



Seller's Disclosure Statement for Commercial/Industrial Property

Addendum to Listing Contract # _____

The following is a disclosure statement, made by Seller concerning the condition of the property located at:

Street Address: 1695 Hilltop Dr
City: Warsaw State: MO
Zip Code: 65355 County: Benton

This disclosure is not a warranty of any kind by Seller or any agent of Seller in this transaction, and is not a substitute for any inspection or warranties the buyer may wish to obtain. The following are representations made by the Seller and are not representations of the Seller's agent.

To the Seller:

Please complete the following form, including past history or problems if known. **Do not leave any spaces blank.** If the condition is not applicable to your property, mark "NA" in the blank. **Attach additional pages if additional space is required.** Be sure to sign every page.

1. GENERAL.

- a) Approximate Year Built: 1986 (Seller to complete Lead-based Paint Disclosure form (DSC-2000 or DSC-3000) for residential building built prior to 1978).
- b) Date Purchased: 1989

2. OCCUPANCY.

- a) Is the property currently vacant? Yes No
- b) Does Seller currently occupy this property?
 Yes No. If not, how long has it been since Seller occupied or inspected the property?
(1) Occupied _____
(2) Inspected _____

3. LAND (SOILS, DRAINAGE AND BOUNDARIES).

- a) Has any part of the property been filled other than in ordinary construction? Yes No Unknown
- b) Is the property located in a flood zone, established flood plain or wetlands area? Yes No Unknown
- c) Do you know of any past or present drainage or flood problems affecting the property or immediately adjacent properties? Yes No
- d) Do you know of any encroachments, title disputes, boundary line disputes or easements affecting the property? Yes No

If any of your answers in this section are "Yes," explain in detail: _____

4. ROOF. (Defined as outer layer of roof)

- a) Age: 12 years.
- b) Has the roof ever leaked during your ownership? Yes No
- c) Has the roof been replaced or repaired during your ownership? Yes No
- d) Do you know of any problems with the roof or rain gutters? Yes No

If any of your answers in this section are "Yes," explain in detail: _____

5. TERMITES, DRYROT, PESTS.

- a) Do you have any knowledge of termites, wood destroying insects, dryrot or pests on or affecting the property? Yes No
- b) Do you have any knowledge of any previous treatment or damage to the property relating to termites, dryrot or pests? Yes No
- c) Is your property currently under warranty or other coverage by a licensed pest control company? Yes No

If any of your answers in this section are "Yes," explain in detail: _____

6. STRUCTURAL ITEMS.

- a) Are you aware of any past or present cracks or flaws in the walls, foundations or structural areas? Yes No
- b) Are you aware of any past or present water leakage or seepage in the building? Yes No
- c) Are you aware of any fire damage or other casualty to the property? Yes No
- d) Have there been any repairs or other attempts to control any problem described above? Yes No
- e) Have any insurance claims been made in the last 5 years? Yes No
- f) Have you received any insurance payments for damage to the property, which were not spent for repairs? Yes No
- g) Are you aware of any insurance application or prior coverage regarding all or any part of the property that has been rejected or will not be renewed? Yes No
- h) Are you aware that any existing insurance coverage will be subjected to increased premium rates? Yes No

- i) Do you know of any temporary repairs that when made the repairmen advised that replacement would soon be needed? Yes No

If any of your answers in this section are "Yes," explain in detail. When describing repairs or control efforts, describe the location, extent, date, and name of the persons who did the repair or control effort. Also attach copies of any available insurance claims made within the last 5 years.

7. BASEMENTS, CRAWLSPACES AND FOUNDATIONS.

- a) Does the property have a sump pump? Yes No
- b) Has there ever been any water leakage, seepage, accumulation, moisture or dampness within or around the basement, crawlspace, foundation or slab? Yes No If "Yes," describe in detail: _____
- c) Have there been any repairs or other attempts to control any water or dampness problem relating to the basement, crawlspace, foundation or slab? Yes No If "Yes," describe the location, extent, date, and name of the person who did the repair or control effort: _____

8. ADDITIONS/REMODELS.

- a) Have you made any additions, improvements, structural changes, or other alterations to the property? Yes No If "Yes," did you obtain all necessary permits and approvals and was all work in compliance with building codes? Yes No Unknown If your answer is "No," explain: _____

9. HEATING AND AIR CONDITIONING.

- a) Air Conditioning: Central Electric Central Gas Window (#) Units
 2 mini-splits
- b) Heating: Electric Propane Natural Gas Other: _____
- c) Water Heating: Electric Gas Solar
- Are you aware of any problems regarding these items? Yes No If "Yes," explain in detail: _____

- 10. ELECTRICAL SYSTEM.** Are you aware of any problems with the electrical system? Yes No If "Yes," explain in detail: _____

- 11. PLUMBING SYSTEM.** Are you aware of any problems with the plumbing system? Yes No If "Yes," explain in detail: _____

12. OTHER EQUIPMENT AND ITEMS.

Mark the number of items being sold with property:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Electric Garage Door Opener | <input type="checkbox"/> Transmitters | <input checked="" type="checkbox"/> Water Softener | <input checked="" type="checkbox"/> Smoke Detectors |
| <input type="checkbox"/> Security Alarm System | <input type="checkbox"/> Disposal | <input type="checkbox"/> Lawn Sprinklers | <input type="checkbox"/> Fire Suppression Equipment |
| <input type="checkbox"/> Spa/Hot Tub | <input checked="" type="checkbox"/> Refrigerator | <input checked="" type="checkbox"/> Dishwasher <i>Sink only</i> | <input type="checkbox"/> Automatic Timers |
| <input type="checkbox"/> Fireplace Doors and Covering | <input checked="" type="checkbox"/> Stove | <input checked="" type="checkbox"/> Microwave Oven | <input checked="" type="checkbox"/> Ceiling Fans |
| <input type="checkbox"/> TV Antennas | <input type="checkbox"/> Washer | <input type="checkbox"/> Dryer | <input type="checkbox"/> FP Insert |
| <input type="checkbox"/> Wood Stove | <input type="checkbox"/> Swimming Pool | <input type="checkbox"/> Pool Heater | <input type="checkbox"/> Propane Tank |
| <input type="checkbox"/> Pool/spa Equipment (list) _____ | | | |

Other (describe): _____
 If any of the above are not in working order, or are not owned by Seller, explain: _____

13. AVAILABLE RESOURCES.

- Sewer System Natural Gas Electricity Telephone Cable Television Cable
- a) What is your drinking water source: Public Private System Well on Property Shared Well
- b) If non-public, date last tested: _____ Results: _____
- c) What is the type of sewage system: Public Sewer Connected Private Sewer Septic Tank None
 Other: _____ Explain: _____
- d) Is there a sewage lift pump? Yes No
- e) When was the septic system last serviced? *N/A*
- f) Do you know of any leaks, backups or other problems relating to any of the plumbing, water and sewage-related items? Yes No If "Yes," explain in detail: _____

- 14. NEIGHBORHOOD.** Are you aware of any annexation, school re-districting, threat of condemnation, zoning changes or street changes? Yes No If "Yes," explain in detail: _____

15. HAZARDOUS SUBSTANCES.

- a) Are you aware of the presence of any lead-based paint on the property? Yes No
- b) Are you aware of asbestos materials on the property, such as roof shingles, siding insulation, ceiling, flooring, pipe wrap, etc? Yes No
- c) Are you aware of the presence of other environmental concerns that may affect the property such as underground tanks, lead water supply pipes, polychlorinated biphenyls (PCB's), radon gas, mold, toxic waste, dump sites or any other hazardous substance? Yes No

- d) Are you aware whether the property has been tested for mold, radon gas or any other hazardous substances?
 Yes No
 If "Yes," please give date performed, type of test and test results: _____
 If any of the above answers are "Yes," explain in detail: _____

Other disclosures: _____

16. PROPERTY OWNERS ASSOCIATIONS/ CONDOMINIUMS/USE RESTRICTIONS.

- a) Is the property subject to covenants, conditions and restrictions (CC&R's)?
 Yes No Unknown
- b) Is the property part of a condominium, property owner's association or other common ownership?
 Yes No Unknown
 (If your answer to (b) is "No," or "Unknown," you may ignore the remainder of this section).
- c) Is there any condition or claim which may result in an increase in assessments or fees?
 Yes No Unknown
 If your answer to (c) is "Yes," explain in detail: _____
- d) Are all association dues, fees, charges and assessments related to the property current?
 Yes No Unknown
 If your answer to (d) is "No," explain in detail: _____
- What are the association fees, dues and other assessments related to the property? _____

DUE TO SELLER'S LIMITED KNOWLEDGE OF THE PROPERTY, SELLER MAKES NO DISCLOSURES.

The undersigned Seller represents that the information set forth in the foregoing disclosure statement is accurate and complete to the best of Seller's knowledge. Seller does not intend this disclosure statement to be a warranty or guaranty of any kind. Seller hereby authorizes the Broker to provide this information to prospective buyers of the property and to real estate brokers and sales people. Seller will fully and promptly disclose in writing to Buyer any new information pertaining to the Property that is discovered by or made known to Seller at any time prior to closing or settlement and constitutes an adverse material fact or would make any existing information set forth herein false or materially misleading. Seller does have legal authority to sell the property, and does not know of any facts that could restrict, impede or prevent Seller's ability to sell.

Seller: James H. Atkins
 Date: 6-3-24
 Seller: M. Paterson
 Date: 6-3-24

17. OTHER MATTERS.

- a) Do you know of any existing legal action which would prevent Seller from conveying the property?
 Yes No
- b) Do you know of any violations, or alleged violations of local, state or federal laws or regulations, or any covenants, conditions, or restrictions relating to this property? Yes No
- c) Do you know of any mortgages, deeds of trust or other liens against the property that may affect your ability to sell the property? Yes No
- d) Do you know of proceedings which might result in a special tax bill or assessment on the property?
 Yes No
- e) Are you aware that the property is or was used as a site for methamphetamine production, storage or was the residence of a person convicted of a crime involving any controlled substance related thereto?
 Yes No Unknown **If "Yes," MAR form DSC-5000 must be filled out in conjunction with this form.**

RECEIPT AND ACKNOWLEDGMENT OF BUYER

The undersigned Buyer is urged to carefully inspect the property and, if desired, to have the property examined by professional inspectors. Buyer understands that this disclosure statement is not a substitute for such inspections. Buyer acknowledges that no broker or salesperson involved in this transaction is an expert at detecting or repairing physical defects in the property. Buyer understands that there are areas of the property of which Seller has no knowledge and that this disclosure statement does not encompass those areas.

Buyer understands that unless stated otherwise in the Contract with Seller, the property is being sold in its present condition only, without warranties or guarantee of any kind by Seller or any broker or salesperson. Buyer states that no representations concerning the condition of the property are being relied upon by Buyer except as stated within the sale contract.

Buyer: _____
 Date: _____
 Buyer: _____
 Date: _____

If any of your answers in this section are "Yes," explain in detail: _____
 (use extra sheets, if necessary)



Measurements Disclaimer

This disclaimer applies to the following real estate (the "Property"):

1695 Hittop Dr Warshaw MO 65355 Barton
Street Address City Zip Code County

SOURCE OF MEASUREMENTS:

The undersigned Brokerage Firm(s) and its affiliated licensee(s) **Have Not** measured the acreage of the Property or the square footage of any improvement located thereon. Any information shared regarding acreage or square footage ("**Measurements**") has been provided from another source(s) as indicated (*Check applicable box(es) below*):

Source of Measurements Information:

- Prior appraisal
- Building Plans
- Assessor's Office
- Other _____

Any Measurements information shared has not been independently verified and is for purposes of marketing only. Measurements are an approximation and may not be exact. Measurements are not to be relied upon for purpose of a loan, valuation or for any other purpose.

If exact acreage or square footage is a concern, the Property should be independently measured.

Any independent measurement or investigation should be completed by Buyer on or before the Survey Deadline (*with respect to acreage*) and/or the Property Data Review Period (*with respect to improvements*) of the Contract.

Brokerage Firm Assisting Buyer

Trophy Properties & Auction

By (Signature) Rashell L Burke
Licensee Print Name: Rashell L Burke
Date: 6/3/24

Brokerage Firm Assisting Seller

By (Signature) _____
Licensee Print Name: _____
Date: _____

The undersigned acknowledge(s) receipt of this Disclaimer:

BUYER _____ Date _____
Print Name: _____

Javier H. Patino _____ Date 6-3-24
SELLER Print Name: JAVIER H. PATINO

BUYER _____ Date _____
Print Name: _____

M. Patino _____ Date 6-3-24
SELLER Print Name: Marcela Patino

Approved by legal counsel for use exclusively by current members of the Missouri REALTORS®, Columbia, Missouri. No warranty is made or implied as to the legal validity or adequacy of this Disclaimer, or that it complies in every respect with the law or that its use is appropriate for all situations. Local law, customs and practice, and differing circumstances in each transaction, may each dictate that amendments to this Disclaimer be made.

Effective 1/1/19.

© 2019 Missouri REALTORS®



Water Well/Sewage System Disclosure Rider

This document has legal consequences. If you do not understand it, consult your attorney. It should be attached to and made part of DSC-8000 ("Seller's Disclosure Statement for Residential Property").

This Disclosure Rider is made by the undersigned Seller concerning the following property (the "Property"):

1695 Hilltop Dr.

Warsaw

MO 65355

Benton

Street Address

City

Zip Code

County

Note: Seller may not frequently use the Water Well/Sewage System. If underutilized, it may falsely appear to be problem free. Even if heavily utilized, problems may surface that were previously not known or detectable.

Does the Property include or is it served by a Water Well?: Yes No (If "Yes", complete all of the following)

- (1) Specify type and depth _____
 - (2) Age of well _____ Installed/Drilled by _____
 - (3) Has the well been tested? Yes No
 - (4) Is any part of the well located on a neighbor's property or community lot? Yes No
 - (5) Is the well shared with any other property(ies)? Yes No
If "Yes", is there a recorded agreement? Yes No
 - (6) Have you been notified or cited by any authority for any problem related to the water well system? Yes No
 - (7) Is there a current maintenance service agreement covering the water well system? Yes No
If "Yes", what is the annual cost and who is the current provider? _____
 - (8) Are you aware of any plan to bring public water (e.g., City/Water District) to the Property? Yes No
 - (9) **Are you aware of any problem or repair needed for any part of the water well system?** Yes No
- Please explain any "Yes" answer above. Include all available test reports and repair history (attach additional pages if needed): city water

Does the Property include or is it served by a "Sewage System"? (meaning a private, shared or community sewer, septic, lateral, lagoon, cistern or other similar system): Yes No (If "Yes", complete all of the following)

- (1) Check all that apply: septic lateral lagoon cistern lift station Other city sewer system
 - (2) Do you have a diagram of the Sewage System? Yes No
 - (3) If a lagoon, is there a fence? Yes No
 - (4) If a septic tank:
 - Is it readily accessible from the surface? Yes No
 - Are clean-outs present? Yes No
 - Of what is the tank constructed? Steel Concrete Other: _____
 - Does it discharge into a lateral or lagoon? Yes No
 - Size & Age of tank (if known) is _____
 - (5) Does any other property owner(s) share the Sewage System? Yes No If "Yes", how many? _____
 - (6) Is any part of the Sewage System located on a neighbor's property or community lot? Yes No
 - (7) Is there a well within 50 feet of the Sewage System? Yes No Unknown
 - (8) Does the Sewage System have an aerator? Yes No
 - (9) Does any plumbing (e.g., sink, tub or shower) disperse outside of the Sewage System? Yes No
 - (10) Is there any untreated seepage or discharge (effluence) from the Sewage System? Yes No
 - (11) Does any effluence from a neighbor's system disperse onto your Property? Yes No
 - (12) Have you noticed any unusual odors from the Sewage System? Yes No
 - (13) Have you experienced slow drainage or drain backups? Yes No
 - (14) Is there a current maintenance service agreement covering the Sewage System? Yes No
If "Yes", what is the annual cost and who is the current provider? _____
 - (15) Does any government authority require a maintenance service agreement for the Sewage System? Yes No
 - (16) Have you been notified or cited by any authority for any problem related to the Sewage System? Yes No
 - (17) Have you expanded, updated or modified the Sewage System? Yes No
 - (18) Have you added any bedrooms at the Property since the Sewage System was installed? Yes No
 - (19) Have you cleaned, pumped or serviced the Sewage System during your ownership of the Property? Yes No
- Are you aware of any problem or repair needed for any part of the Sewage System?** Yes No
- Please explain any "Yes" answer above. Include all available permits, test reports and repair history (attach additional pages if needed): _____

Buyer's Initials _____ (date) _____

Seller's Initials [Signature] (date) 6-3-24

Approved by legal counsel for use exclusively by current members of Missouri REALTORS®, Columbia, Missouri. No warranty is made or implied as to the legal validity or adequacy of this Rider, or that it complies in every respect with the law or that its use is appropriate for all situations. Local law, customs and practice, and differing circumstances in each transaction, may each dictate that amendments to this Rider be made.

Last Revised 12/31/21

©2021 Missouri REALTORS®