



# Tallahassee BOARD OF REALTORS® SELLER'S PROPERTY DISCLOSURE STATEMENT

(Revised March 2024)



(It is suggested that copies of this disclosure be available at the property)

1 SELLER: David R. Swilley  
 2 Property Address: 5640 Jacksons Gap Rd  
 3 Date Property Purchased: 10/7/2021 Year Built 2010  
 4 \* If built before 1978 seller must provide the Lead Based Paint Disclosure Form

## NOTICE TO SELLER AND BUYER:

THIS FORM IS INTENDED TO BE TO THE BENEFIT/INFORMATION FOR THE BUYER. THIS FORM IS TO BE FILLED OUT TO THE BEST OF THE SELLER'S KNOWLEDGE, DISCLOSING INFORMATION PROVIDED TO THEM UPON THEIR PURCHASE, AND/OR DISCLOSURES THAT HAVE OCCURED DURING THEIR OWNERSHIP.

## NOTICE TO SELLER AND BUYER:

- Every SELLER is legally obligated to disclose to a buyer all known facts, which are not readily discoverable to a BUYER that materially and/or adversely affect the value of the property being sold.
- This disclosure statement is intended to assist the SELLER in complying with disclosure requirements and to provide helpful information to a BUYER.
- The Listing Broker, the Selling Broker and their respective Salespersons will also rely upon this information when they evaluate, market, and present SELLER'S property to prospective BUYERS.
- NON-OCCUPANT SELLERS (ie Trusts/Probate, Rentals, Investment/Flip) still have a liability to disclose repair history as paid through a third party (for example: Attorney, Property Manager, Project Manager, etc.)

## NOTICE TO BUYER:

This is a disclosure of SELLER'S knowledge as of the date signed by the SELLER of the condition of the property and is not a substitute for BUYER'S due diligence. It is not a warranty of any kind by SELLER or a warranty or representation by the Listing Broker, the Selling Broker, or their Salespersons.

## 1. OCCUPANCY

- (a) The property is occupied by ☒ Seller ☐ Tenant ☐ Other
- (b) If property is vacant, provide date it was vacated: 09/09/2025
- (c) If Tenant occupied, provide the following information:
1. Is there a written lease? ☐ Yes ☒ No If yes, expiration date N/A
  2. Is there a moveout/cancelation clause in the lease? ☐ Yes ☒ No Notice Required N/A
  3. Monthly rental amount \_\_\_\_\_ Security Deposit amount \_\_\_\_\_
  4. Management Company, if any \_\_\_\_\_

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- 74 (f) Have there been any problems with the chimney or flue? ☐ Yes ☐ No ☐ Unknown  
75 (g) Have there been any repairs or other effects to control the cause or effects of any problem(s)  
76 Describe in this section ☐ Yes ☒ No ☐ Unknown  
77 If any answers are yes, explain: \_\_\_\_\_  
78 \_\_\_\_\_

79 **4. ADDITIONS / ALTERATIONS & REMODELING**

- 80 (a) Have you made any additions, structural changes, or other alterations to the property? ☒ Yes ☒ No  
81 Date 10/2022 If yes, explain: New privacy fence  
82 \_\_\_\_\_  
83 (b) Provide the name of any Contractor or individual who did any additions, structural changes, or other  
84 alterations to the property, if known: \_\_\_\_\_  
85 (c) Were the necessary permits pulled and closed out ☐ Yes ☒ No ☐ Unknown

86 **5. ROOF**

- 87 (a) Has the roof been replaced during your ownership. ☐ Yes ☒ No Year current roof put on \_\_\_\_\_  
88 (b) Roofing material ☒ Arch shingle ☐ 3 tab shingle ☐ Metal ☐ Other \_\_\_\_\_  
89 (c) Has the roof ever leaked during your ownership? ☐ Yes ☒ No  
90 (d) Has the roof been repaired during your ownership? ☐ Yes ☒ No Repair date \_\_\_\_\_  
91 If yes, provide name of Contractor or individual who did the work and details of replacement/repair  
92 \_\_\_\_\_  
93 \_\_\_\_\_  
94 (e) If roof replaced, is it under warranty? ☐ Yes ☐ No Is the warranty transferable? ☐ Yes ☐ No  
95 (f) Please provide roof age on any additional structures: \_\_\_\_\_  
96 (g) Do you know of any other problems with the roof or gutters? ☐ Yes ☐ No  
97 If any answers are yes, explain: \_\_\_\_\_  
98 \_\_\_\_\_

99 **6. SIDING**

- 100 (a) Exterior siding material(s): ☐ Asbestos ☐ Brick ☐ Concrete Block Stone ☒ Fiber Cement  
101 ☐ Manufactured Siding (LP/GP) ☐ Stucco ☐ Synthetic Stucco ☐ Unknown ☐ Wood  
102 ☐ Vinyl ☐ Other \_\_\_\_\_  
103 (b) If manufactured siding, provide name of manufacturer, if known \_\_\_\_\_  
104 (c) If stucco, have there been any inspection reports on the stucco? ☐ Yes ☐ No  
105 (d) Do you know of any problems/defects with the siding? ☐ Yes ☒ No  
106 (e) Have you filed any claims with manufacturers in regard to the siding? ☐ Yes ☒ No  
107 If any answers are yes, explain: \_\_\_\_\_  
108 \_\_\_\_\_  
109 \_\_\_\_\_

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34 For the remaining sections please be prepared to provide any additional information such as warranties  
35 supporting documentation and or reports

36 **2. EQUIPMENT AND APPLIANCES INCLUDED IN SALE (Subject to final negotiated contract)**

37 Unless otherwise stated, all fixtures and the following items are assumed to remain (including  
38 but not limited to): doorbells, smoke/CO2 detectors, thermostat(s), light bulbs, bathroom mirrors,  
39 blinds and shutters.

40 Mark the additional items included in the sale of your property:

- |  |   |   |
|--|---|---|
| 41 <input type="checkbox"/> Above Ground Pool              | <input type="checkbox"/> Intercom   | <input type="checkbox"/> Storage Shed                             |
| 42 <input checked="" type="checkbox"/> Ceiling Fans—all    | <input checked="" type="checkbox"/> Irrigation System   | <input type="checkbox"/> Surveillance Equipment                   |
| 43 <input type="checkbox"/> Central Vacuum and Attachments | <input checked="" type="checkbox"/> Light Fixtures—all  | <input type="checkbox"/> Trash Compactor                          |
| 44 <input type="checkbox"/> Curtain Rods                   | <input checked="" type="checkbox"/> Microwave Oven  | <input type="checkbox"/> Washer                                   |
| 45 <input type="checkbox"/> Curtains/Drapes                | <input type="checkbox"/> Pool Equipment   | <input type="checkbox"/> Water Softener/Purifier                  |
| 46 <input checked="" type="checkbox"/> Dishwasher          | <input type="checkbox"/> Pool Heater  | <input type="checkbox"/> Window/Wall AC                           |
| 47 <input type="checkbox"/> Disposal                       | <input checked="" type="checkbox"/> Range/Oven  | <input checked="" type="checkbox"/> Cummins Whole House Generator |
| 48 <input checked="" type="checkbox"/> Dryer               | <input checked="" type="checkbox"/> Refrigerator <input checked="" type="checkbox"/> with Ice Maker | <input type="checkbox"/> _____                                    |
| 49 <input checked="" type="checkbox"/> Garage Door Opener  | <input type="checkbox"/> Satellite System   | <input type="checkbox"/> _____                                    |
| 50 <input checked="" type="checkbox"/> Generator           | <input type="checkbox"/> Security System – (see below)  | <input type="checkbox"/> _____                                    |
| 51 <input type="checkbox"/> Ice Maker                      | <input type="checkbox"/> Spa or Hot Tub with Heater   | <input type="checkbox"/> _____                                    |

52 ☐ Oil/Propane Tanks ☐ Owned ☐ Leased (If any of the above are leased fill out clause 18)

53 ☐ Security System ☐ Leased

54 (a) Are there any fixtures, appliances, or systems on or about the property excluded from the sale?  
55 (ex. Smart home devices, etc)

56 No

57 (b) If any of these items have been replaced during your ownership, which items and what year:

58 New refrigerator with ice maker (2024)

60 (c) Any other leased systems: (ex. Solar panels, water softeners, etc) No

61 (d) Do any items with the sale have any defects? Explain

62 No known defects

64 (f) Please list any appliances or equipment that are gas powered: House Generator (City Gas)

65 **3. STRUCTURAL ITEMS**

66 (a) Name of Contractor or Builder who built home, if known \_\_\_\_\_

67 (b) Have there been any past or present movement, shifting, cracks, deterioration, structural damage or  
68 other problems with walls, ceilings, or foundations? ☐ Yes ☒ No ☐ Unknown

69 (c) Has there been any past or present water leakage or intrusion into the structure(s)?

70 ☐ Yes ☒ No ☐ Unknown

71 (d) Have there been any past or present problems with driveways, walkways, patios, or retaining walls?

72 ☐ Yes ☒ No ☐ Unknown

73 (e) Is the fireplace functioning properly? ☐ Yes ☐ No Explain: \_\_\_\_\_

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110 **7. WINDOWS/DOORS/LOCKS**

- 111 (a) Are the windows insulated glass? ☐ Yes ☐ No ☐ Unknown
- 112 (b) Are there any fogged, broken, or cracked windows? ☐ Yes ☒ No ☐ Unknown
- 113 If yes, which ones \_\_\_\_\_
- 114 (c) Do all operable windows open, stay open, close and lock properly? ☒ Yes ☐ No ☐ Unknown
- 115 If yes, which ones \_\_\_\_\_
- 116 (d) Are any screens missing or damaged? ☐ Yes ☒ No ☐ Unknown
- 117 If yes, which ones \_\_\_\_\_
- 118 (e) Do all doors operate properly? ☒ Yes ☐ No ☐ Unknown
- 119 If no, explain: \_\_\_\_\_
- 120 (f) Are smart locks present? ☐ Yes ☒ No If yes, does the smart lock have a key? ☐ Yes ☐ No
- 121 (g) Do you have keys/codes to all door locks? ☒ Yes ☐ No
- 122 If no, explain: \_\_\_\_\_

123 **8. HEATING AND AIR CONDITIONING**

- 124 (a) Air Conditioning:
- 125 ☒ Central Electric ☐ Natural Gas ☐ Other ☐ Window Units, # of units \_\_\_\_\_
- 126 Provide age if known<sup>15</sup> \_\_\_\_\_
- 127 ☐ Mini-split, # of units \_\_\_\_\_ ☐ Other Provide age if known \_\_\_\_\_
- 128 (b) Heating:
- 129 ☒ Central Electric ☐ Central Electric Heat Pump ☐ Fuel Oil ☐ Natural Gas ☐ Other \_\_\_\_\_
- 130 (c) Is there a fireplace? ☐ Yes ☒ No Heat Source: ☐ Wood ☐ Natural Gas ☐ Propane ☐ Electric
- 131 (d) Have there been any problems regarding these items? ☐ Yes ☒ No
- 132 (e) Have there been any repairs/replacements of these units during your ownership? ☐ Yes ☐ No
- 133 If yes explain: Benton HVAC does standard
- 134 maintenance and system check up every year.

135 **9. ELECTRICAL SYSTEM**

- 136 (a) Have there been any problems with the electrical system? ☐ Yes ☒ No
- 137 (b) Has the panel been updated since the home was built ☐ Yes ☒ No ☐ Unknown
- 138 Provide date if known \_\_\_\_\_
- 139 (c) Is there a generator installed? ☒ Yes ☐ No If yes provide type Cummins
- 140 Year installed 2011 installed by Lawson & Lawson Electric
- 141 If yes explain: Lawson & Lawson Electric provides maintenance and generator check up every year (last done
- 142 in July 2025)

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143 **10. PLUMBING**

- 144 (a) Have there been any problems with the plumbing system? ☐ Yes ☒ No
- 145 (b) Have there been any updates to the plumbing system? ☐ Yes ☒ No ☐ Unknown
- 146 (c) What is your water supply source: ☒ Public ☐ Community Well
- 147 Well on property location: \_\_\_\_\_
- 148 (d) Do you have polybutylene pipes? ☐ Yes ☒ No ☐ Unknown Pex pipes ☐ Yes ☐ No
- 149 ☐ Unknown Year Installed \_\_\_\_\_
- 150 (e) Have there been any leaks, back-ups, water, and/or sewer/septic tank or drain field problems?
- 151 ☐ Yes ☒ No ☐ Unknown
- 152 If yes explain: \_\_\_\_\_
- 153 (f) What type of sewage system do you have? ☒ Public ☐ Community Sewer ☐ Septic Tank(s)
- 154 If septic how Many \_\_\_\_\_ Location(s) \_\_\_\_\_
- 155 (g) When was septic tank last pumped and by who? \_\_\_\_\_
- 156 (h) If community sewer/septic and or well who maintains these functions and how many residences does
- 157 it serve? \_\_\_\_\_
- 158 (i) If on a septic tank, is sewer service available to your property? ☐ Yes ☐ No ☐ Unknown
- 159 **If yes, it is the responsibility of the BUYER to contact the local Health Department regarding**
- 160 **continued use of a septic system.**
- 161 (j) Does your utility bill contain a fee for sewer? ☒ Yes ☐ No
- 162 **If yes, it is the responsibility of the BUYER to contact the utility department to determine if a sewer**
- 163 **is currently in use or if the sewer fee is for availability of sewer for future usage.**
- 164 (k) Is there a pump associated with your sewage system? ☐ Yes ☒ No
- 165 (l) If your water is from a well, have there ever been repairs/replacements to the well or pump?
- 166 ☐ Yes ☐ No ☐ Unknown
- 167 (m) Has the well water ever been tested? ☐ Yes ☐ No ☐ Unknown
- 168 Date and Test Results: \_\_\_\_\_
- 169 (n) Do you have a water conditioning system? ☐ Yes ☒ No
- 170 If yes, is the system ☐ Owned ☐ Leased
- 171 (o) Type of water heater(s)? ☐ Gas ☐ Electric ☐ Solar
- 172 On timer(s)? ☐ Yes ☐ No
- 173 Number of Water Heaters? <sup>1</sup> \_\_\_\_\_ Age of water heater(s) 15 years
- 174 location: Outside
- 175 Number of gallons? \_\_\_\_\_ or ☒ Tankless
- 176 If any answers are yes, explain: \_\_\_\_\_
- 177 \_\_\_\_\_
- 178 \_\_\_\_\_

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179 **11. UTILITIES**

- 180 (a) Who supplies electrical service? ☒ City of Tallahassee ☐ Talquin ☐ Duke ☐ Other
- 181 (b) If Talquin please provide meter number \_\_\_\_\_
- 182 (c) Average utility bill? \$<sup>180</sup> \_\_\_\_\_ Number of people living in property \_\_\_\_\_
- 183 (d) Who supplies water service? ☒ City of Tallahassee ☐ Talquin ☐ Duke ☐ Other
- 184 (e) Who supplies gas service? ☒ City of Tallahassee ☐ Other \_\_\_\_\_
- 185 Tank buried? ☐ Yes ☐ No
- 186 (f) If gas/propane service is leased, will provider allow for it to be transferred to the new owner?
- 187 ☐ Yes ☐ No
- 188 (g) Are solar panels present? ☐ Yes ☒ No Location: \_\_\_\_\_
- 189 (h) If solar panels are present are they ☐ Leased ☐ Owned ☐ Financed If Financed are terms
- 190 assumable? ☐ Yes ☐ No
- 191 (i) Who are the cable/internet provider in your area: \_\_\_\_\_
- 192 (j) Who provides Garbage Collection? ☐ City of Tallahassee ☐ Private ☒ Waste Pro (non city)
- 193 ☐ Other/None

194 **12. POOL / SPA / HOT TUB (Complete if applicable)**

- 195 (a) ☐ **POOL** year installed \_\_\_\_\_ ☐ Salt ☐ Chlorine
- 196 ☐ In ground: ☐ Gunnite ☐ Fiberglass ☐ Vinyl Age of liner \_\_\_\_\_ ☐ Above ground
- 197 (b) Has the pool been resurfaced? ☐ Yes ☐ No ☐ Unknown Date \_\_\_\_\_
- 198 (c) Pool heater: ☐ None ☐ Gas ☐ Electric ☐ Solar Age if known \_\_\_\_\_
- 199 (d) Pool pump: Year installed \_\_\_\_\_
- 200 (e) Filter type: \_\_\_\_\_ Year installed \_\_\_\_\_
- 201 (f) Is pool equipment included? ☐ Yes ☐ No
- 202 If yes, itemize: \_\_\_\_\_
- 203 (g) Is there an automatic pool cleaner? ☐ Yes ☐ No If yes, manufacturer name \_\_\_\_\_
- 204 Age if known \_\_\_\_\_
- 205 (h) ☐ **SPA/HOT TUB** Year installed \_\_\_\_\_
- 206 (i) Spa heater: ☐ None ☐ Gas ☐ Electric ☐ Solar
- 207 (j) Do you use a pool service company ☐ Yes ☐ No If yes, please provide details such as
- 208 company/cost/treatment \_\_\_\_\_
- 209 If there have been any problems with any of the items above, explain: \_\_\_\_\_
- 210 \_\_\_\_\_
- 211 \_\_\_\_\_

212 **13. CRAWL SPACES AND BASEMENTS (Complete if applicable)**

- 213 For the information below, provide the name of any contractor or individual who did any of the following
- 214 work/repair/improvements to the basement or crawl space. \_\_\_\_\_
- 215 (a) Has there ever been any water leakage, accumulation of water or dampness in the basement or crawl
- 216 space? ☐ Yes ☐ No ☐ Unknown
- 217 (b) Is a sump pump in use ☐ Yes ☐ No ☐ Unknown How many \_\_\_\_\_ Age \_\_\_\_\_

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- 218 (c) Is a dehumidifier in use ☐ Yes ☐ No ☐ Unknown How many \_\_\_\_\_ Age \_\_\_\_\_  
219 (d) Is the crawl space encapsulated? ☐ Yes ☐ No ☐ Unknown Year installed \_\_\_\_\_  
220 (e) Is a vapor barrier installed ☐ Yes ☐ No ☐ Unknown  
221 (f) Have there been any repairs or other attempts to control any water or dampness problems in the basement or  
222 crawlspace? ☐ Yes ☐ No ☐ Unknown

223 If any answers are yes, explain: \_\_\_\_\_

224 \_\_\_\_\_

225 \_\_\_\_\_

226 **14. WOOD DESTROYING ORGANISMS**

- 227 (a) Has there been damage to the property caused by wood rot? ☐ Yes ☒ No ☐ Unknown  
228 (b) Have termites or any wood destroying insects affected the property? ☐ Yes ☒ No ☐ Unknown  
229 (c) Has there ever been any damage to the property caused by termites or wood destroying insects  
230 during your ownership?  
231 ☐ Yes ☒ No ☐ Unknown  
232 (d) Is the property currently under bond for wood destroying insects from a licensed pest control  
233 company? ☒ Yes ☐ No  
234 What company? Capelouto Termite & Pest Control Renewal Fee \_\_\_\_\_  
235 Expiration date: 11/2025

236 If any answers are yes, explain: \_\_\_\_\_

237 \_\_\_\_\_

238 \_\_\_\_\_

239 **15. SOIL / DRAINAGE / BOUNDARIES**

- 240 (a) Is any portion of the property located in a flood hazard area? ☐ Yes ☒ No ☐ Unknown  
241 Flood zone type, if known? \_\_\_\_\_  
242 (b) Is flood insurance required by your lender? ☐ Yes ☒ No ☐ Unknown  
243 If yes provide the insurer information and annual cost: \_\_\_\_\_  
244 (c) Have there been any past or present drainage or flood problems affecting the property?  
245 ☐ Yes ☒ No ☐ Unknown  
246 (d) Have there been any past or present drainage or flood problems affecting adjacent properties?  
247 ☐ Yes ☒ No ☐ Unknown  
248 (e) Is there any fill or pipe clay on the property? ☐ Yes ☒ No ☐ Unknown  
249 (f) Has there been any settling or earth movement on the property?  
250 ☐ Yes ☒ No ☐ Unknown  
251 (g) Has there been any settling or earth movement in the immediate neighborhood?  
252 ☐ Yes ☒ No ☐ Unknown  
253 (h) Who owns any fences? \_\_\_\_\_  
254 (i) Are there any encroachments, boundary line disputes, or easements affecting the property?  
255 ☐ Yes ☒ No ☐ Unknown  
256 (j) Are there any conservation easements or environmental restrictions? ☐ Yes ☒ No

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257 (k) Are there any conservation easements or environmental restrictions? ☐ Yes ☒ No  
258 If any answers are yes, explain: \_\_\_\_\_  
259 \_\_\_\_\_  
260 \_\_\_\_\_

261 **16. TOXIC SUBSTANCES**

262 (a) Are you aware of any hazardous materials in, on or about the property? (Hazardous Materials may  
263 include but are not limited to: lead-based paint, asbestos materials, asbestos siding, mold, and buried  
264 oil, fuel or other storage tanks.) ☐ Yes ☒ No ☐ Unknown  
265 Location of tanks if buried: \_\_\_\_\_  
266 (b) Has the property been tested for mold, lead-based paint, or any other toxic substances?  
267 ☐ Yes ☐ No ☒ Unknown  
268 (c) Has the property been tested for Radon? ☐ Yes ☐ No ☒ Unknown If yes was the reported  
269 radon levels above the EPA recommended level? ☐ Yes ☐ No ☐ Unknown  
270 (d) Is a Radon Mitigation system installed? ☐ Yes ☐ No Number \_\_\_\_\_  
271 Location(s) \_\_\_\_\_ Installer \_\_\_\_\_  
272 If any answers are yes, explain: \_\_\_\_\_  
273 \_\_\_\_\_  
274 \_\_\_\_\_

275 **17. ROAD MAINTENANCE AND NEIGHBORHOOD/HOA INFORMATION**

276 **Note: If there is a mandatory Homeowners' Association, including active covenants and periodic**  
277 **dues, you must complete the separate HOMEOWNERS' ASSOCIATION/ COMMUNITY DISCLOSURE**  
278 (a) Is the property located in the City limits? ☒ Yes ☐ No  
279 (b) Who maintains your road? ☒ Gov't ☐ Private  
280 If private, is it maintained by: ☐ HOA ☐ Road Maintenance Agreement ☐ Other (ex. Easement)  
281 (c) If a road maintenance agreement exists, please provide terms and/or contact person for details: \_\_\_\_\_  
282 \_\_\_\_\_  
283 (d) What is the annual fee? \$ 160 How is it paid? ☐ Monthly ☒ Yearly ☐ Other  
284 (e) Are fees current? ☒ Yes ☐ No  
285 (f) What does the fee cover? Common Grounds Maintenance (Lawn/Landscaping)  
286 (g) Who is the contact person for the association? Selvan  
287 Phone # \_\_\_\_\_ Email SIVASEL1980@yahoo.com  
288 website \_\_\_\_\_  
289 (h) Are there any transfer fees? ☐ Yes ☐ No ☒ Unknown  
290 Amount \$ \_\_\_\_\_  
291 If yes, to whom: \_\_\_\_\_  
292 (i) Is there an enhancement fee or any other type of fee upon resale? ☐ Yes ☐ No ☒ Unknown  
293 Amount \$ \_\_\_\_\_ If yes, what kind of fee and to whom \_\_\_\_\_

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- (j) Are there any special assessments or any other fees of any type? ☐ Yes ☒ No ☐ Unknown  
If yes, explain nature of assessment/fee imposed by whom and amount: \_\_\_\_\_
- (k) Is there a CDD (Community Development District) fee attached to your property?  
☐ Yes ☒ No ☐ Unknown If yes, amount \$ \_\_\_\_\_  
How is it paid? \_\_\_\_\_
- (l) Are there any defects, damages, legal actions, conditions or assessments that may affect the association or its fees? ☐ Yes ☒ No
- (m) Have there been any proposed changes or conditions in your neighborhood that could affect the value or desirability of the property? ☐ Yes ☒ No ☐ Unknown  
If yes, explain: \_\_\_\_\_
- (n) Does the property violate the restrictive covenants? ☐ Yes ☐ No ☐ Unknown

### 18. LEASED OR FINANCED SYSTEMS/EQUIPMENT

- (a) If the seller has leased or financed systems, will the seller be paying off the lease or loan of the system prior to closing? ☐ Yes ☐ No
- (b) Are there any leased/financed systems that are not included in the sale? ☐ Yes ☐ No
- (c) Are solar panels installed? ☐ Yes ☐ No ☐ Owned ☐ Financed  
If financed, are terms assumable? ☐ Yes ☐ No
- (d) Is there security system equipment included? ☐ Yes ☐ No ☐ Owned ☐ Leased ☐ Financed  
if financed, are terms assumable? ☐ Yes ☐ No
- (e) Is there a water softener/purifier system installed? ☐ Yes ☐ No ☐ Owned ☐ Leased ☐ Financed  
If financed, are the terms assumable? ☐ Yes ☐ No
- (f) List item(s) and details of any other leased/financed systems that are incorporated into the property: \_\_\_\_\_

### 19. OTHER MATTERS

- (a) Has an insurance claim been filed on this property during your ownership? ☐ Yes ☒ No  
How many \_\_\_\_\_ Please provide additional details such as when filed, if paid out, amount, if claim has been closed, and who current provider is: \_\_\_\_\_
- (b) Does anyone have a first right of refusal or an option to buy this property? ☐ Yes ☒ No
- (c) Is there any existing or threatened legal action affecting the property? ☐ Yes ☒ No
- (d) Is this property located within a geographical area which has been designated, or is being considered for designation, as a Historic Preservation Overlay District? ☐ Yes ☒ No ☐ Unknown
- (e) Is the property registered as a rooming house under the Rooming House Ordinance?  
☐ Yes ☒ No ☐ Unknown
- (f) Are there any zoning violations, non-conforming uses, set back violations, or proposed zoning or road changes? ☐ Yes ☒ No ☐ Unknown
- (g) Are there any violations of local, state, or federal laws or regulations relating to this property?  
☐ Yes ☒ No ☐ Unknown
- If any above are yes, explain: \_\_\_\_\_

BUYERS Initials: \_\_\_\_\_

SELLERS Initials: DS



334 (h) Is your Leon County Fire Tax Assessment ☐ Paid separately ☒ Included in tax bill ☐ Unknown  
335 ☐ N/A Amount, if any: \$ \_\_\_\_\_ ☐ Included in utility bill  
336 (i) Are there any concealed cosmetic defects? ☐ Yes ☒ No ☐ Unknown  
337 If Yes, please explain: \_\_\_\_\_  
338 \_\_\_\_\_  
339 (j) Anything else you feel you should disclose to a prospective buyer that may materially and/or adversely  
340 affect the value or desirability of the property \_\_\_\_\_  
341 \_\_\_\_\_

342 The undersigned SELLER represents that the information set forth in the foregoing property disclosure  
343 statement is accurate and complete to the best of the SELLER'S knowledge on the date signed below.  
344 SELLER does not intend this property disclosure statement to be a warranty or guaranty of any kind. SELLER  
345 hereby authorizes Listing Broker to provide this information to prospective BUYERS and to other Real Estate  
346 Brokers and other Salespersons.  
347 **SELLER understands and agrees that SELLER will immediately notify Listing Broker in writing if any**  
348 **information set forth in this property disclosure changes.**

349 Seller: David Swilley Date: 08/29/2025  
350 Seller: \_\_\_\_\_ Date: \_\_\_\_\_

351 **RECEIPT AND ACKNOWLEDGMENT BY BUYER**

352 BUYER hereby acknowledges receipt of a copy of this property disclosure. BUYER is strongly advised to obtain  
353 property inspection(s) as provided for in the Contract for Sale and Purchase. BUYER should select professionals  
354 with appropriate qualifications to conduct inspections. BUYER is aware that this property disclosure is not  
355 intended as a warranty or guaranty of any kind by SELLER. The Brokers and their Salespersons do not warrant  
356 or guarantee the condition of the property and are in no way responsible for the condition of the property.  
357 BUYER understands that the property is being sold in its present condition unless otherwise agreed upon in  
358 the Contract for Sale and Purchase.

359 Buyer: \_\_\_\_\_ Date: \_\_\_\_\_  
360 Buyer: \_\_\_\_\_ Date: \_\_\_\_\_