32554994

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Form # 2091 01/20

## SELLER'S DISCLOSURE STATEMENT

	e completed by <b>SELLER</b> concerning	13871 Pike 43	(Property Address) locate
in th	e municipality of Bowling Green	(if incorporated), County of	<u>pike</u> , Missouri
Note	e: If Seller knows or suspects some condition	which might lower the value of t	he property being sold or adversely affect
Buy	er's decision to buy the property, then Seller n	eeds to disclose it. This statement	will assist Buyer in evaluating the propert
bein	g considered. Real estate brokers and agents	involved in the sale do not inspec	t the property for defects, and they canno
	cantee the accuracy of the information in this f	_	
_	•		the best westestion assingt future above
	SELLER: Your truthful disclosure of the con		
	you violated your legal obligation to Buye		
	hamphetamine production or storage and/or a		
	ownership may be relevant. In the case of a		
	istent pattern of a problem not completely re		
	eve full and honest disclosure. Your answers		
	a after the closing of the sale. This questionna		
	ects of your property. If you know of or suspec		
	air the health or safety of future occupants, or	otherwise affect Buyer's decision	to buy your property, then use the space a
the e	end of this form to describe that condition.		
TO	BUYER: THIS INFORMATION IS A DISC	CLOSURE ONLY AND IS NOT	INTENDED TO BE A PART OF ANY
CON	NTRACT BETWEEN BUYER AND SELLER	R. If you sign a contract to purcha	se the property, that contract, and not thi
	losure statement, will provide for what is to be		
	ided, you must specify them in the contract. S		
	there are, in fact, no problems with the prope		
	er are not warranties of the condition of the pr		
	property. You may also wish to obtain a home		
	lucts, and arrangements Buyer should contact		
	ditions of the property that you can see on a re		
	ou should make the correction of these conditi		
•			
<b>SUB</b>	DIVISION, CONDOMINIUM, VILLA, CO-(	OP OR OTHER SHARED COST	DEVELOPMENT (if applicable)
SUB (a)	DIVISION, CONDOMINIUM, VILLA, CO-O Development Name	OP OR OTHER SHARED COST I NA	DEVELOPMENT (if applicable)
(a)	Development NameContact	OP OR OTHER SHARED COST I	DEVELOPMENT (if applicable) Phone
(a)	Development Name	NA NA	Phone
(a)	Development Name Contact Type of Property: (check all that apply) □ Sin □ Villa □ Co-Op	gle-Family Residence ☐ Multi-Fan	Phone Phone Townhome
a) b)	Development Name Contact Type of Property: (check all that apply) □ Sin □ Villa □ Co-Op	gle-Family Residence ☐ Multi-Fan	Phone Phone Townhome
a) b)	Development Name Contact Type of Property: (check all that apply) □ Sin □ Villa □ Co-Op	gle-Family Residence ☐ Multi-Fan	Phone Phone Townhome
(a) (b)	Development Name Contact Type of Property: (check all that apply) □ Sin □ Villa □ Co-Op Mandatory Assessment: #1 Mandatory Assessment: #2	gle-Family Residence ☐ Multi-Fan	Phone Phone Townhome
a) b) c)	Development Name	gle-Family Residence	Phone Phone nily □ Condominium □ Townhome per: □ month □ quarter □ half-year □ yea. per: □ month □ quarter □ half-year □ yea
a) b) c)	Development Name	gle-Family Residence	Phone Phone nily □ Condominium □ Townhome  per: □ month □ quarter □ half-year □ year per: □ month □ quarter □ half-year □ year □ snow removal of common area
a) b) c)	Development Name	gle-Family Residence  Multi-Fan  \$	Phone Phone Townhome  per: □ month □ quarter □ half-year □ year per: □ month □ quarter □ half-year □ year per: □ month □ quarter □ half-year □ year □ snow removal of common area □ landscaping specific to this dwelling
(a) (b)	Development Name	gle-Family Residence  Multi-Fan  \$\$  ance  common ground landscaping of common area exercise area  reception facility	PhonePhonePhonePhonePhonePer: □ month □ quarter □ half-year □ year per: □ month □ quarter □ half-year □ year □ snow removal of common area □ landscaping specific to this dwelling □ water □ sewer □ trash removal
(a) (b) (c)	Development Name	gle-Family Residence  Multi-Fan  \$ ance  common ground landscaping of common area exercise area  reception facility ecurity  elevator other	Phone Phone Townhome  per: □ month □ quarter □ half-year □ year per: □ month □ quarter □ half-year □ year □ snow removal of common area □ landscaping specific to this dwelling □ water □ sewer □ trash removal common facility
(a) (b) (c)	Development Name	sgle-Family Residence	Phone
(a) (b)	Development Name	gle-Family Residence	Phone
(a) (b)	Development Name	sqle-Family Residence  Multi-Fan  \$\$  ance  common ground landscaping of common area exercise area  reception facility security  elevator other identified as  red by Assessment:	Phone
a) b) cc) d)	Development Name	sqle-Family Residence  Multi-Fan  \$\$  ance  common ground landscaping of common area exercise area  reception facility security  elevator other identified as  red by Assessment:	Phone
a) b) cc) d)	Development Name	sgle-Family Residence □ Multi-Fan  \$\$  ance □ common ground landscaping of common area exercise area □ reception facility security □ elevator □ other identified as □ : red by Assessment: explain	Phone
a) b) c) d)	Development Name	sqle-Family Residence  Multi-Fan  \$\$  ance  common ground landscaping of common area exercise area  reception facility security  elevator other identified as  red by Assessment: explain  stal assessments? Yes No	Phone Phone Townhome per: □ month □ quarter □ half-year □ year per: □ month □ quarter □ half-year □ year □ snow removal of common area □ landscaping specific to this dwelling □ water □ sewer □ trash removal common facility some insurance □ real estate taxes
(a) (b) (c) (d) (e) (f) (g)	Development Name	sqle-Family Residence	Phone Phone Townhome per: □ month □ quarter □ half-year □ year per: □ month □ quarter □ half-year □ year □ snow removal of common area □ landscaping specific to this dwelling □ water □ sewer □ trash removal common facility some insurance □ real estate taxes
(a) (b) (c) (d) (f) (g)	Development Name	sqle-Family Residence	PhonePhone
(a) (b) (c) (d) (f) (g) (h)	Development Name	sance	PhonePhone
(a) (b) (c) (d) (e) (f) (g) (h) (i)	Development Name	sance	PhonePhone
(a) (b) (c) (d) (e) (f) (g) (h) (i) (j)	Development Name	sqle-Family Residence □ Multi-Fan  \$\$  ance □ common ground landscaping of common area exercise area □ reception facility security □ elevator □ other identified as □ □ :  red by Assessment: explain □ :  real assessments? □ Yes ☑ No ct improvement assessments? □ Ye may cause an increase in assessmen ommon or other shared elements? □ ctive covenants? □ Yes ☑ No	Phone
	Contact	sqle-Family Residence □ Multi-Fan  \$\$  ance □ common ground landscaping of common area exercise area □ reception facility security □ elevator □ other identified as □ □  red by Assessment: explain □  real assessments? □ Yes ■ No ct improvement assessments? □ Ye may cause an increase in assessmen ommon or other shared elements? □ ctive covenants? □ Yes ■ No s/restrictions by yourself or by other	Phone
(a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k)	Development Name	sqle-Family Residence	Phone
(a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l)	Contact  Type of Property: (check all that apply) □ Sin □ Villa □ Co-Op  Mandatory Assessment: #1  Mandatory Assessment: #2  Mandatory Assessment(s) include: □ entrance sign/structure □ street maintent of sign show removal specific to this dwelling □ clubhouse □ pool □ tennis court □ □ doorman □ cooling □ heating □ sassigned parking space(s): how many □ other specific item(s): □ Exterior Maintenance of this dwelling cover Optional Assessment(s)/Membership(s) Please  Are you aware of any existing or proposed spect Are you aware of any special taxes and/or district Are you aware of any existing indentures/restrict Are you aware of any violation of the indenture.	sqle-Family Residence	Phone
(a) (b) (c) (d) (f) (g) (h) (i) (j) (k)	Development Name	sqle-Family Residence	Phone

Util	ILITIES	Current Provider
		<u>Current Provider</u> NA if Propane, is tank □Owned □Lease
		AMERIN
Wa	ter:	PUBLIC WATER SUPPLY DISTRICT 1
Sew	ver:	LEACH FIELD
Tra	sh:	WASTE MANAGEMENT
Rec	ycle:	
Inte	ernet:	SATALITE
Pho	one:	CEL
HE	ATING,	COOLING AND VENTILATING (Seller is not agreeing that all items checked are being offered for sale.)
(a)		g Equipment: ■ Forced Air □ Hot Water Radiators □ Steam Radiators □ Radiant □ Baseboard
(b)	Source	of heating:   Electric □ Natural Gas □ Propane □ Fuel Oil □ Other
(c)		f air conditioning: 🖪 Central Electric 🗆 Central Gas 🗖 Window/Wall (Number of window units)
(d)	Areas o	f house not served by central heating/cooling:
(e)		nal: ☐ Humidifier ☐ Electronic Air Filter ☐ Media Filter ☐ Attic Fan ☐ Other:
(f)	Are you	aware of any problems or repairs needed with any item in this section?   Yes No If "Yes", please explain
(g)	Other de	etails:
FIR	REPLACI	$\mathrm{E}(\mathbf{S})$
(a)		f fireplace: □Wood Burning □Vented Gas Logs □Vent Free Gas Logs □Wood Burning Stove □Natural Gas □Propan
(b)		f flues/venting:
		ctional: (properly vented for wood burning and vented gas logs) Number of fireplace(s)Location(s)
	□ Non	-Functional: Number of fireplace(s)Location(s)Please explain
(c)	Are you	a aware of any problems or repairs needed with any item in this section?   Yes  No If "Yes", please explain
PI I	IIMRING	SYSTEM, FIXTURES AND EQUIPMENT; POOL/SPA/POND/LAKE/HOT TUB
(a)		Heater: ■Electric □Natural Gas □Propane □Tankless □Other:
(b)		ker supply line: X Yes \( \subseteq \text{No}\)
(c)		: <b>M</b> Yes □ No
(d)		ing Pool/Spa/Hot Tub: ☐ Yes 🗷 No
` ′		, attach Form #2180, Pool/Spa/Pond/Lake Addendum to Seller's Disclosure Statement)
(e)		Sprinkler System:   Yes  No If yes, date of last backflow device inspection certificate:
(f)	Are you	aware of any problems or repairs needed in the plumbing system?   Yes No If "Yes", please explain
WA	TFR (If	well exists, attach Form #2165, Septic/Well Addendum to Seller's Disclosure Statement)
		the source of your drinking water? Public Community Well Cother (explain)
(b)		c, identify the utility company:  PWSD 1
(c)	Do vou	have a softener, filter or other purification system?   Yes No Downed DLeased/Lease Information
(d)		a aware of any problems relating to the water system including the quality or source of water or any components such a
(4)		stop box?   Yes No If "Yes", please explain
SEV		E (If Septic or Aerator exists, attach Form #2165, Septic/Well Addendum to Seller's Disclosure Statement)
(a)		the type of sewerage system to which the house is connected? $\square$ Public $\square$ Private $\square$ Septic $\square$ Aerator $\square$ Other
	If "Oth	er" please explain
(b)		a sewerage lift system? ☐ Yes M No If "Yes", is it in good working condition? ☐ Yes ☐ No
(c)	When v	vas the septic/aerator system last serviced?
(d)		a aware of any leaks, backups, open drain lines or other problems relating to the sewerage system? □Yes ■No ", please explain
A D		
		ES (Seller is not agreeing that all items checked are being offered for sale.)
(a)		ral Appliances and Equipment: ☐ Electric Stove/Range/Cook top  washer ☐ Garbage Disposal ☐ Trash Compactor ☐ Wired smoke alarms ☐ Electric dryer (hook up
		ing Fan(s) ☐ Intercom System ☐ Central Vacuum System ☐ Other
(b)		pliances & Equipment: ☐ Natural Gas ☐ Propane
(0)		n □ Gas Stove/Range/Cook top □ Exterior Lights □ Barbecue □ Water heater □ Tankless Water Heater
		dryer (hook up) $\square$ Other
(c)	Other F	Equipment:   TV Antenna Cable Wiring Phone Wiring Network/Data Wiring
(0)		tric Garage Door Opener(s)  Number of controls
		urity Alarm System  Owned  Leased /Lease information:

11 12		☐ Satellite Dish ☐ Owned ☐ Leased/LeaseInformation: ☐ Electronic Pet Fence System Number of Collars: ☐ Other:
13 14	(d)	Are you aware of any items in this section in need of repair or replacement?   Yes  No If "Yes", please explain
15		ECTRICAL TO THE STATE OF THE ST
16 17	Type (a)	e of service panel:   Fuses Circuit Breakers   Other:   Type of wiring: Copper   Aluminum   Knob and Tube   Unknown
17 18 19	(a) (b)	Are you aware of any problems or repairs needed in the electrical system?   Yes No If "Yes", please explain
20	RO	OF, GUTTERS AND DOWNSPOUTS
21	(a)	What is the approximate age of the roof? <u>8</u> Years. Documented? □Yes ■No
2	(b)	Has the roof ever leaked during your ownership? □Yes ■No If "Yes" please explain
4 5	(c)	Has the roof been repaired, recovered or any portion of it replaced or recovered during your ownership? □Yes ■No If "Yes", please explain
5 7	(d)	Are you aware of any problems with the roof, gutters or downspouts? □Yes ■No If "Yes", please explain
	COI	NSTRUCTION
)	(a)	Are you aware of any problems with the footing, foundation walls, sub-floor, interior and exterior walls, roof construction,
	. ,	decks/porches or other load bearing components? □Yes ■No If "Yes" please describe in detail
	(b)	Are you aware of any repairs to any of the building elements listed in (a) above? □Yes ■No If "Yes", please describe the
	(0)	location, extent, date and name of the person/company who did the repair or control effort
	(a)	Are you aware that any of the work in (b) above was completed without required permits? □Yes ■No
	(c) (d)	List all significant additions, modifications, renovations, & alterations to the property during your ownership:
	(e)	Were required permits obtained for the work in (d) above? □Yes □No
	BAS	SEMENT AND CRAWL SPACE (Complete only if applicable)
	(a)	□Sump pit □Sump pit and pump
	(b)	Type of foundation: □Concrete □Stone □Cinder Block □Wood
	(c)	Are you aware of any dampness, water accumulation or leakage, in the basement or crawl space? □Yes □No If "Yes", please describe in detail
	(d)	Are you aware of any repairs or other attempts to control any water or dampness problem in the basement or crawl space?
		☐ Yes ☐ No If "Yes", please describe the location, extent, date and name of the person/company who did the repair or control effort
		TS OR TERMITES/WOOD DESTROYING INSECTS
	(a)	Are you aware of any pests or termites/wood destroying insects impacting the property and improvements?   Yes No
		Are you aware of any uncorrected damage to the property caused by pests or termites/wood destroying insects?   Yes No Is your property currently under a warranty contract by a licensed pest/termite control company?   Yes No
		Are you aware of any pest/termite control reports for the property? \(\sigma\) Yes \(\mathbb{\mathbb{M}}\) No
		Are you aware of any pest/termite control treatments to the property?   Yes No
		Please explain any "Yes" answers you gave in this section
	SOI	L AND DRAINAGE
	(a)	Are you aware of any fill, expansive soil or sinkholes on the property or that may affect the property?   Yes No
	(b)	Are you aware of any soil, earth movement, flood, drainage or grading problems on the property or that may affect the
	(c)	property?   Yes No  Are you aware of any past, present or proposed mining, strip-mining, or any other excavations on the property or that may affect
	(0)	the property? $\square$ Yes $\square$ No
	(d)	Are you aware of any Post-construction Stormwater Best Management Practices (BMPs) on the property? (BMPs are private
		stormwater management facilities which include a recorded formal Maintenance Agreement with the Metropolitan Sewer District,
	(-)	e.g. retention ponds, rain gardens, sand filters, permeable pavement)   Yes  No
	(e)	Please explain any "Yes" answers you gave in this section
3		

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HA	ZARDOUS SUBSTANCES/OTHER ENVIRONMENTAL CONCERNS
(a)	Lead: (Note: Production of lead-based paint was banned in 1978. See Disclosure of Information and Acknowledgement Lead Based
	Paint and/or Lead-Based Paint Hazards, form #2049.)
	(1) Are you aware of the presence of any lead hazards (such as paint, water supply lines, etc.) on the property? $\square$ Yes $\square$ No
	(2) Are you aware if it has ever been covered or removed? ☐ Yes 🛮 No
	(3) Are you aware if the property has been tested for lead? $\square$ Yes $\square$ No If "Yes", please give date performed, type of test and test
	results
	results
(b)	Asbestos Materials
` ′	(1) Are you aware of the presence of asbestos materials on the property, such as roof shingles, siding, insulation, ceiling, flooring,
	pipe wrap, etc.? ☐ Yes No
	(2) Are you aware of any asbestos material that has been encapsulated or removed? ☐ Yes ☑ No
	(3) Are you aware if the property has been tested for the presence of asbestos?   Yes No If "Yes", please give date performed,
	type of test and test results
(-)	
(0)	Mold (1) Are you aware of the presence of any mold on the property? □ Yes ☑ No
	<ul> <li>(1) Are you aware of the presence of any finoid on the property? □ 1 es ■ No</li> <li>(2) Are you aware of anything with mold on the property that has ever been covered or removed? □ Yes ■ No</li> </ul>
	<ul> <li>(2) Are you aware of anything with mold on the property that has ever been covered or removed? □ Yes ■ No</li> <li>(3) Are you aware if the property has ever been tested for the presence of mold? □ Yes ■ No If "Yes", please give date performed,</li> </ul>
	type of test and test results
	(4) Flease explain any Tes answers you gave in this section
(d)	Radon
	(1) Are you aware if the property has been tested for radon gas? $\square$ Yes $\blacksquare$ No If "Yes", please give date performed, type of test
	and test results
	and test results
	of the person/company who did the mitigation
(e)	Methamphetamine
(-)	Are you aware if the property is or was used as a lab, production or storage site for methamphetamine or was the residence of
	a person convicted of a crime related to methamphetamine or a derivative controlled substance related thereto?
	☐ Yes No If "Yes", Section 442.606 RSMo requires you to disclose such facts in writing, please explain
	Tes a roll 1 res , section 4-2.000 Resido requires you to disclose such facts in writing, please explain
(f)	Waste Disposal Site or Demolition Landfill (permitted or unpermitted)
	Are you aware of any permitted or unpermitted solid waste disposal site or demolition landfill on the property?   Yes  No
	If "Yes", Section 260.213 RSMo requires you to disclose the location of any such site on the property. Please provide such
	information.
	Note: If Seller checks "Yes", Buyer may be assuming liability to the State for any remedial action at the property.
g)	Radioactive or Hazardous Materials
	Have you ever received a report stating affirmatively that the property is or was previously contaminated with radioactive
	material or other hazardous material? 🗆 Yes 🛮 No If "Yes", Section 442.055 RSMo requires you to disclose such knowledge
	in writing. Please provide such information, including a copy of such report, if available.
(h)	Other Environmental Concerns
(11)	Are you aware of any other environmental concerns that may affect the property such as polychlorinated biphenyls (PCB's),
	electro-magnetic fields (EMF's), underground fuel tanks, unused septic or storage tanks, etc.?   Yes No If "Yes", please
	explain
	CAPIGIII
SUF	RVEY AND ZONING
(a)	Are you aware of any shared or common features with adjoining properties?   Yes No
(b)	Are you aware of any rights of way, unrecorded easements, or encroachments, which affect the property?   Yes No
	Is any portion of the property located within the 100-year flood hazard area (flood plain)?   Yes No
	Do you have a survey of the property? $\square$ Yes $\square$ No (If "Yes", please attach) Does it include all existing improvements on the
. /	property? ☐ Yes ☐ No
(e)	Are you aware of any violations of local, state, or federal laws/regulations, including zoning, relating to the property? \(\subseteq Yes \subseteq No\)
	Please explain any "Yes" answers you gave in this section
. /	

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MIS	SCELLANEOUS
	The approximate age of the residence is $\underline{}$ years. The Seller has occupied the property from $\underline{\mathtt{JULY 2017}}$ to $\underline{}$ NO Has the property been continuously occupied during the last twelve months? $\Box$ Yes $\Box$ No If "No", please explain $\underline{}$
(c)	Is the property located in an area that requires any compliance inspection(s) including municipality, conservation, fire disany other required governmental authority?   Yes No If "Yes", please explain
	Is the property located in an area that requires any specific disclosure(s) from the city or county?   Yes No If "Yes", explain
(e)	explain Is the property designated as a historical home or located in a historic district?   Yes No If "Yes", please explain
(f)	Is property tax abated? ☐ Yes ☑ No Expiration date Attach documentation from taxing au
(g)	Are you aware of any pets having been kept in or on the property? Yes \(\subseteq\) No If "Yes" please explain \(\frac{ONE DOG AN}{ONE CAT CHICKENS A YEAR AGO}\)
(h)	Is the Buyer being offered a protection plan/home warranty at closing at Seller's expense?   Yes No (If "Yes", please at Seller's expense?
(i)	Are you aware of any inoperable windows or doors, broken thermal seals, or cracked/broken glass?   Yes No
(j)	Are you aware if carpet has been laid over a damaged wood floor?   Yes No
(k)	Are you aware of any existing or threatened legal action affecting the property?   Yes No
(l) (m)	Are you aware of any consent required of anyone other than the signer(s)of this form to convey title to the property? □Ye Please explain any "Yes" answers you gave for (i), (j), (k), or (l) above
	litional Comments:

## 32554994

g broker in writing of ar	y changes in the property condition. Seller au	
/22/ <b>8/022</b> /22		
DATE	SELLER SIGNATURE	DATE
	Seller Printed Name	
ation of which Seller ha ny other important infor- vice) by an independent,	s actual knowledge. Buyer should verify the in nation provided by either Seller or broker (inc professional investigation of his own. Buyer ac	nformation contained in cluding any information
DATE	BUYER SIGNATURE	DATE
	g broker in writing of an atement to prospective B  //22/8/022/22  DATE  Pread this Seller's Disclonation of which Seller han yother important infortwice) by an independent,	examined this statement and that it is complete and accurate to the best g broker in writing of any changes in the property condition. Seller au atement to prospective Buyers.   221/2022/22