



2745 Coleman Springs Path
17.539± Acres | Scott County
\$2,690,000

Offered Exclusively By:

KIRKPATRICK & CO.

Zach Davis | Principal Broker
+1 .859.576.8195
www.KirkFarms.com
Zach@KirkFarms.com





Beautifully maintained, thoughtfully appointed, and ideally situated on over 17.5 acres, this classic equine estate is an enviable offering. From its North Elkhorn Creek frontage to its dramatic, private approach at the end of a dead-end road, the farm proves an idyllic setting for both horse & rider in the heart of Central Kentucky.

The Residence

Anchoring it is a stately residence custom-built by respected Georgetown contractor Charles Arthur. Generously sized, the home includes 5 bedrooms and 6 baths (4 full, 2 half). It's well-appointed with fine woodworking throughout and decorated in a warm Bluegrass style. From the inviting library with its own fireplace and barrel ceiling to the columned dining room, the residence offers a blend of formal and casual spaces perfect for entertaining. Soaring ceilings and hardwoods contribute to the elegant environment. The first floor offers a desirable ground-level primary suite with sitting room, as well as a welcoming guest suite. The expansive kitchen includes a sitting area with a fireplace and opens to a large, covered patio with an outdoor kitchen.

Equine Amenities

A picture-perfect four stall barn boasts a wash rack, loft, and an enclosed feed/tack room. Lucas stall fronts feature on both interior and exterior doors. Five paddocks and one field offer ample opportunities for turnout, designed foremost with the safety of the horse in mind. A dry lot, outdoor sand mix arena (60' x 80'), and adjoining grass arena add further equine utility. The three-bay equipment building provides generous storage.

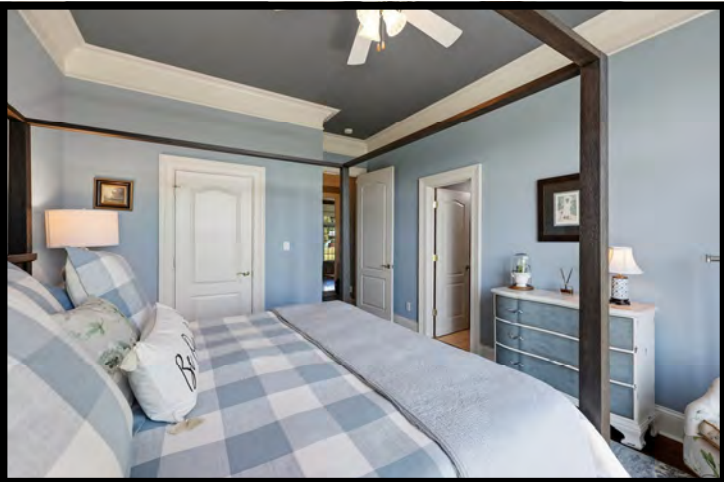
Grounds & Physical Plant

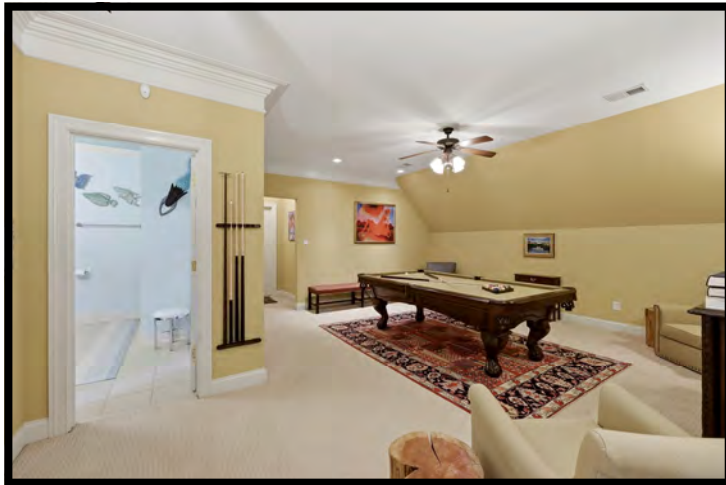
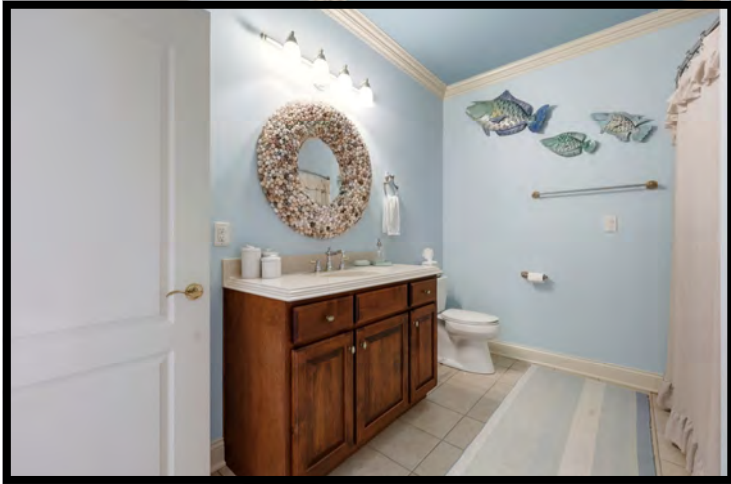
Lying within a gated one-road community, visitors are greeted by a lovely tree-lined drive. An irrigation system also nurtures the mature landscaping. Perfect for entertaining, the grounds offer a playground, basketball court, and bocce ball court. The three-car garage wisely includes a half bath. The property also benefits from high-speed fiber optic internet service. Centrally located, it's less than 10 miles from the Kentucky Horse Park, 5.5 miles to the interstate, and 9 miles to an equine hospital.

















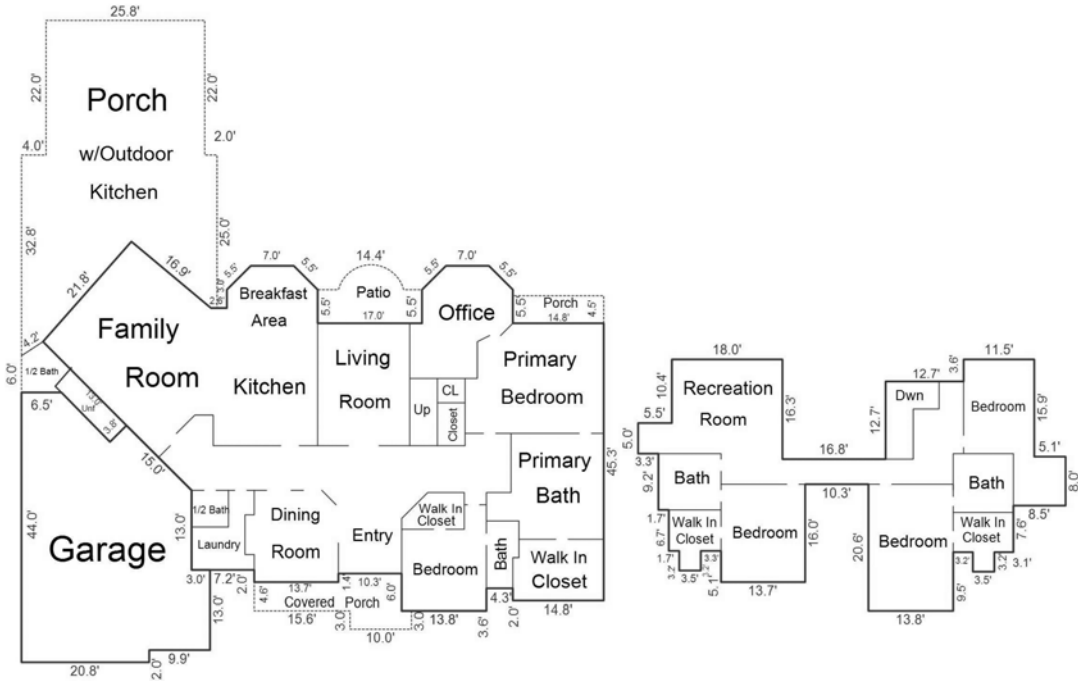




All of the information contained herein is deemed reliable but is not warranted; all figures, facts and boundaries are believed to be accurate but independent verification is strongly advised. Square footage measurements & school district information is believed to be accurate but independent verification is strongly advised. The listing broker or broker associates recommend interested parties, prior to closing, perform a complete property inspection (including but not limited to environmental assessments and percolation tests as may be necessary for BUYER'S intended use of the property) have the land surveyed by a licensed surveyor, the title searched and inspected by an attorney and any and all legal questions or concerns directed to legal counsel. The broker or broker associates will not advise on matters outside the scope of their real estate license.

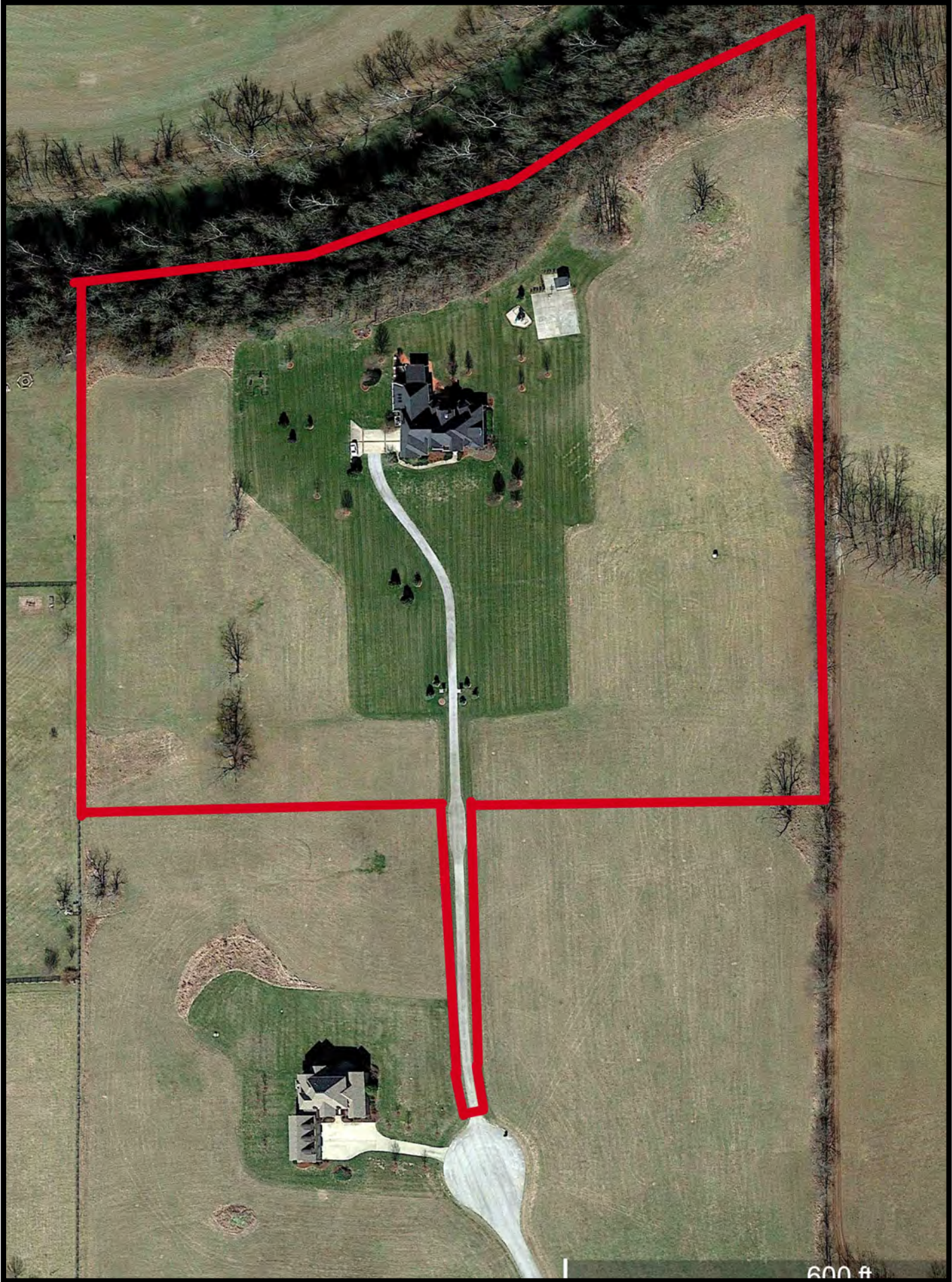
SKETCH ADDENDUM

Intended User
 Property Address 2745 Coleman Springs Path
 City Georgetown County Scott State KY Zip Code 40324
 Client Zach Davis c/o Kirkpatrick & Co



Sketch by Apex Sketch

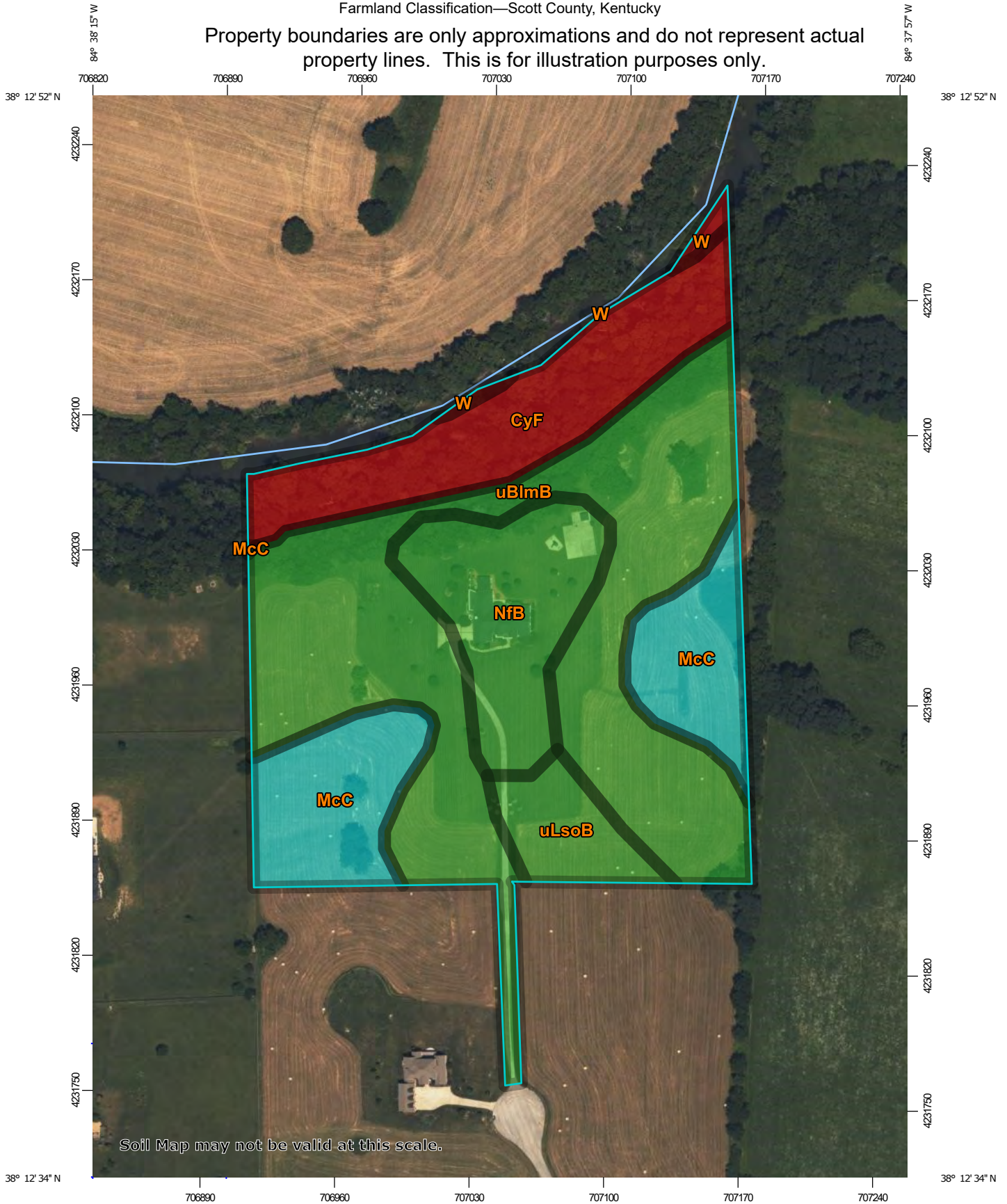
| AREA CALCULATIONS SUMMARY | | | | | AREA CALCULATIONS BREAKDOWN | | | | | |
|---------------------------|--------------------|--------|----------|-----------|-----------------------------|--------------------------------|--------|----------|-----------|-------|
| Code | Description | Factor | Net Size | Perimeter | Net Totals | Name | Base x | Height x | Width = | Area |
| GLA1 | First Floor | 1.0 | 3713.9 | 303.3 | 3713.9 | First Floor | | 7.0 x | 3.9 = | 27.2 |
| GLA2 | Second Floor | 1.0 | 1709.7 | 298.6 | 1709.7 | | 0.5 x | 5.5 x | 2.8 = | 7.6 |
| GAR | Garage | 1.0 | 1080.5 | 142.3 | 1080.5 | | 0.5 x | 5.5 x | 2.8 = | 7.6 |
| OTH | Unfinished sq.ft. | 1.0 | 48.3 | 33.2 | 48.3 | | | 29.8 x | 3.1 = | 93.7 |
| P/P | Half Bath for pati | 1.0 | 46.6 | 28.1 | | | 0.5 x | 10.4 x | 4.8 = | 25.1 |
| | Porch | 1.0 | 154.8 | 69.2 | | | 0.5 x | 17.6 x | 8.8 = | 77.5 |
| | Porch | 1.0 | 66.6 | 38.6 | | | 0.5 x | 2.5 x | 1.3 = | 1.6 |
| | Patio | 1.0 | 125.5 | 48.8 | | | 0.5 x | 17.6 x | 8.8 = | 77.8 |
| | Porch | 1.0 | 1279.0 | 177.5 | 1672.5 | | | 12.5 x | 2.5 = | 31.5 |
| | | | | | | | | 19.4 x | 10.4 = | 200.9 |
| | | | | | | | 0.5 x | 22.5 x | 10.9 = | 122.2 |
| | | | | | | | | 29.8 x | 17.4 = | 517.9 |
| | | | | | | | | 13.0 x | 3.0 = | 39.0 |
| | | | | | | | | 17.5 x | 13.0 = | 227.8 |
| | | | | | | | | 14.8 x | 3.0 = | 44.3 |
| | | | | | | | | 10.3 x | 2.0 = | 20.6 |
| | Net LIVABLE | | | (rounded) | 5,424 | 24 add items 40 total items | | | (rounded) | 5,424 |



Property boundaries are only approximations and do not represent actual property lines. This is for illustration purposes only.

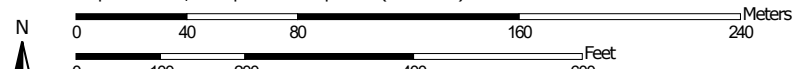
Farmland Classification—Scott County, Kentucky

Property boundaries are only approximations and do not represent actual property lines. This is for illustration purposes only.



Soil Map may not be valid at this scale.

Map Scale: 1:2,730 if printed on A portrait (8.5" x 11") sheet.



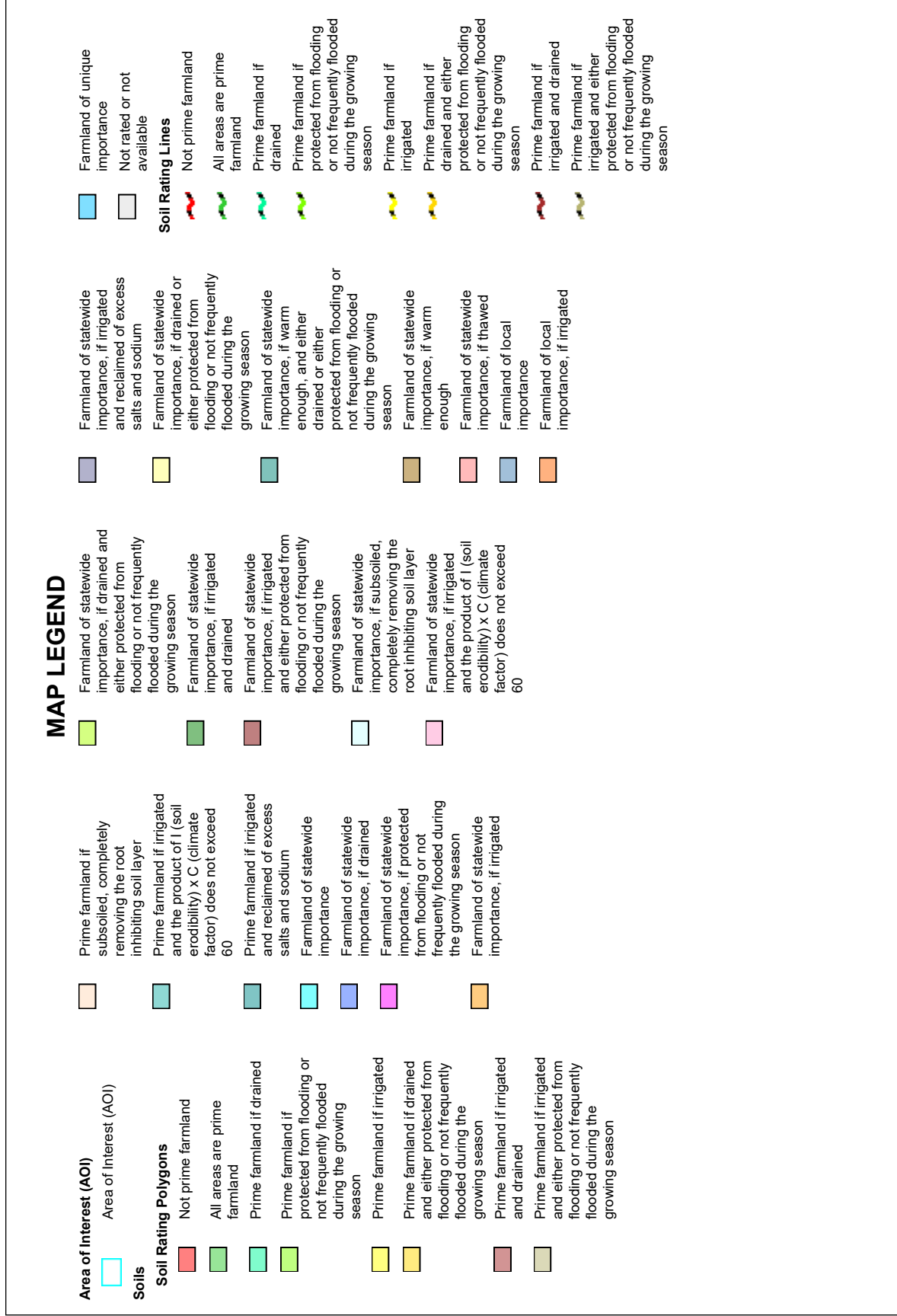
Map projection: Web Mercator Corner coordinates: WGS84 Edge tics: UTM Zone 16N WGS84
































Natural Resources Conservation Service

Web Soil Survey National Cooperative Soil Survey

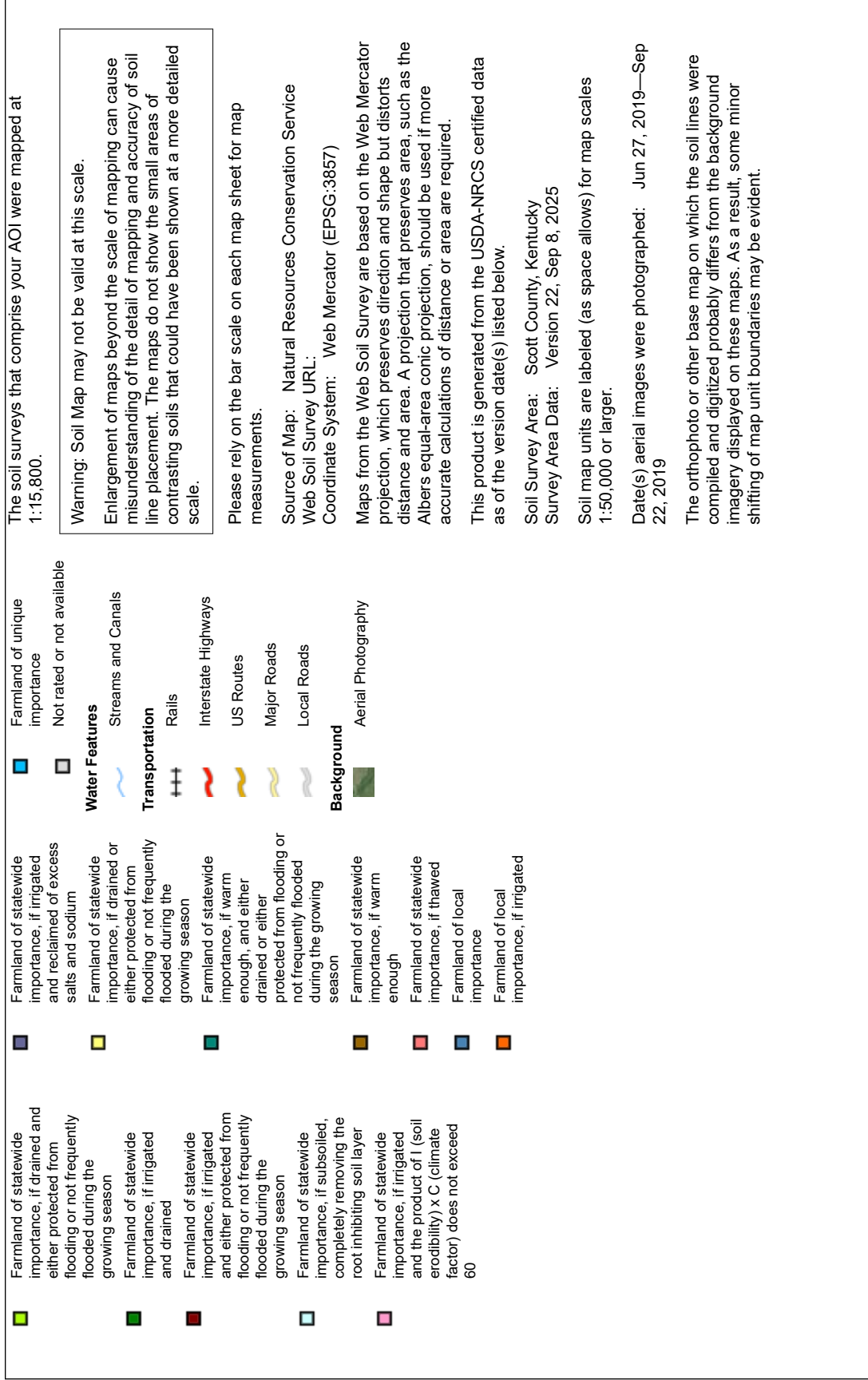
5/21/2026 Page 1 of 5



Farmland Classification—Scott County, Kentucky

| | | | | | | | | | |
|---|--|---|---|---|--|---|--|--|---|
|  | Prime farmland if subsoiled, completely removing the root inhibiting soil layer |  | Farmland of statewide importance, if drained and either protected from flooding or not frequently flooded during the growing season |  | Farmland of statewide importance, if irrigated and reclaimed of excess salts and sodium |  | Farmland of unique importance |  | Prime farmland if subsoiled, completely removing the root inhibiting soil layer |
|  | Prime farmland if irrigated and the product of I (soil erodibility) x C (climate factor) does not exceed 60 |  | Farmland of statewide importance, if irrigated and drained |  | Farmland of statewide importance, if drained or either protected from flooding or not frequently flooded during the growing season |  | Soil Rating Points Not rated or not available | Prime farmland if irrigated and the product of I (soil erodibility) x C (climate factor) does not exceed 60 | |
|  | Prime farmland if irrigated and reclaimed of excess salts and sodium |  | Farmland of statewide importance, if irrigated and either protected from flooding or not frequently flooded during the growing season |  | Farmland of statewide importance, if warm enough, and either drained or either protected from flooding or not frequently flooded during the growing season |  | Not prime farmland | Prime farmland if irrigated and reclaimed of excess salts and sodium | |
|  | Farmland of statewide importance |  | Farmland of statewide importance, if irrigated and either protected from flooding or not frequently flooded during the growing season |  | Farmland of statewide importance, if warm enough |  | All areas are prime farmland | Farmland of statewide importance | |
|  | Farmland of statewide importance, if drained |  | Farmland of statewide importance, if subsoiled, completely removing the root inhibiting soil layer |  | Farmland of statewide importance, if warm enough |  | Prime farmland if drained | Farmland of statewide importance, if drained | |
|  | Farmland of statewide importance, if protected from flooding or not frequently flooded during the growing season |  | Farmland of statewide importance, if irrigated and the product of I (soil erodibility) x C (climate factor) does not exceed 60 |  | Farmland of statewide importance, if thawed |  | Prime farmland if protected from flooding or not frequently flooded during the growing season | Farmland of statewide importance, if protected from flooding or not frequently flooded during the growing season | |
|  | Farmland of statewide importance, if irrigated during the growing season |  | |  | Farmland of local importance |  | Prime farmland if irrigated and drained | Farmland of statewide importance, if irrigated during the growing season | |
|  | |  | |  | Farmland of local importance, if irrigated |  | Prime farmland if irrigated and either protected from flooding or not frequently flooded during the growing season | Farmland of statewide importance, if irrigated during the growing season | |

Farmland Classification—Scott County, Kentucky



Farmland Classification

| Map unit symbol | Map unit name | Rating | Acres in AOI | Percent of AOI |
|------------------------------------|---|----------------------------------|--------------|----------------|
| CyF | Cynthiana-Rock outcrop complex, 20 to 50 percent slopes | Not prime farmland | 2.8 | 16.5% |
| McC | McAfee silt loam, 6 to 12 percent slopes | Farmland of statewide importance | 2.9 | 17.1% |
| NfB | Nicholson silt loam, 2 to 6 percent slopes | All areas are prime farmland | 2.3 | 13.4% |
| uBlmB | Bluegrass-Maury silt loams, 2 to 6 percent slopes | All areas are prime farmland | 8.0 | 47.0% |
| uLsoB | Lowell-Sandview silt loams, 2 to 6 percent slopes | All areas are prime farmland | 0.9 | 5.3% |
| W | Water | Not prime farmland | 0.1 | 0.7% |
| Totals for Area of Interest | | | 17.1 | 100.0% |

Description

Farmland classification identifies map units as prime farmland, farmland of statewide importance, farmland of local importance, or unique farmland. It identifies the location and extent of the soils that are best suited to food, feed, fiber, forage, and oilseed crops. NRCS policy and procedures on prime and unique farmlands are published in the "Federal Register," Vol. 43, No. 21, January 31, 1978.

Rating Options

Aggregation Method: No Aggregation Necessary

Tie-break Rule: Lower



KENTUCKY REAL ESTATE COMMISSION



Public Protection Cabinet
 Mayo-Underwood Building
 500 Mero Street 2NE09
 Frankfort, Kentucky 40601
 (502) 564-7760
<http://krec.ky.gov>



SELLER'S DISCLOSURE OF PROPERTY CONDITION

This form applies to **residential real estate sales and purchases**. This form is **not required** for:

1. Residential purchases of new construction homes if a warranty is provided; or
2. Sales of real estate at auction; or
3. A court supervised foreclosure

As a Seller, you are asked to disclose what you know about the property you are selling. **Your answers to the questions in this form must be based on the best of your knowledge of the property you are selling, however and whenever you gained that knowledge.** Please take your time to answer these questions accurately and completely.

Property Address

2745 Coleman Springs Path

| | | |
|------------|-------|-------|
| City | State | Zip |
| Georgetown | KY | 40324 |

PURPOSE OF DISCLOSURE FORM: Completion of this form shall satisfy the requirements of KRS 324.360 that mandates the "seller's disclosure of conditions" relevant to the listed property. This disclosure is based on the Seller's knowledge of the property's condition and the improvements thereon, however that knowledge was gained. This disclosure form shall not be a warranty by the Seller or real estate agent and shall not be used as a substitute for an inspection or warranty that the purchaser may wish to obtain. This form is a statement of the conditions and other information about the property known by the Seller. Unless otherwise advised, the Seller does not possess any expertise in construction, architecture, engineering, or any other specific areas related to the construction or condition of the property or the improvements on it. Unless otherwise advised, the Seller has not conducted any inspection of generally inaccessible areas such as the foundation or roof. The Buyer is encouraged to obtain his or her own professional inspections of this property.

INSTRUCTIONS TO THE SELLER(S): (1) Answer every question truthfully. (2) Report all known conditions affecting the property, regardless of how you know about them or when you learned. (3) Attach additional pages, if necessary, with your signature and the date and time of signing. (4) Complete this form yourself or sign the authorization at the end of this form to authorize the real estate agent to complete this form on your behalf in accordance with KRS 324.360(9). (5) If an item does not apply to your property, mark "not applicable." (6) If you truthfully do not know the answer to a question, mark "unknown." (7) If you learn any fact prior to closing that changes one or more of your answers to this form after you have completed and submitted it, immediately notify your agent or any potential buyer of the change in writing.

SELLER'S DISCLOSURE: As Seller(s), I / we disclose the following information regarding the property. This information is true and accurate to the best of my / our knowledge as of the date signed. Seller(s) authorize(s) the real estate agent to provide a copy of this statement to any person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. The following information is not the representation of the real estate agent.

Answer all questions to the BEST OF YOUR KNOWLEDGE. Attach additional sheets as necessary.

| 1. PRELIMINARY DISCLOSURES | N/A | YES | NO | UN-KNOWN |
|---|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| a. Have you ever lived in the house? If yes, please indicate the length of time: | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. List the date (month / year) you purchased the house. 07/2021 | | | | |
| c. Do you own the property as (an) individual(s) or as representative(s) of a company? Explain: Individual(s) | | | | |
| d. Has the house been used as a rental? If yes, length of time rented? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Has this house ever been vacant (not lived-in) for more than three (3) consecutive months? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| f. Has this house ever been used for anything other than a residence? Explain: | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

06/04/2021 7:58 AM EDT dotloop verified
 Seller Initials Date/Time

06/04/2021 10:20 AM EDT dotloop verified
 Seller Initials Date/Time

Buyer Initials Date/Time



 Buyer Initials Date/Time

PROPERTY ADDRESS: 2745 Coleman Springs Path, Georgetown, KY 40324

| 2. HOUSE SYSTEMS | | N/A | YES | NO | UN-KNOWN |
|--|------------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| Whether or not they have been corrected, state whether there have been problems affecting: | | | | | |
| a. Plumbing | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Electrical system | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Appliances | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Ceiling and attic fans | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Security system | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| f. Sump pump | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| g. Chimneys, fireplaces, inserts | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| h. Pool, hot tub, sauna | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| i. Sprinkler system | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| j. Heating system | age of system: 2 new, 1 20 y | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Cooling/air conditioning system | age of system: 2 new, 1 20 y | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Water heater | age of system: 20 yo | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Please explain any deficiencies noted in this Section and/or corrections or repairs to resolve these problems: 2 of 3 HVAC replaced Replaced the dishwasher | | | | | |

| 3. BUILDING STRUCTURE | | N/A | YES | NO | UN-KNOWN |
|--|--|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| a. Whether or not they have been corrected, state whether there have been problems affecting: | | | | | |
| 1) The foundation or slab | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2) The structure or exterior veneer | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3) The floors and walls | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4) The doors and windows | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. 1) Has the basement ever leaked? | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2) If so, when did the basement last leak? | | | | | |
| 3) Have you ever had any repairs done to the basement? | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) If you have had basement leaks repaired, when was the repair done? | | | | | |
| 5) If the basement presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.) | | | | | |
| Explain: | | | | | |
| c. Have you experienced, or are you aware of, any water or drainage problems in the crawl space? | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Are you aware of any damage to wood due to moisture or rot? | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| e. Are you aware of any present or past wood infestation (e.g., termites, borers, carpenter ants, fungi, etc.)? | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| f. Are you aware of any damage due to wood infestation? | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1) Has the house or any other improvement been treated for wood infestation? | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2) If yes, by whom? | | | | | |
| 3) Is there a warranty? | | | | | |
| Please explain any deficiencies noted in this Section and/or corrections or repairs to resolve those problems: An upstairs window required work from Pella to repair a leaking seam. It was repaired in 2023. | | | | | |

| 4. ROOF | | N/A | YES | NO | UN-KNOWN |
|---|--|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| a. How old is the roof covering? Age of the roof if known: 3 years | | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Has the roof leaked at any time since you have owned or lived at the property? | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Has the roof leaked at any time before you owned or lived at the property? | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| d. When was the last time the roof leaked? 2023 after the hail storm | | | | | |
| e. Have you ever had any repairs done to the roof? | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |


 Seller Initials _____ Date/Time _____

 Seller Initials _____ Date/Time _____

Buyer Initials _____ Date/Time _____
 Buyer Initials _____ Date/Time _____

PROPERTY ADDRESS: 2745 Coleman Springs Path, Georgetown, KY 40324



| | | | | |
|---|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| f. Have you ever had the roof replaced? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If so, when? 5/2023 | | | | |
| g. If the roof presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.) | | | | |
| Explain: It no longer leaks | | | | |
| h. Have you ever had roof repairs that involved placing shingles on the roof instead of replacing the entire roof covering? If so, when? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Please explain any deficiencies noted in this Section and/or corrections or repairs to resolve those problems: roof replaced in 2023 Roof replaced due to storm damage in May 2023 | | | | |

| 5. LAND / DRAINAGE | N/A | YES | NO | UN-KNOWN |
|---|--------------------------|--------------------------|-------------------------------------|--------------------------|
| a. Whether or not they have been corrected, state whether there have been problems affecting: | | | | |
| 1) Soil stability | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2) Drainage, flooding, or grading | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3) Erosion | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4) Outbuildings or unattached structures | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Is the house located within a Special Flood Hazard Area (SFHA) mandating the purchase of flood insurance for federally backed mortgages? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If so, what is the flood zone? | | | | |
| c. Is there a retention / detention basin, pond, lake, creek, spring, or water shed on or adjoining this property? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Please explain any deficiencies noted in this Section and/or corrections or repairs to resolve those problems: | | | | |

| 6. BOUNDARIES | N/A | YES | NO | UN-KNOWN |
|---|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| a. Have you ever had a staked or pinned survey of the property performed? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are you in possession of a copy of any survey of the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are the boundaries marked in any way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Explain: Boundaries are marked by 4-board fencing except the north side which is marked by the North Elkhorn Creek | | | | |
| d. Do you know the boundaries? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Explain: Boundaries are marked by 4-board fencing except the north side which is marked by the North Elkhorn Creek | | | | |
| e. Are there any encroachments or unrecorded easements relating to the property? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Explain: | | | | |

| 7. WATER | N/A | YES | NO | UN-KNOWN |
|---|--------------------------|--------------------------|-------------------------------------|--------------------------|
| a. Source of water supply: Georgetown Municipal Water and Sewer Service | | | | |
| b. Are you aware of below normal water supply or water pressure? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| c. Has your water ever been tested? If so, attach the results or explain. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Explain: | | | | |

| 8. SEWER SYSTEM | N/A | YES | NO | UN-KNOWN |
|---|--------------------------|--------------------------|-------------------------------------|--------------------------|
| a. Property is serviced by: | | | | |
| 1. Category I: Public Municipal Treatment Facility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Category II: Private Treatment Facility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Category III: Subdivision Package Plant | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Category IV: Single Home Aerobic Treatment System (HOME PACKAGE PLANT) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Category V: Septic Tank with drain field, lagoon, wetland, or other onsite dispersal | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Category VI: Septic Tank with dispersal to an offsite, multi-property cluster treatment system | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Category VII: No Treatment/Unknown | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Name of Servicer: Carter Septic | | | | |
| b. For properties with Category IV, V, or VI systems | | | | |
| Date of last inspection (sewer): | | | | |
| Date of last inspection (septic): 9/2025 Date last cleaned (septic): 9/2025 | | | | |
| c. Are you aware of any problems with the sewer system? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |



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Buyer Initials Date/Time

 Buyer Initials Date/Time

PROPERTY ADDRESS: 2745 Coleman Springs Path, Georgetown, KY 40324

| | | | | |
|--|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| Please explain any deficiencies noted in this Section: | | | | |
| | | | | |
| 9. CONSTRUCTION / REMODELING | N/A | YES | NO | UN-KNOWN |
| a. Have there been any additions, structural modifications, or other alterations made? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. If so, were all necessary permits and government approvals obtained? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Explain: A barn and storage shed were built in 2022/2023 | | | | |
| 10. HOMEOWNERS ASSOCIATION (HOA) | N/A | YES | NO | UN-KNOWN |
| a. 1) Is the property subject to any restrictions, rules, or regulations of a Homeowners Association? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) If yes, what is the annual or monthly assessment? \$1,200 | | | | |
| 3) HOA Name: Coleman Springs Homeowners Association | | | | |
| HOA Primary Contact Name: Stephen Horn | | | | |
| HOA Primary Contact Phone No. and email address: 859-396-2073 | | | | |
| b. Is the property a condominium? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If yes, you must also complete KREC Form 404, the Condominium Seller's Certificate | | | | |
| c. Are you aware of any condition or legal action that may result in an increase in dues, taxes or assessments? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Are any features of the property shared in common with adjoining landowners, such as walls, fences, driveways, etc.? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Are there any pet or rental restrictions? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Explain: Only equine, canine and feline allowed out of doors; no other livestock permitted | | | | |
| | | | | |
| 11. HAZARDOUS CONDITIONS | N/A | YES | NO | UN-KNOWN |
| a. Are you aware of any underground storage tanks, old septic tanks, field lines, cisterns, or abandoned wells on the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are you aware of any other environmental hazards? (e.g., carbon monoxide, hazardous waste, water contamination, asbestos, the use of urea formaldehyde, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| LEAD BASED PAINT DISCLOSURE REQUIREMENT | | | | |
| Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint, which may cause certain health risks. | | | | |
| c. Was this house built before 1978? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. Are you aware of the existence of lead-based paint in or on this house? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| RADON DISCLOSURE REQUIREMENT | | | | |
| Radon is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities, may present health risks, including lung cancer. The Kentucky Department for Public Health recommends radon testing. For more information, visit chfs.ky.gov and search "radon." | | | | |
| e. 1) Are you aware of any testing for radon gas? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2) If yes, what were the results? | | | | |
| f. 1) Is there a radon mitigation system installed? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2) If yes, is it functioning properly? | | | | |
| METHAMPHETAMINE CONTAMINATION DISCLOSURE REQUIREMENT | | | | |
| A property owner who chooses NOT to decontaminate a property used in the production of methamphetamine MUST make written disclosure of methamphetamine contamination pursuant to KRS 224.1-410(10) and 902 KAR 47:200. Failure to properly disclose methamphetamine contamination is a Class D Felony under KRS 224.99-010. | | | | |
| g. 1) Is the property currently contaminated by the production of methamphetamine? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2) If no, has the property been professionally decontaminated from methamphetamine contamination? | | | | |
| Explain: | | | | |
| 12. MISCELLANEOUS | N/A | YES | NO | UN-KNOWN |
| a. Are you aware of any existing or threatened legal action affecting this property? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Are there any assessments other than property assessments that apply to this property (e.g. sewer assessments)? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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PROPERTY ADDRESS: 2745 Coleman Springs Path, Georgetown, KY 40324

| | | | | | |
|----|---|--------------------------|--------------------------|-------------------------------------|--------------------------|
| c. | Are you aware of any violations of local, state, or federal laws, codes, or ordinances relating to this property? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| d. | Are there any transferable warranties? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Explain:

| | | | | | |
|-----------------|--|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| e. | Has this house ever been damaged by fire or other disaster? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Explain: | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. | Are you aware of the existence of mold or other fungi on the property? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| g. | Has this house ever had pets living in it? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Explain: Several dogs

| | | | | | |
|----|--|--------------------------|--------------------------|-------------------------------------|--------------------------|
| h. | Is this house in a historic district or listed on any registry of historic places? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|----|--|--------------------------|--------------------------|-------------------------------------|--------------------------|

13. ADDITIONAL INFORMATION

| | | | | |
|--|--------------------------|--------------------------|-------------------------------------|--------------------------|
| Do you know anything else about the property that that should be disclosed to the Buyer? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|-------------------------------------|--------------------------|

If yes, please provide details in the space provided, below. Attach additional sheets, as necessary.
There is an underground propane tank just northwest of the home. The access hatch is clearly visible. Outdoor lighting boxes are installed and ready for connection. When we purchased the home, the existing setup was not fully functional, and we dismantled the front as we saw no need. The tile walkway in the back of the home was improperly laid on a stone surface, and several tiles have broken away from the stone surface.

14. SELLER(S) CERTIFICATION (CHOOSE ONE)

As Seller(s) I / we hereby certify that the information disclosed above is complete and accurate to the best of my / our knowledge and belief. I / we agree to immediately notify Buyer in writing of any changes that become known to me / us prior to closing.

| | | | |
|-----------------------------|--|------------------------|---|
| Seller Signature | Date | Seller Signature | Date |
| <i>R. Matthew Hendricks</i> | <small>dotloop verified 05/04/20 7:38 AM EDT IF5H-BIKZ-YMUS-WB3J</small> | <i>Terry Hendricks</i> | <small>dotloop verified 05/05/20 10:20 AM EDT OSZ1-TRSV-SKES-04UZ</small> |

As Seller(s) I / we hereby certify that my / our Real Estate Agent, Zach Davis (print name) has completed this form with information provided by me / us at my / our direction and request. I / we further agree to hold the above-named agent harmless for any representations that appear on this form, in accordance with KRS 324.360(9).

| | | | |
|------------------|------|------------------|------|
| Seller Signature | Date | Seller Signature | Date |
| | | | |

As Seller(s) I / we refuse to complete this form and acknowledge that the Real Estate Agent will so inform the Buyer.

| | | | |
|------------------|------|------------------|------|
| Seller Signature | Date | Seller Signature | Date |
| | | | |

The Seller(s) refuse(s) to complete this form or to acknowledge such refusal.

| | | |
|---|--|------|
| Principal Broker / Real Estate Agent Print Name | Principal Broker / Real Estate Agent Signature | Date |
| | | |

The Buyer(s) hereby certifies they have received a copy of this Seller's Disclosure of Property form.

| | | | |
|-----------------|------|-----------------|------|
| Buyer Signature | Date | Buyer Signature | Date |
| | | | |

| | |
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SELLER'S REAL PROPERTY HISTORY – FARM PROPERTY

For use only by members of Bluegrass REALTORS®

PROPERTY ADDRESS: 2745 Coleman Springs Path, Georgetown, KY 40324

DATE: 06/03/2026

Please answer all questions. Mark yes or no to all questions. If answer is yes, please explain in item #13.

| | Yes | No | Unknown |
|--|-------------------------------------|-------------------------------------|--------------------------|
| 1. MAIN RESIDENCE – HOUSE SYSTEMS | | | |
| Are you aware of any problems affecting: | | | |
| (a) Electrical wiring | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Air Conditioning | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Plumbing/Septic | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (d) Heating | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (e) Pool/Hot tubs/Sauna..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (f) Appliances | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (g) Doors and windows | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. MAIN RESIDENCE – FOUNDATION | | | |
| (a) Are you aware of any problems concerning the basement?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Are you aware of any problems concerning sliding, settling, movement upheaval, or earth stability?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Are you aware of any defects or problems relating to the foundation? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. MAIN RESIDENCE – ROOF | | | |
| (a) Has the roof ever leaked?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) Has the roof ever been repaired?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) Do you know of any problems with the roof..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. MAIN RESIDENCE – ALE/LEAD-BASED PAINT | | | |
| (a) Was residence built before 1978? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (If yes, seller may not accept and buyer should not present an offer to purchase contract that does not include a "Disclosure of Information and Acknowledgement of Lead-Based Paint and/or Hazards" addendum acknowledging receipt of the EPA pamphlet "Protect Your Family From Lead in Your Home".) | | | |
| 5. DRAINAGE | | | |
| (a) Is this property located in a flood plain zone?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Has the property ever had a drainage, flooding or grading problem?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. BOUNDARIES | | | |
| (a) Have you ever had a survey of your property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Do you know the boundaries of your property?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) Are the boundaries of your property marked in any way? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (d) Are you aware of any encroachments, recorded or unrecorded easements relating to this property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (e) Is there any common fencing? If yes, explain any agreement and common maintenance..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (f) Any improvements shared in common with adjoining or adjacent properties?.... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. HOMEOWNER'S ASSOCIATION | | | |
| (a) Is the property subject to rules or regulations of any homeowner's association? If yes, please supply copy of rules and regulations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. WATER | | | |
| (a) Are all the improvements connected to a public water system? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) IF NOT, please state your water sources and explain. | | | |
| (c) Has your water system ever gone dry? If yes, explain..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (d) Are you aware of any problems with your water lines and/or waterers?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (e) Is your water supply shared with anyone else? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. AUXILIARY HOUSES | | | |
| (a) Are you aware of any problems affecting any of the mechanical systems, structure Or roof on any of the auxiliary houses?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Were any auxiliary houses built before 1978?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (If yes seller may not accept and buyer should not present an offer to purchase contract that does not include a "Disclosure of Information and Acknowledgement of Lead-Based Paint and/or Hazards" addendum acknowledging receipt of the EPA pamphlet "Protect Your Family From Lead in Your Home".) | | | |
| 10. BARNS/OUTBUILDINGS | | | |
| (a) Are you aware of any problems affecting any of the mechanical systems, Structure, or roof on any of the barns or outbuildings?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

