



# TALLAHASSEE BOARD OF REALTORS®, INC. SELLER'S PROPERTY DISCLOSURE STATEMENT



(REVISED JULY 2017)  
(IT IS SUGGESTED THAT COPIES OF THIS DISCLOSURE BE AVAILABLE AT THE PROPERTY)

SELLER: \_\_\_\_\_

Property Address: \_\_\_\_\_

Date Property Purchased \_\_\_\_\_ Year Built \_\_\_\_\_

**NOTICE TO SELLER:** Every SELLER is obligated to disclose to a BUYER all known facts, which are not readily observable to a BUYER that materially and/or adversely affect the value of the property being sold. This disclosure statement is intended to assist SELLER in complying with disclosure requirements and to provide helpful information to a BUYER. The Listing Broker, the Selling Broker and their respective Salespersons will also rely upon this information when they evaluate, market and present SELLER'S property to prospective BUYERS.

**• IF THIS PROPERTY IS UNIMPROVED, COMPLETE SECTIONS 14-17 ONLY.**

• When explanations are needed please give details such as location, extent, date, and name of repair persons. Use extra sheets if necessary.

**NOTICE TO BUYER:** This is a disclosure of SELLER'S knowledge as of the date signed by the SELLER of the condition of the property and is not a substitute for BUYER'S due diligence. It is not a warranty of any kind by SELLER or a warranty or representation by the Listing Broker, the Selling Broker, or their Salespersons.

## 1. OCCUPANCY

- (a) If property is vacant, provide date it was vacated. \_\_\_\_\_
- (b) Is the property occupied by  Seller  Tenant
- (c) If Tenant occupied, provide the following information:
  - 1. Is there a written lease?  Yes  No If yes, expiration date \_\_\_\_\_
  - 2. Monthly rental amount \_\_\_\_\_ Security Deposit amount \_\_\_\_\_
  - 3. Management Company, if any \_\_\_\_\_

## 2. EQUIPMENT AND APPLIANCES INCLUDED IN SALE (Subject to final negotiated contract)

Mark the items included in the sale of your property:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Above Ground Pool                     | <input type="checkbox"/> Generator             | <input type="checkbox"/> Range/Oven   | <input type="checkbox"/> Washer                  |
| <input type="checkbox"/> Ceiling Fans—all                      | <input type="checkbox"/> Ice Maker—Stand Alone | <input type="checkbox"/> Refrigerator <input type="checkbox"/> with Ice Maker | <input type="checkbox"/> Water Softener/Purifier |
| <input type="checkbox"/> Central Vacuum and Attachments        | <input type="checkbox"/> Intercom              | <input type="checkbox"/> Satellite System                                     | <input type="checkbox"/> Window Treatments—all   |
| <input type="checkbox"/> Dishwasher                            | <input type="checkbox"/> Irrigation System     | <input type="checkbox"/> Security System – (see below)                        | <input type="checkbox"/> Window/Wall AC          |
| <input type="checkbox"/> Disposal                              | <input type="checkbox"/> Light Fixtures—all    | <input type="checkbox"/> Spa or Hot Tub with Heater                           | <input type="checkbox"/> _____                   |
| <input type="checkbox"/> Dryer                                 | <input type="checkbox"/> Microwave Oven        | <input type="checkbox"/> Storage Shed   | <input type="checkbox"/> _____                   |
| <input type="checkbox"/> Garage Door Opener and Transmitter(s) | <input type="checkbox"/> Pool Equipment        | <input type="checkbox"/> Surveillance Equipment                               | <input type="checkbox"/> _____                   |
|  | <input type="checkbox"/> Pool Heater           | <input type="checkbox"/> Trash Compactor                                      | <input type="checkbox"/> _____                   |
- Oil/Propane Tanks  Owned  Leased, If leased, from whom \_\_\_\_\_ Cost \_\_\_\_\_
- Security System  Owned  Leased, If leased, from whom \_\_\_\_\_ Cost \_\_\_\_\_

Any other leased systems: \_\_\_\_\_

If any of these items have been replaced during your ownership, which items and what year: \_\_\_\_\_

If any of these items have any defects, explain: \_\_\_\_\_

Are there any fixtures, appliances, or systems on or about the property excluded from the sale?  Yes  No

If yes, explain: \_\_\_\_\_

BUYERS Initials: \_\_\_\_\_

SELLERS Initials: \_\_\_\_\_

**3. STRUCTURAL ITEMS**

- (a) Name of Contractor or Builder who built home, if known \_\_\_\_\_
  - (b) Has there been any past or present movement, shifting, cracks, deterioration, structural damage or other problems with walls, ceilings, or foundations?  Yes  No  Unknown
  - (c) Has there been any past or present water leakage or intrusion in the structure(s)?  Yes  No  Unknown
  - (d) Have there been any past or present problems with driveways, walkways, patios, or retaining walls?  Yes  No  Unknown
  - (e) Have there been any repairs or other efforts to control the cause or effect of any problem(s) described in this section?  
 Yes  No  Unknown
  - (f) Has there ever been a fire in this property?  Yes  No  Unknown
  - (g) Have there been any problems with the fireplace?  Yes  No  Unknown
- If any answers are yes, explain: \_\_\_\_\_
- 

**4. ADDITIONS / ALTERATIONS & REMODELING**

- (a) Have you made any additions, structural changes, or other alterations to the property?  Yes  No  
If yes, explain: \_\_\_\_\_
- If yes, did you obtain and close out all necessary permits?  Yes  No  Unknown
- (b) Provide the name of any Contractor or individual who did any additions, structural changes, or other alterations to the property, if known: \_\_\_\_\_

**5. ROOF**

- (a) Year current roof put on \_\_\_\_\_
  - (b) Has the roof ever leaked during your ownership?  Yes  No
  - (c) Has the roof been replaced or repaired during your ownership?  Yes  No  
If yes, provide name of Contractor or individual who did the work and details of replacement/repair \_\_\_\_\_
  - (d) Do you know of any other problems with the roof or gutters?  Yes  No  
If any answers are yes, explain: \_\_\_\_\_
- 

**6. SIDING**

- (a) Exterior siding material(s):  Brick  Wood  Vinyl  Stucco  Synthetic Stucco  
 Manufactured Siding  Fiber Cement  Other \_\_\_\_\_  Unknown
  - (b) If manufactured siding, provide name of manufacturer, if known \_\_\_\_\_
  - (c) If stucco, have there been any inspection reports on the stucco in the last 5 years?  Yes  No
  - (d) Do you know of any problems/defects with the siding?  Yes  No
  - (e) Have you filed any claims with manufacturers in regard to the siding?  Yes  No  
If any answers are yes, explain: \_\_\_\_\_
- 

**7. WINDOWS/DOORS/LOCKS**

- (a) Are the windows insulated glass?  Yes  No
- (b) Are there any fogged, broken, or cracked windows?  Yes  No  Unknown  
If yes, which ones \_\_\_\_\_
- (c) Do all operable windows open, stay open, close and lock properly?  Yes  No  Unknown  
If no, which ones \_\_\_\_\_
- (d) Are any screens missing or damaged?  Yes  No  Unknown  
If yes, which ones \_\_\_\_\_
- (e) Do all doors operate properly?  Yes  No  
If no, explain: \_\_\_\_\_
- (f) Do you have keys to all door locks?  Yes  No  
If no, explain: \_\_\_\_\_

BUYERS Initials: \_\_\_\_\_

SELLERS Initials: \_\_\_\_\_

**8. HEATING AND AIR CONDITIONING**

- (a) Air Conditioning:  Central Electric  Natural Gas  Window Units, # of units included in sale \_\_\_\_\_  
 Mini-split, # of units \_\_\_\_\_ Provide age if known \_\_\_\_\_
  - (b) Heating:  Central Electric  Central Electric Heat Pump  Fuel Oil  Natural Gas  Other \_\_\_\_\_  
Provide age if known \_\_\_\_\_
  - (c) Have there been any problems regarding these items?  Yes  No
  - (d) Have there been any repairs/replacements of these units during your ownership?  Yes  No
- If yes, explain: \_\_\_\_\_
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**9. ELECTRICAL SYSTEM**

- (a) Have there been any problems with the electrical system?  Yes  No
  - (b) Who supplies electrical service?  City of Tallahassee  Talquin  Other \_\_\_\_\_
  - (c) Average utility bill? \$ \_\_\_\_\_ month  
Number of people living in property \_\_\_\_\_
- Comments: \_\_\_\_\_
- 

**10. PLUMBING**

- (a) Have there been any problems with the plumbing system?  Yes  No  Unknown
  - (b) Do you have polybutelene pipes?  Yes  No  Unknown
  - (c) Have there been any leaks, back-ups, water, and/or sewer/septic tank problems?  Yes  No  Unknown
  - (d) What type of sewage system do you have?  Public  Community Sewer  Septic Tank(s) How Many \_\_\_\_\_  
Location(s) \_\_\_\_\_  
When was septic tank last pumped? \_\_\_\_\_
  - (e) During your ownership have there been any septic system problems?  Yes  No
  - (f) If on a septic tank, is sewer service available to your property?  Yes  No  Unknown
- If yes, it is the responsibility of the BUYER to contact the local Health Department regarding continued use of a septic system.**
- (g) Does your utility bill contain a fee for sewer?  Yes  No
- If yes, it is the responsibility of the BUYER to contact the utility department to determine if a sewer is currently in use or if the sewer fee is for availability of sewer for future usage.**
- (h) Is there a pump associated with your sewage system?  Yes  No
  - (i) What is your water supply source:  Public  Community Well  Well on Property
  - (j) If your water is from a well, have there ever been repairs/replacements to the well or pump?  Yes  No  Unknown
  - (k) Has the well water ever been tested?  Yes  No  Unknown  
Date and Test Results: \_\_\_\_\_
  - (l) Do you have a water conditioning system?  Yes  No  
If yes, is the system  Owned  Leased
  - (m) Type of water heater(s)?  Gas  Electric  Solar  
On timer(s)?  Yes  No  
Number of Water Heaters? \_\_\_\_\_ Age of water heater(s) \_\_\_\_\_  
Number of gallons? \_\_\_\_\_ or  Tankless
- If any answers are yes, explain: \_\_\_\_\_
- 

BUYERS Initials: \_\_\_\_\_

SELLERS Initials: \_\_\_\_\_

**11. POOL / SPA / HOT TUB (Complete if applicable)**

- (a)  POOL year installed \_\_\_\_\_  Salt  Chlorine  
 In ground:  Gunitite  Fiberglass  Vinyl Age of liner \_\_\_\_\_  Above ground
  - (b) Has the pool been resurfaced?  Yes  No  Unknown Date \_\_\_\_\_
  - (c) Pool heater:  None  Gas  Electric  Solar
  - (d) Pool pump: Year installed \_\_\_\_\_
  - (e) Filter type: \_\_\_\_\_ Year installed \_\_\_\_\_
  - (f) Is pool equipment included?  Yes  No  
 If yes, itemize: \_\_\_\_\_
  - (g) Is there an automatic pool cleaner?  Yes  No If yes, manufacturer name \_\_\_\_\_
  - (h)  SPA/HOT TUB Year installed \_\_\_\_\_
  - (i) Spa heater:  None  Gas  Electric  Solar
- If there are any problems with any of the items above, explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**12. CRAWL SPACES AND BASEMENTS (Complete if applicable)**

- (a) Has there ever been any water leakage, accumulation of water or dampness in the basement or crawl space?  Yes  No  Unknown
  - (b) Do you have a sump pump?  Yes  No
  - (c) Have there been any repairs or other attempts to control any water or dampness problems in the basement or crawlspace?  Yes  No
- If any answers are yes, explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**13. WOOD DESTROYING ORGANISMS**

- (a) Have termites or any wood destroying insects affected the property during your ownership?  Yes  No  Unknown
  - (b) Has there ever been any damage to the property caused by termites or wood destroying insects during your ownership?  
 Yes  No  Unknown
  - (c) Has there ever been any damage to the property caused by wood rot during your ownership?  Yes  No  Unknown
  - (d) Is the property currently under bond for wood destroying insects from a licensed pest control company?  Yes  No  
 What company? \_\_\_\_\_ Expiration date: \_\_\_\_\_
  - (e) Do you know of any wood destroying organisms reports on the property in the last five years?  Yes  No
- If any answers are yes, explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**14. SOIL / DRAINAGE / BOUNDARIES**

- (a) Is there any fill or pipe clay on the property?  Yes  No  Unknown
  - (b) Has there been any settling or earth movement on the property?  Yes  No  Unknown
  - (c) Has there been any settling or earth movement in the immediate neighborhood?  Yes  No  Unknown
  - (d) Is any portion of the property located in a flood hazard area?  Yes  No  Unknown Flood zone, if known \_\_\_\_\_
  - (e) Is flood insurance required by your lender?  Yes  No
  - (f) Have there been any past or present drainage or flood problems affecting the property?  Yes  No  Unknown
  - (g) Have there been any past or present drainage or flood problems affecting adjacent properties?  Yes  No  Unknown
  - (h) Are there any encroachments, boundary line disputes, or easements affecting the property?  Yes  No  Unknown
  - (i) Are there any conservation easements or environmental restrictions?  Yes  No  Unknown
  - (j) Are there any shared driveways, fences or joint use agreements?  Yes  No
- If any answers are yes, explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- (k) Who owns any fences? \_\_\_\_\_  
 \_\_\_\_\_

BUYERS Initials: \_\_\_\_\_

SELLERS Initials: \_\_\_\_\_

**15. TOXIC SUBSTANCES**

(a) Are you aware of any hazardous materials in, on or about the property? (Hazardous Materials may include but are limited to: lead-based paint, asbestos materials, asbestos siding, radon, mold, and buried oil, fuel or other storage tanks.)

Yes  No  Unknown

(b) Has the property ever been tested for radon, mold, lead-based paint, or any other toxic substances?  Yes  No  Unknown

If any answers are yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**16. NEIGHBORHOOD/HOA FEES AND RESTRICTIONS**

(a) Have there been any proposed changes or conditions in your neighborhood that could affect the value or desirability of the property?

Yes  No  Unknown

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

(b) Is this property located within a geographical area which has been designated, or is being considered for designation, as a Historic Preservation Overlay District:  Yes  No  Unknown

(c) Is the property located in the City limits?  Yes  No

**Note: If there is a mandatory Homeowners' Association, including active covenants and periodic dues, you must complete the separate HOMEOWNERS' ASSOCIATION / COMMUNITY DISCLOSURE**

(d) Who maintains your road?  Gov't  Private

If private, is it maintained by:  HOA  Road Maintenance Agreement  Other

(e) What is the annual fee? \$ \_\_\_\_\_

How is it paid?  Monthly  Yearly  Other \_\_\_\_\_

(f) What does the fee cover? \_\_\_\_\_

(g) Are fees current?  Yes  No

(h) Who is the contact person for the association? \_\_\_\_\_

Phone # / Email \_\_\_\_\_

(i) Are there any defects, damages, legal actions, conditions or assessments that may affect the association or its fees?  Yes  No

(j) Does the property violate the restrictive covenants?  Yes  No  Unknown

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

(k) Are there any transfer fees?  Yes  No  Unknown

If yes, to whom \_\_\_\_\_

(l) Is there an enhancement fee or any other type of fee upon resale?  Yes  No  Unknown

If yes, what kind of fee \_\_\_\_\_

To whom \_\_\_\_\_

(m) Is there a CDD (Community Development District) fee attached to your property?  Yes  No  Unknown

If yes, amount \$ \_\_\_\_\_ How is it paid? \_\_\_\_\_

(n) Is your Leon County Fire Tax Assesment  Paid separately  Included in tax bill  Unknown  N/A

Amount, if any: \$ \_\_\_\_\_

(o) Are there any special assessments or any other fees of any type?  Yes  No

If yes, explain nature of assessment/fee and amount: \_\_\_\_\_  
\_\_\_\_\_

BUYERS Initials: \_\_\_\_\_

SELLERS Initials: \_\_\_\_\_

**17. OTHER MATTERS**

- (a) Are there any concealed cosmetic defects?  Yes  No  Unknown
- (b) Does anyone have a first right of refusal or an option to buy to this property?  Yes  No
- (c) Is there any existing or threatened legal action affecting the property?  Yes  No
- (d) Has an insurance claim been filed on this property during your ownership?  Yes  No
- (e) Is the property registered as a rooming house under the Rooming House Ordinance?  Yes  No  Unknown
- (f) Are there any zoning violations, non-conforming uses, set back violations, or proposed zoning or road changes?  Yes  No  Unknown
- (g) Are there any violations of local, state, or federal laws or regulations relating to this property?  Yes  No  Unknown
- (h) Anything else you feel you should disclose to a prospective buyer that may materially and/or adversely affect the value or desirability of the property: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The undersigned SELLER represents that the information set forth in the foregoing property disclosure statement is accurate and complete to the best of the SELLER'S knowledge on the date signed below. SELLER does not intend this property disclosure statement to be a warranty or guaranty of any kind. SELLER hereby authorizes Listing Broker to provide this information to prospective BUYERS and to other Real Estate Brokers and other Salespersons.

**SELLER understands and agrees that SELLER will immediately notify Listing Broker in writing if any information set forth in this property disclosure changes.**

Seller: \_\_\_\_\_ Date: \_\_\_\_\_

Seller: \_\_\_\_\_ Date: \_\_\_\_\_

**RECEIPT AND ACKNOWLEDGMENT BY BUYER**

BUYER hereby acknowledges receipt of a copy of this property disclosure. BUYER is strongly advised to obtain property inspection(s) as provided for in the Contract for Sale and Purchase. BUYER should select professionals with appropriate qualifications to conduct inspections. BUYER is aware that this property disclosure is not intended as a warranty or guaranty of any kind by SELLER. The Brokers and their Salespersons do not warrant or guarantee the condition of the property and are in no way responsible for the condition of the property. BUYER understands that the property is being sold in its present condition unless otherwise agreed upon in the Contract for Sale and Purchase.

Buyer: \_\_\_\_\_ Date: \_\_\_\_\_

Buyer: \_\_\_\_\_ Date: \_\_\_\_\_