

Seller's Property Disclosure

(To be completed by Seller)

This report supersedes any list appearing in the MLS

Property Address: 15051 E 79TH ST S DEEBY KS

Seller: _____ Date of Purchase: _____

Message to the Seller: 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. If you know something important about the Property that is not addressed on the Seller's Property Disclosure, add that information to the form. Prospective Buyers may rely on the information you provide.

Instructions: (1) Complete this form yourself. (2) Answer all questions truthfully and as fully as possible. (3) Attach all available supporting documentation. (4) Use explanation lines as necessary. (5) If you do not have the personal knowledge to answer a question, use the comment lines to explain.

By signing below you acknowledge that the failure to disclose known material information about the Property may result in liability.

Message to the Buyer: Although Seller's Property Disclosure is designed to assist the SELLER in disclosing all known material (important) facts about the Property, there are likely facts about the Property that the SELLER does not know. Therefore, it is important that you take an active role in obtaining the information about the Property.

Instructions: (1) Review this form and any attachments carefully. (2) Verify all important information. (3) Ask about any incomplete or inadequate responses. (4) Inquire about any concerns not addressed on the Seller's Property Disclosure. (5) Obtain professional inspections of the Property. (6) Investigate the surrounding area.

THE FOLLOWING ARE REPRESENTATIONS OF THE SELLER(S) AND ARE NOT INDEPENDENTLY VERIFIED BY THE BROKER(S) OR AGENTS(S).

PART I

APPLIANCES					ELECTRICAL						
None	Does Not Transfer	TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.	None	Does Not Transfer	TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.
		Working	Not Working	Don't Know				Working	Not Working	Don't Know	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke/Fire Detectors
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oven	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Switches/Outlets
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Range (Circle One) Gas <u>Electric</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling Fan(s)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bathroom Vent Fan(s)
					Built in (Circle One) <u>NO</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone Wiring/Blocks/Jacks
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Range Hood	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Door Bell
					Vented Outside (Circle One) <u>YES</u> NO	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Intercom
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kitchen Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garage Door Opener
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clothes Washer						# of Remotes: <u>2</u> Keypad Entry: (Circle One) <u>YES</u> NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clothes Dryer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Aluminum Wiring
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trash Compactor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Copper Wiring
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Central Vacuum	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	220 Volt
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exterior Attached Gas Grill						? Service Panel Total Amps <u>- 3 breaker boxes</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Solar Equipment - (Circle One) Own Rent/Lease Company
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wind - (Circle One) Own Rent/Lease
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hydroelectric - (Circle One) Own Rent/Lease
Comments:					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security System - (Circle One) Own Rent/Lease Company	
					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Audio/Video Surveillance System	

PART II

Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.

Attach all relevant documentation for further explanation, including any and all repair reports.

SECTION 1
STRUCTURAL FOUNDATION/WALLS

YES NO DON'T KNOW
 Are any exterior walls covered with Exterior Insulation & Finish System (synthetic stucco)?
 If YES, are you aware of any adverse conditions? _____
 Indicate all that apply: Basement Crawl Space Slab
 YES NO Are there any structural engineer's report(s) available?
 If YES, Date of Report: _____ Copy Attached? (Mark One): YES NO
 To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)
 YES NO DON'T KNOW
 YES NO DON'T KNOW Movement, shifting, deterioration or other problems with walls or foundation?
 YES NO DON'T KNOW Cracks or flaws in the walls, floors or foundation?
 YES NO DON'T KNOW Problems with driveways, walkways, patios, retaining walls, party walls? *Crack + lowering at NE corner of drive, near garage.*
 YES NO DON'T KNOW Problems with operation of windows or doors, or broken seals?
 YES NO DON'T KNOW Any corrective actions to items in this section? (Example - Piering, bracing, etc.)
 YES NO DON'T KNOW Are there any transferable warranties? Date: _____ (If YES, explain below and attach copy.)
 YES NO DON'T KNOW Is there insulation in the walls?
 YES NO DON'T KNOW Is there insulation in the floors?

Additional Comments:
settling of utility room floor from hearth room. Has been there when we purchased home 20 yrs ago. This room was added on to original home, before we bought it.

SECTION 2
ROOF/INSULATION *In paper work and documents*

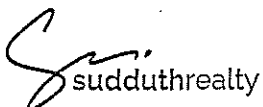
YES NO DON'T KNOW
 Age: _____ Type: _____
 YES NO DON'T KNOW To your knowledge, are there any PAST PRESENT roof leaks? (Mark One)
 If any, identify details below.
 YES NO DON'T KNOW During your ownership, has the roof ever been REPLACED? REPAIRED? (Mark One)
 If YES, Date: _____ (Identify details below.)
 YES NO DON'T KNOW Are there any transferable warranties? Date: _____ (If YES, explain below and attach copy.)
 YES NO DON'T KNOW Do you know of any problems with chimneys or chases? (If YES, explain below.)
 YES NO DON'T KNOW Do you know of any problems with roof, roof structure or rain gutters? (If YES, explain below.)
 YES NO DON'T KNOW Is there insulation in the ceiling/attic?

Additional Comments:
Some rain gutters need fixing and down spouts need cleaning out.

SECTION 3
MOLD/MILDEW

According to the EPA, molds are part of the natural environment. Molds reproduce by means of tiny spores that are invisible to the naked eye, and float through outdoor and indoor air. Mold may begin growing indoors when mold spores land on surfaces that are wet. Inhaling or touching mold spores may cause allergic reactions in sensitive individuals.
 To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)
 YES NO DON'T KNOW Presence of any mold/mildew in the property?
 YES NO DON'T KNOW Any problems created by mold or mildew for occupants of the structure during your ownership?
 YES NO DON'T KNOW Have you had any inspections for mold or mildew? If YES, Date: *Several years ago* (If YES, explain below.)
 YES NO DON'T KNOW Have you received any reports pertaining to mold or mildew on or within the structure? (If YES, attach.)
 YES NO DON'T KNOW Has the property had any professional mold remediation during your ownership? If YES, Date: *Several years ago*

Additional Comments:
Had mold in back bed room several years ago. It was treated at that time. Since then, room has been updated and no signs of mold at all.



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Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.

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Attach all relevant documentation for further explanation, including any and all repair reports.

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YES	NO	DON'T KNOW	SECTION 4 WATER/SEWAGE SYSTEMS		
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128 Is the property connected to City Water?

129 Is the property connected to Rural Water? If YES, Transfer Fee: ? District: Rural Water Dist. 3

130 Is the property connected to any private water systems? (Mark all that apply.) Sdg. Co.

131 Drinking Well Irrigation Well Geo-Thermal Well

132 Working? Type: ? Location: ? Depth: ?

133 Working? Type: Location: Depth:

134 Working? Type: Location: Depth:

135 Has the water in any wells shown test results of contamination? (If YES, explain below.)

136 Is the property connected to a public sewer system? If shared lagoon/septic system, explain below.

137 Is the property connected to a septic system? Date Last Pumped: 4-29-19

138 Tank Size: unknown Location: Between house + garden area

139 # feet laterals: # Feet infiltrators: Location:

140 Is the property connected to a lagoon system? Location:

141 Is the property connected to some other type of waste disposal system? (If YES, explain below.)

142 Has the main waste disposal line ever been snaked or scoped?

143 To your knowledge, is there any problem relating to the waste disposal system?

144 Additional Comments:

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YES	NO	DON'T KNOW	SECTION 5 WATER INTRUSION/LEAKS		
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148 To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)

149 Any water leakage in or around the fireplace or chimney?

150 Any water leakage around (If YES, mark all that apply.) WINDOWS SKYLIGHTS DOORS?

151 Any leaks occurring in any plumbing, water supply lines, drains, sewer lines, etc.? Leakage in pipes under kitchen

152 Any leaks caused by appliances? sink - many yrs ago - none

153 Any leaks from any condensation drain lines, humidifier, dehumidifier, etc.? since (see below)

154 Any water leakage into (If YES, mark all that apply.) BASEMENT CRAWL SPACE - see above ↑

155 Any accumulation of water within the basement/crawl space?

156 Sump Pump(s) Location(s): Crawl Space, Cellar

157 Drain Tiles (If YES, mark all that apply.) INTERIOR EXTERIOR

158 Additional Comments:

159 Had leak under sink in main Bathroom. ~~enter~~

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YES	NO	DON'T KNOW	SECTION 6 PEST, WOOD INFESTATION & DRY ROT		
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163 Do you have any knowledge of the following items on/affecting the property? (Mark all that apply.)

164 WOOD DESTROYING INSECTS DRY ROT OTHER WOOD INFESTATION

165 Any knowledge of any damage to the property caused by the following items? (Mark all that apply.)

166 WOOD DESTROYING INSECTS DRY ROT OTHER WOOD INFESTATION

167 Have there been any repairs of such damage? (If YES, explain below.)

168 Is the property currently under a termite warranty or other coverage by a licensed pest control company?

169 Company: ? Warranty Expiration Date:

170 Any wood destroying insects control reports in the last 5 years? (If YES, explain below.)

171 Any professional wood destroying insects control treatments in the last 5 years? (If YES, explain below.)

172 Any pest control reports in the last 5 years? (If YES, explain below.)

173 Any professional pest control treatments in the last 5 years? (If YES, explain below.)

174 Additional Comments:

175 Wood bees have been present off and on under cellar roof. Use

176 strips for control, from man who does our pest control - Air Capital

177 White, KS

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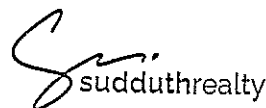
RELEASE DATE 4/2022 (Rev 11/21)

SELLER'S INITIALS: JA CA

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BUYER'S INITIALS:

#1004



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Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.

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Attach all relevant documentation for further explanation, including any and all repair reports.

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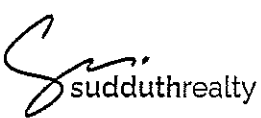
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YES	NO	DON'T KNOW	SECTION 7 ENVIRONMENTAL CONDITIONS
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property located in a subdivision with a master drainage plan?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If YES, is the property in compliance?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the property ever had any drainage problems during your ownership? (If YES, explain below.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any producing or non-producing gas/oil wells on the property or adjacent property?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Do mineral rights convey to buyer? If NO, please define: _____
			Groundwater contamination has been detected in several areas in the State of Kansas.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are you aware of groundwater contamination or other environmental concerns?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any reports or records pertaining to groundwater contamination or other environmental concerns?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are there any diseased or dead trees and shrubs?
			To your knowledge, are any of the following substances, materials, products on the real property? (YES or NO Only.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Asbestos
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contaminated soil or water (including drinking water)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Landfill or buried materials
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lead-based paint (If YES, attach disclosure.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Radon gas in house or well Has a mitigation system been installed? (Mark One) <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Methane Gas
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Oil sheers in wet areas
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Radioactive material
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic material disposal (solvents, chemicals, etc.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Underground fuel or chemical storage tanks
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EMFs (Electro Magnetic Fields)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Urea formaldehyde foam insulation (UFFI)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are you aware if any portion of the property has ever been used for the manufacture of, or storage of, chemicals or equipment used in manufacturing methamphetamine, ecstasy, LSD or any other illegal substances?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, are any of the above conditions present near your property?
Comments:			
			<i>Trees need trimmed - some dead due mostly to drought. Blue Spruce on east side of driveway dying!</i>

YES	NO	DON'T KNOW	SECTION 8 BOUNDARIES/LAND
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Have you had a survey of the property? (If YES, attach copy if available.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are the boundaries of your property marked in any way?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is there any fencing on the boundaries of the property?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does fencing belong to the property? If YES, which sides? _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any features of the property shared in common with adjoining landowners, such as, walls, fences, roads, driveways? (If YES, explain below.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property owner responsible for maintenance of any such shared feature(s)?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, are there any boundary disputes, encroachments, or unrecorded easements?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	To your knowledge, is any portion of the property located in a federally designated flood plain?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do you currently, or have you ever, paid flood insurance for the property?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, is any portion of the property located in a designated wetlands area?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you know of any of the following items that have occurred on the property or in the immediate area? (Mark all that apply.)
			<input type="checkbox"/> EXPANSIVE SOIL <input type="checkbox"/> EARTH MOVEMENT
			<input type="checkbox"/> FILL DIRT <input type="checkbox"/> UPHEAVAL
			<input type="checkbox"/> SLIDING <input type="checkbox"/> EARTH STABILITY PROBLEMS
			<input type="checkbox"/> SETTLING
Comments:			
			<i>Was in flash flood 2016. Water under house in crawl space and in garage to steps. Water in utility room under door. Restorative work done at that time. Do have continuous flood insurance</i>

RELEASE DATE 4/2022 (Rev 11/21) SELLER'S INITIALS: *JA CA* Pg 5 of 7 BUYER'S INITIALS: _____



at that time. Do have continuous flood insurance no problems since 2016



SELLER'S ACKNOWLEDGEMENT

286 Seller acknowledges that: the information contained in this disclosure is accurate, true and complete to the best of Seller's
 287 knowledge, information and belief; Seller has provided all the information contained in this Seller's Property Disclosure; and that the
 288 Broker/Realtor® has not prepared, nor assisted in the preparation of this Disclosure. Seller hereby indemnifies, holds harmless and
 289 releases all Brokers/Realtors® involved in the sale of the property from all liability, claims, loss, cost, or damage in connection with
 290 the information contained in this Disclosure. Seller hereby authorizes the listing broker to provide copies of this Disclosure to other
 291 real estate brokers and agents and prospective buyers of the property.

292 Seller is occupant: YES NO

293 Seller certifies that the information herein is true and correct to the best of the Seller's knowledge as of the date signed by Seller.

294 SELLER: *[Signature]* SELLER: *Catherine A. Ashley*
 295 _____ Date _____ Date _____

BUYER'S ACKNOWLEDGEMENT AND AGREEMENT

297 1. I have personally inspected the property. I have been advised to have the property examined by professional inspectors. Subject
 298 to any inspections, I agree to purchase the property in its present condition without representations or guarantees of any kind by
 299 the Seller or any REALTORS® concerning the condition or value of the property, except as given above or as stated in my contract
 300 with the Seller.

301 2. I acknowledge that neither Seller nor any REALTORS® involved in this transaction is an expert at detecting or repairing physical
 302 defects in the property.

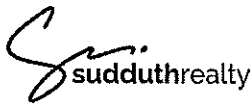
303 3. I acknowledge that I have been informed that Kansas Law requires persons who are convicted of certain sexually violent crimes
 304 after April 14, 1994, to register with the sheriff of the county in which they reside. I have been advised that if I desire information
 305 regarding those registrants, I may find information on the home page of the Kansas Bureau of Investigation (KBI) at
 306 <http://www.kansas.gov/kbi/> or by contacting the local sheriff's office.

307 4. I acknowledge that McConnell Air Force Base is located within Sedgwick County and is an operational military Air Force base that
 308 is open 24 hours a day and activity at that base may generate noise. The volume, pitch, amount and frequency of noise may be
 309 affected by future changes in McConnell Air Force Base activity. I have been informed that if I desire information regarding potential
 310 for noise caused by the aircraft operations associated with McConnell Air Force Base and its operations, I may find information by
 311 contacting the Metropolitan Area Planning Department.

312 BUYER: _____ BUYER: _____
 313 _____ Date _____ Date _____

[Signature]
 sudduthrealty

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Seller's Worksheet

Please take a few minutes to complete this work sheet of commonly asked questions before our appointment.

Property Address: 15051 E. 79th St. So, Derby, KS. 67037

Water Name: Rural Water Dist. # 3, Sedgwick County
Phone: (316) 777-0877

Electric Name: Butler Rural Electric Cooperative
Phone: (316) 321-9600

Natural Gas Name: _____
Phone: _____

Trash Service Name: _____
Phone: _____

Propane Name: Hayman Oil Co.
Phone: (316) 777-1926

Internet Name: AT&T Wireless
Phone: (800) 288-2020

TV Name: Sprint TV
Phone: (888) 854-1961

Security System: Name: None
Phone: _____

School District: _____ Elementary: _____ Middle: _____ High: _____

Please add special features you think are important to point out about your home. Great location on a paved road. Close to Derby and Rose Hill.

Any information important for the buyer of your home to have?

Nice to sit out on the patio and watch the birds, turkeys and deer. And the peace and quiet.

Do you have a copy of a survey? yes no

Do you have copies of service agreement or recent receipts for repairs or upgrades? yes no