



SELLER'S PROPERTY CONDITION DISCLOSURE

This is a legally binding document. If not understood, consult an attorney.

SELLER'S AGENT – COMPLETE THIS SECTION ONLY!

SELLER NAME: GIAN LUCA SPAGNOLI ("Seller")

PROPERTY ADDRESS: 5039 West Ambermont Drive, Herriman, UT 84096 ("Property")

SELLER'S BROKERAGE: Berkshire Hathaway Utah Properties ("Seller's Brokerage")

NOTICE

Buyer and Seller are advised that the Seller's Brokerage and its agents are trained in the marketing of real estate. Neither the Seller's Brokerage nor its agents are trained or licensed to provide Buyer or Seller with professional advice regarding the physical condition of any property or regarding legal or tax matters. The Seller's Brokerage and its agents strongly recommend that in connection with any offer to acquire the Property, Buyer retain the professional services of legal and/or tax advisors, property inspectors, surveyors, and other professionals to satisfy Buyer as to any and all aspects of the physical and legal condition of the Property.

If the Buyer's agent/brokerage are providing this document to an unrepresented Seller, the Seller acknowledges and agrees that the Buyer's agent/brokerage represent solely the interests of the Buyer. The Seller acknowledges that the Buyer's agent/brokerage have advised the Seller that the Seller is entitled to be represented by a real estate agent that will represent the Seller exclusively. The Seller has however, elected not to be represented by a real estate agent in this transaction. The Seller further acknowledges and agrees that all actions of the Buyer's agent/brokerage, even those that assist the Seller in performing or completing any of the Seller's contractual or legal obligations, are intended for the benefit of the Buyer exclusively.

INSTRUCTIONS TO SELLER

SELLER IS OBLIGATED UNDER LAW AND UNDER REPC SECTION 7(a), REGARDLESS OF OCCUPANCY, TO DISCLOSE TO BUYERS DEFECTS IN THE PROPERTY AND FACTS KNOWN TO SELLER THAT MATERIALLY AND ADVERSELY AFFECT THE USE AND VALUE OF THE PROPERTY THAT CANNOT BE DISCOVERED BY A REASONABLE INSPECTION BY AN ORDINARY PRUDENT BUYER. This disclosure form is designed to assist Seller in complying with these disclosure requirements.

Please thoroughly disclose your actual knowledge regarding the condition of the Property. The Seller's Brokerage, other real estate agents, and buyers will rely on this disclosure form.

- Complete the remainder of this form.
- Please be specific when describing any past or present problems, malfunctions or defects (location, nature of problem, etc.).
- Use an additional addendum if necessary.
- If a question does not apply to your Property, CHECK THE "N/A" BOX NEXT TO THE QUESTION.

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1. OWNERSHIP	YES	NO	N/A
A. How long has the Seller owned the Property? <u>6</u> Years and _____ Months			
B. Does the Seller currently occupy the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If No, when did the Seller last occupy the Property? <u>06/06/2026</u> (Date)			<input type="checkbox"/>
OR			
<input type="checkbox"/> The Seller never occupied the Property			<input type="checkbox"/>
ii. If the Seller has occupied the Property, approximately how long did the Seller occupy the Property? <u>6</u> Years and _____ Months			<input type="checkbox"/>
C. Is the Property or any portion of it, currently being used as a rental?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", to your knowledge does that use comply with local zoning and restrictive covenants, if any?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. If "No", please explain: I just vacate the house moving to Boise.			<input type="checkbox"/>
ii. During the time the Seller has owned the Property, has the Property ever been rented or leased?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
iii. If "Yes" to your best knowledge, approximately how long was the property rented or leased? _____ Years and _____ Months			<input type="checkbox"/>

2. ADDITIONS/REMODELS/COMPLETIONS	YES	NO	N/A
A. With the exceptions of cosmetic upgrades to the Property (such as carpet, paint, wallpaper, etc.), have you remodeled, made any room additions, made structural modifications or other alterations or improvements to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such remodel/alteration work, were any permits issued, were any permits closed, and who completed the remodel/alteration work:			<input type="checkbox"/>
B. To your knowledge, did any former owners make any additions, structural changes, or alterations to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature of any such remodel/alteration work, were any permits issued, were any permits closed, and who completed the remodel/alteration work:			<input type="checkbox"/>
C. To your knowledge, did any property managers or tenants make additions, structural changes, or alterations to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature of any such remodel/alteration work, were any permits issued, were any permits closed, and who completed the remodel/alteration work:			<input type="checkbox"/>

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3. USE OF THE PROPERTY		YES	NO	N/A
A.	Are you aware of any past or present non-conforming or illegal uses of the Property (such as renting the Property in violation of local zoning laws, or renting the Property without a business license where such license is required)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such non-conforming or illegal use(s): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
B.	Are you aware of any existing or threatened legal action affecting the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such legal action: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
C.	Are you aware of any past or present violations of any local, state, or federal law or regulation, or of any restrictive covenants relating to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such violations: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
D.	To your knowledge, is any portion of the Property presently assessed, for property tax purposes, as "Greenbelt"?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

4. ROOF		YES	NO	N/A
A.	Are you aware of any past or present leaks in the roof?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any past or present leaks: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
B.	Other than leaks, are you aware of any past or present problems or defects with the roof, for example, structural issues, dry rot, moisture and/or ice damage, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any past or present problems or defects with the roof: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
C.	Has all or any portion of the roof been repaired or replaced during your ownership?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, when any roof repairs/replacements took place, the nature of any roof repairs/replacements, were any permits issued, were any permits closed, and who completed the roof repairs/replacements: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
D.	To your knowledge, are there any written warranties presently in place for the roof?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please attach copies of any warranties in your possession.			<input type="checkbox"/>

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5. NATURAL GAS, ELECTRICITY, PHONE, TV, INTERNET		YES	NO	N/A
A.	Are you aware of any past or present problems with utility service to the Property or with any of the utility service systems, for example, poor phone reception, internet, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any past or present problems with utility service or utility systems: 			<input type="checkbox"/>

6. CULINARY WATER		YES	NO	N/A
Culinary water service for the Property is provided by (check applicable box below):				
<input type="checkbox"/> Governmental Entity (city, town, water district, etc.).				
A.	Name of Governmental Entity water service provider: <u>City of Herriman</u>			
B.	Are you aware of any past or present problems with any water service provided to the Property by the Governmental Entity, i.e., water quality, inadequate or excessive water pressure, etc.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such problems: 			<input type="checkbox"/>
<input type="checkbox"/> Water Company.				
A.	Name of Water Company: <u>City of Herriman</u>			
B.	Contact information for Water Company: _____			
C.	Please attach a copy of any water share certificates in your possession.			
D.	To your knowledge, are water share assessments paid in full?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
E.	Are you aware of any past or present problems with any water service provided to the Property by the Water Company, i.e., water quality, inadequate or excessive water pressure, etc.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such problems: 			<input type="checkbox"/>
<input type="checkbox"/> Private Water Right (Well, Spring, ect.).				
A.	Is a well, spring, or other water source presently located on the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
B.	Do you share a well, spring, or other water source with any other person or entity? If "Yes," please attach a copy of any sharing agreement.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
C.	To your knowledge, what is the State Engineer's assigned water right number for your water right? _____ - _____			
D.	To your knowledge, is your water right represented by a contract with a water conservancy district or other district?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", what is the district name and what is the number of the contract? 			<input type="checkbox"/>
E.	Are you aware of any past or present problems with the water source or water system (for example, water quality, inadequate water pressure, faulty pump, well issues, etc.)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of any such problems: 			<input type="checkbox"/>

7. IRRIGATION/SECONDARY WATER		YES	NO	N/A
Irrigation/secondary water service for the Property is provided by (check applicable box below):				
<input type="checkbox"/> Governmental Entity (city, town, water district, etc.).				
A. Name of Governmental Entity water service provider: <u>City of Herriman</u>				
B. Are you aware of any past or present problems with any water service provided to the Property by the Governmental Entity, i.e., water quality, inadequate or excessive water pressure, etc.?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems:				<input type="checkbox"/>
<input type="checkbox"/> Water Company.				
A. Name of Water Company: <u>City of Herriman</u>				
B. Contact information for Water Company: _____				
C. Please attach a copy of any water share certificates in your possession.				
D. To your knowledge, are water share assessments paid in full?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
E. Are you aware of any past or present problems with any water service provided to the Property by the Water Company, i.e., water quality, inadequate or excessive water pressure, etc.?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems:				<input type="checkbox"/>
<input type="checkbox"/> Private Water Right (Well, Spring, ect.).				
A. Is a well, spring, or other water source presently located on the Property?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
B. Do you share a well, spring, or other water source with any other person or entity? If "Yes," please attach a copy of any sharing agreement.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
C. To your knowledge, what is the State Engineer's assigned water right number for your water right? _____ - _____				
D. To your knowledge, is your water right represented by a contract with a water conservancy district or other district?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", what is the district name and what is the number of the contract?				<input type="checkbox"/>
E. Are you aware of any past or present problems with the water source or water system (for example, water quality, inadequate water pressure, faulty pump, well issues, etc.)?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems:				<input type="checkbox"/>

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8. SEWER/SEPTIC TANK		YES	NO	N/A
A.	Sewer for the Property will be provided by (check applicable box): <input checked="" type="checkbox"/> Public Sewer <input type="checkbox"/> Septic/Holding Tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	If Public Sewer, who is the Public Sewer provider? <u>Wasatch Front Waste & Recycling</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Are you aware of any past or present problems with the sewer or septic/holding service or components, for example, broken sewer lines, consistently slow or clogged drains, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	To your knowledge, has the sewer lateral line or septic/holding tank been repaired or replaced?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of the repair or replacement, when it was repaired or replaced, and who performed the repair or replacement: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	If the Property is serviced by a septic/holding tank, to your knowledge, has the tank been inspected and/or pumped within the past five years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, how many times the septic/holding tank has been inspected and/or pumped within the past five years? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii.	Please provide the name, address, and phone number of the person and/or company that last serviced the septic/holding tank. (Name) _____ (Address) _____ (Phone) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F.	If the Property is serviced by a septic/holding tank, please describe the location of the septic tank and where it may be accessed to be inspected/pumped: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. HEATING/COOLING		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the heating or air-conditioning equipment, components or systems, for example, baseboard heating unit doesn't work, inadequate forced air from specific vent, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Has the evaporative cooling system been winterized? (water shut off, drained, etc.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", explain what has been done: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Are any of heating/cooling equipment in place on the Property not owned by Seller (i.e. leased or tenant owned)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe what equipment is not owned by Seller: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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10. EQUIPMENT		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the following: air purifier, audio system, central vacuum, computer network, fire sprinkling system, automatic garage door opener, humidifier, intercom, media system, satellite dish & components, security system, smart home system, smoke alarm, tv antenna, water heater, water purifier, water softener, range hood, attic vent fans, bathroom vent fans, or propane tanks?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems, for example, audio system doesn't work, central vacuum doesn't work, etc? 			<input type="checkbox"/>
B.	Is any of the equipment in place on the Property listed in Section 10 (A) not owned by Seller (i.e. leased or tenant owned) or being financed by Seller?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe which equipment is not owned or being financed by Seller: 			<input type="checkbox"/>

11. APPLIANCES		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the following: dishwasher, disposal, dryer, freezer, indoor grill, microwave, oven, range, refrigerator, trash compactor, ice machine, or washer?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems, for example, disposal doesn't work, etc.? 			<input type="checkbox"/>
B.	Are any of the appliances in place on the Property listed in Section 11 (A) not owned by Seller (i.e. leased or tenant owned)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe which appliances are not owned by Seller: 			<input type="checkbox"/>

12. FIREPLACES/STOVES		YES	NO	N/A
A.	Are you aware of any past or present problems with any of the following: fireplace insert, gas fireplace, gas fireplace starter, woodburning fireplace, potbelly/wood stove, or pellet stove?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such problems, for example, gas fireplace starter doesn't work, damper not working, etc.? 			<input type="checkbox"/>
B.	Are any of the fireplaces/stoves in place on the Property listed in Section 12 (A) not owned by Seller (i.e. leased or tenant owned)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe which equipment is not owned by Seller: 			<input type="checkbox"/>

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13. INTERIOR FEATURES		YES	NO	N/A
A. Are you aware of any past or present problems with any of the interior features, including but not limited to, ceiling fans, dumb waiter, elevator, flooring (stone, marble, hardwood, etc.), jetted bathtub(s), indoor pool, spa/hot tub, sauna, skylights, steam room/shower, or wet bar?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems, for example, jetted bathtub doesn't work, skylights leak, etc.?				<input type="checkbox"/>
B. Are any of the interior features in place on the Property not owned by Seller (i.e. leased or tenant owned)?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe which interior features are not owned by Seller:				<input type="checkbox"/>

14. EXTERIOR & EXTERIOR FEATURES		YES	NO	N/A
A. Are you aware of any past or present problems with any of the exterior features, including but not limited to, gas barbeque, propane tank(s), heated driveway or walkway, lawn sprinkler system, pool, spa/hot tub, roof heat tape, or rain gutters?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe, to your knowledge, the nature of any such problems, for example, spa/hot tub leaks, heated driveway only works on portion of driveway, etc.:				<input type="checkbox"/>
B. With the exception of regular maintenance of the exterior surfaces of the Property (painting, staining, etc.), are you aware of any past or present problems with any portion of the exterior, for example, moisture damage behind stucco, etc?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes" please describe, to your knowledge, the nature of any such problems:				<input type="checkbox"/>
C. Has the outdoor sprinkler system been winterized? (water shut off, pipes drained, etc.)		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe what has been done:				<input type="checkbox"/>
D. Are any of the exterior features not owned by Seller (i.e. leased or tenant owned)?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i. If "Yes", please describe which exterior features are not owned by Seller:				<input type="checkbox"/>

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15. TERMITES/DRY ROT/PESTS		YES	NO	N/A
A.	Are you aware of any past or present problems with termites, dry rot, rodents, or pests on or affecting the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any such problems: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
B.	Are you aware of any damage to the Property caused by termites, dry rot, rodents, or pests?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes" please describe, to your knowledge, the nature and location of any such damage, and any efforts to mitigate such damage: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
C.	To your knowledge, are there any written warranties or other termite or pest control coverage presently in place for the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes" please attach any copies of such warranties in your possession.			<input type="checkbox"/>

16. STRUCTURAL ITEMS & SOILS		YES	NO	N/A
A.	Are you aware of any settlement or heaving of soil on the Property or on any adjoining Property (collapsible or expansive soils, poorly compacted fill)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any settlement or heaving of soil: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
B.	Are you aware of any sliding or earth movement on the Property or on any adjoining Property (landslides, falling rocks, debris or mud flows)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any such shifting, problems, etc: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
C.	Are you aware of any past or present movement, shifting, deterioration, or other problems with the walls or foundation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any such shifting, problems, etc: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
D.	To your knowledge, does any portion of the Property contain any subsurface debris that has been buried, covered or abandoned, including, but not limited to, any discarded or abandoned construction materials, concrete, footings or foundations, underground tanks, trash, etc?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe the nature and location of such subsurface debris: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
E.	Please describe, to your knowledge, any action taken to repair or mitigate any of the issues described in 16A through 16D: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>

F. Are you aware of any geologic, soils, or engineering reports that have been prepared for the Property?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please attach a copy of any such reports in your possession.				<input type="checkbox"/>
17. BOUNDARIES & EASEMENTS		YES	NO	N/A
A. Do you know if anything on your Property (such as a fence, deck, or any other improvement) encroaches (extends) onto any adjoining property?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature and approximate location of any such encroachment:				<input type="checkbox"/>
<div style="border: 1px solid black; height: 40px;"></div>				
B. Do you know if anything on any adjoining property (such as a fence, deck, or any other improvements) encroaches onto your Property?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature and approximate location of any such encroachment:				<input type="checkbox"/>
<div style="border: 1px solid black; height: 40px;"></div>				
C. Are you aware of any boundary disputes or conflicts involving your Property and any adjoining property or properties?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes" please describe, to your knowledge, the nature and location of any such boundary disputes or conflicts:				<input type="checkbox"/>
<div style="border: 1px solid black; height: 40px;"></div>				
D. Are you aware of any unrecorded easements affecting the Property?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes" please describe, to your knowledge, the nature and approximate location of any such easement:				<input type="checkbox"/>
<div style="border: 1px solid black; height: 40px;"></div>				

18. ELECTRICAL		YES	NO	N/A
A. Are you aware of any past or present problems with any electrical switches, outlets, and/or any portion of the electrical system?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature of any such problems:				<input type="checkbox"/>
<div style="border: 1px solid black; height: 40px;"></div>				

19. MOLD		YES	NO	N/A
A. With the exception of any occasional accumulation of mold and mildew in bathroom shower, tub and sink areas, are you aware of any past or present mold on walls, ceilings, floors, or any other interior portion of the Property?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the nature of any such mold:				<input type="checkbox"/>
<div style="border: 1px solid black; height: 40px;"></div>				
B. Have you had the Property inspected for the existence of any mold?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i. If "Yes", please describe, to your knowledge, the results of the inspection, and attach copies of any inspection reports in your possession:				<input type="checkbox"/>
<div style="border: 1px solid black; height: 40px;"></div>				

20. OTHER MOISTURE CONDITIONS		YES	NO	N/A
A.	In reference to the basement and/or crawlspace, are you aware of any past or present water leakage, water accumulation or dampness?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any past or present water leakage, water accumulation or dampness: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
B.	Are you aware of any past or present water or moisture-related damage caused by: flooding; lot drainage; moisture seepage or condensation; sewer overflow/backup; leaking or broken pipes, pipe fittings, or plumbing fixtures; or leaking appliances, fixtures, or equipment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any such water or moisture-related damage: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
C.	To your knowledge, has the main water line been repaired or replaced?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature of the repair or replacement, when the main water line was repaired or replaced, and who performed the repair or replacement: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
D.	Please describe, to your knowledge, any attempts to repair any moisture-related damage and/or to prevent any recurrence of water and moisture-related problems on the Property: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
E.	Are you aware of any wetlands located on the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and location of any wetlands on the Property: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
F.	Are you aware of any attempts to mitigate any wetland issues through the Army Corps of Engineers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>
G.	To your knowledge, is the Property located in a floodplain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
H.	To your knowledge, is any portion of the Property subject to standing water or flooding?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			<input type="checkbox"/>

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21. HAZARDOUS CONDITIONS	YES	NO	N/A
<p>With the exception of methamphetamines (see Section 21.C below), are you aware of any past or present hazardous conditions, substances, or materials on the Property, such as asbestos, lead-based paint, methane gas, radon gas, radioactive or toxic materials, or ureaformaldehyde foam insulation, buried storage tanks and lines?</p> <p>A. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p>i. If "Yes", please describe, to your knowledge, the nature of any such hazardous conditions:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
<p>B. Please describe, to your knowledge, any attempts to mitigate any such hazardous condition(s):</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
<p>C. To your knowledge, is the Property currently contaminated from the use, storing, or manufacturing of methamphetamines?</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A</p>			

22. HOMEOWNERS ASSOCIATION	YES	NO	N/A
<p>A. Is the Property part of a condominium or other homeowner's association (HOA)?</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p>i. If "Yes", to your knowledge, is the Property part of multiple HOAs?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>			
<p>B. Please describe the HOA payment amount, frequency, and what utilities and/or services are included:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
<p>C. Does the HOA(s) levy dues or assessments for maintenance of common areas and/or other common expenses?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p>			
<p>D. Some HOAs, special improvement districts and/or other specially planned areas, under their governing documents, charge a fee that is due to such entity as a result of the transfer of title to the Property from Seller to Buyer. Such change of ownership fees are sometimes referred to as transfer fees, community enhancement fees, HOA reinvestment fees, etc. Regardless of what the change of ownership fee is titled, to your knowledge, does the HOA charge such a fee?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p>i. If "Yes", please describe, to your knowledge, the HOA change of ownership amount: _____</p>			
<p>E. For questions regarding the HOA(s), including past, present or future dues or assessments, or regarding financial statements, bylaws, HOA meetings and minutes, information may be obtained from the following:</p> <p>(Name) _____ (Phone) _____</p> <p>(Website) _____ (Email) _____</p>			
<p>F. Are you aware if the HOA(s) has been involved any past or ongoing lawsuits or litigation?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p>i. If "Yes", please describe, to your knowledge, any information regarding the timing and nature of the lawsuit(s):</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
<p>G. For information about The Office of the Homeowner's Association Ombudsman, Buyer is advised to go to https://commerce.utah.gov/hoa/</p>			

23. PUBLIC INFRASTRUCTURE DISTRICT	YES	NO	N/A
<p>A. Are you aware if the Property is located within a public infrastructure district (PID)?</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A</p>			
<p>B. Are you aware of any ongoing property tax obligations because of the PID's issuance of a limited tax bond?</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A</p> <p>i. If "Yes", please describe, to your knowledge, the nature and amount owed on an annual basis:</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			

24. UNPAID ASSESSMENTS		YES	NO	N/A
A.	Are you aware of any HOA, municipal, special improvement district, PID or other assessments that are presently owing against the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and amount owed:			<input type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>				
B.	Are you aware of any potential HOA, municipal, special improvement district or PID assessments that may be pending approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the pending special assessments that have not yet been approved:			<input type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>				
C.	Are you aware of any HOA, municipal, special improvement district or PID assessments that have been approved but not yet levied against the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please describe, to your knowledge, the nature and amount of any such approved, but not yet levied, assessments:			<input type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>				

25. INSURANCE		YES	NO	N/A
A.	During your ownership of the Property, have you filed any insurance claims based on loss or damage to the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
B.	If the Property is part of a condominium or other homeowner's association, do you know if the HOA has filed any insurance claims for loss or damage to any portion of the development?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the nature of any such claims:			<input type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>				

26. ENERGY EFFICIENCY		YES	NO	N/A
A.	During your ownership of the Property, have you had an independent energy efficiency assessment of the Property conducted by an individual or entity that specializes in such assessments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", please attach a copy of the assessment if available.			<input type="checkbox"/>
B.	During your ownership of the Property have any energy efficiency improvements (such as added insulation, sealing air leaks, efficient lighting, efficient windows, or efficient heating or cooling systems) been made to the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
i.	If "Yes", please describe, to your knowledge, the general nature of the improvements:			<input type="checkbox"/>
<div style="border: 1px solid black; height: 20px;"></div>				

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27. SOLAR PANEL SYSTEM		YES	NO	N/A
A.	To your knowledge, does the Property have a Solar Panel System ("System") that supplies power to the Property? If "Yes", please respond to Sections 27 (B) through (H) below as applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
B.	To your knowledge, when was the System installed? <u>2014</u> (year)			<input type="checkbox"/>
C.	The contact information for the solar company is as follows: (Name) <u>Enphase Energy</u> (Address) _____ (Phone) <u>8777974743</u> (Website) <u>https://enphase.com/</u>			<input type="checkbox"/>
D.	The financial status of the System is (check applicable box): <input checked="" type="checkbox"/> Owned free and clear <input type="checkbox"/> Subject to an existing lease agreement ("Lease") <input type="checkbox"/> Subject to a power purchase agreement ("PPA") <input type="checkbox"/> Financed by an unpaid loan ("System Financing")			<input type="checkbox"/>
E.	If subject to a Lease, PPA, or System Financing please attach a copy of the applicable documentation.			<input type="checkbox"/>
F.	If subject to a Lease, PPA or System Financing, the contact information for the company servicing the financing is as follows: (Name) _____ (Phone) _____ (Address) _____			<input type="checkbox"/>
G.	Are you aware of any past or present problems with the System and its individual components (including, but not limited to, solar panels, inverters, charge controllers, batteries, battery charge controller, backup generator, solar array disconnect, power meter, and/or power converter and cables)? If "Yes," please describe the nature of the problem(s), including when you experienced such problem, the component(s) affected, any information you received, attempt(s) made to remediate the problem, and whether, to your knowledge, the problem has been resolved: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
H.	Please provide any information in your possession on any maintenance or repairs that have been completed on the System, including dates, the company performing any services, any components that have been replaced, and a brief description of any work performed. _____			<input type="checkbox"/>

28. ALTERNATE/ADDITIONAL POWER SYSTEMS (OTHER THAN SOLAR)		YES	NO	N/A
A.	To your knowledge, does the Property have an alternate/additional power system (other than solar) that supplies power to the Property or power company such as wind or generator?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i.	If "Yes", what type(s) of alternate power source(s) do you have? <input type="checkbox"/> Wind <input type="checkbox"/> Generator <input type="checkbox"/> Other _____			<input type="checkbox"/>
B.	Are you aware of any past or present problems with the alternate/additional power system(s) and its individual components? If "Yes," please describe the nature of the problem(s), including when you experienced such problem, the component(s) affected, any information you received, attempt(s) made to remediate the problem, and whether, to your knowledge, the problem has been resolved: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. Is the equipment for the alternate/additional power system(s) leased or financed? <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D. For questions regarding the alternate/additional power system(s), information may be obtained from the following: (Name) _____ (Phone) _____ (Address) _____			<input checked="" type="checkbox"/>
E. A copy of the documentation for the alternate/additional power system lease, power purchase agreement, or financing, if applicable, is attached.			

29. ADDITIONAL DISCLOSURES

A. Please disclose any additional material information that you are aware of and/or please clarify any disclosures made above:

For the solar system:

Added a new electronic control unit to be able on your phone to check the performance of the system and the performance of the solar panel to be able to see eventual malfunctions or performance issue.

Solar Microinverter system has still an active warranty until 2039. Gateway until April 2027.

System maintained by DWELLTEK LLC company in Utah
Phone: 866-232-8314
967 Roundup Way, Oakley, Utah. 84055

SQUARE FOOTAGE/ACREAGE

The source(s) of the square footage figures used in marketing of the house and related improvements at the Property is/are the following (check applicable box):

County Records Appraisal Building Plans Other (explain) Previous MLS

County Records are not intended to be used by Buyer as the primary source of information regarding the square footage of the house and related improvements. Seller represents that any figures provided by Seller in any documents regarding the square footage or acreage of the Property are not based on any personal measurement by Seller. If the square footage or acreage of the Property is of material concern to Buyer, Buyer is advised to verify the square footage or acreage through any independent sources or means deemed appropriate by Buyer. BUYER IS ADVISED NOT TO RELY ON SELLER, THE SELLER'S BROKERAGE, OR ANY AGENTS OF THE SELLER'S BROKERAGE FOR A DETERMINATION REGARDING THE SQUARE FOOTAGE OR ACREAGE OF THE PROPERTY.

FOREIGN INVESTMENT IN REAL PROPERTY TAX ACT ("FIRPTA")

The sale or other disposition of a U.S. real property interest by a foreign person is subject to income tax withholding under FIRPTA. A "foreign person" may include a non-resident alien individual, foreign corporation, foreign partnership, foreign trust and foreign estate. If FIRPTA applies to you as the Seller of the Property described in this disclosure form, the Buyer or other qualified substitute may be legally required to withhold a substantial percentage of the total purchase price for the Property, as required by law, at closing and remit that amount to the IRS. Seller warrants and represents to Buyer that Seller IS NOT a "foreign person" as defined in the Internal Revenue Code and its associated regulations, unless checked below.

Seller warrants and represents to Buyer that Seller IS a "foreign person" as defined in the Internal Revenue Code and its associated regulations.

VERIFICATION BY SELLER

Seller verifies that Seller has prepared this disclosure form and that the information contained herein is accurate and complete to the best of Seller's actual knowledge as of the date signed by Seller below. SELLER UNDERSTANDS AND AGREES THAT SELLER WILL UPDATE THIS DISCLOSURE FORM IF ANY INFORMATION CONTAINED HEREIN BECOMES INACCURATE OR INCORRECT IN ANY WAY. Seller authorizes the Seller's Brokerage to provide copies of this disclosure form to prospective buyers, and to real estate brokers and agents. This disclosure form is not a warranty of any kind. If Buyer and Seller enter into a sales contract for the Property, and such sales contract includes, excludes, or warrants the condition of any item referenced herein, then to the extent there is a conflict between the sales contract and any representations contained herein, the terms of the sales contract shall control.

Seller:  dotloop verified 06/10/26 8:16 AM MDT XBMX-5310-JOQH-U1PD Seller:

ACKNOWLEDGEMENT OF RECEIPT BY BUYER

Buyer's signature below acknowledges Buyer's receipt of a copy of this disclosure form.

BUYER IS ADVISED NOT TO RELY ON THE SELLER'S BROKERAGE, OR ON ANY AGENTS OF THE SELLER'S BROKERAGE, FOR A DETERMINATION REGARDING THE PHYSICAL OR LEGAL CONDITION OF THE PROPERTY, including, but not limited to, legal uses of the Property, the condition of any appliances, heating/cooling equipment and systems, plumbing and electrical fixtures and equipment, moisture or other problems in the roof or foundation, sewer problems, the availability and location of utilities, the exact square footage or acreage of the Property, or the location of property lines.

Buyer: Buyer:

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