

# SELLER'S PROPERTY DISCLOSURE STATEMENT

## EXHIBIT " \_\_\_\_\_ "



2010 Printing

This Exhibit is part of the Agreement with an Offer Date of \_\_\_\_\_ for the purchase and sale of that certain Property known as: 6270 Timbercreek Trail, Dahlonega, Georgia 30533.

**NOTICE TO BUYER AND SELLER:** This disclosure statement is designed to assist Seller in disclosing to prospective buyers material adverse facts relating to the physical condition of Property that may not be readily observable, disclosing historical information and past problems with Property, and identifying those fixtures/items that are included with the sale of Property. All answers are to be answered with respect to the above referenced property. IF THE ANSWERS TO ANY OF THE QUESTIONS LISTED BELOW ARE "YES" OR "OTHER" SELLER SHALL FULLY EXPLAIN THE ANSWER TO THE QUESTION IN THE BLANK CORRESPONDING TO THE QUESTION AND/OR IN THE ADDITIONAL EXPLANATIONS PARAGRAPH.

	Yes	No	Don't Know
<b>1. OCCUPANCY:</b>			
(a) Is Property vacant? If yes, how long has it been since Seller occupied Property? _____	_____	<input checked="" type="checkbox"/>	_____
(b) Are there any leases, written or verbal, on Property or any part thereof?	_____	<input checked="" type="checkbox"/>	_____
<b>2. SOIL, TREES, SHRUBS AND BOUNDARIES:</b>			
(a) Are there any landfills (other than foundation backfill), graves, mine shafts, trash dumps or wells (in use or abandoned) on Property?	_____	<input checked="" type="checkbox"/>	_____
(b) Is there any sliding, settling (other than normal settling), earth movement, sinkholes, upheaval, or earth stability/expansive soil problems?	_____	<input checked="" type="checkbox"/>	_____
(c) Are there any diseased or dead trees on Property?	_____	<input checked="" type="checkbox"/>	_____
(d) Are there any encroachments (known or recorded), leases, unrecorded easements, or boundary line disputes?	_____	<input checked="" type="checkbox"/>	_____
<b>3. TERMITES, DRY-ROT, PESTS, AND WOOD-DESTROYING ORGANISMS:</b>			
(a) Is there any past or present damage to Property caused by infiltrating pests, termites, dry-rot, or other wood-destroying organisms?	_____	<input checked="" type="checkbox"/>	_____
(b) Is your Property currently under a transferable bond, warranty or other coverage for termites or other wood destroying organisms by a licensed pest control company? If yes, check type of coverage: <input type="checkbox"/> re-treatment and repair; or <input type="checkbox"/> re-treatment	_____	<input checked="" type="checkbox"/>	_____
(c) Is there a cost to transfer the bond, warranty or other coverage? If yes, what is the cost? \$ _____	_____	<input checked="" type="checkbox"/>	_____
(d) Is there a cost to maintain the bond, warranty or other coverage? If yes, what is the annual cost? \$ _____ Renewal Date _____	_____	<input checked="" type="checkbox"/>	_____
(e) Have any termite/pest control reports or treatments for Property been done in the last five (5) years?	_____	<input checked="" type="checkbox"/>	_____
(f) Does any dwelling or garage on Property have any untreated wood or exterior siding/cladding, such as rigid board insulation, foam plastic, synthetic stucco, hard coat stucco, wood or masonry siding (excluding brick), below grade or within six inches of finished grade?	_____	<input checked="" type="checkbox"/>	_____
<b>4. STRUCTURAL ITEMS, ADDITIONS AND ALTERATIONS:</b>			
(a) What year was the main residential dwelling constructed? <u>2000</u>	_____	_____	_____
(b) Has there been any movement, shifting, settling (other than normal settling), cracking, deterioration, or other structural problems with any dwelling or garage on Property?	_____	<input checked="" type="checkbox"/>	_____
(c) Has there been any additional structural bracing, underpinning, or other structural reinforcement added to any dwelling or garage on Property?	_____	<input checked="" type="checkbox"/>	_____
(d) Are there any problems with driveways, walkways, patios, or retaining walls on Property?	_____	<input checked="" type="checkbox"/>	_____
(e) Have there been any additions, structural changes, or any other major alterations to the original improvements on the Property?	_____	<input checked="" type="checkbox"/>	_____
(f) Has there been any work done on the Property where required permits and/or approvals (public or private) were not obtained?	_____	<input checked="" type="checkbox"/>	_____
(g) Has any work been done to Property that was not in compliance with building codes or zoning regulations?	_____	<input checked="" type="checkbox"/>	_____
(h) Does any part of the exterior siding or cladding of any dwelling or garage on Property consist of synthetic stucco?	_____	<input checked="" type="checkbox"/>	_____
<b>5. LEAD-BASED PAINT:</b> Was any part of the residential dwelling on the Property or any painted component, fixture or material used therein constructed or manufactured prior to 1978? <input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input checked="" type="checkbox"/> No If you have answered "Yes" or "Don't Know" the Lead-Based Paint Exhibit F54 must be executed by the parties and the Lead-Based Paint Pamphlet F55 must be provided to the buyer.			

	Yes	No	Don't Know
<b>6. ROOF, GUTTERS AND DOWNSPOUTS:</b>			
(a) Approximate age of roof: <u>10</u> years.			
(b) Has the roof, or any part thereof, been repaired during Sellers ownership?		✓	
(c) Are there any roof leaks or other problems with the roof, roof flashing, gutters or downspouts?		✓	
<b>7. DRAINAGE, FLOODING AND MOISTURE:</b>			
(a) Has there been any water leakage, water accumulation, or dampness within the basement, crawl space or other parts of the main dwelling at or below grade?		✓	
(b) Have any repairs been made to control any water or dampness problems in the basement, crawl space, or other parts of the main dwelling at or below grade?		✓	
(c) Is the Property or any improvements thereon located in a flood zone?		✓	
(d) Does water regularly stand on Property for more than one (1) day after it has rained?		✓	
(e) Has there been any past flooding on Property?		✓	
(f) Are there any problems with siding or exterior cladding, swelling, chipping, delaminating or retaining moisture?		✓	
(g) Does mold appear on interior heated and cooled portions of any dwelling on Property other than on the walls, floors or ceilings of showers, sinks, and bathtubs?		✓	
<b>8. PLUMBING RELATED ITEMS:</b>			
(a) What is your drinking water source: <input type="checkbox"/> public <input type="checkbox"/> private <input checked="" type="checkbox"/> well on property			
(b) If your drinking water is from a well, has it been tested within the past 12 (twelve) months?		✓	
(c) Do you have a water softener, filter or purifier? If yes, <input type="checkbox"/> leased <input type="checkbox"/> owned		✓	
(d) What is the type of sewage system: <input type="checkbox"/> public <input type="checkbox"/> private <input checked="" type="checkbox"/> septic tank			
(e) Is the main dwelling served by sewage pump or lift system?	✓		
(f) Do you know if any septic tank or cesspool on Property has ever been professionally serviced? If yes, please give the date of last service: _____	✓		
(g) Do you know of any past or present leaks, backups, or other similar problems relating to any of the plumbing, water and/or sewage-related items?		✓	
(h) Is there any polybutylene plumbing, other than primary service line, on Property?		✓	
(i) Are any of the plumbing fixtures in the Property not low water flow fixtures?		✓	
<b>9. OTHER SYSTEMS AND COMPONENTS:</b>			
(a) What type of heating system(s) serve the main dwelling? <input type="checkbox"/> gas <input checked="" type="checkbox"/> electric <input type="checkbox"/> other			
(b) What is the approximate age of heating system(s): <u>10</u> years			
(c) What type of air conditioning system(s) serve the main dwelling? <input type="checkbox"/> gas <input checked="" type="checkbox"/> electric <input type="checkbox"/> other			
(d) What is the approximate age of air conditioning system(s) <u>3</u> years			
(e) Is any portion of the main dwelling not served by a central or zoned heating and/or air conditioning system?		✓	
(f) How is water heated in the main dwelling? <input checked="" type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> solar			
(g) What is the approximate age of water heater: <u>10</u> years			
(h) Does the main dwelling have aluminum wiring other than the primary service line?		✓	
(i) Is there any system or appliance which is leased or for which the buyer must pay a transfer fee to continue to use? If yes, what is the transfer fee? \$ _____ If yes, what is the current use fee to be paid by the Buyer? \$ _____		✓	
(j) Are any fireplaces not working or in need of repair?		✓	
(k) When was each fireplace, wood stove or chimney/flue last cleaned? Date(s): _____			
<b>10. TOXIC SUBSTANCES:</b>			
(a) Are there any underground tanks, toxic or hazardous substances on Property (structure or soil) such as asbestos, urea-formaldehyde, methane gas, radioactive material, radon, mold, benzene or other environmental contaminants?		✓	
(b) Has Property ever been tested for radon, lead, mold or any other potentially toxic substances?		✓	
<b>11. COVENANTS, FEES AND ASSESSMENTS:</b>			
(a) Is Property part of a condominium, community association or subject to covenants, conditions and restrictions (CC & Rs)?	✓		
(b) Is there a mandatory community association fee or assessment? If yes, what is the amount? \$ <u>100.00</u> per <u>year</u> Is there an initiation fee? If yes, what amount? \$ _____	✓		
(c) Are there any recreational facilities in the community for which the obligation to pay and the right to use are optional? If yes, the nature of the facilities should be described in the Additional Explanations paragraph and the optional fee or charge is \$ _____		✓	
(d) In purchasing Property, will any initiation, transfer, or other similar fee be owed to the Association? If yes, what is the amount? \$ _____		✓	
(e) Are there any special assessments approved by a Community Association that are not yet due and payable? If yes, what is the amount? \$ _____		✓	



**12. OTHER MATTERS:**

- (a) Have there been any inspections of Property in the past year?  
If yes, by whom and of what type? \_\_\_\_\_
- (b) Was any of the drywall used in the Property made in China and/or have a foul smelling odor? \_\_\_\_\_
- (c) Does Property contain any building products which are or have been the subject of class action lawsuits, litigation or legal claims alleging that the product is defective? If yes, please identify in the Additional Explanations the product or products and the general location of each on Property. \_\_\_\_\_
- (d) Is there or has there been in the past any litigation involving Property or any improvement therein alleging negligent or improper construction defects, termites, and/or title problems? \_\_\_\_\_
- (e) Has there been any award or payment of money in lieu of repairs for such a defective building product? \_\_\_\_\_
- (f) Has any release been signed that would limit a future owner from making any claims in connection with Property? \_\_\_\_\_
- (g) Has there been any fire, flood or wind damage which required repairs to Property in excess of \$500.00? \_\_\_\_\_
- (h) Approximately how many insurance claims have been filed on Property since you owned it? NONE
- (i) Are any fixtures or appliances included in the sale in need of repair? \_\_\_\_\_
- (j) Have any repairs been made to the electrical, plumbing, or heating and air condition systems, or any part thereof? \_\_\_\_\_
- (k) Was any dwelling on Property or portion thereof (excluding mobile, modular and manufactured dwelling) moved to the site from another location? \_\_\_\_\_
- (l) Are there any other adverse, material facts pertaining to the physical condition of the Property that have not otherwise been disclosed? \_\_\_\_\_

Yes	No	Don't Know
_____	<input checked="" type="checkbox"/>	_____
_____	<input checked="" type="checkbox"/>	_____
_____	<input checked="" type="checkbox"/>	_____
_____	<input checked="" type="checkbox"/>	_____
_____	<input checked="" type="checkbox"/>	_____
_____	<input checked="" type="checkbox"/>	_____
_____	<input checked="" type="checkbox"/>	_____
_____	<input checked="" type="checkbox"/>	_____
<input checked="" type="checkbox"/>	_____	_____
_____	<input checked="" type="checkbox"/>	_____
_____	<input checked="" type="checkbox"/>	_____

**FIXTURES/ITEMS:** (Check (✓) only those fixtures/items below that are included in the sale of Property. Unless otherwise indicated, if there is more than one item (such as a second refrigerator or two chandeliers or three smoke detectors), all such fixtures/items checked are included in the sale of Property. Those fixtures/items listed below that are not checked shall not be included in the sale of Property.

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Air Conditioning Window Unit                               | <input type="checkbox"/> Fence Pet Collar                                | <input checked="" type="checkbox"/> Microwave Oven                                  | <input type="checkbox"/> Sump Pump  |
| <input type="checkbox"/> Air Purifier   | <input type="checkbox"/> Fireplace                                       | <input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input checked="" type="checkbox"/> Surface Unit Cook Top                 |
| <input type="checkbox"/> Alarm System (Burglar)                                     | <input type="checkbox"/> Gas Logs  | <input type="checkbox"/> Mirror (Attached)  | <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric |
| <input type="checkbox"/> Leased <input type="checkbox"/> Owned                      | <input type="checkbox"/> Gas Starter Key                                 | <input type="checkbox"/> Outbuilding  | <input checked="" type="checkbox"/> Swimming Pool                         |
| <input type="checkbox"/> Alarm System (Smoke/Fire)                                  | <input type="checkbox"/> Remote Control                                  | <input type="checkbox"/> Outdoor Bench  | <input type="checkbox"/> Above Ground                                     |
| <input type="checkbox"/> Leased <input type="checkbox"/> Owned                      | <input type="checkbox"/> Screen/Door                                     | <input type="checkbox"/> Playhouse  | <input type="checkbox"/> Swimming Pool Equipment (List below)             |
| <input type="checkbox"/> Arbor  | <input type="checkbox"/> Wood Burning Insert                             | <input type="checkbox"/> Porch swing  | <input type="checkbox"/> Swing Set  |
| <input type="checkbox"/> Attic Fan (Whole House Fan)                                | <input type="checkbox"/> Fire Sprinkler System                           | <input type="checkbox"/> Propane Gas/ Fuel Oil Tanks                                | <input type="checkbox"/> Switch Plate Covers                              |
| <input type="checkbox"/> Attic Ventilator Fan                                       | <input type="checkbox"/> Flag Pole                                       | <input type="checkbox"/> Above ground <input type="checkbox"/> Buried               | <input type="checkbox"/> Telephone Jacks/Wires                            |
| <input type="checkbox"/> Awning   | <input type="checkbox"/> Garbage Disposal                                | <input type="checkbox"/> Leased <input type="checkbox"/> Owned                      | <input checked="" type="checkbox"/> Television Antenna                    |
| <input type="checkbox"/> Basketball Post & Goal                                     | <input checked="" type="checkbox"/> Garage Door Opener                   | <input type="checkbox"/> Propane/ Fuel Oil in Tank                                  | <input type="checkbox"/> Television Cable/Jacks                           |
| <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            | <input checked="" type="checkbox"/> Remote Control                       | <input type="checkbox"/> Radio (Built-In)   | <input type="checkbox"/> Thermostat (Programmable)                        |
| <input type="checkbox"/> Birdhouses   | <input type="checkbox"/> Gas Grille                                      | <input type="checkbox"/> Refrigerator   | <input type="checkbox"/> Trash Compactor                                  |
| <input type="checkbox"/> Boat Dock  | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Safe   | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing  |
| <input type="checkbox"/> Carbon Monoxide Detector                                   | <input type="checkbox"/> Gates   | <input type="checkbox"/> Satellite Dish/Receiver                                    | <input type="checkbox"/> Tree House                                       |
| <input checked="" type="checkbox"/> Ceiling Fan                                     | <input type="checkbox"/> Remote Control                                  | <input type="checkbox"/> Sauna  | <input type="checkbox"/> Trellis  |
| <input type="checkbox"/> Remote Control   | <input type="checkbox"/> Gazebo  | <input type="checkbox"/> Septic Pump  | <input type="checkbox"/> Vacuum System (Built-In)                         |
| <input type="checkbox"/> Chandelier   | <input type="checkbox"/> Hot Tub   | <input type="checkbox"/> Shelving Unit & System                                     | <input type="checkbox"/> Vacuum Attachments                               |
| <input type="checkbox"/> Closet Shelving System                                     | <input type="checkbox"/> Humidifier                                      | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            | <input checked="" type="checkbox"/> Vent Hood                             |
| <input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Ice Maker                                       | <input checked="" type="checkbox"/> Shower Head/Sprayer                             | <input type="checkbox"/> Washing Machine                                  |
| <input type="checkbox"/> Dehumidifier   | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Smoke Detector   | <input type="checkbox"/> Water Purification System                        |
| <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing            | <input type="checkbox"/> Intercom  | <input type="checkbox"/> Battery Operated   | <input type="checkbox"/> Water Softener System                            |
| <input type="checkbox"/> Dishwasher   | <input type="checkbox"/> Jetted Tub                                      | <input type="checkbox"/> Hard Wired   | <input type="checkbox"/> Weather Vane                                     |
| <input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Landscape Irrigation System                     | <input type="checkbox"/> Speakers (Built-In)  | <input checked="" type="checkbox"/> Well Pump                             |
| <input type="checkbox"/> Dog House  | <input type="checkbox"/> Landscaping Lights                              | <input type="checkbox"/> Statuary   | <input checked="" type="checkbox"/> Window Screens                        |
| <input type="checkbox"/> Door & Window Hardware                                     | <input type="checkbox"/> Light Bulbs                                     | <input type="checkbox"/> Stepping Stones  | <input type="checkbox"/> Window Treatments (Including Hardware)           |
| <input type="checkbox"/> Dryer  | <input type="checkbox"/> Light Fixtures (Except Chandeliers)             | <input type="checkbox"/> Storage Building   | <input type="checkbox"/> Wine Cooler                                      |
| <input type="checkbox"/> Gas <input type="checkbox"/> Electric                      | <input checked="" type="checkbox"/> Mailbox                              | <input checked="" type="checkbox"/> Stove   |   |
| <input type="checkbox"/> Fence (Invisible)  |  | <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric           |   |
|   |  | <input checked="" type="checkbox"/> Built-In <input type="checkbox"/> Free Standing |   |

Other fixtures/items included in the sale of Property shall be: \_\_\_\_\_

Other fixtures/items not included in the sale of Property shall be: \_\_\_\_\_

The common law of fixtures shall apply to fixtures not addressed herein. Those fixtures/items that are not included in the sale of Property shall remain Property of Seller and shall be removed prior to closing or the transfer of possession of Property to Buyer, whichever is later. Seller shall lose the right to remove any such fixtures/items not timely removed. In removing all fixtures/items, Seller shall use reasonable care to prevent damage and, if necessary, to restore Property to its original condition.

14. **AGRICULTURAL DISCLOSURE:** Is Property within, partially within, or adjacent to any property zoned or identified on an approved county land use plan as agricultural or forestry use?  Yes  No  Don't Know

It is the policy of this state and this community to conserve, protect, and encourage the development and improvement of farm and forest land for the production of food, fiber, and other products, and also for its natural and environmental value. This notice is to inform prospective property owners or other persons or entities leasing or acquiring an interest in real property that property in which they are about to acquire an interest lies within, partially within, or adjacent to an area zoned, used, or identified for farm and forest activities and that farm and forest activities occur in the area. Such farm and forest activities may include intensive operations that cause discomfort and inconveniences that involve, but are not limited to, noises, odors, fumes, dust, smoke, insects, operations of machinery during any 24 hour period, storage and disposal of manure, and the application by spraying or otherwise of chemical fertilizers, soil amendments, herbicides, and pesticides. One or more of these inconveniences may occur as the result of farm or forest activities which are in conformance with existing laws and regulations and accepted customs and standards.

15. **ADDITIONAL EXPLANATIONS FOR ALL QUESTIONS ANSWERED "YES" or "OTHER":** [Explanations should reference the number of the question for which more detailed information is being provided.]

Additional pages are  or are  not attached.

**SELLER'S REPRESENTATION:**

To the best of Seller's knowledge and belief, the information contained in this Seller's Property Disclosure Statement is accurate and complete as of the date signed by Seller. It should not be a substitute for Buyer inspecting Property or obtaining any warranties with regard to Property that Buyer may wish to obtain. Seller hereby authorizes Broker to provide this Seller's Property Disclosure Statement to prospective buyers of Property and to real estate Brokers and their affiliated Licensees. Seller agrees to promptly update this Seller's Property Disclosure Statement and to provide any Buyer and Broker with a revised copy of the same if there are any material changes in the answers to the questions contained herein.

Is each individual named below a U.S. Citizen or resident alien?

Yes  No

Has each individual named below been a Georgia resident for the past two (2) years?

Yes  No

Has Property been Seller's primary residence for at least two (2) of the last five (5) years?

Yes  No

Seller: \_\_\_\_\_

Date: \_\_\_\_\_

Seller: \_\_\_\_\_

Date: \_\_\_\_\_

**RECEIPT AND ACKNOWLEDGMENT BY BUYER:**

I acknowledge receipt of this Seller's Property Disclosure Statement. I understand that, except as stated in the Purchase and Sale Agreement, Property is being sold in its present condition, without warranties or guarantees of any kind by Seller or Brokers. No representations concerning the condition of Property are being relied upon by Buyer except as disclosed herein or stated in the Purchase and Sale Agreement.

Buyer: \_\_\_\_\_

Date: \_\_\_\_\_

Buyer: \_\_\_\_\_

Date: \_\_\_\_\_