

APPENDIX A. RESIDENTIAL PROPERTY CONDITION DISCLOSURE STATEMENT

Notice to Seller: Oklahoma Law (the "Residential Property Condition Disclosure Act," Title 60, O.S., §831 et.seq., effective July 1, 1995) requires Sellers of 1 and/or 2 residential dwelling units to complete this form. A Seller must complete, sign and date this disclosure form and deliver it or cause it to be delivered to a purchaser as soon as practicable, but in any event no later than before an offer is accepted by the Seller. If the Seller becomes aware of a defect after delivery of this statement, but before the Seller accepts an offer to purchase, the Seller must deliver or cause to be delivered an amended disclosure statement disclosing the newly discovered defect to the Purchaser. If the disclosure form or amendment is delivered to a Purchaser after an offer to purchase has been made by the Purchaser, the offer to purchase shall be accepted by the Seller only after a Purchaser has acknowledged receipt of this statement and confirmed the offer to purchase in writing.

Notice to Purchaser: The declarations and information contained in this disclosure statement are not warranties, express or implied of any kind, and are not a substitute for any inspections or warranties the Purchaser may wish to obtain. The information contained in this disclosure statement is not intended to be a part of any contract between the Purchaser and Seller. The information and statements contained in this disclosure statement are declarations and representations of the Seller and are not the representations of the real estate licensee.

LOCATION OF SUBJECT PROPERTY 5501 Grays Peak Enid, OK 73403

SELLER IS IS NOT OCCUPYING THE SUBJECT PROPERTY.

Instructions to the Seller: (1) Answer ALL questions. (2) Report known conditions affecting the property. (3) Complete this form yourself. (4) If an item is not on the property, or will not be included in the sale, mark "None/Not Included." If you do not know the facts, mark "Do Not Know if Working." (5) The date of completion by you may not be more than 180 days prior to the date this form is received by a purchaser.

ARE THE ITEMS LISTED BELOW IN NORMAL WORKING ORDER?

Appliances/Systems/ Services	Working	Not Working	Do Not Know if Working	None/ Not Included
Sprinkler System	<input checked="" type="checkbox"/>			
Swimming Pool <i>N/A</i>				<input checked="" type="checkbox"/>
Hot Tub/Spa <i>N/A</i>				<input checked="" type="checkbox"/>
Water Heater <input checked="" type="checkbox"/> Electric ___ Gas ___ Solar	<input checked="" type="checkbox"/>			
Water Purifier	<input checked="" type="checkbox"/>			
Water Softener ___ Leased ___ Owned	<input checked="" type="checkbox"/>			
Sump Pump <i>N/A</i>				<input checked="" type="checkbox"/>
Plumbing	<input checked="" type="checkbox"/>			
Whirlpool Tub				<input checked="" type="checkbox"/>
Sewer System ___ Public <input checked="" type="checkbox"/> Septic ___ Lagoon	<input checked="" type="checkbox"/>			
Air Conditioning System ___ Electric ___ Gas <input checked="" type="checkbox"/> Heat Pump	<input checked="" type="checkbox"/>			
Window Air Conditioner(s)				<input checked="" type="checkbox"/>
Attic Fan				<input checked="" type="checkbox"/>
Fireplaces	<input checked="" type="checkbox"/>			
Heating System ___ Electric ___ Gas <input checked="" type="checkbox"/> Heat Pump <i>geothermal</i>	<input checked="" type="checkbox"/>			
Humidifier				<input checked="" type="checkbox"/>
Ceiling Fans	<input checked="" type="checkbox"/>			

Appliances/Systems/ Services	Working	Not Working	Do Not Know if Working	None/ Not Included
Gas Supply ___ Public ___ Propane ___ Butane				<input checked="" type="checkbox"/>
Propane Tank				<input checked="" type="checkbox"/>
Electric Air Purifier				<input checked="" type="checkbox"/>
Garage Door Opener	<input checked="" type="checkbox"/>			
Intercom				<input checked="" type="checkbox"/>
Central Vacuum	<input checked="" type="checkbox"/>			
Security System ___ Rent ___ Own ___ Monitored				<input checked="" type="checkbox"/>
Smoke Detectors	<input checked="" type="checkbox"/>			
Dishwasher	<input checked="" type="checkbox"/>			
Electrical Wiring	<input checked="" type="checkbox"/>			
Garbage Disposal	<input checked="" type="checkbox"/>			
Gas Grill				<input checked="" type="checkbox"/>
Vent Hood	<input checked="" type="checkbox"/>			
Microwave Oven	<input checked="" type="checkbox"/>			
Built-in Oven/Range	<input checked="" type="checkbox"/>			
Kitchen Stove	<input checked="" type="checkbox"/>			
Trash Compactor				<input checked="" type="checkbox"/>
Source of Household Water <input checked="" type="checkbox"/> Public ___ Well ___ Private/Rural District	<input checked="" type="checkbox"/>			

Buyer's Initials _____ Buyer's Initials _____

Seller's Initials _____ Seller's Initials _____

LOCATION OF SUBJECT PROPERTY _____

IF YOU ANSWERED Not Working to any items on page one, please explain. Attach additional pages with your signature.

Zoning and Historical

1. Property is zoned: (Check One) residential _____ commercial _____ historical _____ office _____ agricultural _____ industrial _____ urban conservation _____ other _____ unknown _____

2. Is the property designated as historical or located in a registered historical district? Yes _____ No

Flood and Water

Yes No

3. What is the flood zone status of the property? _____

4. What is the floodway status of the property? _____

5. Are you aware of any flood insurance requirements concerning the property? Yes No

6. Are you aware of any flood insurance on the property? Yes No

7. Are you aware of the property being damaged or affected by flood, storm run-off, sewer backup, draining or grading problems? Yes No

8. Are you aware of any surface or ground water drainage systems which assist in draining the property, e.g. "French Drains?" Yes No

9. Are you aware of any occurrence of water in the heating and air conditioning duct system? Yes No

10. Are you aware of water seepage, leakage or other draining problems in any of the improvements on the property? Yes No

Additions/Alterations/Repairs

Yes No

11. Are you aware of any additions being made without required permits? Yes No

12. Are you aware of any previous foundation repairs? Yes No

13. Are you aware of any alterations or repairs having been made to correct defects or problems? Yes No

14. Are you aware of any defect or condition affecting the interior or exterior walls, ceilings, roof structure, slab/foundation, basement/storm cellar, floors, windows, doors, fences or garage? Yes No

15. Are you aware of the roof covering ever being repaired or replaced during your ownership of the property? Yes No

16. Approximate age of roof covering, if known _____ number of layers, if known _____

17. Do you know of any current problems with the roof covering? Yes No

18. Are you aware of treatment for termite or wood-destroying organism infestation? Yes No

19. Are you aware of a termite bait system installed on the property? Yes No

20. If yes, is it being monitored by a licensed exterminating company? If yes, annual cost \$ _____

21. Are you aware of any damage caused by termites or wood-destroying organisms? Yes No

22. Are you aware of major fire, tornado, hail, earthquake or wind damage? Yes No

23. Have you ever received payment on an insurance claim for damages to residential property and/or any improvements which were not repaired? Yes No

24. Are you aware of problems pertaining to sewer, septic, lateral lines or aerobic system? Yes No

Environmental

Yes No

25. Are you aware of the presence of asbestos? Yes No

26. Are you aware of the presence of radon gas? Yes No

27. Have you tested for radon gas? Yes No

28. Are you aware of the presence of lead-based paint? Yes No

29. Have you tested for lead-based paint? Yes No

30. Are you aware of any underground storage tanks on the property? Yes No

31. Are you aware of the presence of a landfill on the property? Yes No

32. Are you aware of existence of hazardous or regulated materials and other conditions having an environmental impact? Yes No

33. Are you aware of existence of prior manufacturing of methamphetamine? Yes No

34. Have you had the property inspected for mold? Yes No

35. Are you aware of any remedial treatment for mold on the property? Yes No

36. Are you aware of any condition on the property that would impair the health or safety of the occupants? Yes No

Buyer's Initials _____ Buyer's Initials _____

Seller's Initials _____ Seller's Initials _____

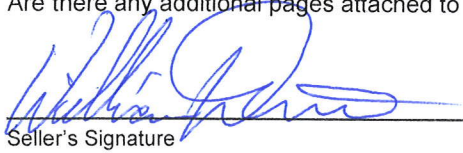
LOCATION OF SUBJECT PROPERTY _____

Property Shared in Common, Easements, Homeowner's Associations and Legal	Yes	No
37. Are you aware of features of the property shared in common with the adjoining landowners, such as fences, driveways, and roads whose use or responsibility has an effect on the property?		<input checked="" type="checkbox"/>
38. Other than utility easements serving the property, are you aware of any easements or right-of-ways affecting the property?		<input checked="" type="checkbox"/>
39. Are you aware of encroachments affecting the property?		<input checked="" type="checkbox"/>
40. Are you aware of a mandatory homeowner's association? Amount of dues \$ _____ Special Assessment \$ _____ Payable: (check one) _____ monthly _____ quarterly _____ annually Are there unpaid dues or assessments for the property? _____ YES _____ NO If yes, what is the amount? \$ _____ Manager's Name _____ Phone Number _____		<input checked="" type="checkbox"/>
41. Are you aware of any zoning, building code or setback requirement violations?		<input checked="" type="checkbox"/>
42. Are you aware of any notices from any government or government-sponsored agencies or any other entities affecting the property?		<input checked="" type="checkbox"/>
43. Are you aware of any surface leases, including but not limited to agricultural, commercial or oil and gas?		<input checked="" type="checkbox"/>
44. Are you aware of any filed litigation or lawsuits directly or indirectly affecting property, including a foreclosure?		<input checked="" type="checkbox"/>
45. Is the property located in a fire district which requires payment? If yes, amount of fee \$ _____ Paid to Whom _____ Payable: (check one) _____ monthly _____ quarterly _____ annually		<input checked="" type="checkbox"/>
46. Is the property located in a private utility district? Check applicable _____ Water _____ Garbage _____ Sewer _____ Other If other, explain _____ Initial membership fee \$ _____ Annual membership fee \$ _____ (if more than one utility attach additional pages)		<input checked="" type="checkbox"/>
Miscellaneous	Yes	No
47. Are you aware of other defect(s) affecting the property not disclosed above?		<input checked="" type="checkbox"/>
48. Are you aware of any other fees or dues required on the property that you have not disclosed?		<input checked="" type="checkbox"/>

If you answered YES to any of the items on pages two and three, list the item number(s) and explain. If needed, attach additional pages with your signature(s), date(s) and location of the subject property. _____

On the date this form is signed, the seller states that based on seller's **CURRENT ACTUAL KNOWLEDGE** of the property, the information contained above is true and accurate.

Are there any additional pages attached to this disclosure? (circle one): YES NO If yes, how many? _____


8/15/19

Seller's Signature _____ Date _____ Seller's Signature _____ Date _____

A real estate licensee has no duty to the Seller or the Purchaser to conduct an independent inspection of the property and has no duty to independently verify the accuracy or completeness of any statement made by the Seller in the disclosure statement.

The Purchaser understands that the disclosures given by the Seller on this statement are not a warranty of condition. The Purchaser is urged to carefully inspect the property, and, if desired, to have the property inspected by a licensed expert. For specific uses, restrictions and flood zone status, contact the local planning, zoning and/or engineering department. The Purchaser acknowledges that the Purchaser has read and received a signed copy of this statement. This completed acknowledgement should accompany an offer to purchase on the property identified. This is to advise that this disclosure statement is not valid after 180 days from the date completed by the Seller.

Purchaser's Signature _____ Date _____ Purchaser's Signature _____ Date _____

The disclosure and disclaimer statement forms and the Oklahoma Residential Property Condition Disclosure Act information pamphlet are made available at the Oklahoma Real Estate Commission (OREC), Denver N. Davison Building, 1915 N. Stiles, Suite 200, Oklahoma City, OK 73105, or visit OREC's Web site www.orec.ok.gov.



SQUARE FOOTAGE DISCLOSURE

This disclosure is made to Buyer and Seller improved residential real estate. Check applicable boxes below.

Property Address: 5501 Grays Peak Enid, OK 73703

1. Licensee Measurement

Listing Licensee Has Has Not measured the square footage of the residence according to the following standard, methodology or manner:

<input type="checkbox"/>	<u>Standard/Methodology/Manner</u>	<u>Date Measured</u>	<u>Square Footage</u>
<input type="checkbox"/>	Exterior measurement	_____	_____
<input type="checkbox"/>	FHA	_____	_____
<input type="checkbox"/>	ANSI	_____	_____
<input type="checkbox"/>	Local standard _____	_____	_____
<input type="checkbox"/>	Other _____	_____	_____

2. Other Source of Measurement:

Listing Licensee Is Is Not providing information on square footage of the residence from another source(s) as indicated below:

<input checked="" type="checkbox"/>	<u>Source of Square Footage Information</u>	<u>Date</u>	<u>Square Footage</u>
<input checked="" type="checkbox"/>	Prior appraisal (Date of document)	<u>5/16/19</u>	<u>5,137</u>
<input type="checkbox"/>	Building plans (Date of document)	_____	_____
<input checked="" type="checkbox"/>	Assessor's office (Date obtained)	_____	_____
<input type="checkbox"/>	Other _____	_____	_____

Measurement is for the purpose of marketing, may not be exact and is not for loan, valuation or other purpose. **If exact square footage is a concern, the property should be independently measured.**

Buyer and Seller are advised to verify this information. Any independent measurement or investigation should be completed on or before the Inspection Objection Deadline of the contract.

By [Signature] 8/15/19
Listing Licensee Date

The undersigned acknowledges receipt of this disclosure.

[Signature] 8/15/19
Seller Date Seller Date

Buyer Date Buyer Date