY READ THE TERMS HEREOF BEFORE SIGNING. WHEN SIGNED BY ALL PARTIES, THIS DOCUMENT BECOMES PART OF A LEGALLY BINDING CONTRACT. IF NOT UNDERSTOOD, CONSULT AN ATTORNEY BEFORE SIGNING.

BUYER'S ACKNOWLEDGEMENT AND AGREEMENT

- 1. I acknowledge that I have read and received a signed copy of the Seller's Property Disclosure Statement.
- 2. I have carefully inspected the property. Subject to any inspections allowed under my contract with Seller, I agree to purchase the property in its present condition only, without warranties or guarantees of any kind by Seller or any real estate licensee concerning the condition or value of the property.
- 3. I agree to verify any of the above information that is important to me by an independent investigation of my own. I have been advised to have the property examined by professional inspectors.
- 4. I acknowledge that neither Seller nor any real estate licensee involved in this transaction is an expert at detecting or repairing physical defects in the property. I state that no important representations concerning the condition of the property are being relied upon by me except as disclosed above or as fully set forth as follows:

Buyer _____ Date _____ Buyer _____ Date _____

This form was updated on the following date:

Seller _____ Date _____ Seller _____ Date _____

Buyer _____ Date _____ Buyer _____ Date _____