

Planning & Community  
Development  
1140 Dielman Rd  
Olivette, MO 63132  
Ph. 314-993-0252



...in the center of it all

Permit# P2026-0302  
Paid \_\_\_\_\_  
INV# \_\_\_\_\_  
Taxes Paid: Y  N   
 House Sale  Rental

Address 651 Ashmont Dr  
Contact Name \_\_\_\_\_  
Owner of Record \_\_\_\_\_ Ph# \_\_\_\_\_

**EXTERIOR**

- P F
- Address/Mailbox
  - Drive/Flat Work
  - Roof/Flashing
  - Fascia/Soffit/Gutters
  - Garage/Carport
  - Exterior Siding
  - Foundation Walls
  - Windows/Screening
  - Deck/Patio
  - Exterior Stairs
  - Overhead Service Drop
  - Accessory Structure(s)
  - Pool/Fence N/A
  - Trees/Landscaping

**INTERIOR**

- Kitchen Walls/Floors/Ceiling
- Stove/Anti-Tip/Exhaust Fan
- Cabinets
- Dining Walls/Floor/Ceiling
- Living Walls/Floor/Ceiling
- Windows & Doors
- Other Rooms
- Fireplace(s)
- Hallway(s)/Stairs
- Bathroom(s) Walls/Floors/Ceilings
- Smoke Detectors
- CO Detectors
- Fireblocking N/A

**ELECTRICAL**

- P F
- Required GFCI Location(s)
  - Outlets
  - Circuit Wiring
  - Lighting/Switches
  - Electrical Panel(s)

**PLUMBING**

- Sinks/Fixtures/Toilets
- Exhaust Fans
- Shut-Offs/Dist.Piping
- Water Heater(s)
- Waste Stack/Clean-out

**MECHANICAL**

- Heating Equipment
- Gas Venting/Piping
- Gas Supply/Shut-Offs
- Laundry Vent

**BEDROOMS**

- Master Bedroom: 13 x 18 = 240 sqft.  
 Egress
- Bedroom 2: 12 x 13 = 170 sqft.  
 Egress
- Bedroom 3: 12 x 13 = 170 sqft.  
 Egress
- Bedroom 4: 13 x 15 = 208 sqft.  
 Egress
- Bedroom 5: \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_ sqft.  
 Egress
- Bedroom 6: \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_ sqft.  
 Egress
- Total # Bedrooms** 4
- Max. Occupancy Load** 12

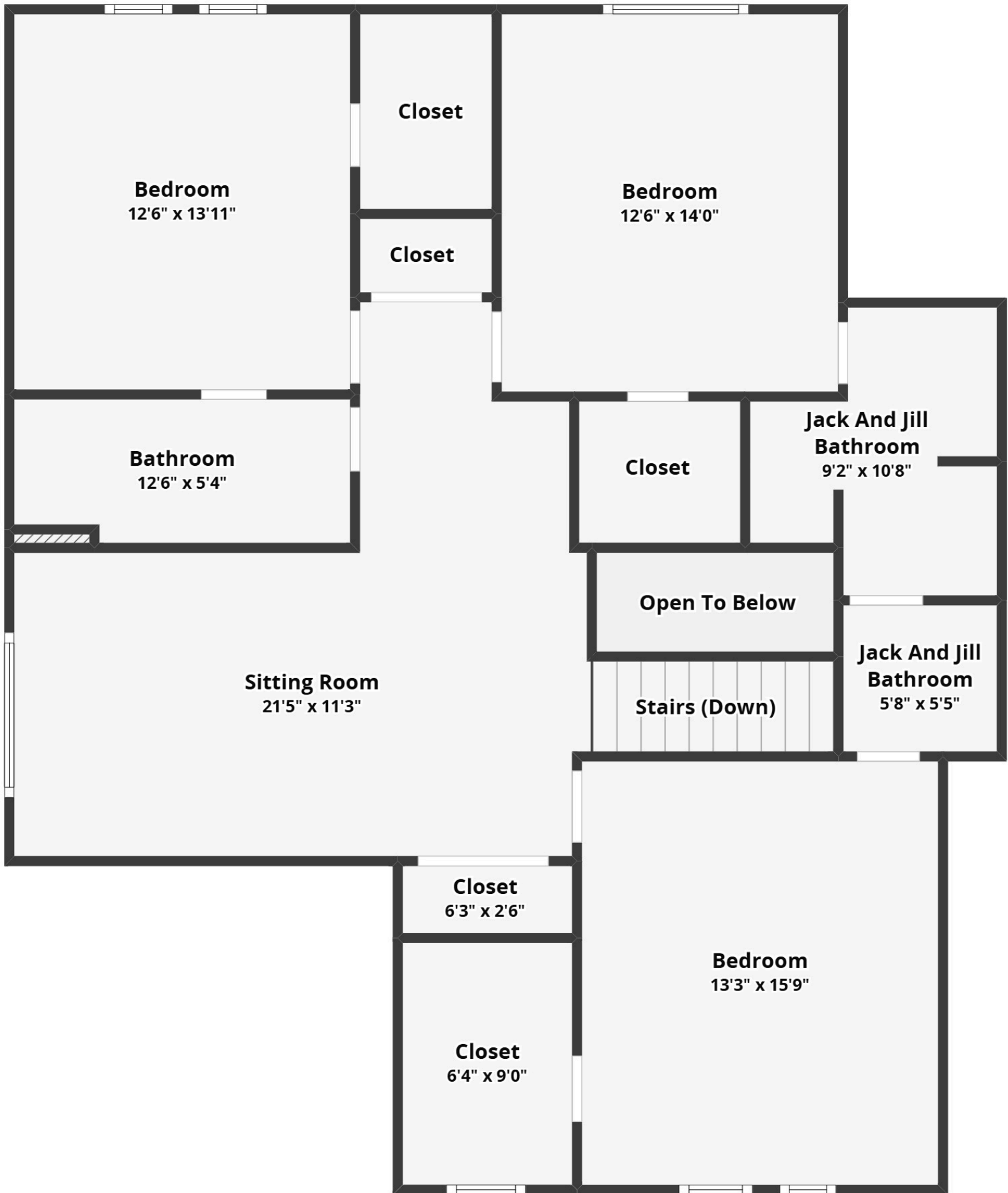
1<sup>st</sup> Inspection Date 05-06-26 Inspector Scott/mike **FAIL** **APPROVED**

2<sup>nd</sup> Inspection Date \_\_\_\_\_ Inspector \_\_\_\_\_ **FAIL** **APPROVED** \_\_\_\_\_

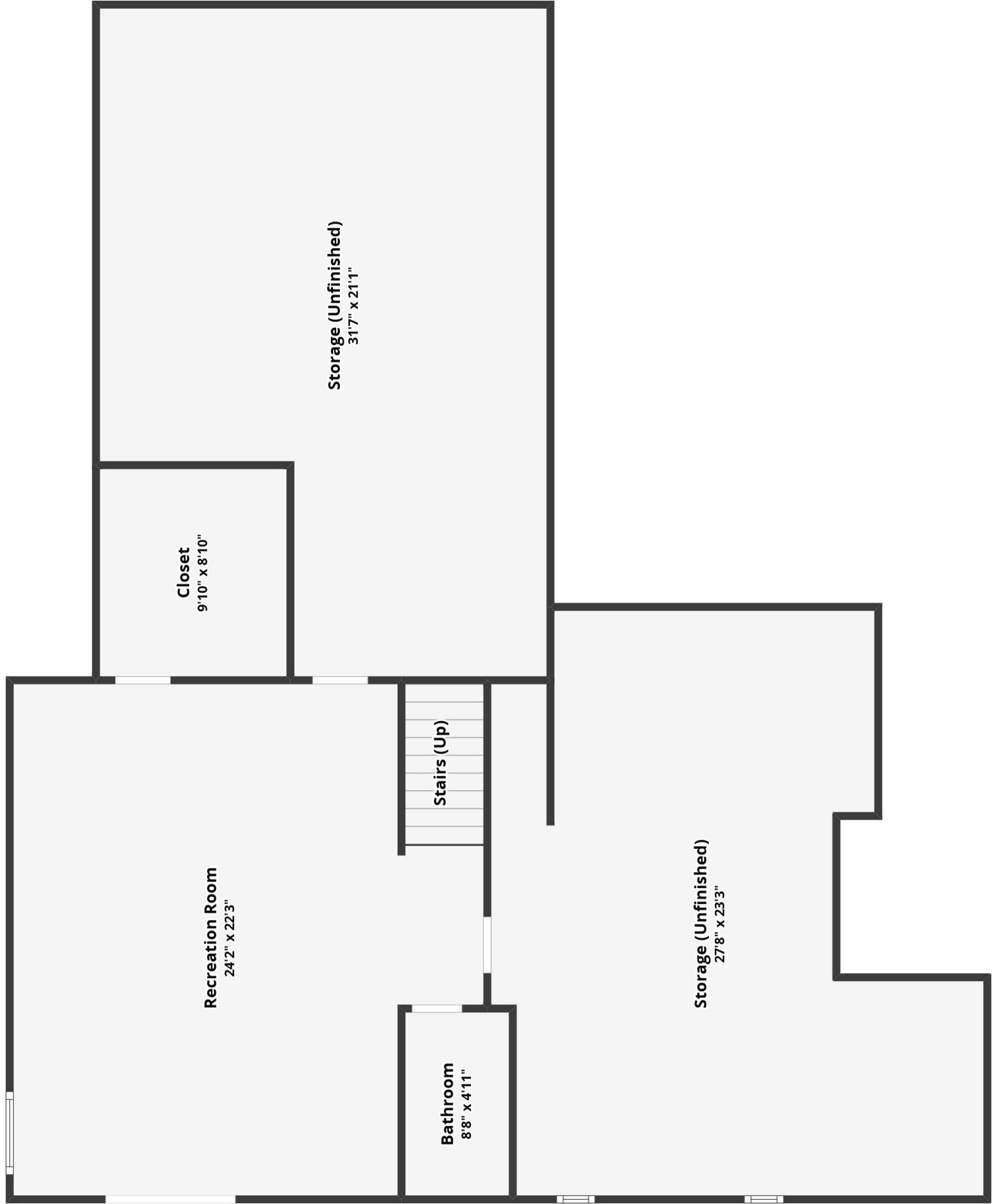




All dimensions are approximate and subject to independent verification.



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Form # 2091

01/26

52376590

**SELLER'S DISCLOSURE STATEMENT**

Property Address : 651 Ashmont Drive Olivette MO 63132

**Note: If Seller knows or suspects some condition which might lower the value of the property being sold or adversely affect Buyer's decision to buy the property, then Seller needs to disclose it. This statement will assist Buyer in evaluating the property being considered. Real estate brokers and agents involved in the sale do not inspect the property for defects, and they cannot guarantee the accuracy of the information in this form.**

**TO SELLER:** Your truthful disclosure of the condition of your property gives you the best protection against future charges that you violated your legal obligation to Buyer by concealing a material defect(s), lead-based paint, use as a site for methamphetamine production or storage and/or any other disclosure required by law. Your knowledge of the property prior to your ownership may be relevant. In the case of a material defect, for example, if information that you possess indicates some persistent pattern of a problem not completely remedied, such information should be included in this disclosure in order to achieve full and honest disclosure. Your answers or the answers you fail to provide, either way, may have legal consequences, even after the closing of the sale. This questionnaire should help you meet your disclosure obligation, but it may not cover all aspects of your property. If you know of or suspect some condition which would substantially lower the value of the property, impair the health or safety of future occupants, or otherwise affect Buyer's decision to buy your property, then use the space at the end of this form to describe that condition.

**TO BUYER: THIS INFORMATION IS A DISCLOSURE ONLY AND IS NOT INTENDED TO BE A PART OF ANY CONTRACT BETWEEN BUYER AND SELLER.** If you sign a contract to purchase the property, that contract, and not this disclosure statement, will provide for what is to be included in the sale. So, if you expect certain items, appliances, or equipment included, you must specify them in the contract. Since these disclosures are based on the Seller's knowledge, you cannot be sure that there are, in fact, no problems with the property simply because the Seller is not aware of them. The answers given by the Seller are not warranties of the condition of the property. Thus, you should condition your offer on a professional inspection of the property. You may also wish to obtain a home protection plan/warranty. Due to the variety of insurance, requirements, products, and arrangements Buyer should contact appropriate party to determine insurance coverage needed. Conditions of the property that you can see on a reasonable inspection should either be taken into account in the purchase price or you should make the correction of these conditions by the Seller a requirement of the sale contract.

<b>STATUTORY DISCLOSURES</b>				
<b>Note: The following information, if applicable to the property, is required by federal or state law to be disclosed to prospective buyers. Local laws and ordinances may require additional disclosures.</b>				
<b>LEAD-BASED PAINT</b>		<b>YES</b>	<b>NO</b>	<b>UNK</b>
1	Does the Property include a residential dwelling built prior to 1978? If "Yes," 42 U.S.C. 4852d and EPA regulations promulgated pursuant thereto require that a completed Disclosure of Information and Acknowledgement Lead Based Paint and/or Lead-Based Paint Hazards form (Form #2049) must be signed by Seller and any involved real estate licensee(s) and given to any potential buyer.	-	X	-
2	Please explain any "Yes" answers you gave in this section:			
<b>METHAMPHETAMINE</b>		<b>YES</b>	<b>NO</b>	<b>UNK</b>
3	Are you aware if the Property is or was used as a site for methamphetamine production or the place of residence of a person convicted of a crime involving methamphetamine or a derivative controlled substance related thereto? If "Yes," §442.606 RSMo requires you to disclose such facts in writing.	-	X	-
4	Please explain any "Yes" answers you gave in this section:			
<b>WASTE DISPOSAL SITE OR DEMOLITION LANDFILL (permitted or unpermitted)</b>		<b>YES</b>	<b>NO</b>	<b>UNK</b>
5	Are you aware of any permitted or unpermitted solid waste disposal site or demolition landfill on the property? If "Yes," Section 260.213 RSMo requires Seller to disclose the location of any such site on the Property. <b>Note: If Seller checks "Yes," Buyer may be assuming liability to the State for any remedial action at the property.</b>	-	X	-

6	Please explain any "Yes" answers you gave in this section:					
<b>RADIOACTIVE OR HAZARDOUS MATERIALS</b>				YES	NO	UNK
7	Have you ever received a report stating affirmatively that the Property is or was previously contaminated with radioactive material or other hazardous material? If "Yes," §442.055 RSMo requires you to disclose such knowledge in writing. Please provide such information, including a copy of such report, if available.			-	X	-
8	Please explain any "Yes" answers you gave in this section:					
<b>ADDITIONAL DISCLOSURES</b>						
<b>Lead-Based Paint</b>				YES	NO	UNK
9	Are you aware of the presence of any lead hazards (such as paint, water supply lines, etc.) on the property?			-	X	-
10	Are you aware if it has ever been covered or removed?			-	X	-
11	Are you aware if the property has been tested for lead?			-	-	X
12	Please explain any "Yes" answers you gave in this section including test date, type of test and results:					
<b>Radon</b>				YES	NO	UNK
13	Are you aware if the property has been tested for radon gas?			-	-	X
14	Are you aware if the property has ever been mitigated for radon gas?			-	X	-
15	Please explain any "Yes" answers you gave in this section:					
<b>Mold</b>				YES	NO	UNK
16	Are you aware of the presence of any mold on the property?			-	X	-
17	Are you aware of anything with mold on the property that has ever been covered or removed?			-	X	-
18	Are you aware if the property has ever been tested for the presence of mold?			-	-	X
19	Please explain any "Yes" answers you gave in this section:					
<b>Asbestos Materials</b>				YES	NO	UNK
20	Are you aware of the presence of asbestos materials on the property, such as roof shingles, siding, insulation, ceiling, flooring, pipe wrap, etc.?			-	X	-
21	Are you aware of any asbestos material that has been encapsulated or removed?			-	X	-
22	Are you aware if the property has been tested for the presence of asbestos?			-	X	-
23	Please explain any "Yes" answers you gave in this section:					
<b>Other Environmental Concerns</b>				YES	NO	UNK
24	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.?			-	X	-
25	Please explain any "Yes" answers you gave in this section:					
<b>SUBDIVISION, CONDOMINIUM, VILLA, CO-OP, OR OTHER SHARED COST DEVELOPMENT (if applicable)</b>						
26	Development Name	oak Estates Neighborhood Association				
27	Contact Name	Mike Ferguson	Phone #	314 3681791		
28	Type of Property (check all that apply) <input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Condominium <input type="checkbox"/> Townhome <input type="checkbox"/> Villa <input type="checkbox"/> Co-op					
29	Mandatory Assessment #1	\$ 75	per	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input checked="" type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Other
30	Mandatory Assessment #2	\$	per	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Other
31	Mandatory Assessment(s) include:					
	<input checked="" type="checkbox"/> entrance sign/structure <input type="checkbox"/> street maintenance <input checked="" type="checkbox"/> common ground <input type="checkbox"/> snow removal specific to dwelling					
	<input type="checkbox"/> snow removal common area <input checked="" type="checkbox"/> landscaping of common area <input type="checkbox"/> landscaping specific to dwelling <input type="checkbox"/> reception facility					
	<input type="checkbox"/> clubhouse <input type="checkbox"/> pool <input type="checkbox"/> tennis court <input type="checkbox"/> exercise area <input type="checkbox"/> water <input type="checkbox"/> sewer <input type="checkbox"/> trash removal <input type="checkbox"/> doorman <input type="checkbox"/> cooling <input type="checkbox"/> heating					
	<input type="checkbox"/> security <input type="checkbox"/> elevator <input checked="" type="checkbox"/> some insurance <input type="checkbox"/> real estate taxes <input type="checkbox"/> other common facility _____					
	<input type="checkbox"/> assigned parking space(s): how many _____ identified as _____					
	<input type="checkbox"/> other specific item(s): _____					
	<input type="checkbox"/> Dwelling exterior maintenance covered by Assessment:					

	YES	NO	UNK
32 Are you aware of any existing or proposed special assessments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
33 Are you aware of any special taxes and/or district improvement assessments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
34 Are you aware of any condition or claim which may cause an increase in assessment or fees?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35 Are you aware of any material defects in any common or other shared elements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
36 Are you aware of any existing indentures/restrictive covenants?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
37 Are you aware of any violation of the indentures/restrictions by yourself or by others?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
38 Is there a recorded shared driveway/street/road maintenance agreement?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
39 Is there a driveway/street/road that is not maintained by city or county? If so, please explain in description.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
40 Please explain any "Yes" answers you gave in this section:			

**UTILITIES**

Services	Current Provider	Phone #	<input type="checkbox"/> Owned <input type="checkbox"/> Leased	Avg Monthly Cost
41 Propane				
42 Gas	SPIRE	800 887 4173		
43 Electric	AMEREN MISSOURI	800 552 7583		
44 Water	MISSOURI AMERICAN WATER	866 430 0820		
45 Sewer	MSD	866 781 5737		
46 Trash	> REPUBLIC SERVICES	636 947 5959		
47 Recycle				
48 Internet	> AT&T			
49 Phone				

**HEATING, VENTILATION AND COOLING ("HVAC") SYSTEMS**

Type of Heating Equipment:				
50 Zone 1: Age 2025 Brand	LENNOX	<input checked="" type="checkbox"/> Forced Air	<input type="checkbox"/> Heat Pump	<input type="checkbox"/> Radiant
51 Zone 2: Age 2025 Brand	LENNOX	<input checked="" type="checkbox"/> Forced Air	<input type="checkbox"/> Heat Pump	<input type="checkbox"/> Radiant
Fuel Source of Heating Equipment:				
52 Zone 1:	<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Propane	<input type="checkbox"/> Fuel Oil
53 Zone 2:	<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Electric	<input type="checkbox"/> Propane	<input type="checkbox"/> Fuel Oil
Type of Air Conditioner:				
54 Zone 1: Age 2025 Brand	Lennox	<input checked="" type="checkbox"/> Central Electric	<input type="checkbox"/> Central Gas	<input type="checkbox"/> Window/Wall (# of Units: )
55 Zone 2: Age 2025 Brand	Lennox	<input checked="" type="checkbox"/> Central Electric	<input type="checkbox"/> Central Gas	<input type="checkbox"/> Window/Wall (# of Units: )
56 Are you aware of any problems or issues with any part of the HVAC system?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57 Do you have any existing maintenance agreements in place?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58 Are any areas of the home not covered by central heating /cooling?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59 With respect to the last service/repair made to the HVAC system, please describe in detail the scope of work, date, name of person/company who did the work and cost:	Welsch Heating + Cooling replaced COMPLETE AIR AND HEAT SYSTEMS 2025 (MAY)			

60 Please explain any "Yes" or "Other" answers you gave in this section:  
Garage does not have heating /cooling.

**FIREPLACE(S)**

	YES	NO	UNK
61 Location 1: Room: <u>Hearth room</u> Type: <input type="checkbox"/> Wood Burning <input checked="" type="checkbox"/> Gas Logs <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> UNK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62 Location 2: Room: _____ Type: <input type="checkbox"/> Wood Burning <input type="checkbox"/> Gas Logs <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> UNK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63 Location 3: Room: _____ Type: <input type="checkbox"/> Wood Burning <input type="checkbox"/> Gas Logs <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> UNK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64 Are you aware of any problems or repairs needed with any item in this section?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

65 Please explain any "Yes" or "No" answers you gave in this section:

**PLUMBING SYSTEM, FIXTURES AND EQUIPMENT**

66 Plumbing System: <input type="checkbox"/> Copper <input type="checkbox"/> PVC <input type="checkbox"/> PEX <input type="checkbox"/> Galvanized <input checked="" type="checkbox"/> Other: <u>UNKNOWN</u>
67 Water Heater 1: Age: <u>2019</u> Location: <u>BASEMENT</u> Tank Size: <u>50L</u> <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Tankless <input type="checkbox"/> Other
68 Water Heater 2: Age: <u>2019</u> Location: <u>BASEMENT</u> Tank Size: <u>50L</u> <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Tankless <input type="checkbox"/> Other

		YES	NO	UNK
69	Does the property have an ice-maker supply line?	X	-	-
70	Is property equipped with a Lawn Irrigation System? If yes, please provide date of last backflow device inspection certificate.	X	-	-
71	Are you aware of any problems or repairs needed in the plumbing system?	-	X	-
72	Does property have a Swimming Pool/Spa/Hot Tub? (If "Yes," attach Form #2180, Pool/Spa/Pond/Lake Addendum to Seller's Disclosure Statement.)	-	X	-
73	Please explain any "Yes" or "Other" answers you gave in this section: <b>BACKFLOW INSIECTION SUMMER 2025 - INSPECTION IS DUE SHORTLY</b>			
<b>WATER (If well exists, attach Form #2165, Septic/Well Addendum to Seller's Disclosure Statement)</b>				
74	What is the source of your drinking water? <input checked="" type="checkbox"/> Public <input type="checkbox"/> Community <input type="checkbox"/> Well <input type="checkbox"/> Other			
75	If well, when was the water last tested? <b>N/A</b> Is test documented? <input type="checkbox"/> Yes or <input type="checkbox"/> No. If yes, please provide documentation.			
76	Do you have a water softener? <input type="checkbox"/> Yes or <input checked="" type="checkbox"/> No. If yes, is it <input type="checkbox"/> Owned or <input type="checkbox"/> Leased. If leased, provide lessor and cost below.			
		YES	NO	UNK
77	Are you aware of any problems relating to the water system including the quality or source of water or any components such as the curb stop box?	-	X	-
78	Please explain any "Yes" answers you gave in this section and water softener lease information if applicable :			
<b>SEWERAGE (If Septic or Aerator exists, attach Form #2165, Septic/Well Addendum to Seller's Disclosure Statement)</b>				
79	What is the type of sewerage system to which the house is connected? <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Septic <input type="checkbox"/> Aerator <input type="checkbox"/> Other If Other, please explain:			
80	If septic/aerator, when was system last serviced? <b>NA</b>			
		YES	NO	UNK
81	Is there a sewerage lift system?	-	X	-
82	Is there a sewerage grinder system?	-	X	-
83	Are you aware of any leaks, backups, open drain lines or other problems relating to the sewerage system?	X	-	-
84	Please explain any "Yes" answers you gave in this section: <b>NO PROBLEMS CURRENTLY. IN SEPTEMBER 2014 THERE WAS SEWER BACK-UP IN UNFINISHED BASEMENT. AFTER THIS MSD INSTALLED A VALVE IN SEWER LINE. NO PROBLEMS SINCE. BASEMENT PROFESSIONALLY CLEANED + SANITIZED 2014.</b>			
<b>ELECTRICAL (Note: Certain types of electrical panels have been subject to recall)</b>				
Type of Service Panel(s):				
85	Panel 1: Amps <b>200</b> Brand <b>MURRAY</b> <input checked="" type="checkbox"/> Circuit Breakers <input type="checkbox"/> Fuses <input type="checkbox"/> Other			
86	Panel 2: Amps <b>125</b> Brand <b>MURRAY</b> <input checked="" type="checkbox"/> Circuit Breakers <input type="checkbox"/> Fuses <input type="checkbox"/> Other			
87	Panel 3: Amps _____ Brand _____ <input type="checkbox"/> Circuit Breakers <input type="checkbox"/> Fuses <input type="checkbox"/> Other			
Type of Wiring:				
88	Panel 1: <input type="checkbox"/> Copper <input type="checkbox"/> Aluminum <input checked="" type="checkbox"/> UNK <input type="checkbox"/> Other			
89	Panel 2: <input type="checkbox"/> Copper <input type="checkbox"/> Aluminum <input checked="" type="checkbox"/> UNK <input type="checkbox"/> Other			
90	Panel 3: <input type="checkbox"/> Copper <input type="checkbox"/> Aluminum <input type="checkbox"/> UNK <input type="checkbox"/> Other			
		YES	NO	UNK
91	Are you aware of any problems or repairs needed in the electrical system?	-	X	-
92	Are you aware of any panels in service in the property being subject to recall or otherwise out of date?	-	X	-
93	Are you aware of any active knob and tube wiring in the property?	-	X	-
94	Please explain any "Yes" answers you gave in this section:			
<b>CONSTRUCTION</b>				
95	The property was originally constructed in: <b>2006</b> . Seller has occupied property from <b>2013</b> to <b>2026</b> .			
96	List all significant additions, modifications, renovations, & alterations to the property during your ownership below: <b>ROOF REPLACED 2021. NEW CARPETING ON UPPER LEVEL 2013. ENTIRELY REPLACED AIR AND HEAT SYSTEMS WITH NEW ZONED HIGH EFFICIENCY LENNOX SYSTEM 2025. NEW REFRIGERATOR 2021, DISHWASHER (BOSCH) IN 2016</b>			
		YES	NO	UNK
97	Were required permits obtained for the work described above?	X	-	-
98	Please explain any "No" answers you gave in this section:			

FOUNDATION				
99	Type of Foundation: <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Cinder Block <input type="checkbox"/> Stone <input type="checkbox"/> Wood <input type="checkbox"/> Other:	YES	NO	UNK
100	Are you aware of any problems or issues with foundation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
101	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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
102	Are you aware of any movement, shifting, deterioration, or other problems with walls, foundations, crawl space or slab?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
103	Are you aware of cracks or flaws in the walls, ceilings, foundations, concrete slab, crawl space, basement floor or garage?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
104	Are you aware of any repairs to any of the building elements listed above?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
105	Were required permits obtained for any repairs described above? <b>NIA</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
106	Please explain any "Yes" answers you gave in this section, including location, extent, date and name of the person/company who did the repair or control effort: <b>Epoxy Injection in cracks in basement wall - 2020</b>			
<b>BASEMENT AND CRAWL SPACE (Complete only if applicable)</b>				
107	Is the home equipped with a sump pit?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
108	Is the home equipped with a sump pump? <b>2</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
109	Are you aware of any issues with sump pit(s) & pump(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
110	Are you aware of any dampness, water accumulation or leakage, in the basement or crawl space or slab?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
111	Are you aware of any repairs or other attempts to control any water or dampness problem in the basement or crawl space?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
112	Please explain any "Yes" answers you gave in this section: <b>See Additional Comments.</b>			
<b>ROOF, GUTTERS AND DOWNSPOUTS</b>				
113	What is the approximate age of the roof? <b>2021</b> Is it documented? If yes, please provide documentation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
114	Are you aware of any active leaks to the roof?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
115	Has the roof ever leaked during your ownership?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
116	Has the roof been repaired, recovered or any portion of it replaced or recovered during your ownership?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
117	Are you aware of any problems with the roof, gutters or downspouts?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
118	Does the property have multiple layers of roofing currently installed on any portion of the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
119	Please explain any "Yes" answers you gave in this section and attach any documentation: <b>ROOF REPLACED 2021 DUE TO HAIL DAMAGE - (Documentation attached)</b>			
<b>PESTS/TERMITES/WOOD DESTROYING INSECTS</b>				
120	Are you aware of any pests, rodents or termites/wood destroying insects impacting the property and improvements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
121	Are you aware of any uncorrected damage to the property caused by above?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
122	Are you aware of any control reports for the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
123	Are you aware of any control treatments to the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
124	Is your property currently under a warranty contract by a licensed pest/termite control company? If so, when does it expire and what is the renewal costs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
125	Please explain any "Yes" answers you gave in this section: <b>SEMI ANNUAL PREVENTATIVE MAINTENANCE BY A PROFESSIONAL COMPANY</b>			
<b>SOIL AND DRAINAGE</b>				
126	Are you aware of any fill, expansive soil or sinkholes on the property or that may affect the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
127	Are you aware of any soil, earth movement, flood, drainage or grading problems on the property or that may affect the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
128	Are you aware of any past, present or proposed mining, strip-mining, or any other excavations on the property or that may affect the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
129	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)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
130	Please explain any "Yes" answers you gave in this section:			

SURVEY AND ZONING				YES	NO	UNK
131	Do you have a survey of the property? If yes, please attach.			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
132	Does the survey include all existing improvements on the property? <i>We believe so</i>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
133	Are you aware of any shared or common features with adjoining properties?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
134	Are you aware of any rights of way, unrecorded easements, or encroachments, which affect the property?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
135	Is any portion of the property located within the 100-year flood hazard area (flood plain)?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
136	Are you aware of any violations of local, state, or federal laws/regulations, including zoning, relating to the property?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
137	Please explain any "Yes" answers you gave in this section:					
INSURANCE				YES	NO	UNK
138	Are you aware of any claims that have been filed for damages to the property? (i.e., roof, flood, fire, casualty, etc.)			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
139	If "Yes," please provide the following information for each claim: date of claim, description of claim, repairs and/or replacements completed.					
<p><i>2014 - SEWER BACK-UP IN UNFINISHED BASEMENT, PROFESSIONAL CLEANING + SANITING, REPLACEMENT OF DRY WALL AND CARPET IN CEDAR BASEMENT CLOSET ONLY</i></p> <p><i>2021 - HAIL DAMAGE TO ROOF - NEW ROOF PLACED</i></p>						
APPLIANCES/EQUIPMENT						
(Seller is not agreeing that all items are being offered for sale; mark N/A if not applicable)						
140	Range/Stove	<input type="checkbox"/> N/A	Age <i>UNKNOWN</i>	<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Electric	
141	Oven	<input type="checkbox"/> N/A	Age <i>UNKNOWN</i>	<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Electric	
142	Cooktop	<input type="checkbox"/> N/A	Age	<input type="checkbox"/> Gas	<input type="checkbox"/> Electric	
143	Outdoor Grill	<input checked="" type="checkbox"/> N/A	Age	<input type="checkbox"/> Gas	<input type="checkbox"/> Electric	
144	Dryer Hookup	<input type="checkbox"/> N/A		<input type="checkbox"/> Gas	<input checked="" type="checkbox"/> Electric	
145	Built in Microwave	<input type="checkbox"/> N/A	Age <i>UNKNOWN</i>			
146	Built in Refrigerator <i>NOT BUILT IN BUT INCLUDED</i>	<input type="checkbox"/> N/A	Age <i>2021</i>			
147	Dishwasher	<input type="checkbox"/> N/A	Age <i>2016</i>			
148	Garbage Disposal	<input type="checkbox"/> N/A	Age <i>We have replaced</i>			
149	Trash Compactor	<input checked="" type="checkbox"/> N/A	Age			
150	Electric Pet Fence	<input checked="" type="checkbox"/> N/A	# of collars			
151	Gas Powered Exterior Lights	<input checked="" type="checkbox"/> N/A	# of lights			
152	Security System/Cameras <i>MONITORED THROUGH ERKA SECURITY SYSTEMS</i>	<input type="checkbox"/> N/A		<input checked="" type="checkbox"/> Owned	<input type="checkbox"/> Leased	
153	Are you aware of any items in this section in need of repair or replacement?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
154	Please explain any "Yes" answers you gave in this section:					
MISCELLANEOUS				YES	NO	UNK
155	Has the property been continuously occupied during the last twelve months?			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
156	Is the property located in an area that requires any compliance inspection(s) including municipality, conservation, fire district or any other required governmental authority?			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
157	Is the property located in an area that requires any specific disclosure(s) from the city or county?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
158	Is the property designated as a historical home or located in a historic district?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
159	Is property tax abated or subject to a tax freeze (such as Senior Property Tax Freeze)? If yes, attach documentation from taxing authority.			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
160	Are you aware of any pets having been kept in or on the property?			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
161	Is the Buyer being offered a protection plan/home warranty at closing at Seller's expense?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
162	Are you aware of any inoperable windows or doors, broken thermal seals, or cracked/broken glass?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
163	Are you aware if carpet has been laid over a damaged wood floor?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
164	Are you aware of any existing or threatened legal action affecting the property?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
165	Are you aware of any consent required of anyone other than the signer(s) of this form to convey title to the property?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
166	Please explain any "Yes" answers you gave in this section:					
<p><i>olivette inspection required</i></p> <p><i>Dog on property 2013 - approximately 2016</i></p>						

**BASEMENT + CRAWL SPACE: ADDITIONAL COMMENTS**

167 ONE SUMP PUMP WAS PRESENT WHEN WE PURCHASED IN 2013. IN 2014 THERE WAS  
 168 WATER IN BASEMENT AND A NEW DRAINAGE SYSTEM WITH SUMP PUMP WAS  
 169 INSTALLED. THERE ARE NOW 2 SUMP PUMPS AND NO PROBLEMS SINCE.  
 170  
 171 IN 2022 WITH HEAVY RAIN, EGRESS WINDOW WELL DID NOT DRAIN. IT WAS  
 172 DISCOVERED THAT DRAIN HAD BEEN TAPED SHUT PRIOR TO US PURCHASING HOME.  
 173 TAPE REMOVED, DRAIN CHECKED BY SPECIALIST + FUNCTIONS WELL. AT THAT  
 174 TIME ORIGINAL SUMP PUMP ALSO REPLACED AS A PRECAUTION  
 175  
 176 REFRIGERATOR IN KITCHEN IS INCLUDED; SAUNA IN BASEMENT EXCLUDED;  
 177 PORTABLE DISHWASHER IN LAUNDRY ROOM EXCLUDED; MEZUZAS (religious scrolls  
 on doorframes and their containers) are excluded

Seller attaches the following document(s): PROPERTY SURVEY, COPY OF INVOICE FOR NEW ROOF  
COPY OF WELSCH Heating and Cooling Invoice,  
Lennox Warranty

**SELLER'S ACKNOWLEDGEMENT:**

Seller acknowledges having carefully examined this statement and that it is complete and accurate to the best of Seller's knowledge. Seller agrees to immediately notify listing broker in writing of any changes in the property condition. Seller authorizes all brokers and their licensees to furnish a copy of this statement to prospective Buyers.

Alan Brook                      5-12-26  
 SELLER SIGNATURE                      DATE

Marcie Brook                      5-12-26  
 SELLER SIGNATURE                      DATE

ALAN D BROOK  
 Seller Printed Name

Marcie Brook                      5-12-26  
 Seller Printed Name

**BUYER'S ACKNOWLEDGEMENT:**

Buyer acknowledges having received and read this Seller's Disclosure Statement. Buyer understands that the information in this Seller's Disclosure Statement is limited to information of which Seller has actual knowledge. Buyer should verify the information contained in this Seller's Disclosure Statement, and any other important information provided by either Seller or broker (including any information obtained through the Multiple Listing Service) by an independent, professional investigation of his own. Buyer acknowledges that broker is not an expert at detecting or repairing physical defects in property.

\_\_\_\_\_  
 BUYER SIGNATURE                      DATE

\_\_\_\_\_  
 BUYER SIGNATURE                      DATE

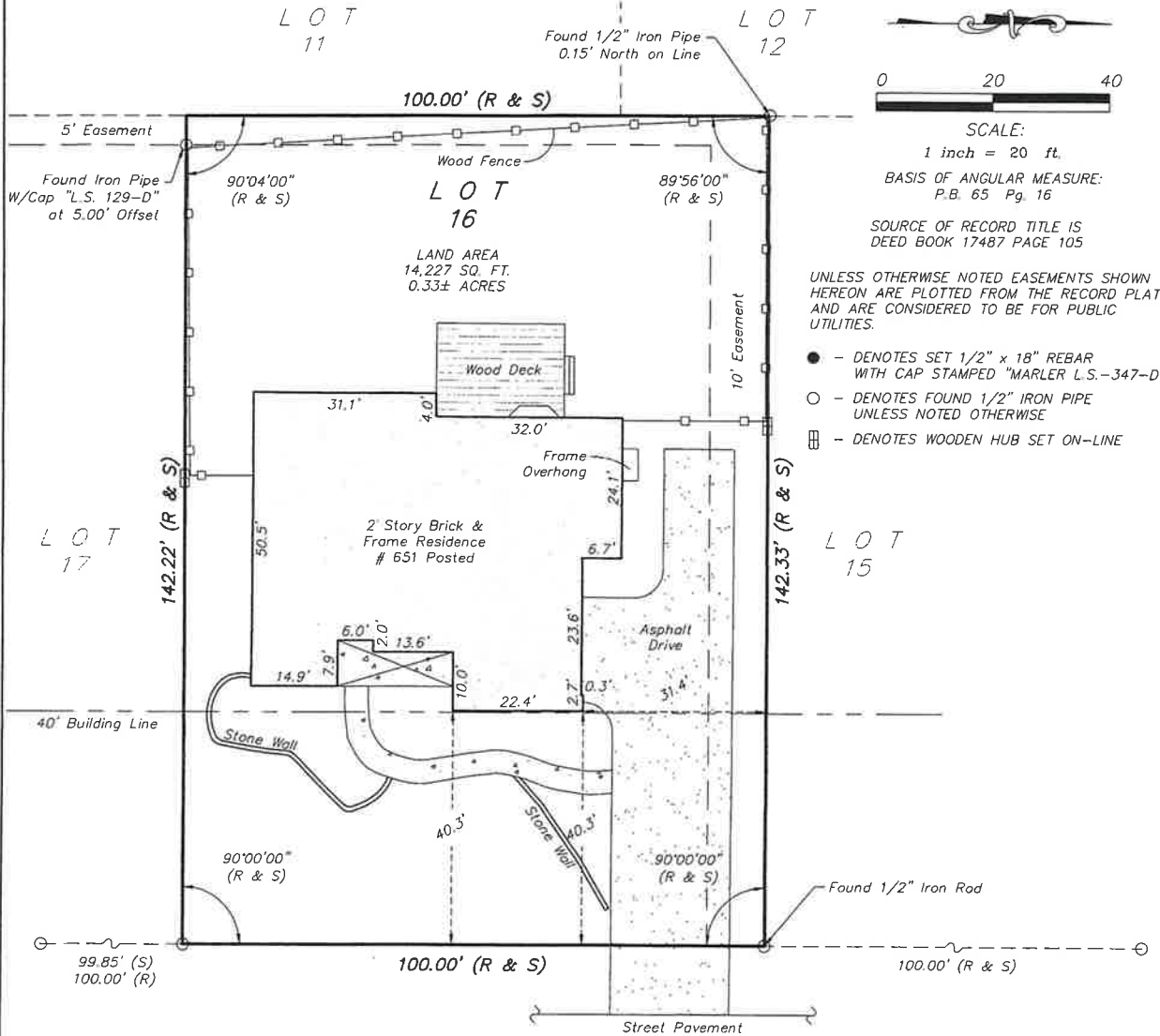
\_\_\_\_\_  
 Buyer Printed Name

\_\_\_\_\_  
 Buyer Printed Name

BOUNDARY RESURVEY AND LOCATION OF IMPROVEMENTS AND EASEMENTS

**OAK ESTATES ADDITION**

ST. LOUIS COUNTY, MISSOURI



**ASHMONT DRIVE (50' W.)**

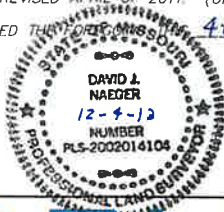
**SURVEYOR'S STATEMENT**

THIS IS TO CERTIFY AT THE REQUEST OF INSIGHT TITLE COMPANY, LLC AND MARCIE BROOK AND ALAN BROOK, WE HAVE DURING THE MONTH OF DECEMBER 2013, PERFORMED A BOUNDARY RESURVEY AND LOCATION OF IMPROVEMENTS AND EASEMENTS ON LOT 16 OF OAK ESTATES ADDITION, A SUBDIVISION RECORDED IN PLAT BOOK 65 PAGE 16 IN THE ST. LOUIS COUNTY LAND RECORDS OFFICE IN ST. LOUIS COUNTY, MISSOURI, AND THE RESULTS OF SAID SURVEY ACCURATELY REFLECTS ALL IMPROVEMENTS, INCLUDING FENCES AND EASEMENTS, BOTH RECORDED AND VISIBLE UNRECORDED ONES: THAT THE SAID SURVEY WAS EXECUTED IN COMPLIANCE WITH THE CURRENT MISSOURI MINIMUM STANDARDS FOR PROPERTY BOUNDARY SURVEYS AS SET FORTH BY THE MISSOURI DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS AND PROFESSIONAL REGISTRATION (20 CSR 2030-16.040) AND THE MISSOURI BOARD FOR ARCHITECTS, PROFESSIONAL ENGINEERS AND LAND SURVEYORS (20 CSR 2030-16.070), AND THE LOCATION OF IMPROVEMENTS AND EASEMENTS (20 CSR 2030-16.110), EFFECTIVE 12/30/94, AND LAST REVISED APRIL OF 2011. (URBAN CLASS PROPERTY)

IN WITNESS WHEREOF, I HAVE SIGNED AND SEALED THIS 4th DAY OF December 2013.

R. = RECORD  
S. = SURVEYED

TITLE COMMITMENT PROVIDED BY:  
INSIGHT TITLE COMPANY, LLC  
TITLE NO.: 93694-13-1



MARLER SURVEYING COMPANY INC.  
MISSOURI CORP. NO. L.S. 347-D

By: *David J. Naeyer*  
DAVID J. NAEYER  
MISSOURI P.L.S. 2002014104

copyright 2013 by Marler Surveying Company, INC.

JOB NO. 1311-115	<p>11402 GRAVOIS RD., STE. 200 ST. LOUIS, MO 63126 (314) 729-1001 PH. (314) 729-1044 FAX 110 WEST MAIN STREET, SULLIVAN, MO (573) 468-4684 PH. (573) 860-8606 FAX email: marler@marlersurveying.net</p>	DEPUTY M.S.
DRWN BY: M.P.B.		CHK'D BY: D.J.N.

Locally Owned & Operated

Roofing, Siding, Room Additions,  
Decks, and Windows



# SNS CONTRACTING ROOFING & SIDING COMPANY

Adam Bernstein  
St. Charles Co.  
(314)-249-7736

1098 Caleb Dr.  
Arnold, MO 63010

Scott Hermann  
St. Louis Co.  
(314) 574-0177

Property Address:

Purchaser Address

Home

Work

Other

- Contractor agrees to remove and discard all existing layers of shingles on the entire roof, up to three layers. If any additional layers are found an additional charge will be added.
- Inspect roof deck for any bad or rotten wood at a cost of \_\_\_\_\_ for 32 sq. ft. of plywood (4' x 8' sheet) and \_\_\_\_\_ per ft. of 1x's or 2x's.
- Apply a 15# felt paper to the roof surface prior to application of shingles.
- Apply starter shingle around entire perimeter of roof.
- Replace, if needed, any bad or worn pipe flashing at a cost of \$40.00 for lifetime lead flashing or rubber self-sealing flashing at no extra charge.
- Install, at homeowners request, passive vents @ \$30.00 ea. And ridge vent @ \$6.00 per ft. \_\_\_\_\_
- Apply a Fiberglass asphalt shingle to the entire roof deck, color and style of homeowner's choice.  
(certain colors are available only in 25 year shingles)  
20 year Three tab shingles \_\_\_\_\_ 30 year Architectural Shingles \_\_\_\_\_  
20 year Three tab shingles \_\_\_\_\_ Other \_\_\_\_\_

(Ask about our algae resistant shingles)

- Shingles are installed per manufacturer's specification, five electroplated nails per shingle.
- Seal entire roof by capping hip and ridges with single tab roofing shingles. Boston style.
- If needed, paint pipes and vents, re-secure all loose gutter and fascia, clean gutters and grounds of all roofing debris.
- Contractor provides a \_\_\_\_\_ year limited labor warranty for this application.
- Shingles come complete with a UL Class "A" Fire rating and Wind resistance rating.

### Optional Instructions:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

TOTAL COST \$19,115 Deposit: \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TERMS AND CONDITIONS ON THE REVERSE SIDE ARE UNDERSTOOD TO ALSO BE PART OF THIS CONTRACT.  
THIS PROPOSAL MAY BE WITHDRAWN IF NOT ACCEPTED WITHIN 30 DAYS.**

E-mail us: [snscontracting93@yahoo.com](mailto:snscontracting93@yahoo.com)

WHITE COPY - CONTRACTOR

YELLOW COPY - HOMEOWNER

PINK COPY - FILE



pd 10/25/21  
dda ✓ # 2573  
\$19,000.<sup>00</sup>

From: Nikki Beckman nbeckman@welsch-heatcool.com

Subject: Welsch Heating and Cooling

Date: May 13, 2026 at 11:55:56 AM

Attached is a copy of the paid invoice that has the model and serial number of all equipment Welsch completed.

*Nikki Beckman*  
*Welsch Heating and Cooling*  
*314-567-6349*  
*Nbeckman@welsch-heatcool.com*



2175 Welsch Industrial Court  
PO Box 28545  
St. Louis, MO 63146  
Phone: 314-872-8070  
Fax: 314-567-6349

**Invoice**  
**Date** 05/08/25  
**Invoice #** 158604J  
**Page 1 of 1**

**Bill to 59064**  
Marcie Brook  
651 Ashmont Drive  
Saint Louis, MO 63132

**Job# 39289**  
651 Ashmont Drive  
651 Ashmont Drive  
Saint Louis, MO 63132-

**Terms:** Payment is due upon compl **Salesman:** 865 - Dennis - Turin **Cust PO#** **Project Manager:** 520

**Job Description:** Installed two new Lennox furnace and air conditioner for second floor.  
Furn: ML196UH070XE36B (1725C36491)  
Furn: ML196UH090XE60C (1724D35536)  
Coil: CK40CT24B-71 (1524K24449)  
Coil: CK40CT60C-71 (1525C06423)  
AC Unit: ML14KC1024 (1925D49952)  
AC Unit: ML14KC1060 (1925A03901)

Original Amount: 16,600.00  
Change Orders: .00  
Total Contract: 16,600.00



noreply@warranty... 5/9/25

# Your Lennox Product Registration: SEM2UM

Dear MARCIE ,

Thank you for registering your new Lennox equipment.

Please find attached your Certificate of Coverage. Please save a copy of your Certificate of Coverage, along with your proof of purchase and installation date (for existing homes) or closing (for new construction), as you may need them to obtain warranty coverage.

Our records reflect that you have registered the following equipment:

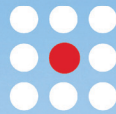
Serial Number	Product Type	Brand	Model	Parts Warranty Expiration	Lennox Labor Expiration
1925A03901	AIR CONDITIONER	LENNOX	ML14KC1-060-230A01	5/7/2035	N/A
1525C06423	COIL	LENNOX	CK40CT-60C-71	5/7/2035	N/A
1724D35536	FURNACE	LENNOX	ML196UH090XE60C-53	5/7/2035	N/A
1925D49952	AIR CONDITIONER	LENNOX	ML14KC1-024-230A02	5/7/2035	N/A
1524K24449	COIL	LENNOX	CK40CT-24B-71	5/7/2035	N/A
1725C36491	FURNACE	LENNOX	ML196UH070XE36B-55	5/7/2035	N/A

If this information is incorrect, or if you have a question or concern about your registration, please contact us at [product\\_registration@lennox.com](mailto:product_registration@lennox.com) (or just reply to this email) or 1-800-9-LENNO

Eligible equipment comes with a Basic Limited Warranty and the opportunity to receive an Extended Limited Warranty, if any, free of charge (together, the Basic Limited Warranty and Extended Limited Warranty are the "Limited Warranties"). We strongly recommend that you review the full terms, conditions, and exclusions of your Limited Warranties, which can be found by clicking here: [www.Lennox.com/WarrantyYourWay](http://www.Lennox.com/WarrantyYourWay). It is important that you become familiar with your Limited Warranties' terms and conditions (the "Terms"), which include, but are not limited to, requirements relating to maintenance and repairs. If you fail to comply with your Limited Warranties' Terms, it may result in the denial of a warranty claim.

PLEASE CAREFULLY REVIEW THE BASIC LIMITED WARRANTY'S DISPUTE RESOLUTION SECTION, WHICH INCLUDES AN ARBITRATION CLAUSE AND CLASS ACTION WAIVER. WHEN YOU REGISTERED YOUR EQUIPMENT, YOU RE-CONFIRMED YOUR AGREEMENT TO THE BASIC LIMITED WARRANTY'S TERMS, INCLUDING THE DISPUTE RESOLUTION SECTION





GLADYS

MANION  
REAL ESTATE

90 Years  
1936 - 2026



651 Ashmont Drive | Olivette







BUTLER FELSHER | GROUP  
ButlerFelsher.com

**Carol Butler** C: 314.630.3165  
**Juli-Ann Felsher** C: 314.303.3232  
**Gladys Manion's #1 Team 2025**



Locally Owned and Operated Since 1936  
314-721-4755  
GladysManion.com