

1921 CLIFTON AVENUE

1,778 +/- Square Feet

Paris, Bourbon County, Kentucky



Completely renovated 3BR/2BA home is absolutely gorgeous and combines the charm of Paris living with an easy 15-minute commute to Lexington or Georgetown.

Offered Exclusively By



www.kyhorsefarms.com

518 East Main Street • Lexington, Kentucky 40508 • (859) 255-3657

First Floor

Home features a first-floor master with full bath and custom closet, large first floor laundry/mud room and a spacious, inviting kitchen.



Front Room (13'1" x 32'1") with beautiful entry and newly-installed bamboo flooring.

The tastefully-renovated **kitchen** (13'2" x 13'4") features:

- Granite counter tops
- Stainless steel appliances
- Large island/breakfast bar
- Custom back splash
- Exposed brick



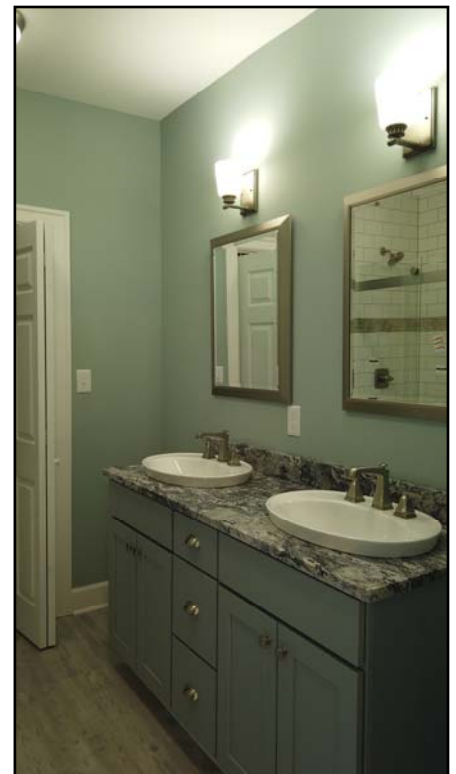


First floor **master bedroom** measures 13'7" x 15'4" and has:

- Bamboo flooring
- Spacious walk-in closet
- Ceiling fan/light
- Natural light

The **master bath** features :

- His and her sinks
- Granite counter top
- Subway tile shower
- Glass sliding doors



There is a second full **bath** with:

- Granite counter tops
- Subway tile tub/shower combo

The **Laundry Room** measures 13'9" x 11'9" and features:

- Ample storage/closets
- Beautiful views
- French doors
- Washer and dryer

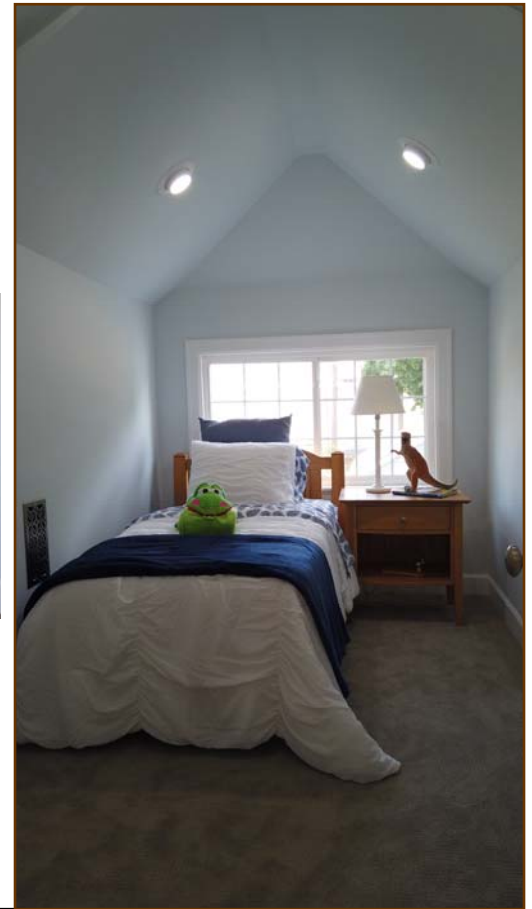


Back Deck with spacious back yard and privacy fence



Second Floor

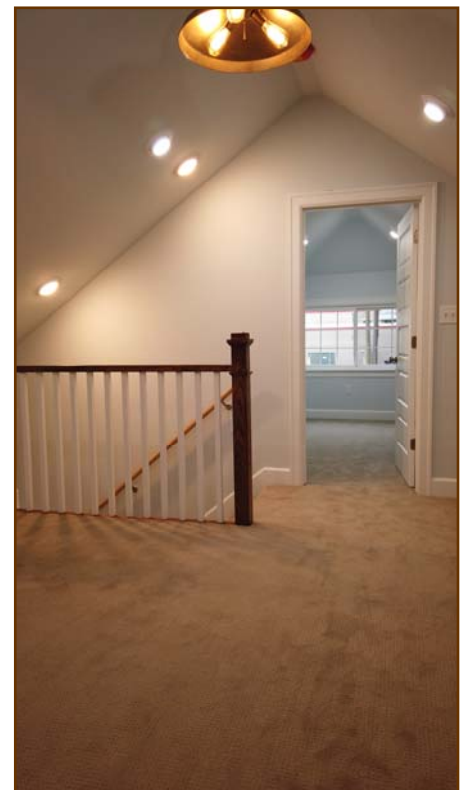
Left Bedroom measures 12' 3" x 6' 10" with upgraded light fixtures and wall-to-wall carpet.



Right Bedroom measures 22' 7" x 12' 5" and has upgraded light fixtures and wall-to-wall carpet.



Bonus Room measures 12' 2" x 12' 5" and has carpet and updated light fixtures.





Off-street parking located behind the house

Two large storage sheds



Worry free with all new big-ticket items including roof, siding, gutters, plumbing, electric, HVAC, appliances, privacy fence and much more! Off street parking provided by a large gravel parking area directly behind the privacy fence. So many UPGRADES have been made & this home has it all, the space, the finishes, the look!

Schedule your showing today!

Offered Exclusively By

PRICE: \$195,000.



Amber Siegelman, Agent
859-948-0068

www.kyhorsefarms.com

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1921 Clifton Ave New Work Completed 2018/2019

- Roof (2018-warranted)
- Gutters (2018-warranted)
- Siding (2018-warranted)
- All new wiring and electric panel.
- All new plumbing
- Spray Foam Insulation
- HVAC (New units 2018, both serviced for 2019)
- Water Heater (2019)
- Appliances (2019)
 - Stove
 - Refrigerator
 - Microwave
 - Dishwasher
 - Disposal
 - Washer
 - Dryer
- Cabinets, fixtures, lighting
- Bamboo flooring
- Engineered Vinyl (Baths, laundry)
- Anso® nylon carpet
- Rebuilt porch including new Tigerwood decking
- 12x12 rear deck
- Termite treatment (treated presumptively due to signs of old damage)
- Privacy fence
- Sod/landscape

PROPERTY ADDRESS: 1921 Clifton Ave, Paris Ky 40361

SELLER'S DISCLOSURE OF PROPERTY CONDITION

This form applies to residential real estate sales and purchases. This form is **not required** for:

1. Residential purchases of new construction homes if a written warranty is provided;
2. Sales of real estate at auction; or
3. A court supervised foreclosure.

The information in this form is based upon the undersigned's observation and knowledge about the property during the period beginning on the date of his or her purchase of the property on March 8, 2018, and ending on 04/29/2019.
(Date of purchase) (Date of this form)

PROPERTY ADDRESS: -1921 Clifton Ave, Paris Ky 40361

PURPOSE OF DISCLOSURE FORM: Completion of this form shall satisfy the requirements of KRS 324.360 that mandates the seller's disclosure of information about the property he or she is about to sell. This disclosure is based solely on the seller's observation and knowledge of the property's condition and the improvements thereon. This disclosure form shall not be a warranty by the seller or seller's real estate agent and shall not be used as a substitute for an inspection or warranty that the purchaser may wish to obtain. This form is a statement of the conditions and other information about the property known by the seller. Unless otherwise advised, the seller does not possess any expertise in construction, architectural, engineering, or any other specific areas related to the construction or condition of the improvements on the property. Other than having lived at or owned the property, the seller possesses no greater knowledge than that which could be obtained upon a careful inspection of the property by the potential buyer. Unless otherwise advised, the seller has not conducted any inspection of generally inaccessible areas such as the foundation or roof. It is not a warranty of any kind by the seller or by any real estate agent representing any seller in this transaction. It is not a substitute for any inspections. The purchaser is encouraged to obtain his or her own professional inspections.

INSTRUCTIONS TO THE SELLER: (1) Complete all numbered items. (2) Report all known conditions affecting the property. (3) Attach additional pages, if necessary, with your signature and the date and time of signing. (4) Complete this form yourself or sign the authorization at the end of this form to authorize the real estate agent to complete this form on your behalf in accordance with KRS 324.360(9). (5) If some items do not apply to your property, mark "not applicable." (6) If you do not know the answer to a question, mark "unknown."

SELLER'S DISCLOSURE: As seller, I/we disclose the following information regarding the property. This information is true and accurate to the best of my/our knowledge as of the date signed. Seller authorizes the real estate agent to provide a copy of this statement to any person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. The following information is not the representation of the real estate agent.

Please answer all questions. If the answer is yes, please explain. If additional space is needed, use the reverse side or make attachments.

1. HOUSE SYSTEMS N/A YES NO UNKNOWN

Any past or current problems affecting:

- | | | | | |
|---|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| (a) Plumbing | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Electrical system | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Appliances | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (d) Floors and walls | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (e) Doors and windows | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (f) Ceiling and attic fans | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (g) Security system | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (h) Sump pump | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (i) Chimneys, fireplaces, inserts | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (j) Pool, hot tub, sauna | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (k) Sprinkler system | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (l) Heating | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (m) Cooling/air conditioning | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (n) Water heater | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Explain: age 2018

age 2018

age 2019

2. FOUNDATION/STRUCTURE/BASEMENT N/A YES NO UNKNOWN

- (a) Any defects or problems, current or past, to the foundation or slab? ☐ YES ☒ NO ☐ UNKNOWN
- (b) Any defects or problems, current or past, to the structure or exterior veneer? ☐ YES ☒ NO ☐ UNKNOWN

Explain: REPAIRED SMALL AREA OF TERMITE DAMAGE

- (c) Has the basement leaked at any time since you have owned or lived at the property? ☐ YES ☒ NO ☐ UNKNOWN
- (d) When was the last time the basement leaked? 4 MONTHS
- (e) Have you ever had any repairs done to the basement? ☐ YES ☒ NO ☐ UNKNOWN
- (f) If you have had basement leaks repaired, when was the repair performed? 4 MONTHS

Explain: BASEMENT LEAKED DURING CONSTRUCTION DUE TO INCOMPLETE GRADING

Initials (Seller)

RCM
RCM

Date/Time

4-29-19

Initials (Buyer)

Date/Time

Form M105 revised 3/2016

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PROPERTY ADDRESS: 1921 Clifton Ave, Paris Ky 40361

- (g) If the basement presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.) N/A No longer an issue
- (h) Have you experienced, or are you aware of, any water or drainage problems with regard to the crawl space? ☐ ☐ ☒ ☐

3. ROOF

- | | N/A | YES | NO | UNKNOWN |
|--|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| (a) Age of the roof covering? <u>2018</u> | | | | |
| (b) 1. Has the roof leaked at any time since you have owned or lived at the property? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. When was the last time the roof leaked? <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) 1. Have you ever had any repairs done to the roof? <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If you have ever had the roof repaired, when was the repair performed? <u>2018</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (d) 1. Have you ever had the roof replaced? <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If you have had the roof replaced, when was the replacement performed? <u>2018</u> | | | | |
| (e) If the roof presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.) <u>N/A</u> | | | | |
| (f) 1. Have you ever had roof repairs that involved placing shingles on the roof instead of replacing the entire roof covering? <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If yes, when was the repair performed? <u>N/A</u> | | | | |
| Explain: _____ | | | | |

4. LAND/DRAINAGE

- | | N/A | YES | NO | UNKNOWN |
|---|--------------------------|--------------------------|-------------------------------------|--------------------------|
| (a) Any soil stability problems? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Has the property ever had a drainage, flooding, or grading problem? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Is the residence located within a Special Flood Hazard Area (SFHA) mandating the purchase of flood insurance for federally backed mortgages? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes, what is the flood zone? _____ | | | | |
| (d) Is there a retention/detention basin, pond, lake, creek, spring, or water shed on or adjoining this property? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Explain: _____ | | | | |

5. BOUNDARIES

- | | N/A | YES | NO | UNKNOWN |
|---|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| (a) 1. Have you ever received a staked or pinned survey of the property? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Are the boundaries marked in any way? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you know the boundaries? If yes, provide description below. <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Explain: <u>by legal description only</u> | | | | |
| (b) Are there any encroachments or unrecorded easements relating to the property of which you are aware? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Explain: _____ | | | | |

6. WATER

- | | N/A | YES | NO | UNKNOWN |
|---|--------------------------|--------------------------|-------------------------------------|--------------------------|
| (a) 1. Source of water supply <u>CITY</u> | | | | |
| 2. Are you aware of below normal water supply or water pressure? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Is there a water purification system or softener remaining with the house? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Has your water ever been tested? If yes, provide results below. <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Explain: _____ | | | | |

7. SEWER SYSTEM

- | | N/A | YES | NO | UNKNOWN |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| (a) Property is serviced by: | | | | |
| 1. Category I. Public Municipal Treatment Facility <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Category II. Private Treatment Facility <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Category III. Subdivision Package Plant <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Category IV. Single Home Aerobic Treatment System ("Home Package Plant") <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Category V. Septic Tank with drain field, lagoon, wetland, other onsite dispersal <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Category VI. Septic Tank with dispersal to an offsite, multi-property cluster treatment system <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Category VII. No Treatment/Unknown <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Name of Servicer (if known): _____ | | | | |
| (b) For properties with Category IV, V, or VI systems: | | | | |
| Date of last inspection (sewer): _____ | | | | |
| Date of last inspection (septic): _____ Date last cleaned (septic): _____ | | | | |
| (c) Are you aware of any problems with the sewer system? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Explain: _____ | | | | |

Initials (Seller) RCM Date/Time 4-29-19

Initials (Buyer) RCM Date/Time _____

PROPERTY ADDRESS: 1921 Clifton Ave, Paris Ky 40361

8. CONSTRUCTION/REMODELING

- | | N/A | YES | NO | UNKNOWN |
|---|--------------------------|-------------------------------------|--------------------------|--------------------------|
| (a) Have there been any additions, structural modifications, or other alterations made? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) Were all necessary permits and government approvals obtained? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- Explain: _____

9. HOMEOWNER'S ASSOCIATION

- | | N/A | YES | NO | UNKNOWN |
|--|--------------------------|--------------------------|-------------------------------------|--------------------------|
| (a) 1. Is the property subject to rules or regulations of a homeowner's association?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. If yes, what is the yearly assessment? \$ _____ | | | | |
| 3. Homeowner's Association Name: _____ | | | | |
| HOA Primary Contact Name: _____ | | | | |
| HOA Primary Contact Phone No. _____ | | | | |
| (b) Are you aware of any condition that may result in an increase in taxes or assessments?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Are any features of the property shared in common with adjoining landowners such as: walls, fences, driveways, etc?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
- Explain: _____

10. MISCELLANEOUS

- | | N/A | YES | NO | UNKNOWN |
|--|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| (a) Was this house built before 1978? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) Are you aware of any use of urea formaldehyde, asbestos materials, or lead based paint in or on this home?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) 1. Are you aware of any testing for radon gas?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Results, if tested _____ | | | | |
| (d) Are you aware of any underground storage tanks, old septic tanks, field lines, cisterns or abandoned wells on the property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (e) Are there any other environmental hazards known to seller? (e.g., carbon monoxide, hazardous waste, water contamination or methamphetamine contamination)..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

METHAMPHETAMINE CONTAMINATION DISCLOSURE REQUIREMENT

A property owner who chooses **NOT** to decontaminate a property used in the production of methamphetamine **MUST** make written disclosure of methamphetamine contamination pursuant to KRS 224.1-410(10) and 902 KAR 47:200. Failure to properly disclose methamphetamine contamination is a Class D Felony under KRS 224.99-010.

- | | | | | |
|--|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| (f) Are you aware of any present or past wood infestation (e.g., termites, borers, carpenter ants, fungi, etc.)?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (g) Are you aware of any damage due to wood infestation?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (h) 1. Has the house or other improvements ever been treated for wood infestation? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If yes, when, by whom, and any warranties? <u>2018 Fox</u> | | | | |
| (i) Are you aware of any existing or threatened legal action affecting this property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (j) Are there any assessments other than property assessments that apply to this property (e.g., sewer assessments)?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (k) Are you aware of any violations of local, state, or federal laws, codes, or ordinances relating to this property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (l) Are you aware of any other conditions that are defective with regard to this property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (m) Are there any environmental hazards known to seller? E.g., methamphetamine contamination? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (n) Are there any warranties to be passed on?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (o) Has this house ever been damaged by fire or other disaster (e.g., tornado, hail, etc.)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes, please explain: _____ | | | | |
| (p) Are you aware of the existence of mold or other fungi on the property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (q) Has this house ever had pets living in it? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes, Explain _____ | | | | |
| (r) Is the property in a historic district?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Initials (Seller)

RGM
SW

Date/Time

4-29-19

Initials (Buyer)

Date/Time

Form M105 revised 3/2016

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PROPERTY ADDRESS: 1921 Clifton Ave. Paris Ky 40361

SPACE FOR ADDITIONAL INFORMATION

Asbestos siding + pipe insulation
professionally abated

Seller states that the information contained in this Disclosure of Property Condition Form is complete and accurate to the best of his/her knowledge and belief. Seller agrees to immediately notify Buyer of any changes that may become known to Seller prior to closing by providing a written addendum hereto.

+ [Signature] 4-29-19
Seller Date

[Signature] 4-29-19
Seller Date

THE REAL ESTATE AGENT NAMED HERE, _____, HAS BEEN REQUESTED BY THE OWNER TO COMPLETE THIS FORM AND HAS DONE SO. SELLER HEREBY AGREES TO HOLD HARMLESS THE NAMED REAL ESTATE AGENT FOR ANY REPRESENTATIONS THAT APPEAR ON THIS FORM IN ACCORDANCE WITH KRS 324.360(9).

Seller: _____

Date: _____

THE SELLER REFUSES TO COMPLETE THIS FORM AND ACKNOWLEDGES THAT THE REAL ESTATE AGENT SHALL SO INFORM THE BUYER.

Seller: _____
Date: _____

Seller: _____
Date: _____

THE SELLER HAS REFUSED TO COMPLETE THIS FORM AND HAS REFUSED TO ACKNOWLEDGE HIS FAILURE TO COMPLETE THE FORM

Broker/Real estate agent: _____

Date: _____

THE BUYER ACKNOWLEDGES RECEIPT OF THIS FORM.

Buyer Date

Buyer Date

THIS FORM PROVIDES THE MINIMUM DISCLOSURES REQUIRED BY LAW. SELLER MAY DISCLOSE ADDITIONAL INFORMATION NOT REQUESTED ON THIS FORM AND MAY RESPOND TO ADDITIONAL INQUIRIES OF THE BUYER.

Initials (Seller) [Signature]

Date/Time 4-29-19

Initials (Buyer) _____

Date/Time _____