

3650 DELANEY FERRY

Versailles, Woodford County, Kentucky

10 +/- Acres



Country charm is the hallmark of this spacious 3,320 +/- square foot completely remodeled house on ten well-planned acres set up for horses.

Strategically located between Route 169 and Route 33, you have all the privacy and tranquility of the country—but just 15 minutes from Versailles Road or Harrodsburg Road.

Offered Exclusively By

Mary Sue Walker-Hughes
(859) 619-4770
Owner/Agent



Price: \$679,000.

www.kyhorsefarms.com

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



Spacious entrance affords plenty of walk-in room and built-in cabinetry niches on either side of front door for lovely displays of objet d'art. Crown molding in every room on first floor and master bedroom provides a lovely accent touch.



Hardwood floors and fireplace in formal living room create a warm atmosphere for cozy conversations or a quiet getaway.

What a family room! Huge area to the right of the entrance showcases the wall of cabinetry with a raised hearth fireplace, built-in bookcase that accommodates smaller televisions, and beautiful views of the front pasture. The powder room just off the family room has a beautiful jade green wallpaper and easy access to the family room or kitchen.





If ever there was a gathering place, this is it! Gorgeous cabinetry, center island, granite counter tops, intricate tile work, hardwood floors, bar stool area, eat-in area, work space in built-in black full-wall display cabinet, and French doors to large brick-walled patio





Master bedroom has wall-to-wall carpet, electric fireplace, two large closets (one is a walk-in), and master bath vanitories and huge walk-in shower.



This bedroom has an electric fireplace and large closet.



The Jack and Jill bath with tub services the two bedrooms pictured above.

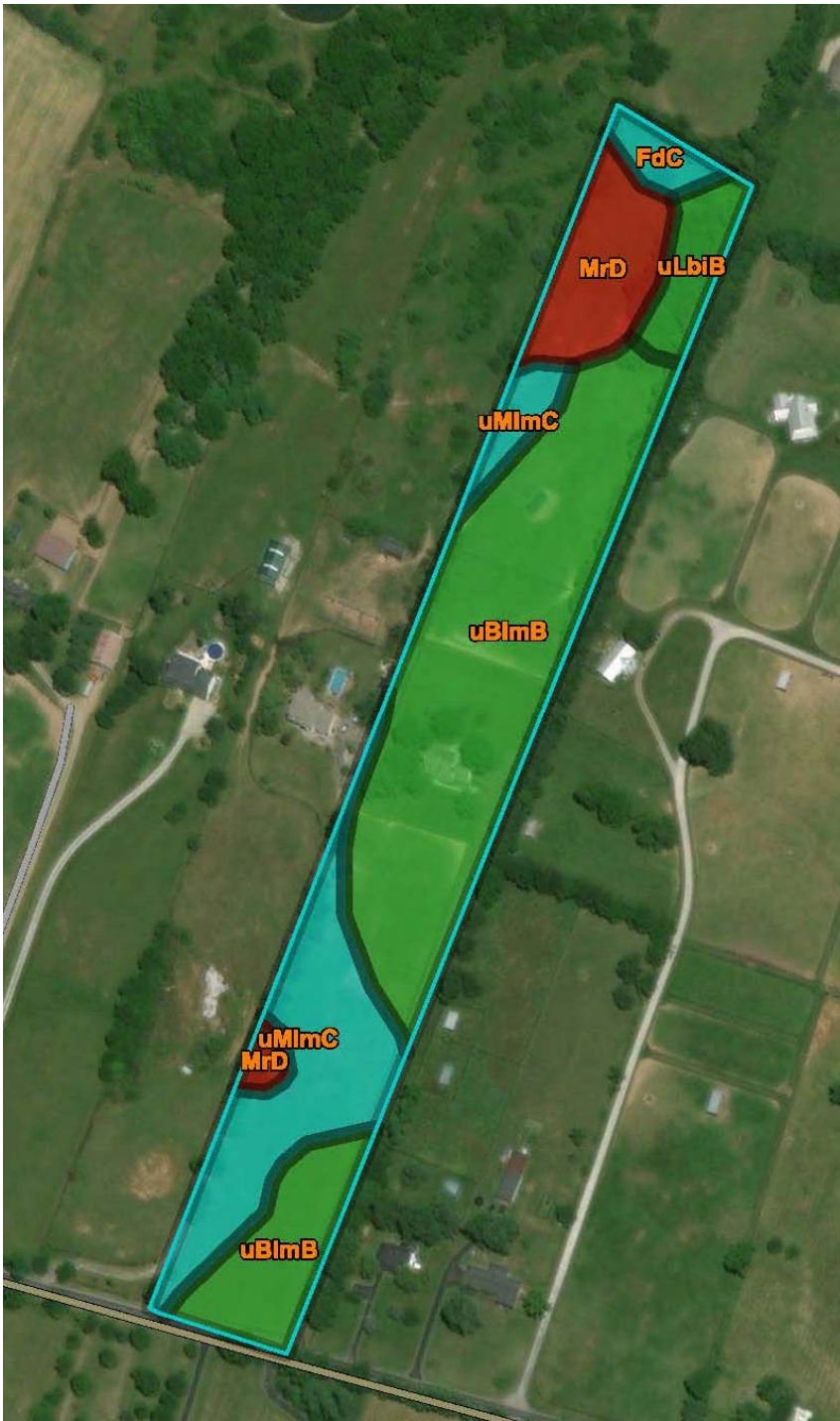


The fourth bedroom has wall-to-wall carpet, a large closet, and huge storage room that's perfect for Christmas decorations, etc!

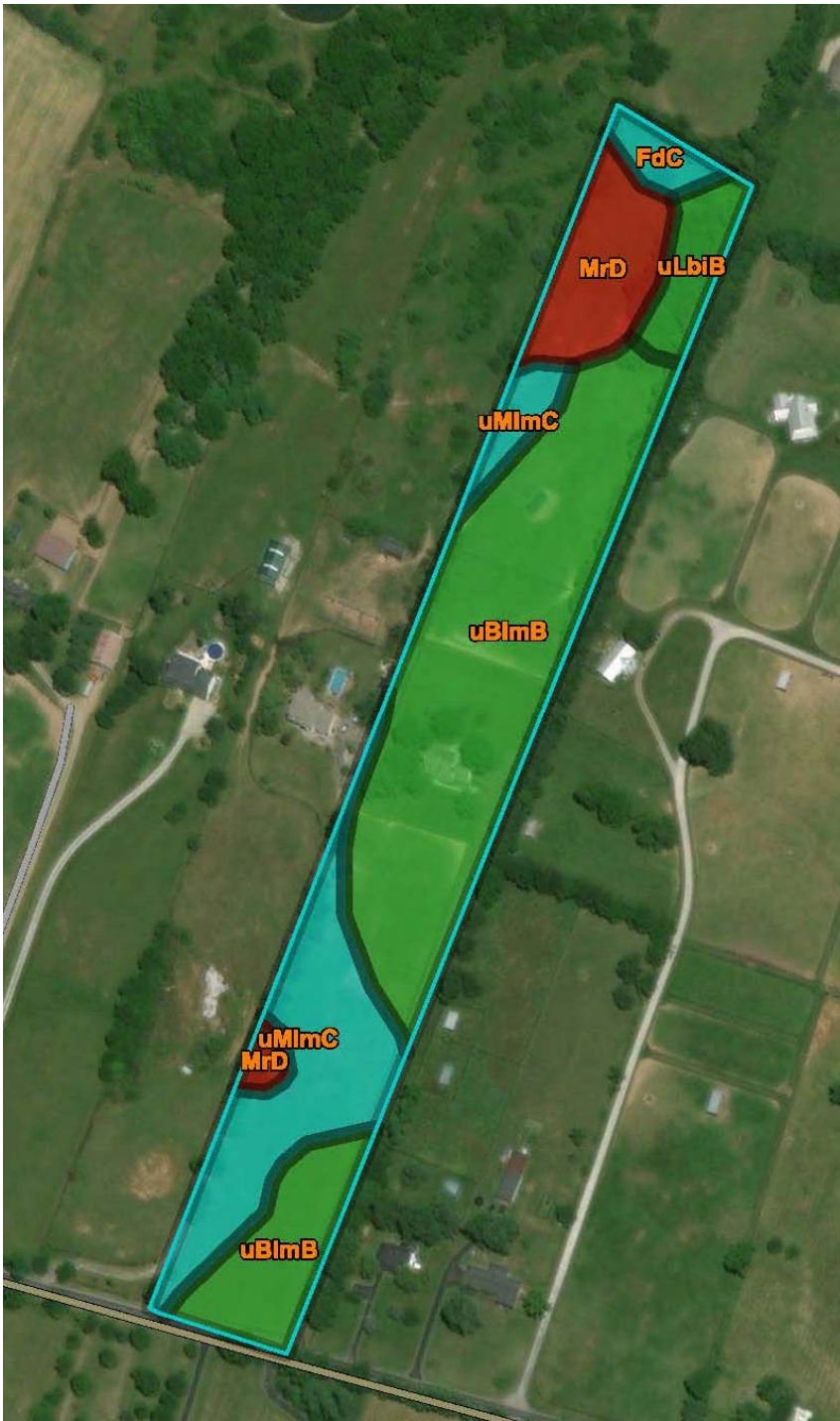


Lower level family room with wall-to-wall carpet and a raised brick hearth fireplace. It's a great place for kids—big or small!





Map unit symbol	Map unit name	Rating	Acres in AOI	Percent of AOI
FdC	Faywood silt loam, 6 to 12 percent slopes	Farmland of statewide importance	0.3	2.8%
MrD	McAfee-Rock outcrop complex, 6 to 20 percent slopes	Not prime farmland	1.1	11.6%
uBlmB	Bluegrass-Maury silt loams, 2 to 6 percent slopes	All areas are prime farmland	5.4	57.2%
uLbiB	Lowell-Bluegrass silt loams, 2 to 6 percent slopes	All areas are prime farmland	0.5	5.4%
uMImC	Maury-Bluegrass silt loams, 6 to 12 percent slopes	Farmland of statewide importance	2.2	23.0%
Totals for Area of Interest			9.5	100.0%



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Totals for Area of Interest			9.5	100.0%

SELLER'S REAL PROPERTY HISTORY – FARM PROPERTY

For use only by members of the Lexington-Bluegrass Association of REALTORS®

PROPERTY ADDRESS: 3650 Delaney Ferry Road, Versailles, KY 40383

DATE: _____

Please answer all questions. Mark yes or no to all questions. If answer is yes, please explain in item #13.

	Yes	No	Unknown
1. MAIN RESIDENCE – HOUSE SYSTEMS			
Are you aware of any problems affecting:			
(a) Electrical wiring	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Air Conditioning	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Plumbing/Septic	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Heating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Pool/Hot tubs/Sauna.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Appliances	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(g) Doors and windows	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. MAIN RESIDENCE – FOUNDATION			
(a) Are you aware of any problems concerning the basement?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Are you aware of any problems concerning sliding, settling, movement upheaval, or earth stability?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Are you aware of any defects or problems relating to the foundation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. MAIN RESIDENCE – ROOF			
(a) Has the roof ever leaked?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Has the roof ever been repaired?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Do you know of any problems with the roof.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. MAIN RESIDENCE – ALE/LEAD-BASED PAINT			
(a) Was residence built before 1978?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(If yes, seller may not accept and buyer should not present an offer to purchase contract that does not include a "Disclosure of Information and Acknowledgement of Lead-Based Paint and/or Hazards" addendum acknowledging receipt of the EPA pamphlet "Protect Your Family From Lead in Your Home".)			
5. DRAINAGE			
(a) Is this property located in a flood plain zone?	<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 checked="" type="checkbox"/>	<input type="checkbox"/>
6. BOUNDARIES			
(a) Have you ever had a survey of your property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Do you know the boundaries of your property?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Are the boundaries of your property marked in any way?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Are you aware of any encroachments, recorded or unrecorded easements relating to this property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Is there any common fencing? If yes, explain any agreement and common maintenance.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Any improvements shared in common with adjoining or adjacent properties?....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. HOMEOWNER'S ASSOCIATION			
(a) Is the property subject to rules or regulations of any homeowner's association? If yes, please supply copy of rules and regulations.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. WATER			
(a) Are all the improvements connected to a public water system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) IF NOT, please state your water sources and explain.			
(c) Has your water system ever gone dry? If yes, explain.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Are you aware of any problems with your water lines and/or waterers?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) Is your water supply shared with anyone else?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. AUXILIARY HOUSES			
(a) Are you aware of any problems affecting any of the mechanical systems, structure Or roof on any of the auxiliary houses?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Were any auxiliary houses built before 1978?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(If yes seller may not accept and buyer should not present an offer to purchase contract that does not include a "Disclosure of Information and Acknowledgement of Lead-Based Paint and/or Hazards" addendum acknowledging receipt of the EPA pamphlet "Protect Your Family From Lead in Your Home".)			
10. BARNS/OUTBUILDINGS			
(a) Are you aware of any problems affecting any of the mechanical systems, Structure, or roof on any of the barns or outbuildings?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- | | Yes | No | Unknown |
|--|-------------------------------------|-------------------------------------|--------------------------|
| 11. UTILITIES | | | |
| (a) Are you aware of the location of the following underground utilities? | | | |
| 1) Water lines | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Electric lines..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Natural Gas/Propane | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) Telephone lines | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) Septic/Field lines..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) If you answered yes to any of the above, can you furnish a diagram of same? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. MISCELLANEOUS | | | |
| (a) To your knowledge, does the property have any ureaformaldehyde or asbestos materials used in construction? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Do you know of any violations of local, state or federal government laws or regulations relating to this property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Are you aware of any Radon test being performed on this property? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (d) Are you aware of any existing or threatened legal action affecting this property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (f) Are there any assessments other than property assessments that apply to this property?..... | <input type="checkbox"/> | <input checked="" 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"/> |
| (h) Have the house and/or other improvements ever been treated for wood infestation? If yes, when and by whom? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (i) Are you aware of any underground storage tanks?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (j) Are you aware of any past or present chemical contamination to the soil and/or water on this property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (k) Are you aware of any dumps on the property, present or past?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (l) Are any sink holes being used as a dump? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (m) To your knowledge, has the property been used for anything besides agricultural purposes? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (n) Are there any leases on the property (e.g. tobacco, mineral, timber, etc.)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (o) Have you ever had a soil analysis done?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, by whom and when. | | | |
| (p) Are you aware of any other fact, conditions or circumstances which may affect the desirability of this property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (q) Are you aware of any cemeteries, burial grounds or burial sites located on or within the boundaries of this property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. If the answer was "yes" to any of the above questions, please explain. | | | |

Fencing shared with neighbors on four sides.
 New 30 year dimensional shingle rood 9/2019
 Jack and Jill Bathtub plumbing replaced 9/21

THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. THIS INFORMATION IS PROVIDED BY THE SELLER FOR THE BENEFIT OF THE PROSPECTIVE BUYER(S). THIS INFORMATION IS BELIEVED TO BE ACCURATE BUT NOT WARRANTED BY ANY REALTOR.

<i>Mary Sue Walker</i> <small>dotloop verified 10/01/21 8:14 AM EDT G440-JXK4-BB5B-MYUD</small>	
SELLER	SELLER
DATE	DATE
TIME	TIME

IF THIS FORM IS BLANK, THE BROKER/AGENT'S SIGNATURE BELOW CONSTITUTES NOTICE TO THE BUYER THAT THE SELLER HAS DECLINED TO PROVIDE THE INFORMATION NECESSARY TO COMPLETE THIS FORM.

BROKER/AGENT: _____ DATE: _____ TIME: _____

I (WE) ACKNOWLEDGE THAT I (WE) HAVE RECEIVED A COPY OF THE "SELLER'S REAL PROPERTY HISTORY".

BUYER	BUYER
DATE	DATE
TIME	TIME

If you have specific questions please consult an attorney.
 The Lexington-Bluegrass Association of Realtors disclaims any and all liability that may result from your use of this form.

KENTUCKY REAL ESTATE COMMISSION

Public Protection Cabinet
 Mayo-Underwood Building
 500 Mero Street 2NE09
 Frankfort, Kentucky 40601
 (502) 564-7760

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 warranty is provided;
2. Sales of real estate at auction; or
3. A court supervised foreclosure

As a Seller, you are asked to disclose what you know about the property you are selling. Your answers to the questions in this form must be based on the best of your knowledge of the property you are selling, however and whenever you gained that knowledge. Please take your time to answer these questions accurately and completely.

Property Address

3650 Delaney Ferry Road

City	State	Zip
Versailles	KY	40383

PURPOSE OF DISCLOSURE FORM: Completion of this form shall satisfy the requirements of KRS 324.360 that mandates the "seller's disclosure of conditions" relevant to the listed property. This disclosure is based on the Seller's knowledge of the property's condition and the improvements thereon, however that knowledge was gained. This disclosure form shall not be a warranty by the Seller or 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, architecture, engineering, or any other specific areas related to the construction or condition of the property or the improvements on it. Unless otherwise advised, the Seller has not conducted any inspection of generally inaccessible areas such as the foundation or roof. The Buyer is encouraged to obtain his or her own professional inspections of this property.

INSTRUCTIONS TO THE SELLER(S): (1) Answer every question truthfully. (2) Report all known conditions affecting the property, regardless of how you know about them or when you learned. (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 an item does not apply to your property, mark "not applicable." (6) If you truthfully do not know the answer to a question, mark "unknown." (7) If you learn any fact prior to closing that changes one or more of your answers to this form after you have completed and submitted it, immediately notify your agent or any potential buyer of the change in writing.

SELLER'S DISCLOSURE: As Seller(s), 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(s) authorize(s) 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.

Answer all questions to the best of your knowledge. Attach additional sheets as necessary.

1. PRELIMINARY DISCLOSURES	N/A	YES	NO	UN-KNOWN
a. Have you ever lived in the house?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. List the date (month / year) you purchased the house. <u>8/2006</u>				
c. Do you own the property as (an) individual(s) or as representative(s) of a company?				
Explain: <u>individual</u>				
d. To the best of your knowledge, has the house been used as a rental?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e. To the best of your knowledge, has this house ever been vacant (not lived-in) for more than three (3) consecutive months?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f. To the best of your knowledge, has this house ever been used for anything other than a residence?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain:				

09/30/21
5:10 Seller
dotloop verified

Date/Time

Buyer Initials

Date/Time

PROPERTY ADDRESS: 3650 Delaney Ferry Road, Versailles, KY 40383

2. HOUSE SYSTEMS

Whether or not they have been corrected, state whether there have been problems affecting:	N/A	YES	NO	UN-KNOWN
a. Plumbing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Electrical system	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Appliances	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Ceiling and attic fans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Security system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Sump pump	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
g. Chimneys, fireplaces, inserts	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
h. Pool, hot tub, sauna	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Sprinkler system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Heating system		age of system: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
k. Cooling/air conditioning system		age of system: <u>10 and 15</u>	<input type="checkbox"/>	<input type="checkbox"/>
l. Water heater		age of system: ?	<input type="checkbox"/>	<input type="checkbox"/>

Please explain any deficiencies noted in this Section: _____

3. BUILDING STRUCTURE

	N/A	YES	NO	UN-KNOWN
a. Whether or not they have been corrected, state whether there have been problems affecting:				
1) The foundation or slab	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) The structure or exterior veneer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3) The floors and walls	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) The doors and windows	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. 1) To the best of your knowledge, has the basement ever leaked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) When was the last time the basement leaked?				
3) Have you ever had any repairs done to the basement?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) If you have had basement leaks repaired, when was the repair done? 8 years ago				
5) If the basement presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.)				
Explain: _____				
h. Have you experienced, or are you aware of, any water or drainage problems in the crawl space?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Are you aware of any damage to wood due to moisture or rot?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
j. Are you aware of any present or past wood infestation (e.g. termites, borers, carpenter ants, fungi, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
k. Are you aware of any damage due to wood infestation?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1) Has the house or any other improvement been treated for wood infestation?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) If yes, by whom? _____				
3) Is there a warranty? _____				

Please explain any deficiencies noted in this Section: _____

4. ROOF

	N/A	YES	NO	UN-KNOWN
a. How old is the roof covering? (write the age of the roof if known)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Has the roof leaked at any time since you have owned or lived at the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. To the best of your knowledge, has the roof leaked at any time before you owned or lived at the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. When was the last time the roof leaked?				
e. Have you ever had any repairs done to the roof?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Seller Initials Date/Time

Buyer Initials Date/Time

PROPERTY ADDRESS: 3650 Delaney Ferry Road, Versailles, KY 40383

f. Have you ever had the roof replaced?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, when? 2019				
g. If the roof presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.)				
Explain:				
h. Have you ever had roof repairs that involved placing shingles on the roof instead of replacing the entire roof covering? If so, when?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Please explain any deficiencies noted in this Section:				

5. LAND / DRAINAGE	N/A	YES	NO	UN-KNOWN
a. Whether or not they have been corrected, state whether there have been problems affecting:				
1) Soil stability	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) Drainage, flooding, or grading	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3) Erosion	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4) Outbuildings or unattached structures	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Is the house 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 checked="" type="checkbox"/>	<input type="checkbox"/>
If so, what is the flood zone?				
c. 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 checked="" type="checkbox"/>	<input type="checkbox"/>
Please explain any deficiencies noted in this Section:				

6. BOUNDARIES	N/A	YES	NO	UN-KNOWN
a. Have you ever had a staked or pinned survey of the property performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Are you in possession of a copy of any survey of the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Are the boundaries marked in any way?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: Fences				
d. Do you know the boundaries?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				
e. Are there any encroachments or unrecorded easements relating to the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain:				


7. WATER	N/A	YES	NO	UN-KNOWN
a. Source of water supply: South Woodfords Water District				
b. Are you aware of below normal water supply or water pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Has your water ever been tested? If so, attach the results or explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				


8. SEWER SYSTEM	N/A	YES	NO	UN-KNOWN
a. Property is serviced by:				
1. Category I: Public Municipal Treatment Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Category II: Private Treatment Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Category III: Subdivision Package Plant	<input 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"/>
5. Category V: Septic Tank with drain field, lagoon, wetland, or other onsite dispersal	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Category VII: No Treatment/Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of Servicer:				
b. For properties with Category IV, V, or VI systems				
Date of last inspection (sewer):				
Date of last inspection (septic): 7-21	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 type="checkbox"/>
Please explain any deficiencies noted in this Section:				



 09/30/21
 5:18 PM
 dotloop verified

Initials Date/Time






Buyer Initials

Date/Time


PROPERTY ADDRESS: 3650 Delaney Ferry Road, Versailles, KY 40383

9. CONSTRUCTION / REMODELING				
	N/A	YES	NO	UN-KNOWN
a. Have there been any additions, structural modifications, or other alterations made?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. If so, were all necessary permits and government approvals obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explain:				
10. HOMEOWNER'S ASSOCIATION (HOA)				
	N/A	YES	NO	UN-KNOWN
a. 1) Is the property subject to rules or regulations of a HOA?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) If yes, what is the yearly assessment?				
3) HOA Name:				
HOA Primary Contact Name:				
HOA Primary Contact Phone No.:				
b. Is the property a condominium?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, you must also complete KREC Form 404, the Condominium Seller's Certificate				
c. Are you aware of any condition that may result in an increase in taxes or assessments?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. 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 type="checkbox"/>	<input type="checkbox"/>
e. Are there any pet or rental restrictions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain:				
11. HAZARDOUS CONDITIONS				
	N/A	YES	NO	UN-KNOWN
a. 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"/>
b. Are you aware of any other environmental hazards? (e.g., carbon monoxide, hazardous waste, water contamination, asbestos, the use of urea formaldehyde, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LEAD BASED PAINT DISCLOSURE REQUIREMENT				
Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint, which may cause certain health risks.				
c. Was this house built before 1978?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are you aware of the existence of lead-based paint in or on this house?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
RADON DISCLOSURE REQUIREMENT				
Radon is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities, may present health risks, including lung cancer. The Kentucky Department for Public Health recommends radon testing. For more information, visit chfs.ky.gov and search "radon."				
e. 1) Are you aware of any testing for radon gas?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) If yes, what were the results? Mitigation system installed				
f. 1) Is there a radon mitigation system installed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) If yes, is it functioning properly?				
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.				
g. 1) Is the property currently contaminated by the production of methamphetamine?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2) If no, has the property been professionally decontaminated from methamphetamine contamination?				
Explain:				
12. MISCELLANEOUS				
	N/A	YES	NO	UN-KNOWN
a. 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"/>
b. 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"/>
c. 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"/>
d. Are there any warranties to be passed on?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



 09/30/21
 5:10 PM
 dotloop verified

 Date/Time



 Buyer Initials

 Date/Time

PROPERTY ADDRESS: 3650 Delaney Ferry Road, Versailles, KY 40383

Explain: _____

e. Has this house ever been damaged by fire or other disaster?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. 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"/>
g. Has this house ever had pets living in it?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: Cats and Dog				
h. Is this house in a historic district or listed on any registry of historic places?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. ADDITIONAL INFORMATION	N/A	YES	NO	UN-KNOWN
Do you know anything else about the property that that should be disclosed to the Buyer?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If yes, please provide details in the space provided, below. Attach additional sheets, as necessary.

14. SELLER(S) CERTIFICATION (CHOOSE ONE)

As Seller(s) I / we hereby certify that the information disclosed above is complete and accurate to the best of my / our knowledge and belief. I / we agree to immediately notify Buyer in writing of any changes that become known to me / us prior to closing.

Seller Signature	Date	Seller Signature	Date
X <i>Mary Sue Walker</i>		X	

As Seller(s) I / we hereby certify that my / our Real Estate Agent, _____ (print name) has completed this form with information provided by me / us at my / our direction and request. I / we further agree to hold the above-named agent harmless for any representations that appear on this form, in accordance with KRS 324.360(9).

Seller Signature	Date	Seller Signature	Date
X		X	

As Seller(s) I / we refuse to complete this form and acknowledge that the Real Estate Agent will so inform the Buyer.

Seller Signature	Date	Seller Signature	Date
X		X	

The Seller(s) refuse(s) to complete this form or to acknowledge such refusal.

Broker / Agent Print Name	Broker / Agent Signature	Date
	X	

The Buyer(s) hereby certifies they have received a copy of this Seller's Disclosure of Property form

Buyer Signature	Date	Buyer Signature	Date
X		X	