

## SELLER'S RESIDENTIAL REAL ESTATE SALES DISCLOSURE

State Form 46234 (R6/6-14)

Date (month, day, year)

Note: This form has been modified from the version currently found at 876 IAC 9-1-2 to include questions regarding disclosure of contamination related to controlled substances or methamphetamine as required by P.L. 180-2014. Rule revisions will be made to 876 IAC 9-1-2 to include these changes in the near future, however the Commission has made this information available now through this updated form

Seller states that the information contained in this Disclosure is correct to the best of Seller's CURRENT ACTUAL KNOWLEDGE as of the above date. The prospective buyer and the owner may wish to obtain professional advice or inspections of the property and provide for appropriate provisions in a contract between them concerning any advice, inspections, defects, or warranties obtained on the property. The representations in this form are the representations of the owner and are not the representations of the agent, if any. This information is for disclosure only and is not intended to be a part of any contract between the buyer and the owner. Indiana law (IC 32-21-5) generally requires sellers of 1-4 unit residential property to complete this form regarding the known physical condition of the property. An owner must complete and sign the disclosure form and submit the form to a prospective buyer before an offer is accepted for the sale of the real estate.

Property address (number and street, city, state, and ZIP code)

4015 Winthrop Dr. South Bend, In 46614

| A. APPLIANCES   | None/Not<br>Included/<br>Rented                  | Defective                      | Not<br>Defective                 | Do Not<br>Know               | C. WATER & SEWER SYSTEM   | None/Not<br>Included<br>Rented | Defective  |                | Not<br>ective | Do No<br>Know  |
|---|--|--------------------------------|----------------------------------|------------------------------|---|--------------------------------|--|----------------|---------------|----------------|
| Built-in Vacuum System  | X  | MICHIGAN IN THE REAL PROPERTY. | NAME OF TAXABLE                  | ALIENS ACTION                | Cistern   | Kented                         |  | Name and       |               | ELECTION 1     |
| Clothes Dryer   |  |                                | ×                                |                              | Septic Field/Bed  | ×                              |  | _              |               |                |
| Clothes Washer  |  |                                | X                                |                              | Hot Tub   | Ý                              |  | +-             |               |                |
| Dishwasher  |  |                                | ×                                |                              | Plumbing  |                                |  | <u> </u>       | ,             |                |
| Disposal  |  |                                | X                                |                              | Aerator System  | Х                              |  | <del>  ^</del> |               |                |
| Freezer   |  |                                | X                                |                              | Sump Pump   | X                              |  | +              |               |                |
| Gas Grill   | V  |                                | _^_                              |                              | Irrigation Systems  |                                |  | +              | _             |                |
| Hood  | <del>                                     </del> |                                |                                  |                              | Water Heater/Electric   | X                              |  |                |               |                |
| Microwave Oven  |  |                                |                                  |                              | Water Heater/Gas  |                                |  |                | ×             |                |
| Oven  |  |                                |                                  |                              | Water Heater/Solar  | X                              |  | -              |               |                |
| Range   | -  |                                |                                  |                              | Water Purifier  | X                              |  |                |               |                |
| Refrigerator  |  | -                              |                                  |                              | Water Softener  |                                |  |                |               |                |
| Room Air Conditioner(s)   | X  |                                |                                  |                              | Well  | X                              |  | -              |               |                |
| Trash Compactor   | <del>  •</del>                                   |                                |                                  |                              |   | X                              |  | -              |               |                |
| TV Antenna/Dish   | <del>\</del>                                     |                                |                                  |                              | Septic and Holding Tank/Septic Mound  |                                |  | -              |               |                |
| Other:  |  |                                |                                  |                              | Geothermal and Heat Pump Other Sewer System (Explain)   | Х                              |  |                |               |                |
|   |  |                                |                                  |                              | Swimming Pool & Pool Equipment  | X                              | ,  |                |               |                |
|   | . v  |                                |                                  |                              |   | •                              |  | Yes            | No            | Do Not<br>Know |
| н   |  |                                |                                  |                              | Are the structures connected to a pr  | ublic water sy                 | ystem?   | X              |               |                |
| B. Electrical   | None/Not<br>Included/                            | Defective                      | Not<br>Defective                 | Do Not<br>Know               | Are the structures connected to a public sewer system?  Are there any additions that may require improvements to the sewage disposal system?  If yes, have the improvements been completed on the |                                |  | X              |               |                |
| System  | Rented   |                                | Delective                        | Rilow                        |   |                                |  |                | X             |                |
| Air Purifier  | X  |                                |                                  |                              |   |                                |  | -              |               |                |
| Burglar Alarm   | X  |                                |                                  |                              | sewage disposal system?   |                                |  |                |               |                |
| Ceiling Fan(s)  | Χ  |                                |                                  |                              | Are the improvements connected to a private/community water system?   |                                |  |                |               |                |
| Garage Door Opener / Controls   |  |                                | ×                                |                              | Are the improvements connected to a private/community   |                                |  | -              | -             |                |
| Inside Telephone Wiring and Blocks/Jacks  |  | 8                              | ×                                |                              | sewer system?  D. HEATING & COOLING   None/Not   Defective  |                                |  | N              | lot           | Do Not         |
| Intercom  | Χ  |                                |                                  |                              | SYSTEM  | Included                       | Delective  | Defective      |               | Know           |
| Light Fixtures  | -,   |                                | Х                                |                              | Attic For   | Rented                         |  | Internal       |               | to the state   |
| Sauna   | X  |                                |                                  |                              | Attic Fan  Central Air Conditioning   | Х                              |  | -              | <i>i</i> .    | -              |
| Smoke/Fire Alarm(s)   |  |                                | χ                                |                              | Hot Water Heat  |                                | -  | X              |               |                |
| Switches and Outlets  |  |                                | X                                |                              |   |                                |  | X              |               | -              |
| Vent Fan(s)   |  |                                | X                                |                              | Furnace Heat/Gas  | ~                              |  | >              | `             |                |
| 60(100/200 Amp Service  |  |                                | 1                                |                              | Furnace Heat/Electric   | ×                              |  |                |               |                |
| (Circle one)  |  |                                | X                                |                              | Solar House-Heating   | _X                             |  |                |               |                |
| Generator   | X  |                                |                                  |                              | Woodburning Stove   | _X                             |  |                |               |                |
| NOTE: Means a condition that would have a significant"Defect" adverse effect on the value of the property, that would significantly impair the health or safety of future occupants of the property, or that if not repaired, removed or replaced would significantly shorten or adversely affect the expected normal life of the premises. |  |                                |                                  |                              | Fireplace   | Х                              |  |                |               |                |
|   |  |                                |                                  |                              | Fireplace Insert  | _X                             |  |                |               |                |
|   |  |                                |                                  |                              | Air Cleaner   | X                              |  |                |               |                |
|   |  |                                |                                  |                              | Humidifier  | X                              |  |                |               |                |
|   |  |                                |                                  | I                            | Propane Tank  | X                              |  |                |               |                |
|   |  |                                |                                  |                              | Other Heating Source  | X                              |  |                |               |                |
| disclosure form is not a warranty   | by the owner<br>ater obtain. A                   | or the owner<br>t or before se | 's agent, if an<br>ttlement, the | y, and the d<br>owner is req | certifies to the truth thereof, based or<br>isclosure form may not be used as a s<br>uired to disclose any material change i  | ubstitute for<br>n the physica | any inspection of all condition of the c | ns or v        | varranti      | s that the     |

acknowledge receipt of this Disclosure by signing below.

Page 1 of 2

Signature of Buyer

Signature of Buyer

Signature of Seller (at closing)

Phone: (574) 216-7776

Fax: (574) 235-7154

4015 Winthrop Dr

Date (mm/dd/yy)

Date (mm/dd/yy)

Date (mm/dd/yy)

Signature of Seller

of Signature of Seller

Signature of Seller (at closing)

The Seller hereby certifies that the condition of the property is substantially the same as it was when the Seller's Disclosure form was originally provided to the Buyer.

Date (mm/dd/yy)

Date (mm/dd/yy)

Date (mm/dd/yy)

| Property address (number and street, city, state  | , and ZIP  |                       | 115 Winthrop D   | r, South Bend, In 46614   |                |                 |                |  |  |
|---|------------|-----------------------|--|---|----------------|-----------------|----------------|--|--|
| 2. ROOF   | YES        | NO                    | DO NOT<br>KNOW   | 4. OTHER DISCLOSURES  | YES            | NO              | DO NOT<br>KNOW |  |  |
| Age, if known Years.  |            |                       |  | Do atrusturas have aluminum wiring?   |                | X               | KINOW          |  |  |
| Does the roof leak?   |            | Χ                     | 2  | Do structures have aluminum wiring?  Are there any foundation problems with the                           |                |                 |                |  |  |
| Is there present damage to the roof?  |            | Х                     |  | structures?   |                | X               |                |  |  |
| Is there more than one layer of shingles on the house?  |            | Χ                     |  | Are there any encroachments?  Are there any violations of zoning, building codes,                         |                | X               |                |  |  |
| If yes, how many layers?  |            |                       |  | or restrictive covenants?   |                | X               |                |  |  |
|   |            |                       |  | Is the present use of non-conforming use? Explain:  |                | X               |                |  |  |
| 3. HAZARDOUS CONDITIONS   | YES        | NO                    | DO NOT<br>KNOW   |   |                |                 |                |  |  |
| Have there been or are there any hazardous conditions on the property, such as methane gas, lead paint, radon gas in house or well, radioactive material, landfill, mineshaft, expansive soil, toxic materials, mold, other biological contaminants, asbestos insulation, or PCB's?   |            | X                     |  |   |                |                 |                |  |  |
| Is there any contamination caused by the  |            | X                     |  | Is the access to your property via a private road?  |                | X               |                |  |  |
| manufacture or a controlled substance on the property that has not been certified as  |            |                       |  | Is the access to your property via a public road?   | X              |                 |                |  |  |
| decontaminated by an inspector approved   |            |                       |  | Is the access to your property via an easement?   |                | Х               |                |  |  |
| under IC 13-14-1-15?  Has there been manufacture of   |            |                       |  | Have you received any notices by any governmental or quasi-governmental agencies affecting this property? |                | X               |                |  |  |
| methamphetamine or dumping of waste from<br>the manufacture of methamphetamine in a<br>residential structure on the property?   |            | X                     |  | Are there any structural problems with the building?  |                | X               |                |  |  |
| Explain:  |            |                       |  | Have any substantial additions or alterations been made without a required building permit?               |                | X               |                |  |  |
|   |            |                       |  | Are there moisture and/or water problems in the basement, crawl space area, or any other area?            |                | χ               |                |  |  |
|   |            |                       |  | Is there any damage due to wind, flood, termites, or rodents?   |                | X               |                |  |  |
|   |            |                       |  | Have any structures been treated for wood destroying insects?   |                | χ               |                |  |  |
|   |            |                       | Are the furnace/woodstove/chimney/flue all in working order?                                       |   |                |                 |                |  |  |
| E. ADDITIONAL COMMENTS AND/OR EXPLANAT  | IONS:      |                       |  | Is the property in a flood plain?   |                | X               |                |  |  |
| (Use additional pages, if necessary)  |            |                       |  | Do you currently pay for flood insurance?   |                | X               |                |  |  |
|   |            |                       |  | Does the property contain underground storage tank(s)?  |                | X               |                |  |  |
|   |            |                       |  | Is the homeowner a licensed real estate salesperson or broker?  |                | X               |                |  |  |
|   |            |                       |  | Is there any threatened or existing litigation regarding the property?                                    |                | X               |                |  |  |
|   |            |                       | Is the property subject to covenants, conditions and/or restrictions of a homeowner's association? | *   | X              |                 |                |  |  |
|   |            |                       |  | Is the property located within one (1) mile of an airport?  |                | X               |                |  |  |
| The information contained in this Disclosure has been furnished by the Seller, who certifies to the truth thereof, based on the Seller's CURRENT ACTUAL KNOWLEDGE. A disclosure form is not a warranty by the owner or the owner's agent, if any, and the disclosure form may not be used as a substitute for any inspections or warranties that the prospective buyer or owner may later obtain. At or before settlement, the owner is required to disclose any material change in the physical condition of the property or certify to the purchaser at settlement that the condition of the property is substantially the same as it was when the disclosure form was provided. Seller and Purchaser hereby acknowledge receipt of this Disclosure by signing below. |            |                       |  |   |                |                 |                |  |  |
| Signature of Seller   | Luca .     | Date                  | (mm/dd/yy)   | Signature of Buyer  |                | Date (mm/dd/yy) |                |  |  |
| Signature of Seller   | (mm/dd/yy) | Signature of Buyer Da |  |   | ate (mm/dd/yy) |                 |                |  |  |
| The Seller hereby certifies that the condition of the property is substantially the same as it was when the Seller's Disclosure form was originally provided to the Buyer.  |            |                       |  |   |                |                 |                |  |  |
| Signature of Seller (at closing)  Date (mm/dd/yy)  Signature of Seller (at closing)  Date (mm/dd/yy)  |            |                       |  |   |                |                 |                |  |  |
|   | -          |                       |  |   |                |                 |                |  |  |



