



SELLER'S PROPERTY DISCLOSURE

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NORTHEAST FLORIDA ASSOCIATION OF REALTORS®, INC.



NOTICE TO SELLER

In Florida the seller of residential property is obligated to disclose to a buyer all facts known to the seller that materially and adversely affect the value of the Property being sold which are not readily observable by a buyer. This Disclosure is designed to assist a seller in complying with the disclosure requirements under Florida law, and to assist a buyer in evaluating the Property described below ("the Property"). All parties, including the listing real estate Brokers and cooperating Brokers, may wish to refer to this information when they evaluate, market or present the Property to prospective buyers.

NOTICE TO BUYER

This Disclosure is not a warranty by SELLER or a representation of any kind by any REALTOR to this transaction and is not considered a substitute for inspections or warranties a buyer may wish to obtain. This Disclosure is based solely only upon SELLER's knowledge of the Property's condition as of the date signed by SELLER.

SELLER John Honse

Street Address 4529 Pine Ridge Parkway

City Middleburg State FL Zip 32068

Year Built: 2022 Date SELLER purchased Property: _____

Is each individual named above a U.S. Citizen or resident alien? Yes No

Do you currently occupy the Property? Yes No

If not, when did you vacate the Property? _____

Is the Property tenant occupied? Yes No

If yes, is there a written lease? Yes No

Date lease began _____ Deposit amount \$ _____ Date lease ends _____

Monthly payment due under lease \$ _____ Date payable _____

1. **PROPERTY INFORMATION:** The Property has the items checked below, which are installed and, to SELLER's actual knowledge, are in working condition unless otherwise indicated:

- | | | |
|---|--------------|--|
| <input type="checkbox"/> Dishwasher | Brand: _____ | <input type="checkbox"/> Garage Door Opener(s) and Number of Control(s): _____ |
| <input type="checkbox"/> Disposal | Brand: _____ | <input type="checkbox"/> Fireplace <input type="checkbox"/> Gas Logs <input type="checkbox"/> Wood burning <input type="checkbox"/> Electric |
| <input type="checkbox"/> Dryer | Brand: _____ | <input type="checkbox"/> Smoke Detectors |
| <input type="checkbox"/> Microwave Oven | Brand: _____ | <input type="checkbox"/> Window/Wall A/C(s) - Number of units: _____ |
| <input type="checkbox"/> Cooktop | Brand: _____ | <input type="checkbox"/> Built-In Generator |
| <input type="checkbox"/> Range/Oven | Brand: _____ | <input type="checkbox"/> Wine Cooler <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing |
| <input type="checkbox"/> Refrigerator(s) | Brand: _____ | <input type="checkbox"/> In-ground Pool |
| <input type="checkbox"/> Trash Compactor | Brand: _____ | <input type="checkbox"/> Above Ground Pool |
| <input type="checkbox"/> Washer | Brand: _____ | <input type="checkbox"/> Pool Heater |
| <input type="checkbox"/> Ceiling Fans - Number of fans: _____ | | <input type="checkbox"/> Pool Fence/Barrier |
| <input type="checkbox"/> Light Fixtures | | <input type="checkbox"/> Pool Sweep |
| <input type="checkbox"/> Bathroom Mirrors | | <input type="checkbox"/> Spa or Hot Tub with Heater |
| <input type="checkbox"/> Drapery Hardware | | <input type="checkbox"/> Sauna |
| <input type="checkbox"/> Window Treatments/Coverings | | <input type="checkbox"/> Solar Equipment |
| <input type="checkbox"/> Security Gate and other Access Devices | | <input type="checkbox"/> Individual Mailbox |
| <input type="checkbox"/> Storage Shed | | <input type="checkbox"/> Cluster Mailbox and Key-Box Number _____ |
| <input type="checkbox"/> Audio Visual System Wiring | | <input type="checkbox"/> Smart Home and Security Devices (specify): _____ |
| <input type="checkbox"/> Mounted/Installed Speakers | | _____ |
| <input type="checkbox"/> Television Wall Mounts and Mounting Hardware | | _____ |
| <input type="checkbox"/> Satellite Dish <input type="checkbox"/> Owned <input type="checkbox"/> Leased | | _____ |
| <input type="checkbox"/> Water Softener/Treatment System <input type="checkbox"/> Owned <input type="checkbox"/> Leased | | _____ |
| <input type="checkbox"/> Storm Shutters and Panels | | |
| <input type="checkbox"/> Built-In Grill <input type="checkbox"/> Gas Supply: <input type="checkbox"/> Utility <input type="checkbox"/> Bottled/Tank | | |
| <input type="checkbox"/> Irrigation System <input type="checkbox"/> Full <input type="checkbox"/> Partial | | |
| <input type="checkbox"/> Water Heater: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Solar Brand: _____ | | |

2. CLAIMS AND ASSESSMENTS:

- a. Are you aware of any existing, pending or proposed legal or administrative action affecting you or the Property? Yes No
- b. Are you aware of any existing or proposed municipal or county special assessments or Property Assessed Clean Energy financing ("PACE") affecting the Property? Yes No
- c. Have any local, state or federal authorities notified you that repairs, alterations or corrections to the Property are required? Yes No
- d. Are you aware of any existing, pending or proposed legal action or administrative action affecting homeowners'/condominium association common areas (such as clubhouse, pools, tennis courts, walkways or other areas)? Yes No

If yes to any of these items, please explain:

3. DEED/HOMEOWNERS'/CONDOMINIUM ASSOCIATION:

- a. Are there any deed, homeowners' or condominium restrictions? Yes No
- b. Are there any mandatory homeowners' or condominium associations? Yes No

If yes, how many? _____

If yes, please see Homeowners' Association/Community Disclosure Addendum or Condominium Rider

Fees are payable to: _____

Payee's address: _____

Payee's phone number: _____

- Homeowners' Association fees and assessments are payable in the amount of \$ _____ per _____
- Master Association fees and assessments are payable in the amount of \$ _____ per _____
- Condominium Association maintenance fees are payable in the amount of \$ _____ per _____
- Condominium Association special assessment fees are payable in the amount of \$ _____ per _____
- _____ fees or assessments are payable in the amount of \$ _____ per _____
- _____ fees or assessments are payable in the amount of \$ _____ per _____
- _____ Association transfer/access fees payable by BUYER \$ _____
- _____ Association Capital Contribution fee payable by BUYER \$ _____

- c. Are any of your Association fees delinquent? Yes No
- d. Are you aware of any special or other assessment that has been levied by the Association, or that has been an item on the agenda, or reported in the minutes of the Association within six months prior to the date of this Disclosure? Yes No
- e. Are you aware of any proposed changes to any of the restrictions? Yes No
- f. Are there any resale restrictions? Yes No
- g. Are there any restrictions to leasing the Property? Yes No
- h. Are you aware of any violations of the restrictive covenants affecting the Property including failure to obtain Association approval for improvements or changes to the Property? Yes No

If yes to c, d, e, f, g, or h please explain:

- i. Is the Property part of a Community Development District (CDD)? Yes No

If yes, please complete Community Development District Disclosure.

4. ENVIRONMENT:

- a. Was the Property built before 1978? Yes No

If yes, complete the Lead-Based Paint Disclosure.

- b. Are there or have there been any substances, materials or products which may be an environmental hazard such as, but not limited to, asbestos, urea formaldehyde, methamphetamine, radon gas, mold, lead-based paint, defective drywall, defective flooring, fuel oil, propane or chemical storage tanks (active or abandoned), or contaminated soil or water on the Property? Yes No Unknown
- c. Has there been any clean-up, repair or remediation of the Property due to any of the substances, materials or products listed in subsection (b) above? Yes No Unknown
- d. Are there any wetlands, conservation easements/buffers, archeological sites or other environmentally sensitive areas located on the Property, active or abandoned? Yes No Unknown

If yes to any of these items, please explain:

5. ROADS/LAND USE:

- a. Are access roads Public Private? If private, is there a recorded road maintenance agreement? Yes No Unknown
- b. Is the Property zoned for its current use? Yes No Unknown
- c. Are there any restrictions governing reconstruction of the Property following casualty loss or damage (e.g. for oceanfront or historic district properties)? if yes, complete the CCCL Disclosure Addendum for Oceanfront Property.
Yes No Unknown
- d. If the property is in Jacksonville, Florida, is it in an Airport Noise Zone as defined in ordinance code section 656.1010? For information you may contact the Jacksonville Planning Department Yes No Unknown
- e. Does anyone other than SELLER have any mineral rights in the Property? Yes No

If yes to any of these items, please explain:

6. ADDITIONS/REMODELING/INSURANCE CLAIMS:

- a. Has there been any structural damage or damage to personal property which may have resulted from casualties including, but not limited to, fire, wind, water, flood, hail or sinkholes? Yes No Unknown
- b. If yes, are you aware if any insurance claims were filed? Yes No
If yes, please indicate when _____
If yes, has the claim been completely settled with the insurance company? Yes No
If yes, was the full amount of the claim proceeds used to repair? Yes No
- c. Has insurance policy been denied or canceled by any insurer? Yes No
- d. Have you made any additions, structural changes, or other alterations to the Property? Yes No
If yes, did you obtain all necessary permits? Yes No
Was/Were the permit(s) closed out (finalized)? Yes No Unknown
- e. Was any of the work in violation of any building codes? Yes No
- f. Were there any additions, structural changes or other alterations made to the Property by any previous owner? Yes No Unknown
- g. Please provide the name of any contractor or individual who constructed any addition or made any structural change to the Property. _____
- h. Are you aware of any active, open or expired permits on the Property which have not been closed by a final inspection? Yes No

If yes to any of these items, please explain:

7. ROOF-RELATED ITEMS:

- a. What is the approximate age of the roof? _____ Unknown
- b. Has the roof or roofing system leaked during your ownership of the Property? Yes No
If yes, what was done to correct the leak(s)? _____
- c. Has the roof or roofing system been replaced or repaired or reroofed over existing shingles during your ownership of the Property? Yes No
If yes to any of these items, please explain and provide the date and name of all contractors _____
- d. Is there a transferable workmanship and or roofing warranty? Yes No
If yes, to either, please provide a copy of the warranty. _____

8. POOL/ AND/OR SPA/ HOT TUB:

- a. Does the Property have any of the following?
Pool/Spa Heater Yes No Type: Gas Electric Solar
Pool Sweep Yes No
Spa/Hot Tub Yes No Type: Gas Electric Solar
What is the approximate age of the Pool _____ Spa _____ Hot Tub _____ ?
- b. Has any pool and/or spa/hot tub been filled in? Yes No
- c. Have repairs/replacements ever been made to any item mentioned above? Yes No Unknown
- d. What type of pool and/or spa/hot tub filtration system do you have (salt or chlorine)? _____
- e. The pool and/or spa/hot tub has the following safety features (as defined by Section 515, Florida Statutes):
 Enclosure that meets the pool barrier requirements Approved safety pool cover
 Required door and window exit alarms Required door locks

If yes to any of these items, please explain _____

9. HEATING AND AIR CONDITIONING:

Please indicate existing equipment:

- a. Air Conditioning: Central Electric Brand Name: _____ Age _____
- b. Heating: Central Electric Gas Fuel Oil Brand Name: _____ Age _____
- c. If heat pump, type: _____
- d. Air condenser age _____ Air handler age _____
- e. Window/Wall Unit (s) _____ Number and location of units included in sale: _____
- f. Are you aware of any malfunction, condensation problem or defect regarding these items or ductwork since you have owned the Property? Yes No
If yes, explain: _____
- g. Do you have any fuel storage tanks? Yes No
If yes, Underground Above ground Both

10. WATER INTRUSION:

- a. Are you aware of any past or present water intrusion, accumulation of water or dampness affecting the interior or exterior of any part of the improvements or the land, including any crawl spaces? Yes No
- b. Are you aware of any attempts to control any water or dampness problems, including in any crawl spaces? Yes No
If yes, to either of these, please explain _____
- c. Are you aware of any insurance claims filed specifically for water intrusion? Yes No
If yes, please indicate when _____
If yes, has the claim been completely settled with the insurance company? Yes No
If yes, was the full amount of the claim proceeds used to repair the water intrusion? Yes No

11. SINKHOLES, SETTLING AND SOIL MOVEMENT:

- a. Are you aware of any past or present settling, soil movement or sinkhole(s) affecting the Property? Yes No
If yes, please explain: _____
- b. Are you aware of any insurance claims filed specifically for a sinkhole with an insurance company? Yes No
If yes, has the claim been completely settled with the homeowner's insurance company? Yes No
If yes, was the full amount of the claim proceeds used to repair the sinkhole damage? Yes No

12. WINDOWS/DOORS/LOCKS:

- a. Are the windows insulated glass? Yes No Unknown
- b. Are any windows low "e" filtered windows? Yes No Unknown
- c. Are there any fogged windows? Yes No
- d. Are any windows broken or cracked? Yes No Unknown
- e. Do all operable windows intended to be operable open, stay open, close and lock properly? Yes No Unknown
- f. Are any screens missing or damaged? Yes No Unknown
- g. Do all doors operate properly and lock properly? Yes No Unknown

13. PLUMBING (WATER ONLY):

- a. Have you updated any portion of the plumbing system? Yes No
If yes, please explain: _____
- b. Are you aware of any problems with the plumbing system/fixtures? Yes No
- c. Are you aware of any polybutylene pipes on the Property? Yes No
- d. Are you aware of any leaks, back-ups or other water problems? Yes No
- e. What is your drinking water supply source? Public Private Well on Property Shared well
- f. If your water is from a well, have there ever been repairs/replacements to the well or pump? Yes No Unknown
- g. Has the well water ever been tested? Yes No Unknown
- h. Do you have a separate water supply source for irrigation? Yes No
If yes, Irrigation Meter Well
- i. Number of water heaters? _____ Electric Gas (natural or propane) Solar
Is any water heater tankless? Yes No
Age of water heater(s) if known: _____
If yes to any of these items, please explain:

14. SEWER/SEPTIC (including drain field):

- a. What type of sewage system do you have? Public Private Septic Tank(s)
If septic, how many? _____ Locations: _____
When was septic tank last pumped? _____ Age of septic tank if known: _____
Age of drain field if known: _____
- b. Have you updated any portion of the sewer/septic or drain field system? Yes No
If yes, please explain: _____
- c. Are you aware of any problems with the sewer/septic or drain field system? Yes No
- d. Do any buildings/improvements cover any part of a drain field or septic tank? Yes No
- e. Is there an abandoned septic tank and/or drain field on the Property? Yes No
If so, where is it located? _____
If yes to any of these items, please explain: _____

15. ELECTRICAL/ENERGY SYSTEM:

- a. Have you updated any portion of the electrical system? Yes No
If yes, please explain: _____
- b. Are you aware of any damaged or malfunctioning switches, receptacles, wiring or any problem with the electrical system/fixtures? Yes No
- c. Does the Property have any aluminum, knob-and-tube or cloth wiring? Yes No Unknown
- d. Is any part of the Property powered by Solar? Yes No
If yes to any of these items, please explain: _____

6. EXCLUSIONS/LEASED SYSTEMS:

- a. Are there any items that are affixed to the Property that are excluded from the sale? Yes No
If yes, please itemize: _____
- b. Is there any leased equipment included in the sale? Yes No
If yes, please itemize: _____

17. WOOD-DESTROYING ORGANISMS:

- a. Are you aware of any past or present infestation or damage to the Property caused by any wood-destroying organisms, including fungi? Yes No
If yes, please explain: _____
- b. Is the Property currently under service agreement or bond for wood-destroying organisms with a licensed pest control company? Yes No
If yes, with what company and renewal date? _____
Is the service agreement or bond transferable? Yes No
If yes, please attach a copy of the service agreement or bond.
- c. Do you know of any wood-destroying organism reports on the Property issued in the past five years? Yes No
If yes, please explain and attached a copy if available: _____

18. FLOOD ZONE/DRAINAGE/BOUNDARIES:

- a. Is any portion of the Property in a special flood hazard area for which a lender may require flood insurance? Yes No
If yes, please attach a copy of the flood elevation certificate if available and all current flood insurance policies.
- b. Are you aware of any past or present drainage/flood problems affecting the Property? Yes No
- c. Are you aware of any encroachments or boundary line disputes affecting the Property? Yes No
- d. Are you aware of any shared access/driveway, dock, well or other joint use agreements? Yes No
If yes, oral written. If written, please attach a copy.
- e. Are you aware of any easements affecting the Property other than utility easements? Yes No
If yes, please explain: _____
- f. Do you have a survey map showing all improvements of the Property?
Yes No
If yes, please attach a copy.
If yes to any of these items, please explain: _____

19. OTHER MATTERS:

- a. Does anyone, including any owner's association, have a right of first refusal or an option to buy the Property? Yes
- b. Are you aware of any existing or threatened legal action affecting you or the Property? Yes No
- c. Does the Property have homestead tax exemption for the current year? Yes No
- d. Water/Sewer Provider: _____
Garbage Pick-up Provider: _____ Gas/Fuel oil Provider: _____
Electricity Provider: _____
- e. **Is there anything else that may materially adversely affect the value or desirability of the Property?** Yes No

If yes to any of these items, please explain: _____

SELLER represents that the information set forth in this Property Disclosure is accurate and complete to the best of SELLER's knowledge. SELLER does not intend this Disclosure to be a warranty or guaranty of any kind. SELLER hereby authorizes the listing Broker to provide a copy of this Disclosure to prospective buyers of the Property and to real estate brokers and licensees. **SELLER shall notify the listing Broker in writing immediately if any information set forth in this Disclosure becomes inaccurate or incorrect.**

SELLER DATE

SELLER DATE

SELLER DATE

SELLER DATE

RECEIPT AND ACKNOWLEDGMENT BY BUYER

BUYER hereby acknowledges receipt of a copy of this Property Disclosure. **BUYER is strongly advised to obtain Property inspection(s) as provided for in the Purchase and Sale Agreement.** BUYER should select professionals with appropriate qualifications to conduct inspections. BUYER acknowledges that this Property Disclosure is not intended as a warranty or guaranty of any kind by SELLER.

BUYER hereby acknowledges that SELLER's representations are made to BUYER based on SELLER's knowledge and that it is BUYER's responsibility to have the Property inspected. The statements in this Disclosure are those of SELLER only. The Brokers and their licensees do not warrant or guarantee the statements contained in this Property Disclosure or the condition of the Property and are not responsible for the condition of the Property. BUYER understands that the Property is being sold in its present "as is" condition unless otherwise agreed in the Purchase and Sale Agreement.

BUYER SIGNATURE DATE

BUYER SIGNATURE DATE

BUYER SIGNATURE DATE

BUYER SIGNATURE DATE