



RTown Real Estate
 1635 Foxtrail Dr. #317
 Loveland, CO 80538
Helping You Find Home.

This form is the property of the Colorado Real Estate Commission. The printed portions of this form, except differentiated additions, have been approved and promulgated by the Commission for public use. All users are prohibited from modifying this form except as permitted by the Rules Regarding Real Estate Brokers, 4 CCR 725-1-7.2.

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 the 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: *February 12, 2026*

Property: *448 Rossum Drive* *Loveland* *CO* *80537*

Seller: *Buckley Living Trust*

Year Built: *2002*

Year Seller Acquired Property: *2007*

Seller is is not currently occupying the Property.

If Seller is not currently occupying the property, date Seller last occupied the Property: *N/A*

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 | | |
| 4 | Damage due to termites, other insects, birds, animals, or rodents | | |
| 5 | Damage due to hail, wind, fire, flood, or other casualty | | |
| 6 | Any settling, movement, cracking, heaving or breakage of the following: | | |
| | a. Foundations | | |
| | b. Floors | | |
| | c. Interior Walls | ✓ | Two small spots on living room ceiling I hadn't noticed until it was pointed out to me last week. |
| | d. Exterior Walls | | |
| | e. Driveways | | |
| | f. Sidewalks | | |
| | g. Patios | | |
| | h. Retaining Walls | | |
| | i. Other: Shades | ✓ | Several of my shades need rethreading. |
| 7 | Window leaks | | |
| 8 | Exterior Artificial Stucco (EIFS) | | |
| 9 | Subfloors | | |
| 10 | | | |

| B. | ROOF - General Information Do you know of the following on the Property: If yes, provide the requested information in Comments | | |
|----|---|-----|--|
| 1 | Indicate age of roof in Comments | | 24 yrs |
| 2 | Indicate roof material in Comments | | Roof tile |
| 3 | Roof under warranty | | |
| | a. Date of warranty expiration | | Limited Lifetime |
| | b. Warranty is transferable | | <input checked="" 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 | | | |
| | ROOF If you know of any of the following problems EVER EXISTING , check the "Yes" column: | Yes | Comments |
| 6 | Roof leak | | |
| 7 | Damage to roof | | |
| 8 | Damage to Skylight | | |
| 9 | Damage to Gutter or downspout | | |

Buyer initials _____

Seller initials mlb

| | | | |
|----|---|--|--|
| 10 | Other roof problems, issues or concerns | | |
| 11 | | | |

| C. | APPLIANCES (if included in the sale) If you know of any problems NOW EXISTING with the following, check the "Yes" column: | Yes | Age If Known | Comments |
|----|---|-----|--------------|---|
| 1 | Built-in vacuum system & accessories | | | |
| 2 | Clothes dryer | | 20 yrs | <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric ? |
| 3 | Clothes washer | | 20 yrs | |
| 4 | Dishwasher | | 20 yrs | |
| 5 | Disposal | | 16 yrs | |
| 6 | Freezer | | | |
| 7 | Gas grill | | | |
| 8 | Range ventilation system | | | |
| 9 | Microwave oven | | 24 yrs | <input type="checkbox"/> Free Standing <input checked="" type="checkbox"/> Built in |
| 10 | Oven | | 24 yrs | <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Single <input type="checkbox"/> Double |
| 11 | Range/Stove | | 24 yrs | <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Free Standing <input type="checkbox"/> Drop-In |
| 12 | Refrigerator | | 7 yrs | |
| 13 | T.V. antenna: | | | <input type="checkbox"/> Owned <input type="checkbox"/> Leased. If leased, provide the name 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 | | | | |

| D. | ELECTRICAL & TELECOMMUNICATIONS - General Information: 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 | | | |
| 2 | Electrical Service: Amps _____ | | | |
| 3 | Landscape lighting | | | |
| 4 | Electric Provider - provide name in Comments | | | X Cell 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 | | | | |
| | ELECTRICAL & TELECOMMUNICATIONS - If you know of any problems NOW EXISTING with the following, check the "Yes" column: | Yes | Age If known | Comments |
| 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 | | | |
| 25 | Bathroom vent fan(s) | | | |
| 26 | Garage door opener and remote control # of remote/openers: <u>1</u> | | | |
| 27 | Garage door keyless entry | | | |
| 28 | Built in intercom system | | | |
| 29 | Doorbell | | | |
| 30 | Built in sound system | | | |
| 31 | | | | |
| | ELECTRICAL & TELECOMMUNICATIONS If you know of any problems EVER EXISTING with the following, check the "Yes" column: | | | |
| 32 | Electrical Service | | | |
| 33 | Aluminum wiring at the outlets (110) | | | |
| 34 | Solar panels | | | |
| 35 | Wind generators | | | |
| 36 | Electric Wiring or Panel | | | |
| 37 | | | | |

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

| F. | VENTILATION, AIR & HEAT - General Information Do you know of the following on the Property: If yes, provide the requested information in Comments | Yes | Age If Known | Comments |
|-----------|--|------------|---------------------|---|
| 1 | Furnace | | | |
| | a. Furnace Type | | | <input 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 | | | 1 |
| | c. Zoned | | | Location of zone 1: Location of zone 2: Location of zone 3: |
| 2 | Heating system (other than furnace) | | | |
| | a. Type/Fuel | | | |
| 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 (specify): |
| | b. Fireplace starter | | | <input checked="" type="checkbox"/> Switch <input type="checkbox"/> Remote |
| 4 | Free Standing Heating Stove | | | |
| | a. Fuel Source | | | <input type="checkbox"/> Wood <input type="checkbox"/> Pellet <input type="checkbox"/> Corn <input type="checkbox"/> Gas <input type="checkbox"/> Other (specify): |
| 5 | Date fireplace/wood stove, chimney/flue last cleaned: | | | <input type="checkbox"/> Do not know |
| 6 | Fuel tanks: If leased, provide the name and contact information of entity leased from in Comments | | | <input type="checkbox"/> Owned <input type="checkbox"/> Leased |
| 7 | Radiant heating system: | | | <input type="checkbox"/> Interior <input type="checkbox"/> Exterior |
| | a. Interior Type | | | |
| | b. Exterior Type | | | |
| 8 | Air Conditioning | | | |
| | a. Type | | | <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Central Air <input type="checkbox"/> Other (specify): |
| | b. Number of Units | | | 1 |
| | c. Zoned | | | Location of zone 1: Location of zone 2: Location of zone 3: |
| | VENTILATION, AIR & HEAT If you know of any problems NOW EXISTING with the following, check the "Yes" column: | Yes | Age If Known | Comments |
| 9 | Furnace | | | |
| 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 | | | | |

| G. | WATER - General Information: 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 | | | |
| | a. Number of Water Heaters | | 3 yrs | 1 |
| | b. Fuel Type | | | |
| | c. Capacity | | | |
| 2 | Water filter system | | | <input type="checkbox"/> Owned <input type="checkbox"/> Leased. If leased, provide the name and contact information of entity leased from: |
| 3 | Water softener | | | <input type="checkbox"/> Owned <input type="checkbox"/> Leased. If leased, provide the name and contact information of entity leased from: |
| 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 no: _____ |
| | 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 no: _____ |
| 6 | Well metered | | | |
| 7 | Well Pump | | | |
| | a. Brand name and 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 | | | |
| 11 | Supplemental water purchased in past 2 years | | | |
| | a. Name and contact information of entity from which supplemental water was purchased | | | |
| 12 | | | | |
| | WATER If you know of any problems NOW EXISTING with the following, check the "Yes" column: | Yes | Age If Known | Comments |
| 13 | Water heater(s) | | 3 yrs | |
| 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 | | | | |
| | WATER If you know of any problems EVER EXISTING with the following, check the "Yes" column: | Yes | Age If Known | Comments |
| 25 | Leaks, backups, or other 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 | | | |
| 30 | | | | |

| | |
|-----------|---|
| H. | SOURCE OF WATER & WATER SUPPLY Provide the following information regarding 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 provided. Well Permit #: _____ Drilling Records <input type="checkbox"/> Are <input type="checkbox"/> Are not provided. Shared Well Agreement <input type="checkbox"/> Yes <input type="checkbox"/> No The Water Provider for the Property can be contacted at: Name: <u>City of Loveland</u> Address: <u>500 E. 3rd Street</u> Web Site: <u>lovelandgov.org</u> Phone No.: <u>970-962-2000</u> <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]: 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. |

| I. | SEWER/SEPTIC - General Information: Do you know of the following on the Property: If yes, provide the requested information in Comments | Yes | Comments |
|-----------|--|------------|---|
| 1 | Public sanitary sewer service | | |
| | a. Name and contact information of public sanitary sewer service provider | | |
| | b. Date the sewer line was last scoped | | |
| 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 | | <input type="checkbox"/> Tank <input type="checkbox"/> Leach <input type="checkbox"/> Lagoon |
| | b. Date of issuance of latest Individual Use Permit | | |
| | c. Date of the latest inspection | | |
| | d. Date of the 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 | | |
| 5 | Gray water storage/use | | |
| 6 | | | |
| | SEWER/SEPTIC If you know of any problems EVER EXISTING with the following, check the "Yes" column: | Yes | Comments |
| 7 | Leaks, backups, or other similar problems with any portion of the sewage system or damage therefrom | | |
| 8 | Lift station (sewage ejector pump) | | |
| 9 | | | |

| J. | FLOODING AND DRAINAGE If you know of any problems EVER EXISTING with the following on the Property, check the "Yes" column: | Yes | Comments |
|-----------|--|------------|-----------------|
| 1 | Flooding | | |
| 2 | Drainage | | |
| 3 | Grading | | |
| 4 | Water intrusion into 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 | | | |
| | DRAINAGE AND RETENTION PONDS - Other Information Do you know of the following on the Property: | | |
| 7 | Drainage, retention ponds, dams, storm water detention basins, or other similar facilities | | |
| 8 | | | |

| K. | OTHER DISCLOSURES - IMPROVEMENTS If you know of any problems NOW EXISTING with the following, check the "Yes" column: | Yes | Comments |
|-----------|--|------------|-----------------|
| 1 | Included fixtures and equipment | | |
| 2 | Stains on carpet | | |
| 3 | Floors | | |
| 4 | | | |

II. GENERAL

| L. | USE, ZONING & LEGAL ISSUES If you know of any of the following EVER EXISTING , check the "Yes" column: | Yes | Comments |
|-----------|---|------------|-----------------|
| 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 | | |
| 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 | | |

Buyer initials _____

Seller initials jrb

| | | | |
|----|----------------------------------|--|--|
| 13 | Grandfathered conditions or uses | | |
| 14 | | | |

| M. | ACCESS & PARKING If you know of any of the following EVER EXISTING , check the "Yes" column: | Yes | Comments |
|-----------|---|------------|-----------------|
| 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 | | |
| 7 | Requirements for curb, gravel/paving, landscaping | | |
| 8 | Any limitations on parking or access due to size, number of vehicles, or type of vehicles in the past year | | |
| 9 | | | |

| N. | ENVIRONMENTAL CONDITIONS If you know of any of the following EVER EXISTING on any part of the Property, check the "Yes" column: | Yes | Comments |
|-----------|---|------------|-----------------|
| 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 | | |
| 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 soil on the Property | | |
| 8 | Mine shafts, tunnels, or abandoned wells on the Property | | |
| 9 | Within a governmentally designated geological hazard or sensitive areas | | |
| 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 | ✓ | 1 small dog |
| 16 | Other environmental problems, issues or concerns | | |
| 17 | Odors | | |
| 18 | | | |

| O. | RADON If you know of any of the following EVER EXISTING , check the "Yes" column: | Yes | Comments |
|----|--|-----|----------|
| 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. | | |
| 4 | | | |

| P. | COMMON INTEREST COMMUNITY - ASSOCIATION PROPERTY If you know of any of the following NOW EXISTING , check the "Yes" column: | Yes | Comments |
|----|--|-----|-----------------------------|
| 1 | Property is part of an owners' association | ✓ | Fairway Ridge Homeowners |
| 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 | | |
| | COMMON INTEREST COMMUNITY - ASSOCIATION PROPERTY If you know of any of the following EVER EXISTING , check the "Yes" column: | | |
| 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 | | | |
| | COMMON INTEREST COMMUNITY - ASSOCIATION PROPERTY - Other Information: Name of the Owner's Association(s) governing the Property: | | Contact Information: |
| 6 | Owner's Association #1: _____ | | |
| 7 | Owner's Association #2: _____ | | |
| 8 | Owner's Association #3: _____ | | |
| 9 | Owner's Association #4: _____ | | |

| Q. | METROPOLITAN DISTRICT If you know of any of the following NOW EXISTING , 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 | | |
| | METROPOLITAN DISTRICT - Information: | | |
| 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 | | |

| R. | GENERAL DISCLOSURES If you know of any of the following EVER EXISTING , 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. | | |
| 2 | Any property insurance claim submitted (whether paid or not) | | |
| 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 | | | |
| | GENERAL - Other Information: | | |
| 13 | U.S. Postal Service delivery available | | <input type="checkbox"/> Property <input type="checkbox"/> Post Office <input checked="" type="checkbox"/> Cluster Mailbox-Location and No: <u>In Custer</u> <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):

A neighbor said last week he thought the drainage from the gutter on the west side of the house wasn't sending the water to the street. I don't know anything about it. My water in the house is just fine.

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

Monna L. Buckley 2/16/26
Seller **Monna L. Buckley, Trustee** Date Completed

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 Seller's completion 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 Completed _____

Buyer initials _____ Seller initials mb

Buyer

Date Completed

Buyer initials _____

Seller initials ml