RESIDENTIAL PROPERTY SELLER DISCLOSURE STATEMENT

This is an approved uniform DMAAR Form



| PRO | W FILL WEDITED | 201 | NES | STreet | STUART | Lown | 30230 |
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| | PERTY OWNER | Kubert | repin ' | im berly | repin | | |
| Com discl This | RPOSE OF STATEMING INTERPORT OF THE CONTROL OF THE | shall satisfy the on of, and infor be a warranty | mation about, the of any kind by th | e property the S e Seller or Listi | Seller is about to | sell unless the | e property is exemp |
| EXE | MPT PROPERTIES | | | | | | |
| Sell | er is exempt from c | | | | | | |
| | The property conta | | | | units. | | |
| Ĺ | This transfer is be | | | | | | |
| L | ☐ This transfer is to☐ This transfer is by | | | nt of Seller. | | | |
| L T | This transfer is by | | | dissolution of i | marriage. | | |
| [| This transfer is ma | | | | J | | |
| Ī | Seller is a lender | | | | | | |
| [| This transfer is to | or from a gove | ernmental body. | | | | |
| [| This transfer is by | quit claim de | ed. | | | | |
| If S | eller is an Estate, Co | onservatorsh | ip, or Trust, che | ck the approp | riate box below | • | |
|] | immediately precedir Yes. Seller to con No. Seller is exen | nplete disclosu | ure form | | | | |
| | er certifies that the prove. If so: sign and sto | | mpt from the requ | uirement(s) of k | owa Code 558A l | pecause one | of the exemptions |
| Buy | /er | | Date | - | | | |
| | | | | Seller | | | Date |

| | PROPERTY ADDRESS 207 NESth STreeT Sthart | | | | |
|-----|--|--------|--------------|---------|-----------|
| 53 | EVERY QUESTION MUST BE ANSWERED AS DIRECTED ON FORM - CHECK ONLY ONE RES | SPONSE | IN EACH | STATEM | ENT |
| 54 | | /= \ \ | No [| | NUA 🖂 |
| 55 | 1. Basement/Foundation: Any known water or other problems? | | | UNK 🔲 | N/A |
| 56 | 2. Roof: Any known problems? | YES [| _ | UNK 🔲 | N/A |
| 57 | Any known repairs? | YES [| NO 🗌 | UNK 🔲 | N/A |
| 58 | If yes, date of repairs/replacement: | | | | |
| 59 | 3. Well and Pump: (If not applicable, check the box and skip to Question #4) N/A | /F0 🗀 | No 🖂 | | NUA C |
| 60 | Any known problems? | | | UNK 📙 | N/A 🔲 |
| 61 | Any known repairs? | YES 🗌 | NO 🗌 | UNK 🔲 | N/A |
| 62 | If yes, date of repairs/replacement: AP | | | | |
| 63 | Any known water tests? | YES 🗌 | NO 🗌 | UNK 🔲 | N/A |
| 64 | If yes, date of last report: AP | | | | |
| 65 | and results: | _ | | | |
| 66 | 4. Septic Tanks/Drain Fields: (If not applicable, check box and skip to Question #5) N/A | | | | |
| 67 | Any known problems? | YES 🗌 | NO 🗌 | UNK 🔲 | N/A |
| 68 | If yes, explain: | | | | |
| 69 | Has the system been inspected by an Iowa DNR certified inspector within 2 years? | YES 🗌 | NO 🗌 | UNK 🔲 | N/A |
| 70 | Date of Inspection: AP | | | | |
| 71 | Has the system been pumped/cleaned within the last 3 years? | YES 🗌 | NO 🗌 | UNK 🔲 | N/A |
| 72 | Date tank last cleaned: AP | | | | |
| 73 | (Note: If inspected within 2 years of closing date, system may not need inspection, | | | | |
| 74 | and if pumped within 3 years, system may not need pumping/cleaning) | | | | |
| 75 | General location of system: | | | | |
| 76 | Age of system: AP UNK | | | | |
| 77 | 5. Sewer System: Any known problems? | YES 🗌 | NO 🏻 | UNK 🔲 | N/A |
| 78 | Any known repairs? | YES 🗌 | NO 🏻 | UNK 🔲 | N/A |
| 79 | If yes, date of repairs/replacement: AP | | - | | |
| 80 | 6. Heating System(s): Any known problems? | YES 🗌 | ио 🛛 | UNK 🗌 | N/A |
| 81 | Any known repairs? | YES 🗍 | NO 🔽 | UNK 🗍 | N/A |
| 82 | If yes, date of repairs/replacement:AP | | | | |
| 83 | 7. Central Cooling System(s): Any known problems? | YES 🗆 | NO X | UNK 🖂 | N/A |
| 84 | Any known repairs? | YES 🖂 | NO D | | N/A |
| 85 | If yes, date of repairs/replacement: AP | | 450 | | |
| 86 | 8. Plumbing System(s): Any known problems? | YES 🗍 | NO XI | UNK 🗀 | N/A |
| 87 | Any known repairs? | YES 🖂 | NO A | UNK H | N/A |
| 88 | If yes, date of repairs/replacement:AP | | لكرة | | |
| | 9. Floatrical System(s): Any known problems? | VES 🖂 | NO 🏹 | UNK 🗖 | N/A |
| 89 | 9. Electrical System(s): Any known problems? Any known problems? | VEC H | / | UNK | N/A |
| 90 | Any known repairs? | 152 | | | IN/A |
| 91 | If yes, date of repairs/replacement:AP | الم | NO \square | | N/A |
| 92 | 10. Pest Infestation (termites, carpenter ants, bats, etc.): Any known problems? | 169 | NO [| ONK [| N/A |
| 93 | If yes, date(s) of treatment: AP | VEC 🗆 | NO NZ | LINK - | N/A |
| 94 | Any known structural damage? | TES [| NO DE | | IN/A |
| 95 | If yes, date(s) of repairs/replacement:AP | VE6 🖂 | NO DED | LINIZ 🗀 | N/A 🗌 |
| 96 | 11. Asbestos: Any known to be present in the structure? | | | | IN/A |
| 97 | If yes, explain: | VEC [| NO M | | NI/A 🖂 |
| 98 | | | | | N/A |
| 99 | If yes, date of last report: AP and results: 13. Lead-Based Paint: Any known to be present in the structure? | V=0 = | No M | | NI/A 🖂 |
| 100 | 13. Lead-Based Paint: Any known to be present in the structure? | YES [| NO X | UNK | N/A |
| 101 | 14. Flood Plain: Do you know if the property is located in a flood plain? | | | | N/A |
| 102 | If yes, what is the flood plain designation? | | | | NUA - |
| 103 | | YES [| NO 🔀 | UNK 📙 | N/A 🔲 |
| 104 | If yes, what is the zoning classification? | | , | | |
| 105 | | | | | |
| 106 | | | | il i | 12 |
| 107 | BUYER INITIALS BUYER INITIALS | 15 6 | INITIALS | SELLER | INITIALS |
| | BUYER INITIALS BUYER INITIALS Version 2.0 - 6/19/25 © 2025 [| | | | EALTORS 2 |

Serial#: 099559-900175-7091892
Prepared by: Daniel Wilson | SoldWilson Real Estate and Auc | dan@soldwilson.com | 5153711151

Form Simplicity

| ı U. | Covenants: Is the property subject to restrictive covenants? | YES [| | NO FX | LINK | | |
|--|--|---|---------------------------------------|--|--|--|---------|
| | If yes, a true, current copy of the covenants can be obtained: | . 123 [| ' | NO SA | UIVIC | Н | |
| | Attached to this Property Disclosure | | | | | | |
| | | | | | | | |
| | At the county recorder's office | | | | | | |
| | Other: Easements or Encroachments: Any known easements or encroachments? | VEC. | 7 | NO [| LINUZ | \vdash | |
| | | . YES | | NO 🗀 | UNK | Ш | |
| 18. | Shared or Co-Owned Features: Any features of the property known to be shared | | | | | | |
| | in common with adjoining landowners, such as walls, fences, roads, and driveway | S | | 100 | | | |
| | whose use or maintenance responsibility may have an effect on the property? | . YES [| | NO XI | UNK | Ш | |
| | Any known "common areas" such as pools, tennis courts, walkways, or other | | | | | | |
| | areas co-owned with others, or a Homeowners Association which has any | | _ | 🛧 | , | | |
| | authority over the property? | . YES L | _ | NO 🔀 | UNK | \mathbb{H} | |
| | Physical Problems: Any known settling, flooding, drainage or grading problems? | | | | | | |
| | Private Burial Grounds: Does property contain any private burial grounds? | | | | | | |
| | Structural Damage: Any known structural damage or modification? | | | | | | |
| | If yes, what is the damage or modification? | _ | | | | | |
| 22. | If yes, what is the damage or modification? Has there been a property/casualty loss resulting in an insurance claim? If yes, indicate date(s) Loss type(s) | YES [| | NO 🔀 | UNK | | |
| | If yes, indicate date(s) Loss type(s) | | | | | | |
| | Loss amount(s) \$ Correction(s) | _ | | | | | |
| | | | | . 1 | | | |
| 23. | Are you related to Listing Agent? | YES [| | NO 🔀 | UNK | | |
| # | Fasement - drive way is actually city alky wo | y | | | | | |
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| | ELLER(S) DISCLOSURE | y | | | | | |
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Serial#: 099559-900175-7091892

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

| Address | 207 NE 8th St. Stuart, IA 50250 |
|--|--|
| Every provided was built based poisoning learning memory interest lead-based | farning Statement archaser of any interest in residential real property on which a residential dwelling t prior to 1978 is notified that such property may present exposure to lead from lead- aint that may place young children at risk of developing lead poisoning. Lead ig in young children may produce permanent neurological damage, including disabilities, reduced intelligence quotient, behavioral problems, and impaired Lead poisoning also poses a particular risk to pregnant women. The seller of any in residential real property is required to provide the buyer with any information on sed paint hazards from risk assessments or inspections in the seller's possession and e buyer of any known lead-based paint hazards. A risk assessment or inspection for lead-based paint hazards is recommended prior to purchase. |
| (a) Pres belo | Disclosure ence of lead-based paint and/or lead-based paint hazards (initial (i) or (ii) w): i) Known lead-based paint and/or lead-based paint hazards are present in the housing. Describe what is known: |
| (b) Reco | Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing. ords and reports available to the seller (initial (i) or (ii) below): Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing. List documents below: |
| | ii) X Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing. |
| (c) Puro (1 (| haser has (initial (i) or (ii) below): i) received copies of all records and reports pertaining to lead-based paint and/ or lead-based paint hazards in the housing listed above. ii) not received any records and reports regarding lead-based paint and/ or lead-based paint hazards in the housing. |
| (d) | Purchaser has received the pamphlet Protect Your Family from Lead in ome (initial). |

| (ii)waived the opportunity the presence of lead-based paint and | o conduct a risk assessment or inspection for nd/or lead-based paint hazards. | | | | | | | |
|--|---|------|--|--|--|--|--|--|
| Agent's Acknowledgment (initial or enter N/A if not applicable) (f) Seller's Agent has informed the seller of the seller's obligations under 42 U.S 4852d and is aware of his/her responsibility to ensure compliance. (g) Purchaser's Agent has informed the seller of the seller's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.' | | | | | | | | |
| Certification of Accuracy The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate. 10/18/2045 | | | | | | | | |
| | Pate Purchaser | Date | | | | | | |
| Séller É | Pate Purchaser | Date | | | | | | |
| Seller's Agent | Pate Purchaser's Agent ¹ | Date | | | | | | |

Paperwork Reduction Act

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2070-0151). Responses to this collection of information are mandatory (40 CFR 745). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and record keeping burden for this collection of information is estimated to be 0.12 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address."

¹ Only required if the purchaser's agent receives compensation from the seller.