



800-887-8625 - 844-847-2161

[www.BigIronRealty.com](http://www.BigIronRealty.com) - [www.sullivanauctioneers.com](http://www.sullivanauctioneers.com)

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

DATE:

8/31/2023

SELLER:

Joyce Hammons Estate, Glenna Daniels Young  
Personal Representative

PROPERTY ADDRESS:

17995 Gasperi Road

Novinger, MO 63559

**SELLER'S INFORMATION**

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

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

**Statutory Disclosures:**

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

**Part I. - OCCUPANCY OF THE PROPERTY.**

1. Approximate age of the Property: 100 years  
 2. Approximate date that SELLER acquired the Property: inherited 1988, parents bought 1952  
 3. Does SELLER currently occupy the Property? YES ☒ NO. deceased 2/27/2023  
 If NO, how long has it been since SELLER has occupied the Property \_\_\_\_\_

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

**SECTION A. - APPLIANCES, EQUIPMENT AND FIXTURES:**

	Not Included	Working	Working	Unknown
1. Air conditioning-central system	<input checked="" type="checkbox"/>			
2. Air conditioning - window units # <u>1</u>				<input checked="" type="checkbox"/>
3. Air purifier system	<input checked="" type="checkbox"/>			
4. Attic fan	<input checked="" type="checkbox"/>			
5. Cable television wiring/jacks	<input checked="" type="checkbox"/>			
6. Ceiling fan(s) # <u>1</u>				<input checked="" type="checkbox"/>
7. Central vacuum system and attachments	<input checked="" type="checkbox"/>			

Buyer's Initial & Date

\_\_\_\_\_  
 Date \_\_\_\_\_  
 \_\_\_\_\_  
 Date \_\_\_\_\_

Seller's Initial & Date

Gay Date 2/31/23  
 \_\_\_\_\_  
 Date \_\_\_\_\_

	Not Included	Working	Working	Unknown
8. Clothes dryer				<input checked="" type="checkbox"/>
9. Clothes washer				<input checked="" type="checkbox"/>
10. Dishwasher				<input checked="" type="checkbox"/>
11. Disposal	<input checked="" type="checkbox"/>			
12. Doorbell	<input checked="" type="checkbox"/>			
13. Exhaust Fans-Bathrooms	<input checked="" type="checkbox"/>			
14. Fireplace/fireplace insert	<input checked="" type="checkbox"/>			
15. Fireplace gas logs	<input checked="" type="checkbox"/>			
16. Fireplace gas starter	<input checked="" type="checkbox"/>			
17. Fireplace wood burning stove	<input checked="" type="checkbox"/>			
18. Garage door opener(s) # _____	<input checked="" type="checkbox"/>			
19. Gas grill	<input checked="" type="checkbox"/>			
20. Heating system <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Hot Water		<input checked="" type="checkbox"/>		
21. Heat pump	<input checked="" type="checkbox"/>			
22. Hot tub-whirlpool	<input checked="" type="checkbox"/>			
23. Humidifier	<input checked="" type="checkbox"/>			
24. Intercom, sound system, speakers	<input checked="" type="checkbox"/>			
25. Microwave oven	<input checked="" type="checkbox"/>			
26. Oven <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas				<input checked="" type="checkbox"/>
27. Propane tank <input checked="" type="checkbox"/> Leased <input type="checkbox"/> Owned				
28. Range <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas		<input checked="" type="checkbox"/>		
29. Range ventilation system	<input checked="" type="checkbox"/>			
30. Refrigerator # <u>1</u>		<input checked="" type="checkbox"/>		
31. Sauna/spa <input type="checkbox"/> Steam <input type="checkbox"/> Dry	<input checked="" type="checkbox"/>			
32. Security system <input type="checkbox"/> Owned <input type="checkbox"/> Leased	<input checked="" type="checkbox"/>			
33. Smoke alarms/detectors# _____	<input checked="" type="checkbox"/>			
34. Sprinkler system	<input checked="" type="checkbox"/>			
35. Sump Pump	<input checked="" type="checkbox"/>			
36. Swimming Pool	<input checked="" type="checkbox"/>			
37. Telephone wiring/jacks	<input checked="" type="checkbox"/>			
38. Television antenna/receiver/sat dish <u>hard shut off</u> <input type="checkbox"/> Own <input checked="" type="checkbox"/> Leased		<input checked="" type="checkbox"/>		

39. Trash compactor	<u>X</u>	_____	_____	_____
40. Water heater- electrical problems	_____	_____	_____	<u>X</u>
41. Water purified/softener _____ Owned _____ Leased	<u>X</u>	_____	_____	_____
42. Other _____	_____	_____	_____	_____
43. Other _____	_____	_____	_____	_____

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

**A. STRUCTURAL CONDITIONS:**

1. What is the approximate age of the roof (if known)? 30 years. Type of roof: Shingle/flat roof - 2 Rooms
2. Have there been any leaking or other problems with the roof, flashing or rain gutters? around chimney XYES NO
3. Have there been any repairs to the roof, flashing or rain gutters?  
If so, please provide the date of the repairs \_\_\_\_\_  
YES XNO
4. Has there been any roof replacement? flat roof 2016 \_\_\_\_\_  
YES XNO
5. How many layers of roofing materials are currently on the roof (if known)? 2? \_\_\_\_\_  
YES NO
6. Have you made any homeowners' insurance claims on the Property?  
If so, were all the repairs completed? \_\_\_\_\_  
YES XNO
7. Has there ever been leakage/seepage in the basement or crawl space?  
XYES NO

Buyer's Initial & Date

\_\_\_\_\_  
Date \_\_\_\_\_  
\_\_\_\_\_  
Date \_\_\_\_\_

Seller's Initial & Date

Guy Date 9/31/23  
\_\_\_\_\_  
Date \_\_\_\_\_

8. Has there been any damage to the Property due to wind, fire or flood? wind XYES NO
9. Are there any structural problems with the Property? XYES NO
10. Is any exterior wall covering of the structure covered with synthetic stucco? YES XNO
11. Is there any damage to the chimney or fireplace? not used for furnace XYES NO
12. Is there any exposed wiring presently in any structures on the Property? 2 YES NO
13. Are there any windows or doors that leak or have broken thermopane seals? XYES NO
14. Have you ever experienced or are you aware of any:  
Movement, shifting, deterioration or other problems with crawl space, foundations, slab or walls? 3 YES NO  
Cracks or flaws in the basement floor, ceilings, concrete slab, crawl space, foundations or garage? 2 YES NO  
Corrective action to remedy these structural conditions, including but not limited to bracing or piercing? YES XNO  
Water leakage or dampness in the Property, crawl space or basement? XYES NO  
Dry rot, wood rot or similar conditions on the wood of the Property? XYES NO  
Problems with decks, driveways, fences, patios or retaining walls on the Property? XYES NO
15. Do you have any knowledge of any damage to the Property caused by termites or wood infestation?  
If so, is the Property currently under warranty? YES XNO  
If so, please name the company here: \_\_\_\_\_  
YES NO
16. Have you had any termite/pest control treatments for the Property?  
If so, please name the company and year treated here: \_\_\_\_\_  
YES 3 NO
17. Has the ground been pre-treated for termites? YES XNO
18. If you have answered "YES" to any of the questions in A(1) through (17), please attach documentation to describe the date, extent and location of the problem and name of the person or entity responsible for repairing the problem. In addition, please attach, if available, any inspection reports, repair estimates and receipts. Explain in detail here:  
wind damage to siding 2010? uneven floors, stone foundation, cracks in basement floor

19. Additional Comments:

**B. LAND (SOILS; DRAINAGE; BOUNDARIES):**

1. Is the Property or any portion of the Property located in a flood zone, wetlands area or proposed to be located in such by the Federal Emergency Management Agency (FEMA) which requires flood insurance? YES XNO



2. Are you aware of any drainage or flood problems on the Property or adjacent properties? Levy built ☒ YES ☐ NO  
 3. Have any neighbors complained that the Property causes drainage problems? ☐ YES ☒ NO  
 4. Has the Property had a stake survey? ☒ YES ☐ NO  
 If YES, please attach a copy of the stake survey.  
 5. Are the boundaries of the Property marked in any way? fence lines ☒ YES ☐ NO  
 6. Do you have an Improvement Location Certificate (ILC) for the Property? ☐ YES ☒ NO  
 If YES, attach a copy of the Improvement Location Certificate (ILC).  
 7. Is there fencing on the Property? ☒ YES ☐ NO  
 If YES, does the fencing belong to the Property? Shana ☒ YES ☐ NO  
 8. Are you aware of encroachments, boundary line disputes or non-utility easements affecting the Property? ☐ YES ☒ NO  
 9. Any property features shared in common with adjoining landowners, i.e. walls, fences, roads, driveways? ☒ YES ☐ NO  
 If YES, are you responsible for maintenance of any such shared features? ☒ YES ☐ NO  
 10. Are you aware of any expansive soil, fill dirt, sliding, settling, earth movement, upheaval or earth stability problems that have occurred on the Property or in the immediate vicinity of the Property? ☒ YES ☐ NO  
 11. Are you aware of any diseased, dead or damaged trees or shrubs on the Property? ☐ YES ☒ NO  
 12. If you have answered "YES" to any of the questions in B (1) through (12), attach any documentation and explain here:

#11 mine/air shaft?

Buyer's Initial & Date

Date

Date

Seller's Initial & Date

Goy Date 8/31/23

Date

#### C. PLUMBING AND WATER SYSTEMS:

1. What is the drinking water source on the Property? ☒ Public Water ☐ Private Water ☐ Well ☐ Cistern ☐ Other  
 If well water, please state: Type \_\_\_\_\_ Depth \_\_\_\_\_ Diameter \_\_\_\_\_  
 2. If the drinking water source is a well, has the water been tested and, if so, what was the date and result of that test?

3. Does the Property have any sewage facilities on or connected to it? ☐ YES ☒ NO  
 If YES, please specify: ☐ Public Sewer ☐ Private Sewer ☐ Septic System ☐ Other \_\_\_\_\_

4. If there are sewage facilities on or connected to the Property, when were they last serviced? \_\_\_\_\_

5. Are you aware of any problems relating to the plumbing, sewage or water systems on the Property? ☒ YES ☐ NO

If YES, please explain:

plumbing inside has issues no septic system - over hill in back lot

6. Additional Comments:

#### D. ELECTRICAL/GAS/HEATING AND COOLING SYSTEMS:

1. Is there electric service connected to the Property? ☒ YES ☐ NO

If YES, is there a meter? ☒ YES ☐ NO

If NO, what is the distance to the nearest electrical service? \_\_\_\_\_

2. What type of material is used in the electrical wiring (if known)? ☐ Copper ☐ Aluminum ☒ Unknown

3. What type of electrical panels exist on the Property (if known)? ☒ Breaker ☒ Fuse ☐ Unknown

Please specify the location of the electrical panels here:

stairway to basement fuse box in basement

4. Does the Property have heating systems? ☒ YES ☐ NO

☐ Electric ☐ Fuel Oil ☐ Natural Gas ☐ Heat Pump ☒ Propane ☐ Other \_\_\_\_\_

If YES, please provide the name, age and location of the unit along with the date the unit was last service and by whom here:

thermace in basement 2000

5. Does the Property have air conditioning? ☒ YES ☐ NO

Central Electric ☐ Central Gas ☐ Heat Pump ☒ Window Unit(s) *Not sure if works*

If YES, please provide the name, age and location of the unit along with the date the unit was last serviced and by whom here:

6. Does the Property have a water heater? ☒ YES ☐ NO

☒ Electric ☐ Gas ☐ Solar

If YES, please provide the name, age and location of the unit along with the date the unit was last serviced and by whom here:

*Not sure if works 2016?*

7. Are you aware of any problems relating to the electrical, gas and heating and cooling systems on the Property? ☒ YES ☐ NO

If YES, please explain:

*Some lights and plugins don't work*

8. Additional Comments:

Buyer's Initial & Date

Date

Date

Seller's Initial & Date

*Greg* Date *8/31/23*

Date

#### E. HAZARDOUS CONDITIONS:

1. Are you aware of any underground storage tanks on or near this Property? ☐ YES ☒ NO

2. Are you aware of any previous or current existence of hazardous conditions (e.g., storage tanks, oil tanks, oil spills, tires, batteries or other hazardous conditions)? ☐ YES ☒ NO

3. Are you in possession of any previous environmental reports (e.g., Phase 1 Environmental Reports)? ☐ YES ☒ NO  
If YES, please attach a copy of the environmental reports.

4. Are you aware of any previous disposal of any hazardous waste products, chemicals, polychlorinated biphenyl's (PCBs), hydraulic fluids, solvents, paints, illegal or other drugs or insulation on the Property or adjacent property? ☐ YES ☒ NO

5. Are you aware of any other environment matters (i.e. discolored soil, vegetation, oil sheets, etc)? ☐ YES ☒ NO

6. Are you aware of any existing hazardous conditions on the Property or adjacent properties (i.e methane gas, radon gas, mold, radioactive material, landfill or toxic materials)? ☐ YES ☒ NO

7. Are you aware of any methamphetamine or other controlled substances being manufactured, stored or used on the Property? ☐ YES ☒ NO

8. Are you aware of natural gas/oil wells, lines or storage facilities on the Property or adjacent properties? ☒ YES ☐ NO

9. Are you aware of any other environmental conditions on the Property or adjacent properties? ☐ YES ☒ NO

10. Have any other environmental inspections or tests been conducted on the Property? ☐ YES ☒ NO

11. If you have answered "YES" to any of the questions in E(1) through (10), attach any documentation and explain here:

*oil? pipes, no longer being used*

12. Additional Comments:

#### F. NEIGHBORHOOD INFORMATION AND HOMEOWNERS' ASSOCIATIONS:

1. Are you aware of any current/pending assessments, bonds or special taxes that apply to the Property? ☐ YES ☒ NO

2. Is the property subject to conditions, covenants and restrictions of a homeowners' association or common interest community or subdivision restrictions? ☐ YES ☒ NO

3. Are you aware of any violations of such conditions, covenants or restrictions on the Property? ☐ YES ☒ NO



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

Private lane - easement in place for adjoining property

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

13. Additional Comments:

Buyer's Initial & Date

Date

Date

Seller's Initial & Date

Gay Date 9/31/23

Date

**G. OTHER MATTERS:** Are you aware of..

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

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

Farming Rental agreement - RENTER WILL HAVE RIGHT TO HARVEST CROPS AFTER SALE

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

CARPET 40 yrs old

19. Additional Comments:

**H. MISCELLANEOUS MATTERS:**

1. Are you aware of any other facts or condition affecting the habitability, use or value of the Property? ☐ YES ☒ NO
2. If YES, please explain here:

The information contained in this SELLER'S Property Disclosure Statement has been furnished by the SELLER(S), who certifies to the truth hereof to best of SELLER'S belief and knowledge, as of the date signed by the SELLER(S). Any substantive changes will be disclosed by the SELLER(S) to the BUYER(S) prior to closing.

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

Glenn Daniels Young 8/31/23  
SELLER Personal Representative Date

\_\_\_\_\_  
SELLER Date

Buyer's Initial & Date  
\_\_\_\_\_  
Date  
\_\_\_\_\_

Seller's Initial & Date  
Gay Date 8/31/23  
\_\_\_\_\_  
Date

**BUYER'S ACKNOWLEDGMENT AND AGREEMENT**

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

\_\_\_\_\_  
BUYER Date

\_\_\_\_\_  
BUYER Date

Buyer's Initial & Date  
\_\_\_\_\_  
Date \_\_\_\_\_  
\_\_\_\_\_  
Date \_\_\_\_\_

Seller's Initial & Date  
\_\_\_\_\_  
Date 8/31/23  
\_\_\_\_\_  
Date \_\_\_\_\_



## **Copied from Adair County Health Department (Missouri) website - Onsite Sewage page**

Homes in portions of Adair County that are without public sewer systems rely on onsite wastewater treatment systems (OWTS) to treat wastewater and disperse the treated effluent on the property where it originates. These systems should be designed and operated to prevent human contact with sewage and to prevent the contamination of surface water and groundwater. The [Missouri Onsite Sewage Law](#) (701.025-701.059 RSMo) and associated rules establish minimum standards for construction of onsite sewage treatment systems.

A permit is required for construction of an OWTS if the property is smaller than three acres, or if it is adjacent to a public utility lake or Corp of Engineers property. Due to the recent change in onsite program authority, to obtain a permit, you should now contact the Missouri Department of Health and Senior Services at [573-751-6095](tel:573-751-6095).

If the property does not meet conditions that would require a permit, the following conditions must be met:

1. All points of the system must be at least 10 feet from the property line, and
2. No effluent enters adjoining property, and
3. No effluent contaminates ground water or surface water, and
4. It does not create a nuisance. Nuisance is defined as human waste discharged or exposed on land in a manner that makes it a potential instrument or medium for breeding of flies and mosquitoes, the production of odors, or transmission of disease.

Regardless of whether a permit is required, the law requires that any person installing a new OWTS, or repairing an existing OWTS, be registered to do so with the Department of Health and Senior Services. Find a list of the [registered installers in Missouri](#).

New OWTS are designed based on the proposed home and the soil conditions on the site. Therefore, a soil morphology report, prepared by a Registered Onsite Soil Evaluator, should be prepared. The report determines the type of system and location on your property where the system may be installed. Find a list of the [registered soil evaluators in Missouri](#).

Many times during a real estate transaction, the buyer or lending institution will require an inspection of the OWTS to determine if it is adequate and complies with the law. This inspection must be conducted by a person who is licensed to inspect or evaluate onsite systems. Find a list of [Licensed Onsite System Inspectors/Evaluators](#).

If you have questions concerning onsite sewage treatment systems, please contact the Missouri Department of Health and Senior Services at [573-751-6095](tel:573-751-6095).



## Disclosure of Information on Lead-Based Paint and Lead-Based Paint Hazards

### Lead Warning Statement

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 that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

### Seller's Disclosure (initial)

Gay (a) Presence of lead-based paint and/or lead-based paint hazards (check one below):

☐ Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

☒ Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

Gay (b) Records and reports available to the seller (check one below):

☐ Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

☒ Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

### Purchaser's Acknowledgment (initial)

\_\_\_\_ (c) Purchaser has received copies of all information listed above.

\_\_\_\_ (d) Purchaser has received the pamphlet *Protect Your Family from Lead in Your Home*.

\_\_\_\_ (e) Purchaser has (check one below):

☐ Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or

☐ Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

### Agent's Acknowledgment (initial)

LLZ (f) Agent has informed the seller of the seller's obligations under 42 U.S.C. 4852(d) and is aware of his/her responsibility to ensure compliance.

### Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.

Shana Davis Youngs Personal Representative 9/5/23

Seller \_\_\_\_\_ Date \_\_\_\_\_

Roy Louis \_\_\_\_\_ Date 9-5-23

Agent \_\_\_\_\_ Date \_\_\_\_\_

Purchaser \_\_\_\_\_ Date \_\_\_\_\_

Seller \_\_\_\_\_ Date \_\_\_\_\_

Agent \_\_\_\_\_ Date \_\_\_\_\_

Purchaser \_\_\_\_\_ Date \_\_\_\_\_