



**SULLIVAN
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SELLER'S PROPERTY DISCLOSURE STATEMENT RESIDENTIAL
(To Be Completed by Seller)

DATE: 02/28/2024

SELLER: GARNIK, VICTOR V & CHEYENNE M

PROPERTY ADDRESS: 2903 WESTLAKE DR SEDALIA, MO 65301

SELLER'S INFORMATION

This statement is a disclosure of the condition of the above described Property known by the SELLER on the date that it is signed. It is not a warranty of any kind by the SELLER(S) or any real estate licensees involved in this transaction, and should not be accepted as a substitute for any inspections or warranties the BUYER(S) may wish to obtain. The information provided in this statement is the representation of the SELLER and not the representation of any real estate licensees involved in the transaction. The information contained herein is intended to be part of any Contract between the SELLER(S) and BUYER(S).

SELLER discloses the following information with the knowledge that even though this is not a warrant, prospective BUYER(S) may rely on the information contained herein in deciding whether, and on what terms, to purchase the Property. SELLER hereby authorizes any real estate licensee involved in this transaction to provide a copy of this SELLER'S Property Disclosure Statement to any person or entity in connection with any actual or possible sale of the Property.

Statutory Disclosures:

1. **Methamphetamine.** Are you aware if this property is or was used as a site for methamphetamine production or the place of residence of a person convicted of a crime involving methamphetamine or a derivative controlled substance related thereto?
 Yes NO
2. **Lead-Based Paint:** Does this property included a residential dwelling built prior to 1978? Yes NO
a. IF "Yes" a completed lead-based paint disclosure should be attached.
3. **Waste Disposal site or landfill:** Are you aware of a solid waste disposal site or demolition landfill on the property?
 Yes NO
4. **Radioactive or hazardous materials:** Have you ever received a report stating that the property was or is previously contaminated with radioactive material or other hazardous items: Yes NO

Part I. - OCCUPANCY OF THE PROPERTY.

1. Approximate age of the Property: built in 2018
 2. Approximate date that SELLER acquired the Property: 2018
 3. Does SELLER currently occupy the Property? YES NO.
 If NO, how long has it been since SELLER has occupied the Property 2 months

Part II. Indicate the condition of the following items by marking the appropriate box. Check only one box.

SECTION A. - APPLIANCES, EQUIPMENT AND FIXTURES:

	Not Included	Working	Not Working	Unknown
1. Air conditioning-central system		<input checked="" type="checkbox"/>		
2. Air conditioning - window units #	<input checked="" type="checkbox"/>			
3. Air purifier system	<input checked="" type="checkbox"/>			
4. Attic fan	<input checked="" type="checkbox"/>			
5. Cable television wiring/jacks	<input checked="" type="checkbox"/>			
6. Ceiling fan(s) #	<input checked="" type="checkbox"/>			
7. Central vacuum system and attachments	<input checked="" type="checkbox"/>			
8. Clothes dryer		<input checked="" type="checkbox"/>		
9. Clothes washer		<input checked="" type="checkbox"/>		
10. Dishwasher		<input checked="" type="checkbox"/>		
11. Disposal		<input checked="" type="checkbox"/>		
12. Doorbell	<input checked="" type="checkbox"/>			
13. Exhaust Fans-Bathrooms		<input checked="" type="checkbox"/>		
14. Fireplace/fireplace insert	<input checked="" type="checkbox"/>			
15. Fireplace gas logs	<input checked="" type="checkbox"/>			
16. Fireplace gas starter	<input checked="" type="checkbox"/>			
17. Fireplace wood burning stove	<input checked="" type="checkbox"/>			
18. Garage door opener(s) # <u>1</u>		<input checked="" type="checkbox"/>		
19. Gas grill	<input checked="" type="checkbox"/>			
20. Heating system <u>Gas</u> <input checked="" type="checkbox"/> <u>Electric</u> <input type="checkbox"/> <u>Hot Water</u>		<input checked="" type="checkbox"/>		
21. Heat pump		<input checked="" type="checkbox"/>		
22. Hot tub-whirlpool				
23. Humidifier	<input checked="" type="checkbox"/>			
24. Intercom, sound system, speakers	<input checked="" type="checkbox"/>			
25. Microwave oven		<input checked="" type="checkbox"/>		
26. Oven <input checked="" type="checkbox"/> <u>Electric</u> <input type="checkbox"/> <u>Gas</u>		<input checked="" type="checkbox"/>		
27. Propane tank <input type="checkbox"/> <u>Leased</u> <input type="checkbox"/> <u>Owned</u>	<input checked="" type="checkbox"/>			
28. Range <input checked="" type="checkbox"/> <u>Electric</u> <input type="checkbox"/> <u>Gas</u>		<input checked="" type="checkbox"/>		
29. Range ventilation system		<input checked="" type="checkbox"/>		
30. Refrigerator # <u>1</u>		<input checked="" type="checkbox"/>		
31. Sauna/spa <input type="checkbox"/> <u>Steam</u> <input type="checkbox"/> <u>Dry</u>	<input checked="" type="checkbox"/>			
32. Security system <input type="checkbox"/> <u>Owned</u> <input type="checkbox"/> <u>Leased</u>		<input checked="" type="checkbox"/>		
33. Smoke alarms/detectors# <u>5</u>		<input checked="" type="checkbox"/>		
34. Sprinkler system	<input checked="" type="checkbox"/>			
35. Sump Pump	<input checked="" type="checkbox"/>			
36. Swimming Pool	<input checked="" type="checkbox"/>			
37. Telephone wiring/jacks	<input checked="" type="checkbox"/>			
38. Television antenna/receiver/sat dish <input type="checkbox"/> <u>Own</u> <input type="checkbox"/> <u>Leased</u>	<input checked="" type="checkbox"/>			
39. Trash compactor	<input checked="" type="checkbox"/>			
40. Water heater		<input checked="" type="checkbox"/>		
41. Water purified/softener <input type="checkbox"/> <u>Owned</u> <input type="checkbox"/> <u>Leased</u>	<input checked="" type="checkbox"/>			
42. Other _____				
43. Other _____				

PART III. Indicate the condition of the following items by marking the appropriate box and completing the appropriate blanks.

A. STRUCTURAL CONDITIONS:

1. What is the approximate age of the roof (if known)? 6 years. Type of roof: Shingle
2. Have there been any leaking or other problems with the roof, flashing or rain gutters? YES NO
3. Have there been any repairs to the roof, flashing or rain gutters? YES NO
If so, please provide the date of the repairs _____
4. Has there been any roof replacement? YES NO
5. How many layers of roofing materials are currently on the roof (if known)? 1
6. Have you made any homeowners' insurance claims on the Property? YES NO
If so, were all the repairs completed? YES NO
7. Has there ever been leakage/seepage in the basement or crawl space? YES NO
8. Has there been any damage to the Property due to wind, fire or flood? YES NO
9. Are there any structural problems with the Property? YES NO
10. Is any exterior wall covering of the structure covered with synthetic stucco? YES NO
11. Is there any damage to the chimney or fireplace? YES NO
12. Is there any exposed wiring presently in any structures on the Property? YES NO
13. Are there any windows or doors that leak or have broken thermopane seals? YES NO
14. Have you ever experienced or are you aware of any:
Movement, shifting, deterioration or other problems with crawl space, foundations, slab or walls? YES NO
Cracks or flaws in the basement floor, ceilings, concrete slab, crawl space, foundations or garage? YES NO
Corrective action to remedy these structural conditions, including but not limited to bracing or piercing? YES NO
Water leakage or dampness in the Property, crawl space or basement? YES NO
Dry rot, wood rot or similar conditions on the wood of the Property? YES NO
Problems with decks, driveways, fences, patios or retaining walls on the Property? YES NO
15. Do you have any knowledge of any damage to the Property caused by termites or wood infestation? YES NO
If so, is the Property currently under warranty? YES NO
If so, please name the company here: _____
16. Have you had any termite/pest control treatments for the Property? YES NO
If so, please name the company and year treated here: _____ - _____
17. Has the ground been pre-treated for termites? YES NO
18. If you have answered "YES" to any of the questions in A(1) through (17), please attach documentation to describe the date, extent and location of the problem and name of the person or entity responsible for repairing the problem. In addition, please attach, if available, any inspection reports, repair estimates and receipts. Explain in detail here:

19. Additional Comments:

B. LAND (SOILS; DRAINAGE; BOUNDARIES):

1. Is the Property or any portion of the Property located in a flood zone, wetlands area or proposed to be located in such by the Federal Emergency Management Agency (FEMA) which requires flood insurance? YES NO
2. Are you aware of any drainage or flood problems on the Property or adjacent properties? YES NO
3. Have any neighbors complained that the Property causes drainage problems? YES NO
4. Has the Property had a stake survey? YES NO
If YES, please attach a copy of the stake survey.
5. Are the boundaries of the Property marked in any way? YES NO
6. Do you have an Improvement Location Certificate (ILC) for the Property? YES NO
If YES, attach a copy of the Improvement Location Certificate (ILC).
7. Is there fencing on the Property? YES NO
If YES,, does the fencing belong to the Property? YES NO

8. Are you aware of encroachments, boundary line disputes or non-utility easements affecting the Property? YES NO
9. Any property features shared in common with adjoining landowners, i.e. walls, fences, roads, driveways? YES NO
If YES, are you responsible for maintenance of any such shared features? YES NO
10. Are you aware of any expansive soil, fill dirt, sliding, settling, earth movement, upheaval or earth stability problems that have occurred on the Property or in the immediate vicinity of the Property? YES NO
11. Are you aware of any diseased, dead or damaged trees or shrubs on the Property? YES NO
12. If you have answered "YES" to any of the questions in B (1) through (12), attach any documentation and explain here:
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C. PLUMBING AND WATER SYSTEMS:

1. What is the drinking water source on the Property? Public Water Private Water Well Cistern Other
If well water, please state: Type _____ Depth _____ Diameter _____
2. If the drinking water source is a well, has the water been tested and, if so, what was the date and result of that test? _____
3. Does the Property have any sewage facilities on or connected to it? YES NO
If YES, please specify: Public Sewer Private Sewer Septic System Other _____
4. If there are sewage facilities on or connected to the Property, when were they last serviced? _____
5. Are you aware of any problems relating to the plumbing, sewage or water systems on the Property? YES NO
If YES, please explain: _____
-

6. Additional Comments:

D. ELECTRICAL/GAS/HEATING AND COOLING SYSTEMS:

1. Is there electric service connected to the Property? YES NO
If YES, is there a meter? YES NO
If NO, what is the distance to the nearest electrical service? _____
2. What type of material is used in the electrical wiring (if known)? Copper Aluminum Unknown
3. What type of electrical panels exist on the Property (if known)? Breaker Fuse Unknown

Please specify the location of the electrical panels here:

3rd bedroom + Shop by Garage Door

4. Does the Property have heating systems? YES NO
 Electric Fuel Oil Natural Gas Heat Pump Propane Other _____
If YES, please provide the name, age and location of the unit along with the date the unit was last service and by whom here: _____
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5. Does the Property have air conditioning? YES NO
 Central Electric Central Gas Heat Pump Window Unit(s)
If YES, please provide the name, age and location of the unit along with the date the unit was last serviced and by whom here: _____
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6. Does the Property have a water heater? YES NO
 Electric Gas Solar
If YES, please provide the name, age and location of the unit along with the date the unit was last serviced and by whom here: _____
-

7. Are you aware of any problems relating to the electrical, gas and heating and cooling systems on the Property? YES NO
If YES, please explain: _____

8. Additional Comments:

E. HAZARDOUS CONDITIONS:

- 1. Are you aware of any underground storage tanks on or near this Property? YES NO
- 2. Are you aware of any previous or current existence of hazardous conditions (e.g., storage tanks, oil tanks, oil spills, tires, batteries or other hazardous conditions)? YES NO
- 3. Are you in possession of any previous environmental reports (e.g., Phase 1 Environmental Reports)? YES NO
If YES, please attach a copy of the environmental reports.
- 4. Are you aware of any previous disposal of any hazardous waste products, chemicals, polychlorinated biphenyl's (PCBs), hydraulic fluids, solvents, paints, illegal or other drugs or insulation on the Property or adjacent property? YES NO
- 5. Are you aware of any other environment matters (i.e. discolored soil, vegetation, oil sheets, etc)? YES NO
- 6. Are you aware of any existing hazardous conditions on the Property or adjacent properties (i.e methane gas, radon gas, mold, radioactive material, landfill or toxic materials)? YES NO
- 7. Are you aware of any methamphetamine or other controlled substances being manufactured, stored or used on the Property? YES NO
- 8. Are you aware of natural gas/oil wells, lines or storage facilities on the Property or adjacent properties? YES NO
- 9. Are you aware of any other environmental conditions on the Property or adjacent properties? YES NO
- 10. Have any other environmental inspections or tests been conducted on the Property? YES NO
- 11. If you have answered "YES" to any of the questions in E(1) through (10), attach any documentation and explain here:

12. Additional Comments:

F. NEIGHBORHOOD INFORMATION AND HOMEOWNERS' ASSOCIATIONS:

- 1. Are you aware of any current/pending assessments, bonds or special taxes that apply to the Property? YES NO
- 2. Is the property subject to conditions, covenants and restrictions of a homeowners' association or common interest community or subdivision restrictions? YES NO
- 3. Are you aware of any violations of such conditions, covenants or restrictions on the Property? YES NO
- 4. Does the homeowners' association impose a transfer fee upon the sale of the Property? YES NO
- 5. Are you aware of any defect, damage, proposed change or problem with any common elements or area? YES NO
- 6. Are you aware of any condition or claim which may result in a change to assessments or fees? YES NO
- 7. Are streets or roads privately owned? YES NO
- 8. Is the Property in a historic, conservation or special review district that requires any alterations or improvements to the Property to be approved by a board or commission? YES NO
- 9. Is the Property subject to a tax abatement? YES NO
- 10. Is the Property subject to a right of first refusal? YES NO
- 11. If you have answered "YES" to any of the questions F(1) through (10), attach any documentation and explain here:

12. If you are required to pay assessments, dues, fees or any other periodic charges to a homeowners' association or common interest community, please specify here the amount and occurrence of those payments:

\$125 Armada

13. Additional Comments:

G. OTHER MATTERS: Are you aware of..

- 1. Any violation of zoning, setbacks or restrictions, or of a non-conforming use? YES NO
- 2. Any violation of laws or regulations affecting the Property? YES NO
- 3. Any existing or threatened legal action pertaining to the Property? YES NO
- 4. Any litigation or settlement pertaining to the Property? YES NO
- 5. Any other conditions that may materially and adversely affect the value or desirability of the Property? YES NO
- 6. Any pending foreclosure or potential short sale affecting the Property? YES NO
- 7. Any burial grounds on the Property? YES NO
- 8. Any other condition that may prevent you from completing the sale of the Property? YES NO
- 9. Any leases on the Property? YES NO

If YES, attach a copy of the lease agreement and describe the tenant's rights and obligations for vacating the Property:

- 10. Any easements or leases on the Property regarding wind energy? YES NO
 - 11. Any public authority contemplating condemnation proceedings? YES NO
 - 12. Any current or planned government rule limiting future use of the Property? YES NO
 - 13. Any government plans that could lead to special benefit assessments against the Property? YES NO
 - 14. Any interest reserved by a previous owner or government action to benefit any other property? YES NO
 - 15. Any unrecorded interests affecting the Property? YES NO
 - 16. Anything that would interfere in passing clear title to the Buyer? YES NO
 - 17. Any general stains or pet stains to the carpet, flooring or sub-flooring? YES NO
 - 18. If you have answered "YES" to any of the questions in G(1) through (17), attach any documentation and explain here:
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19. Additional Comments:

H. MISCELLANEOUS MATTERS:

- 1. Are you aware of any other facts or condition affecting the habitability, use or value of the Property? YES NO
 - 2. If YES, please explain here:
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The information contained in this SELLER'S Property Disclosure Statement has been furnished by the SELLER(S), who certifies to the truth hereof to best of SELLER'S belief and knowledge, as of the date signed by the SELLER(S). Any substantive changes will be disclosed by the SELLER(S) to the BUYER(S) prior to closing.

CAREFULLY READ THE TERMS HEREOF BEFORE SIGNING. WHEN SIGNED BY ALL PARTIES, THIS DOCUMENT BECOMES PART OF A LEGALLY BINDING CONTRACT. IF NOT UNDERSTOOD, CONSULT AN ATTORNEY BEFORE SIGNING.

Victor Fornith _____ 2/29/24
SELLER Date

Cheyenne Garnett _____ 2/29/24
SELLER Date

BUYER'S ACKNOWLEDGMENT AND AGREEMENT

1. As the BUYER, I acknowledge that I have read and received a signed copy of the Seller's Property Disclosure Statement from the SELLER, the SELLER'S agent or the transaction broker involved in this transaction.
2. I have carefully inspected the property. Subject to any inspections allowed under my contract with SELLER, I agree to purchase the property in its present condition only, without warranties or guarantees of any kind by SELLER or any real estate licensee concerning the condition or value of the property.
3. I agree to verify any of the above information that is important to me by an independent investigation of my own. I have been advised to have the property examined by professional inspectors.
4. I acknowledge that neither SELLER nor any real estate licensee involved in this transaction is an expert at detecting or repairing physical defects in the property. I state that no important representations of the SELLER or any real estate licensees involved in this transaction concerning the condition of the Property are being relied upon by me, except as disclosed above or as fully set forth as follows and signed by them in this document:

BUYER Date

BUYER Date