## **MOLD DISCLOSURE**





The use of this form is for REALTOR® members only (members of the Montana Association of REALTORS®) and cannot be used by any other party for any purpose. Use of these forms by other parties may result in legal action by the Montana Association of REALTORS®.

1	Date: November 14, 2023			
2	Property Address: 8542 MONZ	AN ROAN RILLINGS	MT 59106	
3	Property Address. 0542 More	W ROAD, BILLINGS,	M1 33100	
5	mold. Moisture is one of the most significant factors contributing to mold growth. Information about controlling mold growt may be available from your county extension agent or health department. Certain strains of mold may cause damage to property and may adversely affect the health of susceptible persons, including allergic reactions that may include skin, eye nose, and throat irritation. Certain strains of mold may cause infections, particularly in individuals with suppressed immunous systems. Some experts contend that certain strains of mold may cause serious and even life-threatening diseases. However, experts do not agree about the nature and extent of the health problems caused by mold or about the level of mold exposure that may cause health problems. The Centers for Disease Control and Prevention is studying the line.			
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15	problem is present. To do so, the buyer or tenant should hire a qualified inspector and make any contract to purchase, ren			
16				
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19	propensity for mold in a building that is subject to any contract to purchase, rent, or lease.			
20		-	•	
21	The undersigned, Seller, Landlo	ord, Seller's Agent and/or Pr	operty Manager disclose that the	ey have knowledge that the
22				
23	inhabitable properties contain mold, as defined by the Montana Mold Disclosure Act (any mold, fungus, mildew o spores). The undersigned are not representing that a significant mold problem exists or does not exist on the property as such a determination may only be made by a qualified inspector.			
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27	provided or with this Disclosure provides the Buyer/Tenant a copy of the results of that test (if available) and evidence			
28				
29	any subsequent mitigation or trea	atment.	Auth	entisign°
30		12	Tra	mpus Corder
31	fre cont	Dáte Dáte	V-MON -	<u></u>
32	Seller/Landlord	Date	Seller's Agent/Property Manage	
33	MICHAEL DEAN ANDERSON	12 11 02	TRAMPUS CORDER/PAMELA A	MUNDSEN
34		201700 19.11.03	0.11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	
35	Seller/Landlord	Date	Seller's Agent/Property Manage	r Date
	REBEKAH LEIGH ANDERSON			
	ACKNOWLEDGMENT: The undersigned Buyer/Tenant, Buyer's Agent or Statutory Broker acknowledges receipt of this			
	Disclosure, the test results (if available) and evidence of subsequent mitigation or treatment. The undersigned			
40	Buyer/Tenant agrees that it is their responsibility to hire a qualified inspector to determine if a significant mold problem exists or does not exist on the property. They further acknowledge that the Seller, Landlord, Seller's Agent, Buyer's			
41	Agent, Statutory Broker and/or Property Manager, who have provided this Disclosure, are not liable for any action based			
42	on the presence of or propensity		provided this Disclosure, are not	liable for any action based
43	on the presence of or properly	for more in the property.		
44				
45	Buyer/Tenant	Date	Buyer's Agent/Statutory Brok	er Date
46	Day of Foliation	Date	Dayer's Agent/Statutory Diok	GI Date
47				
	Buyer/Tenant	Date	Buyer's Agent/Statutory Brok	er Date
				- utt

NOTE: Unless otherwise expressly stated the term "days" means calendar days and not business days. Business days are defined as all days except Sundays and Montana or federal holidays.

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