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SPD19 Seller's Property Disclosure (Residential)  
 Adoption Date: August 5, 2025  
 Mandatory Use Date: January 1, 2026

THIS FORM HAS IMPORTANT LEGAL CONSEQUENCES AND THE PARTIES SHOULD CONSULT LEGAL AND TAX OR OTHER COUNSEL BEFORE SIGNING.

SELLER'S PROPERTY DISCLOSURE  
 (RESIDENTIAL)

THIS SELLER'S PROPERTY DISCLOSURE SHOULD BE COMPLETED BY SELLER, NOT BY BROKER.

Seller states that the information contained in this Seller's Property Disclosure ("SPD") is correct to Seller's CURRENT ACTUAL KNOWLEDGE as of the date signed by Seller. If the Contract to Buy and Sell (Contract) requires Seller to complete this SPD, this form must be fully completed to Seller's CURRENT ACTUAL KNOWLEDGE as of the date of the Seller's Property Disclosure Deadline in the Contract. Any changes to the disclosures herein must be disclosed by Seller to Buyer promptly after discovery. In the event Seller discovers a new adverse material fact after completing this SPD, Seller must disclose in writing any such new adverse material fact to Buyer. Seller's failure to disclose a known adverse material fact affecting the Property or occupant may result in legal liability. If Seller has knowledge of an adverse material fact affecting the Property or occupants, it must be disclosed whether there is a specific item on this SPD or not. If the Property is part of a Common Interest Community, this SPD is limited to the Property or unit itself, except as stated in Section P.

Broker is authorized to deliver a copy of this SPD to prospective buyers.

Seller and Buyer understand that this SPD is not a warranty or guarantee of any kind by the Seller or by any Broker or Agent representing the Seller. Property inspection services may be purchased and are advisable. This SPD is not intended as a substitute for an inspection of the Property. Buyers are encouraged to obtain their own professional inspection(s).

SELLER: Your answers are NOT limited to only the space provided in this SPD. Attach additional pages, reports, receipts, or any other documents you believe necessary for the information you provide to be complete.

Date SPD completed by Seller: **1/23/2026**

Property:

**8079 Meadowdale Square, Niwot, CO 80503**

Seller: **Emily A Beck**

Year Built: **1979**

Year Seller Acquired Property: **2019**

Seller  is  is not currently occupying the Property.

If Seller is not currently occupying the property, date Seller last occupied the Property:

During any period when Seller has not occupied the Property, the Property was  vacant  occupied by someone other than Seller.

I. IMPROVEMENTS

NOTE: The Contract, not this SPD, determines whether an item is included or excluded in the sale. If there is an inconsistency between this SPD and the Contract, the Contract controls.

A.	BUILDING CONDITIONS (all aspects of the Property to include decks and patios) If you know of any of the following problems EVER EXISTING, check the "Yes" column:	Yes	Comments
1	Structural problems with improvements		
2	Structural supports or reinforcements added		
3	Moisture and/or water, including but not limited to, leakage/seepage in the basement/crawlspace	<input checked="" type="checkbox"/>	Soft clog from main floor kitchen sink disposal which clogged the drain and created a leak in the basement which was rectified in the fall of 2025
4	Damage due to termites, other insects, birds, animals, or rodents	<input checked="" type="checkbox"/>	pest control service for mice was completed by Orkin in 2025

5	Damage due to hail, wind, fire, flood, or other casualty	<input checked="" type="checkbox"/>	roof replaced in 2024 due to hail event
6	Any settling, movement, cracking, heaving or breakage of the following:		
	a. Foundations		
	b. Floors		
	c. Interior Walls		
	d. Exterior Walls		
	e. Driveways	<input checked="" type="checkbox"/>	normal settling of concrete
	f. Sidewalks		
	g. Patios		
	h. Retaining Walls		New rock retaining wall around side garden was designed and built in fall of 2025
	i. Other:		
7	Window leaks		
8	Exterior Artificial Stucco (EIFS)		
9	Subfloors		
10			

<b>B. ROOF – General Information</b>			
Do you know of the following on the Property? If yes, provide the requested information in Comments.		<b>Yes</b>	<b>Comments</b>
1	Indicate age of roof in Comments		Less than 2 years old
2	Indicate roof material in Comments		
3	Roof is under warranty		
	a. Date of warranty expiration		unknown
	b. Warranty is transferable		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
4	Roof work done while under current roof warranty		
	a. Date work completed		
5			
<b>ROOF – If you know of any of the following problems EVER EXISTING, check the "Yes" column:</b>		<b>Yes</b>	<b>Comments</b>
6	Roof leak		
7	Damage to roof		
8	Damage to skylight		
9	Damage to gutter or downspout		
10	Other roof problems, issues or concerns		
11			

<b>C. APPLIANCES (if included in the sale)</b>				
If you know of any problems <b>NOW EXISTING</b> with the following, check the "Yes" column:		<b>Yes</b>	<b>Age, if known</b>	<b>Comments</b>
1	Built-in vacuum system & accessories			
2	Clothes dryer			<input type="checkbox"/> Gas <input type="checkbox"/> Electric
3	Clothes washer			

4	Dishwasher			
5	Disposal			
6	Freezer			
7	Gas grill			
8	Range ventilation system			
9	Microwave oven			<input type="checkbox"/> Free standing <input type="checkbox"/> Built in
10	Oven			<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Single <input type="checkbox"/> Double
11	Range/Stove			<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Free Standing <input type="checkbox"/> Drop-In
12	Refrigerator			
13	T.V. antenna:			<input type="checkbox"/> Owned <input type="checkbox"/> Leased. If leased, provide the name and contact information of entity leased from:
14	Satellite system or DSS dish:			<input type="checkbox"/> Owned <input type="checkbox"/> Leased. If leased, provide the name and contact information of entity leased from:
15	Trash compactor			
16				

<b>D. ELECTRICAL &amp; TELECOMMUNICATIONS – General Information</b>				
Do you know of the following on the Property? If yes, provide the requested information in Comments.				
		Yes	Age, if known	Comments
1	220 Volt service	<input checked="" type="checkbox"/>		
2	Electrical Service: Amps			
3	Landscape lighting			
4	Electric provider – provide name in Comments			Xcel Energy
5	Cable/TV provider – provide name in Comments			Xfinity
6	Internet provider – provide name in Comments			Xfinity
7	Solar panels			<input type="checkbox"/> Owned <input type="checkbox"/> Leased. If leased, provide the name and contact information of entity leased from:
	a. Output			
8	Wind generators			<input type="checkbox"/> Owned <input type="checkbox"/> Leased. If leased, provide the name and contact information of entity leased from:
9	Security system			<input type="checkbox"/> Owned <input type="checkbox"/> Leased. If leased, provide the name and contact information of entity leased from:
10	Doorbell			<input checked="" type="checkbox"/> Wired <input type="checkbox"/> Wireless <input type="checkbox"/> Smart
11	Smoke/fire detector(s)			<input checked="" type="checkbox"/> Battery <input type="checkbox"/> Hardwire
12	Carbon monoxide alarm(s)			<input checked="" type="checkbox"/> Battery <input type="checkbox"/> Hardwire
13	Internet wiring			<input checked="" type="checkbox"/> Cable <input type="checkbox"/> DSL <input type="checkbox"/> Satellite <input type="checkbox"/> Fiber <input type="checkbox"/> Other:
14	Built in sound system			<input type="checkbox"/> Speakers - Built In <input type="checkbox"/> Wiring - Built In <input type="checkbox"/> Speakers - Wireless
15				
<b>ELECTRICAL &amp; TELECOMMUNICATIONS</b>				
If you know of any problems <b>NOW EXISTING</b> with the following, check the "Yes" column:				
16	Security system			

17	Smoke/fire detector(s)			
18	Carbon monoxide alarm			
19	Light fixtures			
20	Switches & outlets			
21	Internet wiring			
22	Inside telephone wiring & blocks/jacks			
23	Cable TV wiring & jacks			
24	Ceiling fans	<input checked="" type="checkbox"/>		not working, may be removed.
25	Bathroom vent fan(s)	<input checked="" type="checkbox"/>		vent duct in upper level hall bath is functional but needs to be rehung in the above attic space.
26	Garage door opener & remote control # of remote/openers: 2			
27	Garage door keyless entry			
28	Built in intercom system			
29	Doorbell			
30	Built in sound system			
31				
	<b>ELECTRICAL &amp; TELECOMMUNICATIONS</b> If you know of any problems <b>EVER EXISTING</b> with the following, check the "Yes" column:	<b>Yes</b>	<b>Age, if known</b>	<b>Comments</b>
32	Electrical Service			
33	Aluminum wiring at the outlets (110)			
34	Solar panels			
35	Wind generators			
36	Electric wiring or panel			
37				

<b>E. MECHANICAL</b> If you know of any problems <b>NOW EXISTING</b> with the following, check the "Yes" column:	<b>Yes</b>	<b>Age, if known</b>	<b>Comments</b>
1 Overhead doors (including garage doors)			
2 Entry gate system			
3 Elevator			
4 Sump pump(s): # of			
5 Recycle pump			
6			

<b>F. VENTILATION, AIR &amp; HEAT – General Information</b> Do you know of the following on the Property? If yes, provide the requested information in Comments.	<b>Yes</b>	<b>Age, if known</b>	<b>Comments</b>
1 Furnace	<input checked="" type="checkbox"/>		
a. Furnace Type	<input checked="" type="checkbox"/>	20	<input checked="" type="checkbox"/> Forced Air Gas <input type="checkbox"/> Forced Air Electric <input type="checkbox"/> Forced Air Propane <input type="checkbox"/> Radiant <input type="checkbox"/> Gravity Flow <input type="checkbox"/> Other (specify):

	b. Number of Units	<input checked="" type="checkbox"/>	1	
	c. Zoned			Location of zone 1: Location of zone 2: Location of zone 3:
2	Heating system (other than furnace)	<input checked="" type="checkbox"/>		basement electrical baseboard
	a. Type/Fuel	<input checked="" type="checkbox"/>		electric
3	Fireplace			
	a. Type			<input type="checkbox"/> Masonry <input type="checkbox"/> Insert <input type="checkbox"/> Wood Burning <input type="checkbox"/> Direct Vent <input type="checkbox"/> Other:
	b. Fireplace starter			<input type="checkbox"/> Switch <input type="checkbox"/> Remote
4	Free Standing Heating Stove	<input checked="" type="checkbox"/>		wood stove
	a. Fuel Source			<input checked="" type="checkbox"/> Wood <input type="checkbox"/> Pellet <input type="checkbox"/> Corn <input type="checkbox"/> Gas <input type="checkbox"/> Other:
5	Date fireplace/wood stove, chimney/flue last cleaned:			<input checked="" type="checkbox"/> Do not know
6	Fuel tanks			<input type="checkbox"/> Owned <input type="checkbox"/> Leased If leased, entity:
7	Radiant heating system:			<input type="checkbox"/> Interior <input type="checkbox"/> Exterior
	a. Interior Type			
	b. Exterior Type			
8	Air Conditioning			
	a. Type	<input checked="" type="checkbox"/>		<input type="checkbox"/> Electric <input checked="" type="checkbox"/> Central Air <input type="checkbox"/> Other:
	b. Number of Units	<input checked="" type="checkbox"/>	1	
	c. Zoned			Location of zone 1: Location of zone 2: Location of zone 3:
	<b>VENTILATION, AIR &amp; HEAT</b> If you know of any problems <b>NOW EXISTING</b> with the following, check the "Yes" column:	Yes	Age, if known	Comments
9	Furnace	<input checked="" type="checkbox"/>		On Jan 31, our HVAC installer provided two options to fix the furnace code issue as noted in pre inspection: Option 1: Replace a few feet of the single wall flue with a double wall flue and move a wooden stud closest to said flue If the basement area is to include a "bedroom", to meet code a self-closing, weather sealed door should be installed on the hvac closet (instead of the existing bi-fold doors) and a door (ie french door) between the den/bedroom area can also be installed. Option 2: Install a new high efficiency furnace. This would replace the need for the above code amendments.
10	Heating System (other than Furnace)			
11	Heat Pump			
12	Evaporative cooler			
13	Window air conditioning units			
14	Central air conditioning			
15	Attic ventilation system (attic only)			
16	Whole house fan			
17	Vent fans			
18	Humidifier			
19	Air purifier			
20	Fireplace			
21	Fireplace insert			

22	Fireplace starter			
23	Heating Stove			
24	Fuel tanks			
25				

<b>G. WATER – General Information</b>				
Do you know of the following on the Property? If yes, provide the requested information in Comments.		Yes	Age, if known	Comments
1	Water heater	<input checked="" type="checkbox"/>	6	
	a. Number of Water Heaters		1	
	b. Fuel Type			
	c. Capacity			
2	Water filter system			<input type="checkbox"/> Owned <input type="checkbox"/> Leased If leased, entity (name/contact):
3	Water softener			<input type="checkbox"/> Owned <input type="checkbox"/> Leased If leased, entity (name/contact):
4	Indicate location of master water shutoff in Comments			
5	Type of well:			
	a. Exempt well (outside designated groundwater basin)			<input type="checkbox"/> Household use only inside a single-family dwelling (typically less than 35 acres; no outdoor uses) Permit no: _____ ) <input type="checkbox"/> Domestic use (typically 35+ acres; indoor household use in up to 3 dwellings on the parcel, outdoor watering of personal livestock, irrigation of up to 1 acre) Permit no: _____ ) <input type="checkbox"/> Livestock (on farm/range/pasture) Permit no: _____ ) <input type="checkbox"/> Other (please explain): _____ (Permit #: _____ )
	b. Small capacity well (inside designated groundwater basin)			<input type="checkbox"/> Domestic use (indoor household use in up to 3 dwellings on the parcel; watering of personal livestock, limited irrigation area, no more than 1 acre-foot per year) Permit no: _____ ) <input type="checkbox"/> Other (please explain): _____ (Permit #: _____ )
6	Well metered			
7	Well Pump			
	a. Brand name pump number			
	b. Date installed			
	c. Date of last inspection			
	d. Date of last service			
	e. Depth			
	f. GPM and date last measured			
8	Galvanized pipe			
9	Polybutylene pipe			
10	Cistern water storage			
	a. Number of gallons	<input type="checkbox"/>		
11	Supplemental water purchased in past 2 years			

	a. Name and contact information of entity from which supplemental water was purchased	<input type="checkbox"/>		
12				
	<b>WATER</b> If you know of any problems <b>NOW EXISTING</b> with the following, check the "Yes" column:	<b>Yes</b>	<b>Age, if known</b>	<b>Comments</b>
13	Water heater(s)			
14	Water filter system			
15	Water softener			
16	Water system pump			
17	Sauna			
18	Hot tub or spa			
19	Steam room/shower			
20	Underground sprinkler system			
21	Fire sprinkler system			
22	Backflow prevention device			
23	Irrigation pump			
24				
	<b>WATER</b> If you know of any problems <b>EVER EXISTING</b> with the following, check the "Yes" column:	<b>Yes</b>	<b>Age, if known</b>	<b>Comments</b>
25	Leaks, backups, or similar problems with any portion of the water or plumbing systems (including lines and water pressure) or damage therefrom			
26	Well			
27	Pool			
28	Irrigation system			
29	Water has been tested for potability			
	a. Indicate result of test in comments and provide the most recent records and reports pertaining to such testing	<input type="checkbox"/>		
30				

<b>H. SOURCE OF WATER &amp; WATER SUPPLY</b>	
Do you know of the following on the Property:	
1	Type of water supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Community <input type="checkbox"/> Well <input type="checkbox"/> Shared Well <input type="checkbox"/> Other <input type="checkbox"/> None If the Property is served by a Well, a copy of the Well Permit <input type="checkbox"/> Is <input type="checkbox"/> Is Not attached. Well Permit #: _____ Drilling Records <input type="checkbox"/> Are <input type="checkbox"/> Are Not attached. Shared Well Agreement <input type="checkbox"/> Yes <input type="checkbox"/> No.  The <b>Water Provider</b> for the Property can be contacted at: Name: <a href="#">Left Hand Water District</a> Address: <a href="#">6800 Nimbus Rd./PO Box 210 Longmont, CO 80503</a> Web Site: <a href="http://lefthandwater.org/">http://lefthandwater.org/</a> Phone No.: <a href="tel:303-530-4200">303-530-4200</a> <input type="checkbox"/> There is neither a Well nor a Water Provider for the Property. The source of potable water for the Property is [describe source]: _____  <b>SOME WATER PROVIDERS RELY, TO VARYING DEGREES, ON NONRENEWABLE GROUND WATER. YOU MAY WISH TO CONTACT YOUR PROVIDER (OR INVESTIGATE THE DESCRIBED SOURCE) TO DETERMINE THE LONG-TERM SUFFICIENCY OF THE PROVIDER'S WATER SUPPLIES.</b>

<b>I. SEWER/SEPTIC – General Information</b>	
Do you know of the following on the Property? If yes, provide the requested information in Comments.	<b>Yes</b> <b>Comments</b>

1	Public sanitary sewer service	<input checked="" type="checkbox"/>	
	a. Name and contact information of public sanitary sewer service provider	<input checked="" type="checkbox"/>	Niwot Sanitation District 303-652-2525
	b. Date the sewer line was last scoped	<input checked="" type="checkbox"/>	fall 2025
2	Community sanitary sewer service		
	a. Name and contact information of community sanitary sewer service provider:		
	b. Date the sewer line was last scoped		
3	Septic System		
	a. Type		Tank <input type="checkbox"/> Leach <input type="checkbox"/> Lagoon <input type="checkbox"/>
	b. Date of issuance of latest Individual Use Permit		
	c. Date of latest inspection		
	d. Date of latest pumping		
	e. System is under a maintenance agreement (pumped/inspected on a regular basis)		<input type="checkbox"/> Maintenance agreement is mandated. Name and contact information of entity that mandates the maintenance agreement:  <input type="checkbox"/> Maintenance agreement is not mandated
4	Other sanitary sewer service		Type:
5	Gray water storage/use		
6			
	<b>SEWER/SEPTIC</b> – If you know of any problems <b>EVER EXISTING</b> with the following, check the "Yes" column:	<b>Yes</b>	<b>Comments</b>
7	Leaks, backups, or similar problems with any portion of the sewage systems or damage therefrom		
8	Lift station (sewage ejector pump)		
9			

<b>J.</b>	<b>FLOODING AND DRAINAGE</b> If you know of any problems <b>EVER EXISTING</b> with the following on the Property, check the "Yes" column:	<b>Yes</b>	<b>Comments</b>
1	Flooding		
2	Drainage		
3	Grading		
4	Water intrusion in the basement, crawl space, or other parts of Property		
5	Repairs made to control water intrusion in the basement, crawl space, or other parts of the Property		
6			
	<b>DRAINAGE AND RETENTION PONDS – Other Information</b> Do you know of the following on the Property:	<b>Yes</b>	<b>Comments</b>
7	Drainage or retention ponds, dams, storm water detention basins, or other similar facilities		
8			

<b>K.</b>	<b>OTHER DISCLOSURES – IMPROVEMENTS</b> If you know of any problems <b>NOW EXISTING</b> with the following, check the "Yes" column:	<b>Yes</b>	<b>Comments</b>
1	Included fixtures and equipment	<input checked="" type="checkbox"/>	ceiling fan in living room is not functional, may be removed.
2	Stains on carpet		

3	Floors		
4			

**II. GENERAL**

<b>L. USE, ZONING &amp; LEGAL ISSUES</b>		<b>Yes</b>	<b>Comments</b>
	If you know of any of the following <b>EVER EXISTING</b> , check the "Yes" column:		
1	Zoning violation, variance, conditional use, violation of an enforceable PUD, or non-conforming use		
2	Notice or threat of condemnation proceedings		
3	Notice of any adverse conditions from any governmental or quasi-governmental agency that have not been resolved		
4	Notice of zoning action related to the Property		
5	Building code, city, or county violations		
6	Violation of restrictive covenants or owners' association rules or regulations		
7	Any building or improvements constructed within the past one year before this Date without approval by the owner's association or its designated approving body		
8	Any additions or alterations made with a Building Permit		
9	Any additions or non-aesthetic alterations made without a Building Permit	<input checked="" type="checkbox"/>	repositioned furnace in 2019 which does not require a permit
10	Other legal action		
11	Any part of the Property leased to others (written or oral)		
12	Used for short-term rentals in the past year		
13	Grandfathered conditions or uses		
14			

<b>M. ACCESS &amp; PARKING</b>		<b>Yes</b>	<b>Comments</b>
	If you know of any of the following <b>EVER EXISTING</b> , check the "Yes" column:		
1	Any access problems, issues or concerns		
2	Roads, trails, paths, or driveways through the Property used by others		
3	Public highway or county road bordering the Property		
4	Any proposed or existing transportation project that affects or is expected to affect the Property		
5	Encroachments, boundary disputes, or unrecorded easements		
6	Shared or common areas with adjoining properties, including but not limited to, walls, fences and driveways	<input checked="" type="checkbox"/>	guest parking in the neighborhood
7	Requirements for curb, gravel/paving, or landscaping		
8	Any limitations on parking or access due to size, number of vehicles, or type of vehicles in the past year		
9			

<b>N. ENVIRONMENTAL CONDITIONS</b>		<b>Yes</b>	<b>Comments</b>
	If you know of any of the following <b>EVER EXISTING</b> on any part of the Property, check the "Yes" column:		
1	Hazardous materials on the Property, such as radioactive, toxic or biohazardous materials, asbestos, pesticides, herbicides, wastewater sludge methane, mill tailings, solvents, or petroleum products		
2	Underground storage tanks		

3	Aboveground storage tanks		
4	Underground transmission lines	<input checked="" type="checkbox"/>	
5	Property used as, situated on, or adjoining a dump, landfill or municipal solid waste landfill		
6	Monitoring wells or test equipment		
7	Sliding, settling, upheaval, movement or instability of earth, or expansive soils on the Property		
8	Mine shafts, tunnels, or abandoned wells on the Property		
9	Within a governmentally designated geological hazard or sensitive area		
10	Within a governmentally designated floodplain or wetland area		
11	Dead, diseased, or infested trees or shrubs		
12	Environmental assessments, studies, or reports done involving the physical condition of the Property		
13	Used for any mining, graveling, or other natural resource extraction operations such as oil and gas wells		
14	Smoking inside improvements (including garages, unfinished space, or detached buildings) on Property		
15	Animals kept in the residence		
16	Other environmental problems, issues or concerns		
17	Odors		
18			

<b>O. RADON</b>	If you know of any of the following <b>EVER EXISTING</b> , check the "Yes" column:		
		<b>Yes</b>	<b>Comments</b>
1	Radon test(s) conducted on the Property. Provide copies of the most recent records and reports pertaining to radon concentrations within the Property.		
2	Radon concentrations detected or mitigation or remediation performed. Provide a full description.		
3	Radon mitigation system installed on Property. Provide all information known by Seller about the radon mitigation system.	<input checked="" type="checkbox"/>	
4			

<b>P. COMMON INTEREST COMMUNITY – ASSOCIATION PROPERTY</b>	If you know of any of the following <b>NOW EXISTING</b> , check the "Yes" column:		
		<b>Yes</b>	<b>Comments</b>
1	Property is part of an owners' association	<input checked="" type="checkbox"/>	
2	Special assessments or increases in regular assessments approved by owners' association but not yet implemented		
3	Problems or defects in the common elements or limited common elements of the Association Property		
	<b>COMMON INTEREST COMMUNITY – ASSOCIATION PROPERTY</b>		
	If you know of any of the following <b>EVER EXISTING</b> , check the "Yes" column:	<b>Yes</b>	<b>Comments</b>
4	Has the Association made demand or commenced a lawsuit against a builder or contractor alleging defective construction of improvements of the Association Property (common area or property owned or controlled by the Association but outside the Seller's Property or unit)		
5			
	<b>COMMON INTEREST COMMUNITY – ASSOCIATION PROPERTY – Other Information:</b>		<b>Contact Information</b>
	Name of the Owner's Association(s) governing the Property:		
6	Owners' Association #1	<input checked="" type="checkbox"/>	Boom Properties
7	Owners' Association #2		
8	Owners' Association #3		

9	Owners' Association #4		
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<b>Q. METROPOLITAN DISTRICT</b>	If you know of any of the following <b>NOW EXISTING</b> , check the "Yes" column:	Yes	Comments
1	Property is located within the boundaries of a Metropolitan District that was organized on or after January 1, 2000		
<b>METROPOLITAN DISTRICT – Information:</b>			<b>Comments</b>
2	Name of Metropolitan District #1		
3	Official website of the Metropolitan District #1		
4	Name of Metropolitan District #2		
5	Official website of Metropolitan District #2		

<b>R. GENERAL DISCLOSURES</b>	If you know of any of the following <b>EVER EXISTING</b> , check the "Yes" column:	Yes	Comments
1	Written reports of any building, site, roofing, soils, water, sewer, mold, or engineering investigations or studies of the Property. Provide copies of all such reports in possession of Seller.	<input checked="" type="checkbox"/>	Satisfactory air inspection report completed upon conclusion of mold remediation from drainage issue listed above is available
2	Any property insurance claim submitted (whether paid or not)	<input checked="" type="checkbox"/>	
3	Structural, architectural, and engineering plans and/or specifications for any existing improvements. Provide copies of all such reports in possession of Seller.		
4	Property was previously used as a methamphetamine laboratory and not remediated to state standards		
5	Government special improvements approved, but not yet installed, that may become a lien against the Property		
6	Any litigation alleging negligent construction or defective building products		
7	Any award or payment of money in lieu of repairs for defective building products or poor construction		
8	Any release signed regarding defective products or poor construction that would limit a future owner from making a claim		
9	Pending: (1) litigation or (2) other dispute resolution proceeding regarding the Property		
10	Property is subject to Deed Restrictions, other recorded document restrictions, or Affordable Housing Restrictions		
11	Property is located in a historic district		
12			
<b>GENERAL – Other Information:</b>			<b>Comments</b>
13	U.S. Postal Service delivery available	<input checked="" type="checkbox"/>	<input type="checkbox"/> Property <input type="checkbox"/> Post Office <input checked="" type="checkbox"/> Cluster Mailbox - Location and No.: #2 <input type="checkbox"/> Other (specify):
14			

OTHER KNOWN ADVERSE MATERIAL FACTS: For purposes of this section, adverse material facts would include any non-observable or observable physical conditions existing on the Property. Describe any other known adverse material facts in or on the Property (attach additional pages as necessary):

The information contained in this SPD has been furnished by Seller, who certifies it was answered truthfully, based on Seller's CURRENT ACTUAL KNOWLEDGE.

Date: \_\_\_\_\_

Seller: **Emily A Beck**

Seller: \_\_\_\_\_ Date: \_\_\_\_\_

ADVISORY TO BUYER:

1. Even though Seller has answered the above questions to Seller's current actual knowledge, Buyer should thoroughly inspect the Property and obtain expert assistance to accurately and fully evaluate the Property to confirm the status of the following matters are satisfactory to Buyer:

- a. the physical condition of the Property;
- b. the presence of mold or other biological hazards;
- c. the presence of rodents, insects, and vermin including termites;
- d. the legal use of the Property, including zoning and legal access to the Property;
- e. the availability and source of water, sewer, and utilities;
- f. the environmental and geological condition of the Property;
- g. the presence of noxious weeds; and
- h. any other matters that may affect Buyer's use and ownership of the Property that are important to Buyer as Buyer decides whether to purchase the Property.

2. Seller states that the information is correct to "Seller's current actual knowledge" as of the date of this form. The term "current actual knowledge" is intended to limit Seller's disclosure only to facts actually known by the Seller and does not include "constructive knowledge" or "common knowledge" or what Seller "should have known" about the Property. The Seller has no duty to investigate or inspect the Property or inclusions when this SPD is filled in and signed.

3. Valuable information may be obtained from various local/state/federal agencies, and other experts may assist Buyer by performing more specific evaluations and inspections of the Property.

4. Boundaries, location and ownership of fences, driveways, hedges, and similar features of the Property may become the subjects of a dispute between a property owner and a neighbor. A survey may be used to determine the likelihood of such problems.

5. Seller does not warrant that the Property or inclusions are fit for Buyer's intended purposes or use of the Property. Disclosure of the condition of an item is not to be construed as a warranty of its continued operability or as a representation or warranty that such item is fit for Buyer's intended purposes.

BUYER(S) ACKNOWLEDGE RECEIPT OF THIS SPD. BUYER(S) SIGNATURE DOES NOT CONSTITUTE APPROVAL OF ANY DISCLOSED CONDITION AS REPRESENTED HEREIN BY SELLER.

Buyer: \_\_\_\_\_ Date: \_\_\_\_\_

Buyer: \_\_\_\_\_ Date: \_\_\_\_\_

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SPD19 SELLER'S PROPERTY DISCLOSURE (RESIDENTIAL)

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