



State of Alaska Residential Real Property Transfer Disclosure Statement

Prepared in compliance with Alaska Statute (AS) 34.70.010 - 34.70.200

General Information

AS 34.70.010 requires that before the Transferee/Buyer (hereafter referred to as **Buyer**) of an interest in residential real property makes a written offer, the Transferor/Seller (hereafter referred to as **Seller**) must deliver a completed written disclosure form. This disclosure statement is in compliance with AS 34.70.010. It concerns the residential real property* located in the Kenai Recording District, Third Judicial District, State of Alaska.

Legal Description: Dawn Glow #2 L5A

Property Address/City/Other: 209 W Katmai Avenue, Soldotna, AK 99669

* Residential real property means any single family dwelling, or two single family dwelling units under one roof, or any individual unit in a multi-unit structure or common interest ownership community whose primary purpose is to provide housing. AS 34.70.200(2) and (3).

AS 34.70.020 provides that if a disclosure statement or material amendment is delivered to the transferee after the transferee has made a written offer, the transferee may terminate the offer by delivering a written notice of termination to the transferor or the transferor's licensee within three days after the disclosure statement or amendment is delivered in person or within six days after the disclosure statement or amendment is delivered by deposit in the mail.

AS 34.70.040(b) provides that if an item that must be completed in the disclosure statement is unknown or is unavailable to the Seller, and if the Seller or Seller's agent has made a reasonable effort to ascertain the information, the Seller may make an approximation based on the best information available to the Seller or Seller's agent. It must be reasonable, clearly labeled as an approximation, and not used to avoid the disclosure requirements of AS 34.70.010 – AS 34.70.200.

All disclosures made in this statement are required to be made in good faith (AS 34.70.060). The Seller is required to disclose defects or other conditions in the real property or the real property interest being transferred. To comply, disclosure need not include a search of the public records, nor does it require a professional inspection of the property.

If the information supplied in this disclosure statement becomes inaccurate as a result of an act or agreement after the disclosure statement is delivered to the Buyer, the Seller is required to deliver an amendment to the disclosure statement to the Buyer. An addendum/amendment form for that purpose may be attached to this disclosure statement.

Upon delivery to a buyer, any inspection/reports generated by a purchase agreement of this property automatically becomes an addendum/amendment to the property disclosure.

Exemption for First Sale: Under AS 34.70.120, the first transfer of an interest in residential real property that has never been occupied is exempt from the requirement for the Seller to complete the Disclosure Statement.

Waiver by Agreement: Under AS 34.70.110, completion of this disclosure statement may be waived when transferring an interest in residential real property if the Seller and Buyer agree in writing. Signing this waiver does not affect other obligations for disclosure.

Violation or Failure to Comply: A person who negligently violates or fails to perform a duty required by AS 34.70.010 - AS 34.70.200 is liable to the Buyer for actual damages suffered by the Buyer as a result of the violation or failure. If the person willfully violates or fails to perform a duty required by AS 34.70.010 -AS 34.70.200, the Seller is liable to the Buyer for up to three times the actual damages. In addition to the damages, a court may also award the Buyer costs and attorney fees to the extent allowed under the rules of court.

[Signature] 4/13/22 209 W Katmai Avenue, Soldotna, AK 99669 _____
Seller's Initials Date Property Address Buyer's Initials Date

Seller's Information Regarding Property

Property Type (check one):

- Single Family
- Zero Lot Line/Town House
- Condominium
- Townhome/PUD
- Duplex (Including Single Family with an Apartment)
- Other (please specify) Medical office space

Do you currently occupy the property? Yes No If Yes, how long? _____

If not a current occupant, have you ever occupied the property? Yes No If so, when? 2012 - 2019

Year Property Built: _____. If property was built prior to 1978, or if Seller has any knowledge of lead-based paint, Seller must complete Disclosure of Information and Acknowledgment of Lead-based Paint and/or Lead-based Paint Hazards in accordance with Section 1018 of the Residential Lead-Based Paint Hazard Reduction Act of 1992 (also known as Title X) and provide Buyer with the "Protect Your Family From Lead in Your Home" pamphlet. The pamphlet can be found on the Internet at <http://www.epa.gov/lead/leadprot.htm>.

Construction Overview: Wood Frame Manufactured Modular Other: _____

Foundation: Masonry Block Poured Concrete Piling Treated Wood Other: _____

Name of original builder (if known): _____

Property Features:

Check all items that are built-in and will remain with the property. Also . . .

Circle those checked items that have known defects or malfunctions. Also . . .

Describe the defect or malfunction on the Addendum/Amendment(s) To The Disclosure Statement.

- | | | |
|------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> Cooktop | <input type="checkbox"/> Wood Stove(s) # of _____ | <input type="checkbox"/> T.V. Antenna |
| <input type="checkbox"/> Oven(s) # of _____ | <input type="checkbox"/> Jetted Tub | <input type="checkbox"/> Satellite Dish |
| <input checked="" type="checkbox"/> Rods & Blinds | <input type="checkbox"/> Hot Tub <input type="checkbox"/> Cover | <input type="checkbox"/> Window Screens |
| <input type="checkbox"/> Microwave(s) # of _____ | <input type="checkbox"/> Steam Shower Room | <input checked="" type="checkbox"/> Security System |
| <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Water Softener | <input checked="" type="checkbox"/> Smoke Detector(s) # of _____ |
| <input type="checkbox"/> Trash Compactor | <input type="checkbox"/> Water Filtering System | <input type="checkbox"/> CO Detectors # of _____ |
| <input type="checkbox"/> Garbage Disposal | <input type="checkbox"/> Greenhouse <input type="checkbox"/> Attached <input type="checkbox"/> Detached | <input checked="" type="checkbox"/> Fire Alarms |
| <input type="checkbox"/> Instant Hot Water Dispenser | <input type="checkbox"/> Ventilating System | <input type="checkbox"/> Auto Garage Door Opener(s) |
| <input type="checkbox"/> Central Vacuum Installed | <input type="checkbox"/> Heating System | <input type="checkbox"/> # of Opener(s) _____ |
| <input type="checkbox"/> Intercom | <input type="checkbox"/> Storage Shed(s) # of _____ | <input type="checkbox"/> Built-In Refrigerator |
| <input type="checkbox"/> Paddle Fan(s) # of _____ | <input type="checkbox"/> Built-In Barbecue | <input type="checkbox"/> Other _____ |

Comments: _____

Structural Components:

Check only those items that have known defects, malfunctions, or have had major repairs performed within the last five years.

Also . . . Describe the defect, malfunction, or repair on the Addendum/Amendment(s) To The Disclosure Statement.

- | | | | | |
|-------------------------------------------|-----------------------------------------|--------------------------------------------------|------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Fences/Gates | <input type="checkbox"/> Rain Gutters | <input type="checkbox"/> Insulation | <input type="checkbox"/> Electrical Systems | <input type="checkbox"/> Electronic Air Cleaner |
| <input type="checkbox"/> Driveways | <input type="checkbox"/> Exterior Walls | <input type="checkbox"/> Woodstove(s) # of _____ | <input type="checkbox"/> Sewage Systems | <input type="checkbox"/> Heat Recovery |
| <input type="checkbox"/> Private Walkways | <input type="checkbox"/> Interior Walls | <input type="checkbox"/> Fireplace(s) # of _____ | <input type="checkbox"/> Water Supply | <input type="checkbox"/> Ventilator System |
| <input type="checkbox"/> Retaining Walls | <input type="checkbox"/> Floors | <input type="checkbox"/> Gas Starter | <input type="checkbox"/> Garage | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Ceilings | <input type="checkbox"/> Chimneys | <input type="checkbox"/> Garage Floor Drain | <input type="checkbox"/> Mechanical |
| <input type="checkbox"/> Crawl Space | <input type="checkbox"/> Doors | <input type="checkbox"/> Plumbing Systems | <input type="checkbox"/> Carport | <input type="checkbox"/> Filtration |
| <input type="checkbox"/> Roof | <input type="checkbox"/> Windows | <input type="checkbox"/> Heating Systems | <input type="checkbox"/> Washer/Dryer Hook-ups | <input type="checkbox"/> Pool Cover |
| <input type="checkbox"/> Patio/Decking | <input type="checkbox"/> Skylights | <input type="checkbox"/> Solar Panels | <input type="checkbox"/> Humidifier | <input type="checkbox"/> Hot Water Heater |
| <input type="checkbox"/> Slabs | <input type="checkbox"/> Venting | <input type="checkbox"/> Wind Generators | <input type="checkbox"/> Air Conditioner | |

Other items not covered above? _____

Comments: _____

[Signature]
Seller's Initials
Date 4.13.22

209 W Katmai Avenue, Soldotna, AK 99669
Property Address

Buyer's Initials Date

Documentation: Check the documents for the subject property that the seller has available for review:

- | | | |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------|
| <input checked="" type="checkbox"/> Engineer/Property/Home Inspection Report(s) | <input type="checkbox"/> Written Agreements with Adjacent Property Owners | <input type="checkbox"/> Party Wall Agreement |
| <input type="checkbox"/> Title Information | <input type="checkbox"/> Energy Rating Certificate or PUR-101 | <input type="checkbox"/> Lease/Rental Agreement |
| <input type="checkbox"/> As-Built Survey | <input type="checkbox"/> Resale Certificate | <input type="checkbox"/> Soils Test |
| <input type="checkbox"/> Certificate of Occupancy or PUR-102 | <input type="checkbox"/> Water Rights Certificate | <input type="checkbox"/> Well Log and Water Tests |
| <input type="checkbox"/> Deed Restrictions | <input type="checkbox"/> Subdivision Covenants/Restrictions | <input type="checkbox"/> Hazardous Materials Test(s) |
| <input type="checkbox"/> Other _____ | | <input type="checkbox"/> Other _____ |

Additional Information:

Supply information for the following items:

To the best of your knowledge, has the property been inspected by an engineer/home inspector in the last 5 years?..... **Yes** **No**

➤ **Drainage:**

- ◆ Are you aware of ever having any water in the crawl space, basement, or lower level?.....
 - If Yes, how has the problem been resolved?
 - Sump Pump(s) Curtain Drain Rain Gutter/Extension Other plumby leak fixed.
 - When was problem resolved? when identified more than 5 years ago
 - Location of each sump pump: _____
- ♥ To where does the water drain after it leaves the sump pump? _____
If gutters, where do downspouts discharge? _____
- ◆ Is there a floor drain in the structure, including garage?.....
 - If Yes, where is it located and where does it drain to? _____

➤ **Roof or Other Leakage:**

- Type: Asphalt/Composition Shingle Cedar Shake Built-up Metal Other _____
- Age: 10 years. Location of attic access? near office
- ◆ Are you aware of any ice damming on the roof?
 - If Yes, provide location. _____
 - ◆ Are you aware of any water leaking into the home? i.e., windows, lights, fireplace, etc.
 - If Yes, provide location. _____

➤ **Fireplace and/or Woodstove:** Date chimney(s) last cleaned? _____ Who cleaned? _____

➤ **Heating System(s):**

- Mark all types that apply: Hot Water Baseboard Forced Air Radiant Heat Electrical Heat
- Wood Stove Other _____
- Age: 10 years. Last Cleaned: _____ Last Inspected: _____
- Source: Natural Gas Electric Propane Tank leased or owned? _____ Wood Coal
- Oil with _____ gallon storage which is Buried Above Ground Other _____
- Age of Tank? _____ years.

➤ **Hot Water Heater:**

Age: 10 years. Capacity: _____ gallons. Type: Gas Electric Other _____

➤ **Water Supply:**

Type: Public Private Community Cistern/Water Tank If Cistern/Water Tank: _____ Size _____

Other _____

If Private: Well Depth: _____ feet. Flow Rate: _____ gallons per minute. Date Tested: _____

- ◆ Have you had any problems with your water supply?.....
- ◆ Has the water supply been tested in the past 12 months?.....
 - If Yes, attach all documentation from all tests.
- ◆ Are you aware of any contaminants in your water supply, to include but not limited to E-coli, nitrates, heavy metals, arsenic or other contaminants?
- ◆ Has the well failed while you have owned the property?.....
- ◆ Have you ever had a well pump problem or failure?.....
- ◆ Do you supply water to, or receive water from others?.....
 - If Yes, is there a recorded agreement?.....
- ♥ Do you have a water rights certificate for this property?.....

BA Seller's Initials 4/13/22 Date

209 W Katmai Avenue, Soldotna, AK 99669 Property Address

_____/_____/_____ Buyer's Initials Date

Additional Information (Continued):

➤ **Sewer System:**

Type: Public Private Community Other _____

◆ Does your sewer system have a lift station/lift pump? Yes No

If Private: Septic Tank Holding Tank Other: _____

Drainfield System: Bed Trench Mound Pit Crib Other _____

Innovative Sewer System: Intermittent Sand Filter Biocycle Recirculating Upflow Filter
 Secondary sewer treatment plant Other _____

◆ Has the sewer system failed while you owned the property? Yes No

If Yes, explain: _____

Age of sewer system: _____ Location: _____

◆ Have you had any work maintenance or inspections done on the sewer system during your ownership? Yes No

If Yes, explain: _____

Approval/Certification source (and date if known): _____

◆ Are you aware of any abandoned sewer systems, leachfields, cribs, etc. on the property? Yes No

➤ **Freeze-ups:**

◆ Have you had any frozen water lines, sewer lines, drains, or heating systems? Yes No

If yes, please explain. in the drain lines attached to public sewer

◆ Are there any heat tapes, heat lamps, or other freeze prevention devices? Yes No

Location, and explain use. _____

➤ **Average Annual Utility Costs:**

Gas	\$ _____	Company/Source: _____
Electric	\$ _____	Company/Source: _____
Oil	\$ _____ /Gallons: _____	Company/Source: _____
Propane	\$ _____	Company/Source: _____
Wood	\$ _____	Company/Source: _____
Coal	\$ _____	Company/Source: _____
Water	\$ _____	Company/Source: _____
Sewer	\$ _____	Company/Source: _____
Refuse	\$ _____	Company/Source: _____
Other	\$ _____	Company/Source: _____

To the best of your knowledge, are you aware of any of the following conditions with respect to the subject property? If answer is "Yes," indicate the relevant item number and explain the condition on the Addendum/Amendment(s) to the Disclosure Statement.

➤ **Title:**

	Yes	No
1. Do you know of any existing, pending, or potential legal action(s) concerning the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Do you know of any street or utility improvements planned that will affect the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Road maintenance provided by? <u>City of Kenai</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Is the property currently rented or leased?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If Yes, expiration date: <u>7/31/22</u>		
5. Is there a homeowner's association (HOA) for the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, HOA name: _____ HOA Telephone: _____		
<input type="checkbox"/> Mandatory <input type="checkbox"/> Voluntary <input type="checkbox"/> Inactive Monthly Dues Amount: \$ _____ per _____		
Are there any levied or pending assessments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Who is responsible for issuing the resale certificate?		
Name: _____ Telephone: _____		

➤ **Setbacks/Restrictions:**

6. Have you been notified of any proposed zoning changes for the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Are you aware of features of the property shared in common with adjoining property owners, such as walls, fences, and driveways, whose use or responsibility for maintenance may affect the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Are there subdivision conditions, covenants, or restrictions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Are you aware of any violations of building codes, zoning, setback requirements, subdivision covenants, borough, or city restrictions on this property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Are you aware of any nonconforming uses of this property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

[Signature] 4/13/22 209 W Katmai Avenue, Soldotna, AK 99669 _____
 Seller's Initials Date Property Address Buyer's Initials Date

Additional Information (Continued):

- | | Yes | No |
|-----------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|
| 11. Are you aware of any deed, or other private restrictions on the use of the property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. Are you aware of any variances being applied for, or granted, on this property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 13. Are you aware of any easements on the property? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

➤ **Encroachments:**

- | | | |
|-------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| 14. Does anything on your property encroach (extend) onto your neighbor's property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 15. Does anything on your neighbor's property encroach onto your property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

➤ **Environmental Concerns:**

- | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| 16. Are you aware of any substances, materials, or products that may be an environmental hazard such as asbestos, formaldehyde, radon gas, lead-based paint, fuel or chemical storage tanks, contaminated soil, water or by-products from the production of methamphetamines on the subject property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 16a. Are you aware of any mildew or mold issues affecting this property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17. Are you aware of any underground storage tanks on this property, other than previously referenced fuel or septic tanks? Number of tanks: _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 18. Are you aware if the property is in an avalanche zone/mudslide area?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 19. Are you aware if the property has flooded? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Flood zone designation: _____ | | |
| 20. Are you aware of any erosion/erosion zone or accretion affecting this property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 21. Are you aware of any damage to the property or any of the structures from flood, landslide, avalanche, high winds, fire, earthquake, or other natural causes? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 22. Have you ever filed an insurance claim for any environmental damage to the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 23. Are you aware of a waste disposal site or a gravel pit within a one-mile radius of the property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

➤ **Soil Stability:**

- | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| 24. Are you aware of any debris burial or filling on any portion of the property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 25. Are you aware of any permafrost or other soil problems which have caused settling, slippage, sliding, or heaving that affect the improvements of the property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 26. Are you aware of any drainage, or grading problems that affect this property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

➤ **Construction, Improvements/Remodel:**

- | | | |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|
| 27. Have you remodeled, made any room additions, structural modifications, or improvements?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If Yes, please describe. Was the work performed with necessary permits in compliance with building codes? | | |
| <i>extensive remodel to medical office from residential</i> | | |
| Was a final inspection performed, if applicable?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 28. Has a fire ever occurred in the structure?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

➤ **Pest Control or Wood Destroying Organisms:**

- | | | |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| 29. Are you aware of any termites, ants, insects, squirrels, vermin, rodents, etc. in the structure? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| a. If Yes, what type? _____ | | |
| b. If Yes, where? _____ | | |
| 30. Has there been damage in the past resulting from termites, ants, insects, squirrels, rodents, etc. in the structure?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| a. If Yes, when? _____ | | |
| b. If Yes, what type? _____ | | |
| c. If Yes, where? _____ | | |
| d. If Yes, describe what was done to resolve the problem: _____ | | |

➤ **Other:**

- | | | |
|---------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| 31. Are you aware of any murder or suicide having occurred on the property within the preceding 3 years?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 32. Are you aware of any human burial sites on the property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

[Handwritten Signature]
Seller's Initials

4, 13, 22
Date

209 W Katmai Avenue, Soldotna, AK 99669
Property Address

Buyer's Initials

Date

Additional Information (Continued):

Yes No

33. Noise

- a. Are you aware of any noise sources that may affect the property, including airplanes, trains, dogs, traffic, race tracks, neighbors, etc? Yes No
- b. If Yes, explain: Hospital Helipad is close to the building

34. Pets

- a. Have there been any pets/animals in the house? Yes No
- b. If Yes, what kind? _____

I / We have completed this disclosure statement according to AS 34.70.010 - AS 34.70.200 and these instructions, and the statements are made in good faith and are true and correct to the best of my/our knowledge as of the date signed. I/We authorize any licensees involved or participating in this transaction to provide a copy of this statement to any person or entity in connection with any actual or anticipated transfer of the property or interest in the property.

Seller: [Signature]

Seller: [Signature]

Date: 4/13/22

Date: 4.13.22

Buyer's Notice and Receipt of Copy

Transferee (Buyer) Awareness Notice: Under AS 34.70.050, Transferee (Buyer) is independently responsible for determining whether a person who has been convicted of a sex offense resides in the vicinity of the property that is the subject of the Transferee's (Buyer's) potential real estate transaction. This information is available at the following locations: Alaska State Trooper Posts, Municipal Police Departments, and on the State of Alaska, Department of Public Safety Internet site: www.dps.state.ak.us.

Transferee (Buyer) Awareness Notice: Under AS 34.70.050, Transferee (Buyer) is independently responsible for determining whether, in the vicinity of the property that is the subject of the transferee's potential real estate transaction, there is an agricultural facility or agricultural operation that might produce odor, fumes, dust, blowing snow, smoke, burning, vibrations, noise, insects, rodents, the operation of machinery including aircraft, and other inconveniences or discomforts as a result of lawful agricultural operations.

The Buyer is urged to inspect the property carefully and to have the property inspected by an expert. Buyer understands that there are aspects of the property of which the Seller may not have knowledge and that this disclosure statement does not encompass those aspects. Buyer also acknowledges that he/she has read and received a signed copy of this statement from the Seller or any licensee involved or participating in this transaction.

Buyer: _____ Date: _____

Buyer: _____ Date: _____

[Signature] 4/13/22

Seller's Initials Date

209 W Katmai Avenue, Soldotna, AK 99669

Property Address

_____/_____/_____
Buyer's Initials Date