

PROPERTY INFORMATION PACKET

THE DETAILS



1805 S. Exchange St. | Wichita, KS 67213

AUCTION: Saturday, December 5 @ 10:00 AM

12041 E. 13th St. N., Wichita, KS, 67206
316.683.0612 • 800.544.4489
www.McCurdyAuction.com



McCurdy
AUCTION LLC
REAL ESTATE SPECIALISTS



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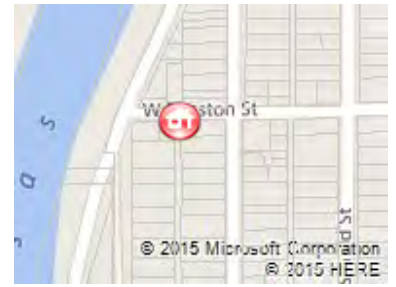
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This Property is selling in its present condition and is accepted by the buyer(s) without any expressed or implied warranties or representations from the seller(s) or his(her) agent(s). It is incumbent upon the buyer(s) to exercise his(her) own due diligence prior to bidding on this property. It is the responsibility of the prospective purchaser(s) to have any and all inspections completed prior to the auction day including, but not limited to, roof, structure, termite, environmental, groundwater, survey, encroachments, groundwater, flood designation, zoning designation, school zone designation, existence of any code violations, drainage, presence of lead-based paint and/or lead-based paint hazards, presence of radon, presence of asbestos, presence of mold, electrical, appliances, heating, air conditioning, mechanical, plumbing (to include water well, septic or lagoon compliance), sex offender registry information, flight patterns and any other desired inspections, if any. Information given is from sources deemed reliable but NOT guaranteed by the seller(s) or the Realtor(s)@/Auctioneer(s). Announcements made the day of the auction shall take precedence over anything previously stated or printed. There will be a 10% Buyers Premium (\$1,500 minimum) added to the high bid price to arrive at the final contract price.

ALL FIELDS CUSTOMIZABLE



MLS # 512496
Class Residential
Property Type Single Family OnSite Blt
County Sedgwick
Area 206
Address 1805 S Exchange Pl
Address 2
City Wichita
State KS
Zip 67213
Status Active
Contingency Reason
Asking Price \$0
Sale/Rent Auction
Original Price \$0



KEYWORDS

AG Bedrooms 2	Approx. AGLA 984
Total Bedrooms 2.00	AGLA Source Court House
AG Full Baths 1	Approx. BFA 0.00
AG Half Baths 0	BFA Source Court House
Old Total Baths 1.00	Approx. TFLA 984
Garage Size 2	Lot Size/SqFt 7033
Basement None	Number of Acres 0.16
Levels One Story	
Approximate Age 81+ Years	
Acreage City Lot	

GENERAL

Year Built 1900	Master Bedroom Level M
School District Wichita School District (USD 259)	Master Bedroom Dimensions 13'x9'10"
Elementary School Harry Street	Master Bedroom Flooring Wood
Middle School Hamilton	Living Room Level M
High School West	Living Room Dimensions 12'11"x18'
Subdivision ROSENTHAL SUBDIVISION	Living Room Flooring Wood
Legal LOTS 291-292 SUPL PLAT OF ROSENTHAL'S 5TH ADD.	Kitchen Level M
Sub-Agent Comm 0	Kitchen Dimensions 11'3"x11'
Buyer-Broker Comm 3	Kitchen Flooring Laminate - Other
Transact Broker Comm 3	Room 4 Type Bedroom
Variable Comm Non-Variable	Room 4 Level M
Virtual Tour Y/N No	Room 4 Dimensions 11'2"x9'7"
Input Date 11/10/2015 5:21 PM	Room 4 Flooring Wood
Update Date 11/10/2015	Room 5 Type Dining Room
	Room 5 Level M
	Room 5 Dimensions 7'x13'5"
	Room 5 Flooring Wood
	Room 6 Type
	Room 6 Level
	Room 6 Dimensions
	Room 6 Flooring
	Room 7 Type
	Room 7 Level
	Room 7 Dimensions
	Room 7 Flooring
	Room 8 Type
	Room 8 Level
	Room 8 Dimensions
	Room 8 Flooring
	Room 9 Type
	Room 9 Level
	Room 9 Dimensions
	Room 9 Flooring
	Room 10 Type
	Room 10 Level
	Room 10 Dimensions
	Room 10 Flooring

Room 11 Type
Room 11 Level
Room 11 Dimensions
Room 11 Flooring
Room 12 Type
Room 12 Level
Room 12 Dimensions
Room 12 Flooring

DIRECTIONS

Harry & Seneca - East to Greenway Blvd, South to Osie, East to Exchange, South to home.

FEATURES

ARCHITECTURE Traditional	FLOOD INSURANCE Unknown	KITCHEN FEATURES Range Hood Electric Hookup	POSSESSION At Closing
EXTERIOR CONSTRUCTION Vinyl/Metal Siding	UTILITIES Sewer Natural Gas Public Water	APPLIANCES Disposal Refrigerator Range/Oven Washer Dryer	WARRANTY No Warranty Provided
ROOF Composition	BASEMENT / FOUNDATION None	MASTER BEDROOM Master Bdrm on Main Level	OWNERSHIP Individual
LOT DESCRIPTION Standard	BASEMENT FINISH None	AG OTHER ROOMS Mud Room	PROPERTY CONDITION REPORT Yes
FRONTAGE Paved Frontage	COOLING Central	LAUNDRY Main Floor Separate Room 220-Electric	DOCUMENTS ON FILE Additional Photos Ground Water Lead Paint Sellers Prop. Disclosure
EXTERIOR AMENITIES Fence-Chain Guttering Sidewalks Storm Door(s) Storm Shelter Storm Windows/Ins Glass	HEATING Gas	INTERIOR AMENITIES Ceiling Fan(s) Hardwood Floors Window Coverings-Part	SHOWING INSTRUCTIONS Call Showing #
GARAGE Detached Carport	DINING AREA Formal		LOCKBOX SCKMLS
			TYPE OF LISTING Excl Right w/o Reserve
			AGENT TYPE Sellers Agent

FINANCIAL

Assumable Y/N	No	HOA Y/N	No
Currently Rented Y/N	No	Yearly HOA Dues	
Rental Amount		HOA Initiation Fee	
General Property Taxes	\$479.17	Home Warranty Purchased	No
General Tax Year	2015	Earnest \$ Deposited With	McCurdy Auction LLC Trust
Yearly Specials	\$4.88		
Total Specials	\$0.00		

PUBLIC REMARKS

ONSITE REAL ESTATE AUCTION ON SATURDAY, DECEMBER 5TH AT 10:00 A.M. NO MINIMUM, NO RESERVE!!! ESTATE - 2-Bedroom, 1-Bath home with 2-car detached garage. The property features sidewalks and a tree-lined lot for privacy. The front of the home has a large covered front porch adorned with wrought iron. The fenced backyard has a garage with alley access and a partially covered patio, built-in basketball goal and a concrete storm shelter. The interior of the home has hardwood floors and neutral colors throughout. The living room is adjacent to the formal dining room for a convenient entertaining layout. The eat-in kitchen has plenty of cabinetry, an oven and refrigerator. Separate laundry room with washer and dryer and storage cabinets. Central heat and air. *Verify schools. The real estate is offered at public auction in its present, "as is where is" condition and is accepted by the buyer without any expressed or implied warranties or representations from the seller or McCurdy Auction, LLC. It is incumbent upon buyer to exercise buyer's own due diligence, investigation, and evaluation of suitability of use for the real estate prior to bidding. It is buyer's responsibility to have any and all desired inspections completed prior to bidding including, but not limited to, the following: roof; structure; termite; environmental; survey; encroachments; groundwater; flood designation; presence of lead-based paint or lead based paint hazards; presence of radon; presence of asbestos; presence of mold; electrical; appliances; heating; air conditioning; mechanical; plumbing (including water well, septic, or lagoon compliance); sex offender registry information; flight patterns, or any other desired inspection. Any information provided or to be provided by seller or McCurdy was obtained from a variety of sources and seller and McCurdy have not made any independent investigation or verification of such information and make no representations as to the accuracy or completeness of such information. Auction announcements take precedence over anything previously stated or printed. Total purchase price will include a 10% buyer's premium (\$1,500.00 minimum) added to the final bid. The earnest money amount due at the auction from the high bidder is \$3,500.

AUCTION

Type of Auction Sale	No Minimum - No Reserve
Method of Auction	Live Only
Auction Location	Onsite
Auction Offering	Real Estate Only
Auction Date	12/5/2015
Auction Start Time	10:00 A.M.
Broker Registration Req	Yes
Buyer Premium Y/N	Yes
Premium Amount	10.00

Earnest Money Y/N Yes
Earnest Amount %/\$ 3,500.00

PERSONAL PROPERTY

ADDITIONAL PICTURES



DISCLAIMER

This information is not verified for authenticity or accuracy and is not guaranteed. You should independently verify the information before making a decision to purchase. © Copyright 2015 South Central Kansas MLS, Inc. All rights reserved.

Seller's Property Disclosure

(To be completed by Seller)

This report supersedes any list appearing in the MLS

Property Address: 1805 S. Exchange Pl. - Wichita, KS 67213

Seller:

Date of Purchase:

Message to the Seller: This statement is a disclosure of the condition of the above described Property known by the SELLER on the date that it is signed. It is not a warranty of any kind by the SELLER(S) or any real estate licensees involved in this transaction, and should not be accepted as a substitute for any inspections or warranties the BUYER(S) may wish to obtain. If you know something important about the Property that is not addressed on the Seller's Property Disclosure, add that information to the form. Prospective Buyers may rely on the information you provide.

Instructions: (1) Complete this form yourself. (2) Answer all questions truthfully and as fully as possible. (3) Attach all available supporting documentation. (4) Use explanation lines as necessary. (5) If you do not have the personal knowledge to answer a question, use the comment lines to explain.

By signing below you acknowledge that the failure to disclose known material information about the Property may result in liability.

Message to the Buyer: Although Seller's Property Disclosure is designed to assist the SELLER in disclosing all known material (important) facts about the Property, there are likely facts about the Property that the SELLER does not know. Therefore, it is important that you take an active role in obtaining the information about the Property.

Instructions: (1) Review this form and any attachments carefully. (2) Verify all important information. (3) Ask about any incomplete or inadequate responses. (4) Inquire about any concerns not addressed on the Seller's Property Disclosure. (5) Obtain professional inspections of the Property. (6) Investigate the surrounding area.

THE FOLLOWING ARE REPRESENTATIONS OF THE SELLER(S) AND ARE NOT INDEPENDENTLY VERIFIED BY THE BROKER(S) OR AGENTS(S).

PART I

APPLIANCES						ELECTRICAL					
		TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.			TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.
None	Does Not Transfer	Working	Not Working	Don't Know		None	Does Not Transfer	Working	Not Working	Don't Know	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke/Fire Detectors
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oven	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Switches/Outlets
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Range (Circle One) <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling Fan(s) <i>1</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bathroom Vent Fan(s)
					Built in (Circle One) <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone Wiring/Blocks/Jacks <i>Not tested</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Range Hood	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Door Bell
					Vented Outside (Circle One) <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Intercom
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kitchen Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garage Door Opener <i>for 1 door</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clothes Washer	# of Remotes: _____		Keypad Entry: (Circle One) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clothes Dryer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Aluminum Wiring
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Copper Wiring
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Central Vacuum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	220 Volt
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exterior Attached Gas Grill				<input checked="" type="checkbox"/>		Service Panel Total Amps
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security System
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	(Circle One) <input checked="" type="checkbox"/> Own <input type="checkbox"/> Rent/Financed					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	Company _____					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	Comments: <i>Rental property</i>					
Comments:											

BUYER'S INITIALS: _____

SELLER'S INITIALS: *[Signature]*

WATER/SEWAGE SYSTEMS (See Part II Also)					HEATING & COOLING SYSTEMS						
		TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.			TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.
None	Does Not Transfer	Working	Not Working	Don't Know		None	Does Not Transfer	Working	Not Working	Don't Know	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage Systems	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cooling System
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sump Pump	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electric Type
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Backup Sump Pump/Battery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Age
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Heating System
					Type	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gas Type
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Heater (Circle One) <input type="checkbox"/> Elect <input checked="" type="checkbox"/> Gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Age
					Size & Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Window/Wall Air Conditioning Units
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Instant Hot Water	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electronic Air Filter
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Softener	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Humidifier
					(Circle One) <input type="checkbox"/> Own <input type="checkbox"/> Rent/Lease	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fireplace
					Company	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fireplace Insert
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Purifier/Reverse Osmosis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wood burning Stove
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Underground Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chimney/Flue - Date Last Cleaned
					Backflow Device (Circle One) <input type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gas Log Lighter
					Date Last Tested or Inspected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Whole House Attic Fan
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pool Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Solar Equipment
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot Tub/Spa	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Propane Tank
Comments:					Comments:						
MEDIA					Any Additional Comments for Part I:						
		TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.	No basement - crawl space					
None	Does Not Transfer	Working	Not Working	Don't Know							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Satellite Dish						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	# of Rcvrs/Remotes						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Attached Antennaes						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cable TV Wiring/Jacks						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attached Television Mount(s)						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Projector(s)						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Projector Screen(s)						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surround Sound Speakers						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wired for Surround Sound						
Comments:											

BUYER'S INITIALS: _____

SELLER'S INITIALS: RPJ



PART II

Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.

Attach all relevant documentation for further explanation, including any and all repair reports.

YES	NO	DON'T KNOW	SECTION 1 STRUCTURAL FOUNDATION/WALLS
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are any exterior walls covered with Exterior Insulation & Finish System (synthetic stucco)? If YES, are you aware of any adverse conditions? _____
			Indicate all that apply: <input type="checkbox"/> Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> Slab
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any structural engineer's report(s) available? If YES, Date of Report: _____ Copy Attached? (Mark One): <input type="checkbox"/> YES <input type="checkbox"/> NO
			<i>To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Movement, shifting, deterioration or other problems with walls or foundation?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cracks or flaws in the walls, floors or foundation?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Problems with driveways, walkways, patios, retaining walls, party walls?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Problems with operation of windows or doors, or broken seals?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any corrective actions to items in this section? (Example - Piering, bracing, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any transferable warranties? Date: _____ (If YES, explain below and attach copy.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there insulation in the walls?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there insulation in the floors?
Additional Comments:			
YES	NO	DON'T KNOW	SECTION 2 ROOF/INSULATION
			Age: _____ Type: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, are there any <input type="checkbox"/> PAST <input type="checkbox"/> PRESENT roof leaks? (Mark One) If any, identify details below.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	During your ownership, has the roof ever been <input type="checkbox"/> REPLACED? <input type="checkbox"/> REPAIRED? (Mark One) If YES, Date: _____ (Identify details below.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are there any transferable warranties? Date: _____ (If YES, explain below and attach copy.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you know of any problems with chimneys or chases? (If YES, explain below.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you know of any problems with roof, roof structure or rain gutters? (If YES, explain below.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there insulation in the ceiling/attic?
Additional Comments: <i>Roof is composite shingles, not replaced within the last few years but exact date is unknown.</i>			
YES	NO	DON'T KNOW	SECTION 3 MOLD/MILDEW
According to the EPA, molds are part of the natural environment. Molds reproduce by means of tiny spores that are invisible to the naked eye, and float through outdoor and indoor air. Mold may begin growing indoors when mold spores land on surfaces that are wet. Inhaling or touching mold spores may cause allergic reactions in sensitive individuals.			
			<i>To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Presence of any mold/mildew in the property?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any problems created by mold or mildew for occupants of the structure during your ownership?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have you had any inspections for mold or mildew? If YES, Date: _____ (If YES, explain below.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have you received any reports pertaining to mold or mildew on or within the structure? (If YES, attach.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the property had any professional mold remediation during your ownership? If YES, Date: _____
Additional Comments:			

BUYER'S INITIALS: _____

SELLER'S INITIALS: *REP*

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Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.
Attach all relevant documentation for further explanation, including any and all repair reports.

YES	NO	DON'T KNOW	SECTION 4	
WATER/SEWAGE SYSTEMS				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property connected to City Water?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to Rural Water? If YES, Transfer Fee: _____ District: _____	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to any private water systems? (Mark all that apply.)	
			<input type="checkbox"/> Drinking Well	<input type="checkbox"/> Irrigation Well <input type="checkbox"/> Geo-Thermal Well
			Type: _____ Location: _____ Depth: _____	
			Type: _____ Location: _____ Depth: _____	
			Type: _____ Location: _____ Depth: _____	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the water in any wells shown test results of contamination? (If YES, explain below.)	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a public sewer system? If shared lagoon/septic system, explain below.	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a septic system? Date Last Pumped: _____	
			Tank Size: _____ Location: _____	
			# feet laterals: _____ # Feet infiltrators: _____ Location: _____	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a lagoon system? Location: _____	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to some other type of waste disposal system? (If YES, explain below.)	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, is there any problem relating to the waste disposal system?	
Additional Comments:				
YES	NO	DON'T KNOW	SECTION 5	
WATER INTRUSION/LEAKS				
<i>To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)</i>				
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any water leakage in or around the fireplace or chimney?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any water leakage around (If YES, mark all that apply.) <input type="checkbox"/> WINDOWS <input type="checkbox"/> SKYLIGHTS <input type="checkbox"/> DOORS?	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any leaks occurring in any plumbing, water supply lines, drains, sewer lines, etc.?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any leaks caused by appliances?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any leaks from any condensation drain lines, humidifier, dehumidifier, etc.?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any water leakage into (If YES, mark all that apply.) <input type="checkbox"/> BASEMENT <input type="checkbox"/> CRAWL SPACE	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any accumulation of water within the basement/crawl space?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sump Pump(s) Location(s): _____	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Drain Tiles (If YES, mark all that apply.) <input type="checkbox"/> INTERIOR <input type="checkbox"/> EXTERIOR	
Additional Comments: <i>plumbing line leak was repaired, line replaced.</i>				
YES	NO	DON'T KNOW	SECTION 6	
PEST, WOOD INFESTATION & DRY ROT				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do you have any knowledge of the following items on/affecting the property? (Mark all that apply.)	
			<input type="checkbox"/> WOOD DESTROYING INSECTS	<input type="checkbox"/> DRY ROT <input type="checkbox"/> OTHER WOOD INFESTATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any knowledge of any damage to the property caused by the following items? (Mark all that apply.)	
			<input type="checkbox"/> WOOD DESTROYING INSECTS	<input type="checkbox"/> DRY ROT <input type="checkbox"/> OTHER WOOD INFESTATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have there been any repairs of such damage? (If YES, explain below.)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property currently under a termite warranty or other coverage by a licensed pest control company?	
			Company: _____	Warranty Expiration Date: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any wood destroying insects control reports in the last 5 years? (If YES, explain below.)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any professional wood destroying insects control treatments in the last 5 years? (If YES, explain below.)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any pest control reports in the last 5 years? (If YES, explain below.)	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any professional pest control treatments in the last 5 years? (If YES, explain below.)	
Additional Comments: <i>House was sprayed for pests on August 11, 2015. Termite inspection at that time did not reveal any termite infestation.</i>				

BUYER'S INITIALS: _____

Pg 4 of 7

SELLER'S INITIALS: *RH*



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Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.
Attach all relevant documentation for further explanation, including any and all repair reports.

SECTION 7			
YES	NO	DON'T KNOW	
ENVIRONMENTAL CONDITIONS			
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is the property located in a subdivision with a master drainage plan?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	If YES, is the property in compliance?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Has the property ever had any drainage problems during your ownership? (If YES, explain below.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any producing or non-producing gas/oil wells on the property or adjacent property?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Do mineral rights convey to buyer? If NO, please define: _____
Groundwater contamination has been detected in several areas in the State of Kansas.			
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are you aware of groundwater contamination or other environmental concerns?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any reports or records pertaining to groundwater contamination or other environmental concerns:
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any diseased or dead trees and shrubs?
To your knowledge, are any of the following substances, materials, products on the real property? (YES or NO Only.)			
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Asbestos
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Contaminated soil or water (including drinking water)
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Landfill or buried materials
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Lead-based paint (If YES, attach disclosure.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Radon gas in house or well If YES, has mitigation been performed? (Mark One) <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Methane Gas
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Oil sheers in wet areas
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Radioactive material
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Toxic material disposal (solvents, chemicals, etc.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Underground fuel or chemical storage tanks
<input type="checkbox"/>	<input checked="" type="checkbox"/>		EMFs (Electro Magnetic Fields)
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Urea formaldehyde foam insulation (UFFI)
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Other: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Are you aware if any portion of the property has ever been used for the manufacture of, or storage of, chemicals or equipment used in manufacturing methamphetamine, ecstasy, LSD or any other illegal substances?
<input type="checkbox"/>	<input checked="" type="checkbox"/>		To your knowledge, are any of the above conditions present near your property?
Comments:			
SECTION 8			
YES	NO	DON'T KNOW	
BOUNDARIES/LAND			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Have you had a survey of the property? (If YES, attach copy if available.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are the boundaries of your property marked in any way?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there any fencing on the boundaries of the property?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Does fencing belong to the property? If YES, which sides? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any features of the property shared in common with adjoining landowners, such as, walls, fences, roads, driveways? (If YES, explain below.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is the property owner responsible for maintenance of any such shared feature(s)?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	To your knowledge, are there any boundary disputes, encroachments, or unrecorded easements?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	To your knowledge, is any portion of the property located in a federally designated flood plain?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Do you currently, or have you ever, paid flood insurance for the property?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	To your knowledge, is any portion of the property located in a designated wetlands area?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Do you know of any of the following items that have occurred on the property or in the immediate area?
(Mark all that apply.)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EXPANSIVE SOIL
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FILL DIRT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SLIDING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SETTLING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EARTH MOVEMENT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	UPHEAVAL
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EARTH STABILITY PROBLEMS
Comments:			

BUYER'S INITIALS: _____

SELLER'S INITIALS: RVG

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Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.
Attach all relevant documentation for further explanation, including any and all repair reports.

YES	NO	DON'T KNOW	SECTION 9 SPECIAL ASSESSMENTS AND HOMEOWNER'S ASSOCIATION
The law requires that the Seller disclose the existence of special assessments against a property.			
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any current/pending bonds, assessments, or special taxes that apply to property?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The property may be subject to special assessments or is located in an improvement district? (Refer to relevant tax disclosure - Mark One). <input type="checkbox"/> Owner <input type="checkbox"/> County <input type="checkbox"/> Public Record <input type="checkbox"/> Other: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property subject to rules or regulations of an active Homeowner's Association? Annual Dues? _____ Initiation Fee? _____
		<input type="checkbox"/>	Homeowner's Association contact information: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property subject to a right of first refusal?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property subject to covenants, conditions, and restrictions of a Homeowner's Association or subdivision restrictions?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any violations of such covenants and restrictions?
Comments:			
YES	NO	DON'T KNOW	SECTION 10 MISCELLANEOUS
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Have any improvements or repairs (including, but not limited to, HVAC, plumbing, electrical, structural additions) been made to the property without obtaining required permits ?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are any local, state, or federal agencies requiring repairs, alterations, or corrections of any existing conditions?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the present use of the property a non-conforming use?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Have you had any insurance claims in the past five years?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Were repairs made? If so,
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there any unrepaired damage due to hail, storm, wind, fire or flood?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are there any stains, tears, burns, holes, etc., in the property that are not readily visible?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Does a pet(s) reside or has a pet(s) ever resided in or on the property?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is there any damage due to pets, interior/exterior, including, but not limited to, odors, stains, etc.?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do all window and door treatments remain? If NO, please list: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does any other personal property remain? If YES, please list: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Does the property contain any of the following? (Mark all that apply.) <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Spa <input type="checkbox"/> Hot Tub <input type="checkbox"/> Sauna <input type="checkbox"/> Water Feature
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If YES, are either of the following heated? <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Spa If yes, type of heat? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are you aware of any past or present problems relating to the swimming pool, spa, hot tub, sauna or water feature? Explain: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is the property in a holistic, conservation or special review district, that requires any alterations or improvements to the Property, be approved by a board or commission?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any other facts, conditions, or circumstances, on or off site, which could affect the value, beneficial use, or desirability of the property?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any transferable warranties on the property or any of its components?
Comments:			
Any Additional Comments For Part II:			

215 BUYER'S INITIALS: _____

SELLER'S INITIALS RLP



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SELLER'S ACKNOWLEDGEMENT

217 Seller acknowledges that: the information contained in this disclosure is accurate, true and complete to the best
218 of Seller's knowledge, information and belief; Seller has provided all the information contained in this Seller's
219 Property Disclosure; and that the Broker/Realtor® has not prepared, nor assisted in the preparation of this
220 Disclosure. Seller hereby indemnifies, holds harmless and releases all Brokers/Realtors® involved in the sale of
221 the property from all liability, claims, loss, cost, or damage in connection with the information contained in this
222 Disclosure. Seller hereby authorizes the listing broker to provide copies of this Disclosure to other real estate
223 brokers and agents and prospective buyers of the property.

224 Seller is occupant: YES NO

225 Seller certifies that the information herein is true and correct to the best of the Seller's knowledge as of the date
226 signed by Seller.

227 SELLER: _____ SELLER: RKP 10/12/15
228 Date Date

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BUYER'S ACKNOWLEDGEMENT AND AGREEMENT

230 1. I have personally inspected the property. I will rely upon the inspections encouraged under my contract with
231 Seller. Subject to any inspections, I agree to purchase the property in its present condition without
232 representations or guarantees of any kind by the Seller or any REALTORS® concerning the condition or value of
233 the property.

234 2. I agree to verify any of the above information that is important to me by an independent investigation of my
235 own. I have been advised to have the property examined by professional inspectors.

236 3. I acknowledge that neither Seller nor any REALTORS® involved in this transaction is an expert at detecting or
237 repairing physical defects in the property. I state that no important representations concerning the condition of
238 the property are being relied upon by me except as disclosed above or as fully set forth as
239 follows: _____

240 4. I acknowledge that I have been informed that Kansas Law requires persons who are convicted of certain
241 sexually violent crimes after April 14, 1994, to register with the sheriff of the county in which they reside. I have
242 been advised that if I desire information regarding those registrants, I may find information on the home page of
243 the Kansas Bureau of Investigation (KBI) at www.ink.org/public/kbi or by contacting the local sheriff's office.

244 5. I acknowledge that McConnell Air Force Base is located within Sedgwick County and is an operational military
245 Air Force base that is open 24 hours a day and activity at that base may generate noise. The volume, pitch,
246 amount and frequency of noise may be affected by future changes in McConnell Air Force Base activity. I have
247 been informed that if I desire information regarding potential for noise caused by the aircraft operations
248 associated with McConnell Air Force Base and its operations, I may find information by contacting the
249 Metropolitan Area Planning Department.

250 BUYER: _____ BUYER: _____
251 Date Date

252 This form is approved by legal counsel for the Wichita Area Association of REALTORS® exclusively for use by members of the Wichita Area
253 Association of REALTORS® and other authorized REALTORS®. No warranty is made or implied as to the legal validity or adequacy of this
254 form, or that its use is appropriate for all situations. Copyright March 2014.

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**DISCLOSURE OF INFORMATION AND ACKNOWLEDGMENT
LEAD-BASED PAINT AND/OR LEAD-BASED PAINT HAZARDS**

Property Address 1805 S. Exchange Pl. - Wichita, KS 67213

Lead Warning Statement

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 that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

SELLER'S DISCLOSURE (please complete both a and b below)

(a) Presence of lead-based paint and/or lead-based paint hazards (*initial one*):

Seller has no knowledge of lead-based paint and/or lead based paint hazards in the housing; *or*

Known lead-based paint and/or lead-based paint hazards are present in the housing (explain):

(b) Records and Reports available to the Seller (*initial one*):

Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing; *or*

_____ Seller has provided the Buyer with all available records and reports pertaining to lead-based paint and/or lead-based hazards in the housing (list documents below):

BUYER'S ACKNOWLEDGMENT (please complete c, d, and e below)

_____ (c) Buyer has received copies of all information listed above. (*initial*)

_____ (d) Buyer has received the pamphlet *Protect Your Family from Lead Paint in Your Home*. (*initial*)

(e) Buyer has (*initial one*):

_____ Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint or lead-based paint hazards; *or*

_____ Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

AGENT'S/LICENSEE'S ACKNOWLEDGMENT (initial below)

(f) Agent/Licensee has informed the Seller of the Seller's obligation under 42 U.S.C. 4852 d and is aware of his/her responsibility to ensure compliance.

CERTIFICATION OF ACCURACY

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

Seller Date 10/12/15

Buyer Date

Seller Date

Buyer Date

Agent/Licensee Date 10-12-15

Agent/Licensee Date



Water Well, Lagoon & Septic Ordinance City of Wichita & Sedgwick County

Property Address: 1805 S. Exchange Pl. - Wichita, KS 67213

1. Within the **City of Wichita**, any property with any type of water well must have an inspection when the property is being transferred. The property owner is required to notify the Health Department, and is responsible for the \$125.00 inspection fee. If the water well on the property is used for personal use (drinking, cooking or bathing) it must be sampled as well. An additional sample fee of \$25.00 per sample will be charged. If the well is for irrigation purposes only, the inspection must be conducted; however the water sample is optional. The City of Wichita will bill for the inspection and sample.
2. In **Sedgwick County** (not within the city of Wichita) Code Enforcement charges fees of \$60 for wastewater inspection (Septic/Lagoon), \$50 for Water Well (Drinking/Irrigation), or \$100 for both system inspections. If a water sample is required, it is an additional \$45. Sedgwick County requires payment prior to scheduling inspections.
3. All water wells must be located a minimum of 25 feet from a foundation that has been treated for termites (or will require treatment prior to transfer of ownership) with a subsurface pressurized application of a pesticide. Existing wells may remain in a basement if they are not within 10 feet of main sewer line or within 25 feet of foundation if no termite treatment has occurred or is currently needed.
4. All wastewater septic and lagoon systems must be inspected prior to property transfer. Prior to scheduling septic inspection, the septic tank must be pumped and inspection must be made at the same time of pumping. Please coordinate this inspection with your septic pumping company and the city/county inspector. Lagoon systems do not need pumping prior to transfer; however, an inspection by the Health Department is required.

DOES THE PROPERTY HAVE A WELL? YES _____ NO X

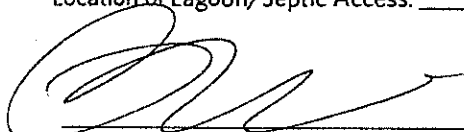
If yes, what type? Irrigation _____ Drinking _____ Other _____

Location of Well: _____

DOES THE PROPERTY HAVE A LAGOON OR SEPTIC SYSTEM? YES _____ NO X

If yes, what type? Septic _____ Lagoon _____

Location of Lagoon/Septic Access: _____


Owner _____

10/10/15
Date _____

Owner _____

Date _____

ADDENDUM _____
(Groundwater)

THIS ADDENDUM to Contract for Sale and Purchase of Real Estate between and among the undersigned is entered into effective on the last date set forth below.

Groundwater contamination has been detected in several areas in and around Sedgwick County. Licensees do not have any expertise in evaluating environmental conditions.

The parties are proposing the sale and purchase of certain property, commonly known as:
1805 S. Exchange Pl. - Wichita, KS 67213

The parties are advised to obtain expert advice in regard to any environmental concerns.

SELLER'S DISCLOSURE (please complete both a and b below)

(a) Presence of groundwater contamination or other environmental concerns **(initial one):**

RRP Seller has no knowledge of groundwater contamination or other environmental concerns; or
_____ Known groundwater contamination or other environmental concerns are:

(b) Records and reports in possession of Seller **(initial one):**

RRP Seller has no reports or records pertaining to groundwater contamination or other environmental concerns; or
_____ Seller has provided the Buyer with all available records and reports pertaining to groundwater contamination or other environmental concerns (list document below):

BUYER'S ACKNOWLEDGMENT (please complete c below)

(c) _____ Buyer has received copies of all information, if any, listed above. **(initial)**

CERTIFICATION

Seller certifies, to the best of Seller's knowledge, that the information Seller has provided is true and accurate and that Buyer and all licensees involved are relying on Seller's information. Buyer certifies that Buyer has reviewed Seller's responses and any records and reports furnished by Seller.

[Signature] _____ 10/12/15
Seller Date

Buyer Date

Seller Date

Buyer Date

This form is approved by legal counsel for the Wichita Area Association of REALTORS® exclusively for use by members of the Wichita Area Association of REALTORS® and other authorized REALTORS®. No warranty is made or implied as to the legal validity or adequacy of this form, or that its use is appropriate for all situations.

1805 S. Exchange Pl., Wichita, KS 67213

Zoning- SF-5 Single Family



Geographic Information Services
 Division of Information & Operations
www.sedgwickcounty.org/gis
 525 N. Main, Suite 212, Wichita, KS 67203
 Tel: 316.660.9290 Fax: 316.262.1174
 Thu Oct 1 08:49:37 GMT-0500 2015

DISCLAIMER: It is understood that, while Sedgwick County Geographic Information Services (SCGIS), City of Wichita GIS, (for purposes of the road centerline file), participating agencies, and information suppliers, have no indication or reason to believe that there are inaccuracies in information provided, SCGIS, its suppliers make no representations of any kind, including, but not limited to, warranties of merchantability or fitness for a particular use, nor are any such warranties to be implied with respect to the information, data or service furnished herein. In no event shall the Data Providers become liable to users of these data, or any other party, for any loss or damages, consequential or otherwise, including but not limited to time, money, or goodwill, arising from the use, operation or modification of the data. In using these data, users further agrees to indemnify, defend, and hold harmless the Data Providers for any and all liability of any nature arising out of or resulting from the lack of accuracy or correctness of the data, or the use of the data. No person shall sell, give or receive for the purpose of selling or offering for sale, any portion of the information provided herein.



1805 S. Exchange Pl., Wichita, KS 67213-Flood Zone



Legend

Flood Zones

- 0.2 PCT ANNUAL CHANCE FLOOD
- A; AE; AH; AO
- X PROTECTED BY LEVEE
- X
- Parcels

This information is not an official record, and cannot be used as such. The user should rely only upon official records available from the custodian of records in the appropriate City and/or County department. Some data provided here and used for the preparation of these maps has been obtained from public records not created or maintained by the City of Wichita.

1: 1,352

Map Created On: 10/1/15 9:03 AM

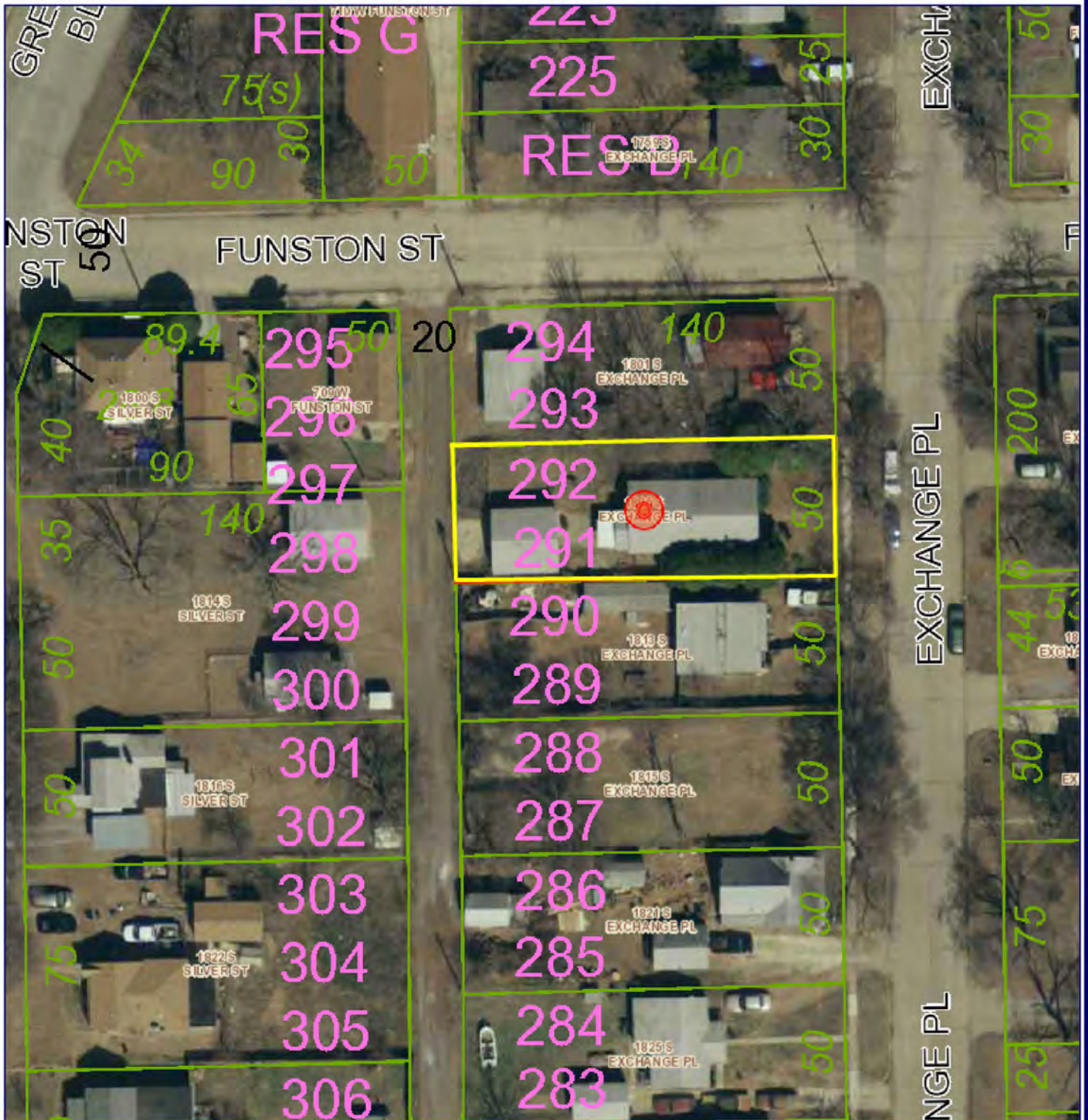
1805 S. Exchange Pl., Wichita, KS 67213 Proposed FEMA Flood Zones - dFIRM Preliminary



This Application displays the PRELIMINARY floodplain boundaries received from the Kansas Department of Agriculture Divisions of Water Resources on January 21, 2015. The boundaries will be finalized in 2016. This preliminary map is subject to change. Changes between the current and preliminary flood zones are displayed on the map. Green indicates new 100-year flood zones areas the 100-year flood zone, but are no longer included based on the new boundaries. Yellow indicates flood zone areas that have not changed. Red indicates new 100-year flood zones areas based on the new boundaries. A 30-day, non-technical comment period begins on January 23, 2015. During this time the public can ask questions regarding street names, political boundaries, and other information aside from the actual floodplain boundaries and base flood elevations. A 90-day comment period for technical questions will begin in early May 2015. Public comments should be directed to Tom Morey or Dane Bailey with the Kansas Department of Agriculture Division of Water Resources. <https://gismaps.sedgwickcounty.org/mabcd/fema/> or call 316-660-1840

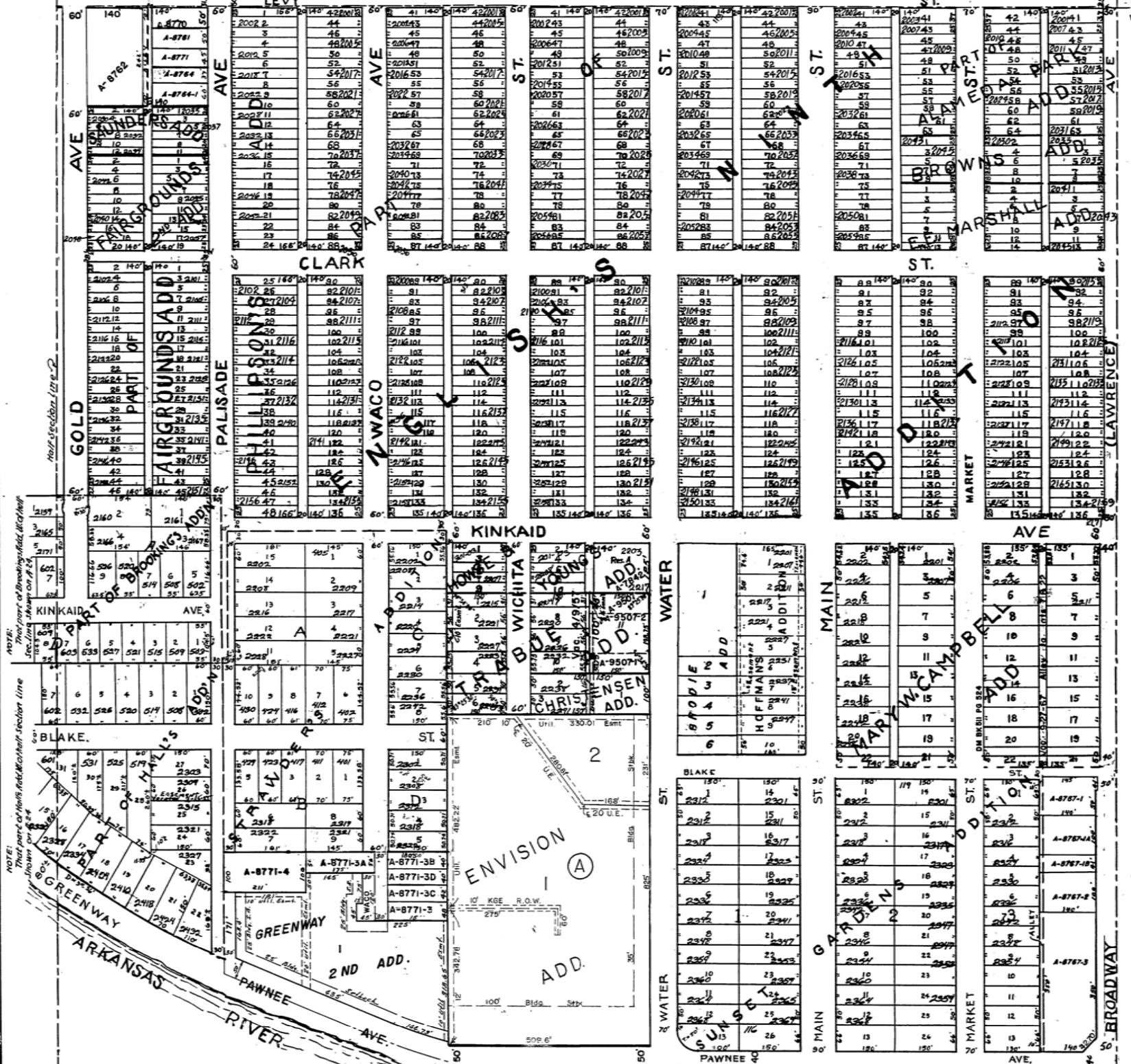
1805 S. Exchange Pl., Wichita, KS 67213

Aerial



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NOTE: This part of Block 140 and West half section line shown on P.L. 2

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GUIDE TO AUCTION COSTS

WHAT TO EXPECT

THE SELLER CAN EXPECT TO PAY

- Half Owners Title Insurance Premium
- Real Estate Commission *(If Applicable)*
- Half of the Closing Fee
- Advertising Costs
- Payoff of Loans, Including Accrued Interest, Statement Fees, Reconveyance Fees and Any Prepayment
- Any Judgements, Tax Liens, Etc. Against The Seller
- Recording Charges Required to Convey Clear Title
- Any Unpaid Taxes and Tax Proation for the Current Year
- Any Unpaid Homeowner Association Dues
- Rent Deposits and Prorated Rents *(If Applicable)*

THE BUYER CAN GENERALLY EXPECT TO PAY

- 10% Buyer's Premium *(If Applicable)*
- Half Owners Title Insurance Premium
- Lender's Title Policy Premiums *(If Obtaining Financing)*
- Half of the Closing Fee
- Document Preparation *(If Applicable)*
- Notary Fees *(If Applicable)*
- Recording Charges For All Documents in Buyer's Name
- Home Owners Association Transfer / Set Up Fee *(If Applicable)*
- All New Loan Charges *(If Obtaining Financing)*
- Homeownere's Insurance Premium for First Year
- All Pre-Paid Deposites for Taxes, Insurance, PMI, etc. *(If Applicable)*

