



**SELLER'S DISCLOSURE AND
CONDITION OF PROPERTY ADDENDUM
(Residential)**

1 **SELLER:** → Kenneth E. and Larissa D. Butler
 2 **PROPERTY:** → 1262 N. Lucy Montgomery Hwy, Olathe, KS 66061
 3

4 **1. SELLER'S INSTRUCTIONS**

5 SELLER agrees to disclose to BUYER all material defects, conditions and facts **KNOWN TO SELLER**
 6 which may materially affect the value of the Property. This disclosure statement is designed to assist
 7 SELLER in making these disclosures. Licensee(s), prospective buyers and buyers will rely on this
 8 information.

9
10 **2. NOTICE TO BUYER**

11 This is a disclosure of SELLER'S knowledge of the Property as of the date signed by SELLER and is not
 12 a substitute for any inspections or warranties that BUYER may wish to obtain. It is not a warranty of any
 13 kind by SELLER or a warranty or representation by the BROKER(S) or their licensees.

14
15 **3. OCCUPANCY**

16 Approximate age of Property? 17 How long have you owned? 6 yrs
 17 Does SELLER currently occupy the Property? Yes No
 18 If not, how long has it been since SELLER occupied the Property? _____ years/months.

19
20 **4. LAND (SOILS, DRAINAGE AND BOUNDARIES). (IF RURAL OR VACANT LAND, ATTACH
 21 SELLER'S LAND DISCLOSURE ALSO.)**

- 22 (a) Fill or expansive soil on the Property?..... Yes No
- 23 (b) Sliding, settling, earth movement, upheaval or earth stability problems on
 24 the Property?..... Yes No
- 25 (c) Is the Property or any portion thereof located in a flood zone, wetlands area or
 26 **proposed** to be located in such as designated by FEMA which requires flood
 27 insurance? Yes No
- 28 (d) Drainage or flood problems on the Property or adjacent properties?..... Yes No
- 29 (e) Do you pay flood insurance premiums?..... Yes No
- 30 (f) If so, is it required? Yes No
- 31 (g) Are the boundaries of the Property marked in any way? Yes No
- 32 (h) Has Property had a stake survey? If yes, attach copy..... Yes No
- 33 (i) Encroachments, boundary line disputes, or non-utility easements affecting the
 34 Property Yes No
- 35 (j) Any fencing on the Property?..... Yes No
- 36 (k) If yes, does fencing belong to the Property Yes No
- 37 (l) Diseased, dead, or damaged trees or shrubs on the Property Yes No
- 38 (m) Gas/oil wells, lines or storage facilities on Property or adjacent property Yes No

39 **If any of the answers in this section are "Yes", explain in detail:** _____

40 Fence is property boundary,
 41 only fence facing the street is owned by seller.
 42

43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65
66
67
68
69
70
71
72
73
74
75
76
77
78
79
80
81
82
83
84
85
86
87
88
89
90
91

5. ROOF:

- (a) Approximate Age: 2 years Unknown Type: Comp.
- (b) Have there been any problems with the roof, flashing or rain gutters? Yes No
If so, what was the date of the occurrence _____
- (c) Have there been any repairs to the roof, flashing or rain gutters? see (a) Yes No
Date of and company performing such repairs Aug. 2005 / Century Roofing
- (d) Has there been any roof replacement? Yes No
If yes, was it: Complete or Partial
- (e) What is the number of layers currently in place: 1 layers, or Unknown.

If any of the answers in this section are "Yes", explain in detail below: (All available warranties and other documentation are attached) We replaced the roof in 2005. The company that handled the job was Century Roofing

6. INFESTATION – ARE YOU AWARE OF:

- (a) Any termites, wood destroying insects, or **other** pests on the Property? Yes No
- (b) Any damage to the property by termites, wood destroying insects or **other** pests? Yes No
- (c) Any termite, wood destroying insects or other pest control treatments on the Property in the last five years? Yes No
If yes, list company, when and where treated _____
- (d) Any warranty, bait stations or other treatment coverage by a licensed pest control company on the Property? Yes No
If yes, the annual cost of service renewal is \$ _____ and the time remaining on the service contract is _____. (Check One)
 The treatment system stays with the Property, or the treatment system is subject to removal by the treatment company if annual service fee is not paid.

If any of the answers in this section are "Yes", explain in detail (attach any receipts): _____

7. STRUCTURAL, BASEMENT AND CRAWL SPACE ITEMS – ARE YOU AWARE OF:

- (a) Movement, shifting, deterioration, or other problems with walls, foundations, crawl space or slab? Yes No
- (b) Any cracks or flaws in the walls, ceilings, foundations, concrete slab, crawl space, basement floor or garage? C. Yes No
- (c) Any corrective action taken including, but not limited to piercing or bracing? Yes No
- (d) Any water leakage or dampness in the house, crawl space or basement? Yes No
- (e) Any dry rot, wood rot or similar conditions on the wood of the Property? Yes No
- (f) Any problems with driveways, patios, decks, fences or retaining walls on the Property? Yes No
- (g) Any problems with fireplace and/or chimney? Yes No
Date of last cleaning? 2006
- (h) Does the Property have a sump pump? Yes No
- (i) Any repairs or other attempts to control the cause or effect of any problem described above? Yes No

92 If any of the answers in this section are "Yes", explain in detail. When describing repairs or control
93 efforts, describe the location, extent, date, and name of the person who did the repair or control effort
94 and attach, if available, any inspection reports, estimates or receipts: The garage floor has
95 some cracks along with cracks on driveway as well. Caulked
96 and sealed. Only minor cracks.
97
98

99 **8. ADDITIONS AND/OR REMODELING:**

- 100 (a) Are you aware of any additions, structural changes, or other material
101 alterations to the Property?..... Yes No
- 102 (b) If "Yes", were all necessary permits and approvals obtained, and was all
103 work in compliance with building codes? Yes No

104 If "No", explain: _____
105 _____
106 _____
107 _____
108

109 **9. PLUMBING RELATED ITEMS:**

- 110 (a) What is the drinking water source? Public Private Well Cistern
111 If well water, state type _____ depth _____
112 diameter _____ age _____
- 113 (b) If the drinking water source is a well, when was the water last checked for safety and what
114 was the result of the test? _____
- 115 (c) Is there a water softener on the Property? Yes No
116 (If so, is it: Leased Owned?)
- 117 (d) Is there a water purifier system? Yes No
118 (If so, is it: Leased Owned?)
- 119 (e) What type of sewage system serves the Property? Public Sewer, or Private Sewer, or
120 Septic System, or Cesspool, or Lagoon, or Other _____
- 121 (f) If there is a septic system, is there a sewage pump on the septic system? Yes No
- 122 (g) Is there a grinder pump system? Yes No
- 123 (h) If there is a privately owned system, when was the septic tank, cesspool, or sewage system
124 last serviced? _____ By whom? _____
- 125 (i) Are you aware of any leaks, backups, or other problems relating to any of the plumbing,
126 water, and sewage related systems? Yes No
- 127 (j) Is there a back flow prevention device on the lawn sprinkling system, sewer
128 or pool? Yes No
- 129 (k) Type of plumbing material currently used in the Property:
130 Copper Galvanized Other PVC
131 The location of the main water shut-off is basement behind door.
132 (l) The location of the sewer line clean out trap is: beside water shut off

133 If your answer to any of the questions in this section is "Yes", explain in detail and provide
134 available documentation: _____
135 _____
136 _____
137 _____

138
139
140
141
142
143
144
145
146
147
148
149
150
151
152
153
154
155
156
157
158
159
160
161
162
163
164
165
166
167
168
169
170
171
172
173
174
175
176
177
178
179
180
181
182
183
184
185
186

10. HEATING AND AIR CONDITIONING:

(a) Does the Property have air conditioning? , Yes No
 Central Electric Central Gas Heat Pump Window Unit(s)

Unit	Age of Unit	Leased	Owned	Location	Last Date Serviced/By Whom?
1. 14 Seer Trane	8 yrs old		owned		Spring of 2007
2.				Climate Control Heating & Cooling	

(b) Does the Property have heating systems? Yes No
 Electric Fuel Oil Natural Gas Heat Pump Propane Fuel Tank
 Other back-up gas

Unit	Age of Unit	Leased	Owned	Location	Last Date Serviced/By Whom?
1. Trane	80% 8 yrs		owned	East side of property	Spring 2007
2.				Climate control Heating & Cooling	

(c) Are there rooms without heat or air conditioning? Yes No
If yes, which room(s)? _____

(d) Does the Property have a water heater? Yes No
 Electric Gas Solar

Unit	Age of Unit	Leased	Owned	Location	Capacity	Last Date Serviced/By Whom?
1.			unknown	owned	Storage area of basement	
2.						

(e) Are you aware of any problems regarding these items? Yes No

If your answer to any of the questions in this section is "Yes", explain in detail: _____

11. ELECTRICAL SYSTEM:

(a) Type of material used: Copper Aluminum Unknown

(b) Type of electrical panel(s): Breaker Fuse
Location of electrical panel(s): Storage area in basement
Size of electrical panel (total amps), if known: 200

(c) Are you aware of any problem with the electrical system? Yes No

If "Yes", explain in detail: _____

12. HAZARDOUS CONDITIONS:

- (a) Underground tanks on the Property? Yes No
- (b) Landfill on the Property? Yes No
- (c) Toxic substances on the Property, (e.g. tires, batteries, etc.)? Yes No
- (d) Has the Property been tested for any of the above listed items? Yes No
- (e) Radon in the property? Yes No
- (f) Have you had the property tested for radon? Yes No
- (g) Have you had the property tested for mold? Yes No
- (h) Are you aware of any other environmental issues? Yes No
- (i) Are you aware of any methamphetamine or controlled substances ever being used or manufactured on the Property? Yes No

(In Missouri, a separate disclosure is required if methamphetamine or other controlled substances have been present on or in the Property)

187 **If your answer to any of the questions in this section is "Yes", explain in detail and attach test**
188 **results:** _____
189 _____
190 _____
191 _____

192 **13. NEIGHBORHOOD INFORMATION AND HOMEOWNERS ASSOCIATIONS:**

- 193 (a) Are you aware of any current/pending bonds, assessments, or special taxes that apply to
194 Property? Yes No
195 Amount: \$ _____
- 196 (b) Are you aware or have you received any notice of any condition or proposed
197 change in your neighborhood or surrounding area? Yes No
- 198 (c) Is the Property subject to covenants, conditions, and restrictions of a
199 homeowner's association or subdivision restrictions? Yes No
- 200 (d) Are you aware of any violations of such covenants and restrictions? Yes No
- 201 (e) Are you aware of any defect, damage, proposed change or problem with any
202 common elements or common areas? Yes No
- 203 (f) Are you aware of any condition or claim which may result in any change to
204 assessments or fees? Yes No
- 205 (g) Are streets privately owned? Yes No
- 206 (h) Is the property in a historic, conservation or special review district that
207 requires any alterations or improvements to the property be approved by a
208 board or commission? Yes No
- 209 (i) Is the property subject to tax abatement? Yes No
- 210 (j) Is the property subject to a right of first refusal? Yes No

211
212 **If the answer to any of the above questions is "Yes" except (c), explain in detail, including**
213 **amounts, if applicable:** _____
214 _____
215 _____
216 _____
217 _____

218 We pay Homes Association dues which are paid in full until N/A in the amount of \$ N/A
219 payable yearly monthly quarterly, sent to _____ and
220 such includes: _____
221 Homeowner's association contact name and phone number: None - N/A
222 _____
223 _____

224 **14. OTHER MATTERS:**

- 225 (a) Are you aware of any of the following?
226 Party walls Common areas Easement Driveways Yes No
- 227 (b) Are you aware of any fire damage to the Property? Yes No
- 228 (c) Are there any liens, other than mortgage(s)/deeds of trust currently on the
229 Property? Yes No
- 230 (d) Are there any violations of laws or regulations affecting the Property? Yes No
- 231 (e) Are you aware of any other conditions that may materially and adversely
232 affect the value or desirability of the Property? Yes No
- 233 (f) Are you aware of any general stains or pet stains to the carpet, the flooring
234 or sub-flooring? Yes No
- 235 (g) Do you have keys for all exterior doors, including garage doors in the
236 home? Yes No
237 List locks without keys _____

- 238 (h) Are you aware of any violation of zoning, setbacks or restrictions, or
 239 non-conforming uses? Yes No
- 240 (i) Are you aware of any unrecorded interests affecting the Property? Yes No
- 241 (j) Are you aware of anything that would interfere with giving clear title to
 242 the Buyer? Yes No
- 243 (k) Are you aware of any existing or threatened legal action pertaining to
 244 the Property? Yes No
- 245 (l) Are you aware of any litigation or settlement pertaining to this Property? ... Yes No
- 246 (m) Have you added any insulation since you have owned the Property? Yes No
- 247 (n) Have you replaced any appliances that remain with the Property in the
 248 past five years? Yes No
- 249 (o) Are there any transferable warranties on the Property or any of its
 250 components? Yes No
- 251 (p) Have you made any insurance or other claims pertaining to this property
 252 in the past 5 years?..... Yes No
- 253 If yes, were repairs from claim(s) completed? Yes No
- 254 (q) Are you aware of any use of synthetic stucco in the property? Yes No

255
 256 If any of the answers in this section are "Yes", (except g), explain in detail: we have keys to all
 257 doors - added insulation when we finished basement, replaced dishwasher,
 258 warranty on heat pump, windows and carpet.
 259

260
 261 **15. UTILITIES:** Identify the name and phone number for utilities listed below.

262 Electric Company Name - Westar Phone 800-383-1183
 263 Gas Company Name - Atmos Phone 888-442-1313
 264 Water Company Name - Caryoforane Phone _____
 265

266 **16. FIXTURES, EQUIPMENT AND APPLIANCES (FILL IN ALL BLANKS)**

267 **O = Operating (Means the item is performing its intended function and is staying with the**
 268 **Property)**

269 **EX= Exclude from Mechanical Repairs and cannot be an Unacceptable Condition**

270 **NA= Not applicable**

271 **NS = Not staying**

- | | | |
|---|---|--|
| <u>NA</u> A/C Window Units, # _____ | Garage door transmitters - # _____ | <u>NA</u> Security system-
<input type="checkbox"/> Own <input type="checkbox"/> Lease |
| <u>O</u> Attic fan | <u>NS</u> Gas Grill | <u>O</u> Smoke detector(s)-# of _____ |
| <u>O</u> Ceiling fans-# of <u>5</u> | <u>NA</u> Gas logs | <u>NA</u> Sprinkler system |
| <u>O</u> Central air conditioning system | <u>O</u> Gas starter for fireplace(s) | <u>NA</u> Sprinkler back flow valve |
| <u>NA</u> Central vac & attachments | <u>NA</u> Gas yard light | <u>NA</u> Sprinkler auto timer |
| <u>NA</u> Convection Oven | <u>O</u> Hot tub | <u>O</u> Stove vent hood |
| <u>O</u> Dishwasher | <u>NA</u> Humidifier | <u>O</u> Sump pump |
| <u>O</u> Disposal | <u>NA</u> Intercom | <u>NA</u> Swimming Pool |
| <u>O</u> Door Bell | <u>O</u> Microwave oven | <u>NA</u> Trash compactor |
| <u>NA</u> Downdraft cooktop (e.g., Jennaire) | <u>O</u> Oven clock timer | <u>NA</u> TV antenna/receiver/satellite
dish: <input type="checkbox"/> Own <input type="checkbox"/> Lease |
| <u>NS</u> Dryer | <u>NA</u> Pool heater | <u>NA</u> Whirlpool tub |
| <u>NA</u> Electric air cleaner or purifier | <u>NA</u> Pool/Spa equipment | <u>NA</u> Wood burning stove |
| <u>O</u> Electric garage door opener(s) | <u>NA</u> Propane Tank | <u>NS</u> Washer |
| <u>O</u> Exhaust fan(s) (baths) | <u>O</u> Range oven (<input checked="" type="checkbox"/> elec. <input type="checkbox"/> gas) | <u>NA</u> Water softener and/or purifier |
| <u>NA</u> Fireplace heat re-circulator | Refrigerator | Other _____ |
| <u>NA</u> Fireplace insert | Location of Refrigerator _____ | Other _____ |
| <u>O</u> Furnace/heat pump/other heating sys. | <u>NA</u> Sauna | |
| Other _____ | Other _____ | |

