

SELLER'S STATEMENT OF PROPERTY CONDITION

(6 PAGES)

As per Chapter 146 of the Acts of 1999, an Act for the Licensing of Home Inspectors, home inspectors are required to follow the Massachusetts Standards of Practice and Code of Ethics. As part of the Standards, the home inspector shall attempt to ascertain information about the home from the *Seller* or the *Seller's Representative*.

Info for the Prospective Buyer: According to 266 CMR 6.01 (5) "*Home inspectors* are required to notify his or her *Client* that answers to the following questions should be ascertained from the *Seller* and are relevant to the purchase of a house and may not be *Readily Observable*:"

For your protection and to aid the home inspector, answers to the following questions should be obtained from the property owner prior to your scheduled home inspection. This disclosure form is **not** a substitute for and inspections, nor is it a warranty.

Questions for the Home Owner: "The *Home Inspector* shall not represent to the *Seller* or *Client* that there is any legal obligation, duty or requirement on behalf of the *Seller's Representative* to answer the questions set forth in 266 CMR 6.01 (5) unless otherwise required by law."

Your voluntary responses to the questions listed below will help the prospective home buyer(s) with their true understanding and purchase decisions. This disclosure form is **not** a warranty of the property either the *Seller* or the *Seller's Representative*. Note: The first 10 questions are set forth in 266 CMR 6.01 (5); the remainder of the questions are provided by Allsafe Home Inspection Service, Inc.

Property Address: _____

1. Does the Dwelling have a history of **seepage, dampness**, and or **water penetration** into the basement and or crawl space, if so please explain?

No Yes

Has a **sump pump** ever been installed or used in the basement/crawl space?

No Yes

Do you use any type of **dehumidifier** in any part of the Dwelling?

No Yes

In addition are you aware of any **mold** or **air quality issues** in the Dwelling?

No Yes

2. Is the Dwelling on **public** or **private sewage systems**?

Public Private sewage system

If the waste system is private, has a **Title V** inspection been completed?

No Yes

If so, is the completed **Title V report** available for review?

No Yes

3. Has the Dwelling ever been **inspected** and or **treated** for **insect infestation**?

No Yes If so when and what were the chemicals used?

4. Are there any **asbestos** products in the Dwelling and or on the property?

No Yes If so where?

<p>5. Has the Dwelling ever been tested for radon gas and or lead paint? Radon gas <input type="checkbox"/> No <input type="checkbox"/> Yes If so, when and what were the results? Lead paint <input type="checkbox"/> No <input type="checkbox"/> Yes, If so, when and what were the results?</p>
<p>6. Has the Dwelling ever been inspected by a Home Inspector? <input type="checkbox"/> No <input type="checkbox"/> Yes If so when?</p>
<p>7. Are the Seller and of the Seller's Representative aware of any structural, mechanical, electrical, or other defect that may exist on the property? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>8. Has there ever been a fire in the Dwelling? <input type="checkbox"/> No <input type="checkbox"/> Yes If so when and what areas were involved, what chemical cleaners, if any were used for cleanup?</p>
<p>9. Has there ever been a hazardous waste spill on the property? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>10. Is there an underground oil tank on the property? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>11. Seller has lived in the home from _____ (date) to _____ (date) How old is the home? _____ years or year constructed _____? How old are the additions? _____ years How old are the additions? _____ years</p>
<p>12. Are you aware of any remodeling, additions, alterations, repairs or replacements done without building permits (structural, electrical, mechanical or plumbing) issued and final inspections completed by municipal or governmental authorities? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>13. Are there any zoning violations, nonconforming uses, or any unusual restrictions on the property that would affect future construction or remodeling? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>14. Is the property or part of it located in a flood plain or wet land area? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, has the property ever been under water / flooded? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain:</p>

<p>15. Do you know of any ENCROACHMENTS, BOUNDARY DISPUTES, COVENANTS, or EASEMENTS (electrical, plumbing, buried public sewage, street drains) Rights of Way, SHARED DRIVEWAYS? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>16. Are there any OWNER'S ASSOCIATION or "COMMON AREA" EXPENSES or ASSESSMENTS? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Not applicable If yes please explain:</p>
<p>17. Are you aware of any environmental health or safety issues around the building (such as abandoned wells, abandoned cesspools or abandoned septic tanks)? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain</p>
<p>18. What is the approximate age of the ROOF covering on the main section of the building? Primary ROOF? _____ years Rear wing? _____ years Left wing? _____ years Right wing? _____ Porch? _____ year. Garage roof _____ years. Other area _____ years.</p> <p>Will you grant the inspector permission to climb on the roof at his or her own risk and also relieve the Home Inspector of all responsibility of possible damage to the roof? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>19. Are you aware of any previous water penetration from the ROOF, CHIMNEY, FLASHINGS, SKYLIGHTS, WINDOWS, DOORS, SIDING or any other part of the building envelope? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain</p>
<p>20. Approximate date CHIMNEY was last cleaned and inspected? _____ Are you aware of any chimney or fireplace problems? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>21. Approximate age of FURNACE / BOILER OR HEAT PUMP #1: _____ years #2: _____ years #3: _____ years</p> <p>What is the approximate date of last heating system service? _____ Are you aware of any rooms that are not heated? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain:</p>
<p>22. Approximate age of the CENTRAL AIR CONDITIONING SYSTEM? #1: _____ years #2: _____ years #3: _____ years</p> <p>What is the approximate date of last AC systems were last serviced? _____ Are you aware of any rooms that are not cooled? <input type="checkbox"/> No <input type="checkbox"/> Yes If so, please explain:</p>

<p>23. Are the heating and cooling systems in need of any repairs? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>24. How old is the WATER HEATER? _____ years. <input type="checkbox"/> Owned <input type="checkbox"/> Rented Do you ever run out of hot water? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>25. Do you have any problems with FUSES CIRCUIT BREAKERS, OUTLETS or WIRING? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>26. Is a WOOD STOVE or COAL STOVE present? <input type="checkbox"/> No <input type="checkbox"/> Yes Was a PERMIT obtained and inspection completed for the stove? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>27. How old are the KITCHEN APPLIANCES? Range _____ Dishwasher _____ Disposer _____ Wall oven _____ Microwave _____ Other: _____ Are all kitchen appliances in working condition? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>28. Is the ATTIC INSULATED? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unknown Are the WALLS INSULATED? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unknown Is the BASEMENT CEILING INSULATED? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unknown Are the BASEMENT WALLS INSULATED? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unknown Is the CRAWL SPACE INSULATED? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unknown</p>
<p>29. Are there any appliances, equipment or fixtures the inspector should not attempt to operate? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>30. Are there any rooms or areas of the building the inspector should not enter? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>31. Are there any crawl spaces or other areas that the inspector might not readily find? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>32. Are you aware of any hazards an inspector might encounter in the living areas, attic, fireplaces, basement or crawl spaces, such as pets, raccoons, rodents, bats, snakes, bees, spiders? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>33. Are you aware of any exterior cladding / siding or trim damage or deficiencies? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>

<p>34. Are you aware of any structural deficiencies in the foundation, columns, floor frame, wall frame, roof frame or staircases: <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>35. Are you aware of any seasonal drainage problems on the property (such as ponding water on the walkways, driveway, or yard; or erosion problems)? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>36. Were any needed repairs already disclosed to the buyer? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain</p>
<p>37. Are you aware of any items that are NOT in working condition, that have known defects or that are in need of repair? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>38. Does the home have working fire and carbon monoxide detectors? <input type="checkbox"/> No <input type="checkbox"/> Yes Has the fire department inspected the fire and carbon monoxide detectors yet? <input type="checkbox"/> No <input type="checkbox"/> yes</p>
<p>39. Is your drinking water private or public? <input type="checkbox"/> Private well <input type="checkbox"/> Public water If a well is present, when was the water last tested? What were the test results? How old is the well pump? _____ years Do you have a softener, filter or other purification system? <input type="checkbox"/> No <input type="checkbox"/> Yes Where is the well located?</p>
<p>40. Are you aware of any plumbing leaks, back-ups or other problems relating to any part of the plumbing system? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>41. Is a lawn irrigation system present? <input type="checkbox"/> No <input type="checkbox"/> Yes Are you aware of any past or present problems with the system? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>
<p>42. Does the property contain any of the following? (chosed 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 If yes, are you aware of any past or present problems with the above? <input type="checkbox"/> No <input type="checkbox"/> Yes If so please explain:</p>

43. Are you aware of any fill, expansive soil, sliding, settling, earth movement, upheaval, subsidence or earth stability problems that have occurred on or that affect the property?
[] No [] Yes If so please explain:

44. Are there any other existing material defects or significant expense repairs affecting the property not listed on this form that a prospective buyer should know about?
[] No [] Yes
If so please explain:

Additional Comments: (Attach a separate page if needed)

Thank you for your cooperation in filling out this questionnaire. *Seller* states that the information contained on this **Statement of Property Condition** is correct to the best of the *Seller's* CURRENT ACTUAL KNOWLEDGE on this date. *Seller* or *Seller's Representative* please print your name, sign and date this form, and return it to the *Buyer* or the *Home Inspector*.

Owner's name – Please print

Owner's name – Please sign

Date

Seller's agent – Please print

Seller's agent – Please sign

Date

BUYER PLEASE READ:

IF THE SELLER OR THE SELLER'S REPRESENTATIVE IS NOT AVAILABLE IT IS STRONGLY RECOMMENDED THAT YOU, THE CLIENT, OBTAIN THE ANSWERS TO THE ABOVE QUESTIONS. YOU SHOULD SEEK FULL DISCLOSURE PRIOR TO AGREEING TO PURCHASE THE PROPERTY.

PLEASE RETURN THIS COMPLETED QUESTIONNAIRE TO THE INSPECTOR.