



North Dakota Real Estate Commission Seller's Property Disclosure Form

www.realestatend.org

2019.07.31

North Dakota law requires a written property disclosure for the sale, exchange, or purchase of real property if:

- (1) a real estate broker, real estate broker associate, or real estate salesperson who is associated with a real estate brokerage firm represents or assists a party to the transaction;
and
- (2) the real property is an owner-occupied primary residence located in North Dakota being sold or exchanged by the owner.

Before the parties sign an agreement for the sale, exchange, or purchase of real property, the seller shall make a written disclosure to the prospective buyer.

The written disclosure must include **all material facts of which the seller is aware could adversely and significantly affect an ordinary buyer's use and enjoyment of the property or any intended use of the property of which the seller is aware.**

The written disclosure **must include latent defects, general condition, environmental issues, structural systems, and mechanical issues regarding the property. The seller shall make the written disclosure in good faith and based upon the best of the seller's knowledge at the time of the disclosure.**

North Dakota Century Code 47-10-02.1

This form is designed to guide you, the seller, in making the legally required disclosures and to assist you to avoid inadvertent nondisclosures of material facts as required by statute. You must disclose all material facts that are required by law, even if not specifically asked in this form. Additional space for disclosure is provided on the last page of this form, and you may attach any additional information as necessary.

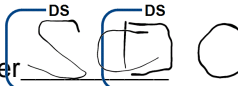
Today's date:	<u>10/21/2022</u>	
Name/s of seller/s:	<u>Samuel Cruz</u>	
Address of property being sold:	<u>2301 38th St. W.</u>	
How long have you owned the property? State in number of years and months.	<u> </u> # of years	<u> </u> # of months
How long have you occupied the property? Provide dates of occupancy.	<u>4 years</u>	

Initials of seller SC

Initials of buyer

UNK=unknown

A. Structure		YES	NO	UNK
1	What is the age of the structure? <u>11</u> # of years _____ # of months			
2	Has the structure been altered? (for example, additions, altered roof lines, changes to load-bearing walls)		X	
	If "Yes," please specify what was done, when and by whom. No			
3	During your ownership, has there been work on the property which required building permits?			
	If "Yes," was a permit obtained? No			
4	Has the property been damaged by fire, smoke, wind, floods, hail, snow, frozen pipes, or broken water line?			
	If "Yes," explain: Winds and hail Teared down siding and parts of my roof			
5	Does the roof leak or has it leaked in the past?			
	If "Yes," explain: Yes, wind teared part of the shingles. Those pieces were replaced and caulked as well, hasn't leaked since then			
6	Has there been any damage from condensation or ice buildup?			
	If "Yes," explain: No			
7	Is there any dry rot in the structure?			
	If "Yes," explain: No			
8	Has the siding been damaged?			
	If "Yes," explain: Yes, by wind. It's been replaced			
9	Has the flooring or floors been damaged?			
	If "Yes," explain: No			
10	Has there been damage to windows?			
	If "Yes," explain: Only in the shed, broken window			
11	Has there been damage to doors?			
	If "Yes," explain: No			
12	Are the rain gutters and downspouts functional?			
	If " <u>No</u> ," explain: No rain gutters or downspouts			

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A. Structure, <i>continued</i>		YES	NO	UNK
13	Has there been damage to the roof or shingles? If "Yes," explain: Caused by wind	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Have you been paid for damage claims by insurance coverage? If "Yes," explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Has there been any water damage to the structure? If "Yes," explain: No	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16	Are there cracks in the floor or walls of the basement? If "Yes," explain: No	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17	Is a drain or sump pump installed and working properly? If " <u>No</u> ," explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18	Are there cracks in the driveway, garage floor, sidewalks, patio, or other outside hard surface areas? If "Yes," explain: No	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19	Are there additional property conditions that have not been described above (for example, uneven floors, material cracks or settling, shifting, deterioration, or other problems with the foundation, floors, or walls)? If "Yes," explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20	Has there been any other damage to the interior or exterior of the structure from any cause? If "Yes," explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

UNK=unknown

B. Water and Sewer		YES	NO	UNK
1	What is the source of household water? <i>Circle one:</i> <input checked="" type="checkbox"/> city <input type="checkbox"/> well <input type="checkbox"/> rural			
2	What is the type of sewer system? <i>Circle one:</i> <input checked="" type="checkbox"/> city <input type="checkbox"/> septic tank with drain field			
3	Is the sewer system in working order? If " <u>No</u> ," explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Initials of seller 

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B. Water and Sewer, <i>continued</i>		YES	NO	UNK
4	Have you had problems such as back up, leakage, or other problems with sewer or septic systems?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
5	Have there been any plumbing leaks?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
6	Are the toilets functioning properly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If " <u>No</u> ," explain:			
7	Have you had clogged drains?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
8	Is there a water well/s on the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9	Are there any shut off, disconnected, or abandoned wells, underground water, or sewer tanks on the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

UNK=unknown

C. Electrical and Mechanical		YES	NO	UNK
1	Are there any electrical outlets, switches, utilities not in proper working order?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
2	Have you had any problems with the electrical system?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
3	Have you had any problem with the heating system?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
4	Have you had any problem with the water heater?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain: Heated water for about 30 min only while showering			
5	Have you had any problem with the air conditioning?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
6	Have you had any problem with the fireplace? (Mark NA in "NO" if the property does not include a fireplace.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain: NA			

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D. Environmental Conditions		YES	NO	UNK
1	Are there underground storage tanks?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	Are there asbestos-containing materials in the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
3	Are there any lead hazards (such as lead paint, lead pipes, lead in soil)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," attach all available records and reports about lead-based hazards.			
4	Has the property been tested for radon?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," when and what were the results?			
5	Are there or have there been any rodent, animal, or insect infestations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
6	Are there or have there been pets on the property?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain: Have been one dog			
7	Are there drainage or flood issues?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
8	Has there been flooding on the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			
9	Is the property in a flood zone?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	If "Yes," explain:			
10	Are you aware of any manufacture, storage, or use of methamphetamines on the property?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	If "Yes," explain:			
11	Is there visible evidence, or are you aware of mold growth in basement, closets, bathrooms, or any other areas of the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	If "Yes," explain:			

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E. Land Use		YES	NO	UNK
1	Is the property subject to any deed restrictions, covenants, or reservations? If "Yes," explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	Is the property subject to any easements, shared driveways, party walls, or encroachments from or on adjacent property? If "Yes," explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	Are there any existing leases? If "Yes," explain: Currently pay lot rent to Cimarron Heights	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Is there a homeowners' association that has authority over the property? If "Yes," explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

This form continues on the next 2 pages.

Initials of seller 

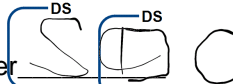
Initials of buyer _____

F. Systems and Appliances

Mark "Yes" if listed item is in working order, "No" if it does not work, and "NA" if not applicable. *Use the space at the end of the list to provide explanations for any items that do not work, and to provide any other comments.

		In working order:					In working order:		
		YES	NO*	NA			YES	NO*	NA
1	Air conditioner	X			26	Landscape lighting			X
2	Air exchanger			X	27	Lawn sprinkler system			X
3	Attic fan			X	28	Microwave oven	X		
4	Bathroom vent fans	X			29	Oven	X		
5	Built-in vacuum system				30	Plumbing systems	X		
6	Carbon monoxide detectors	X			31	Plumbing fixtures & mechanisms	X		
7	Ceiling fans	X			32	Pool			X
8	Clothes washer	X			33	Range			X
9	Clothes dryer	X			34	Range exhaust hood			
10	Central heating system	X			35	Refrigerator	X		
11	Dehumidifier			X	36	Satellite dish			X
12	Dishwasher			X	37	Sauna			X
13	Doorbell			X	38	Security system			X
14	Drain tile system			X	39	Septic tank			X
15	Electrical systems	X			40	Smoke detectors	X		
16	Fireplace			X	41	Steam room/shower			X
17	Freezer			X	42	Sump pump			X
18	Gas grill			X	43	Television cable			X
19	Garbage disposal	X			44	Trash compactor			X
20	Garage door opener			X	45	Washer & dryer hookups	X		
21	Heating stove	X			46	Water heater	X		
22	Hot tub			X	47	Water treatment systems			X
23	Humidifier		X		48	Window air conditioners			X
24	Internet cable	X			49	Window treatments			X
25	In-wall speakers			X	50	Other			X

*Use the space below to explain or comment on items on the list directly above. Identify listed items by number as well as by item name.

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ADDITIONAL DISCLOSURES:


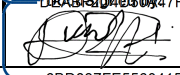
This space is provided for any additional disclosures not included above and for further explanation. Attach additional pages and documents as necessary.

As the seller you are required to disclose all material facts of which you are aware that could adversely and significantly affect an ordinary buyer's use and enjoyment of the property or any intended use of the property of which you are aware.

This written disclosure must include latent defects, general condition, environmental issues, structural systems, and mechanical issues regarding the property. **You must make the written disclosure in good faith and based upon the best of your knowledge at the time of the disclosure.**

ACKNOWLEDGEMENTS:

The Seller acknowledges that this disclosure was made in good faith and based upon the best of the Seller's knowledge at the date listed below.

DocuSigned by:	
Seller: 	Date: Oct 21, 2022 7:23 PM PDT
Seller: 	Date: Oct 21, 2022 7:32 PM PDT

The Buyer/Prospective Buyer acknowledges receipt of this Property Condition Statement. The Buyer acknowledges that Buyer has been advised to verify the information listed in this statement independently. THE BUYER ACKNOWLEDGES AND UNDERSTANDS THAT THIS DOCUMENT IS NOT INTENDED TO BE A WARRANTY OF ANY KIND OR A SUBSTITUTE FOR ANY INSPECTION OF THE PROPERTY THE BUYER MAY WISH TO OBTAIN.

Buyer:	Date:
Buyer:	Date:

Brokerage firms for both the seller and the buyer are required to retain a copy of the written disclosure completed and signed by the seller and signed by the prospective buyer.

Initials of seller  Initials of buyer _____