

The printed portions of this form, except differentiated additions, have been approved by the Colorado Real Estate Commission.
(SPD19L-6-17) (Mandatory 1-18)

THIS FORM HAS IMPORTANT LEGAL CONSEQUENCES AND THE PARTIES SHOULD CONSULT LEGAL AND TAX OR OTHER COUNSEL BEFORE SIGNING.

SELLER'S PROPERTY DISCLOSURE

- LAND Supplement to Residential)**
 LAND – With Improvements)
 LAND – Without Improvements)

THIS DISCLOSURE SHOULD BE COMPLETED BY SELLER, NOT BY BROKER.

Seller states that the information contained in this Disclosure is correct to Seller's **CURRENT ACTUAL KNOWLEDGE** as of this Date. **Any changes must be disclosed by Seller to Buyer promptly after discovery. Seller's failure to disclose a known material defect may result in legal liability.** If Seller has knowledge of an adverse material fact affecting the Property or occupants, it must be disclosed whether there is a specific item on this Disclosure or not.

Note: The Contract to Buy and Sell Real Estate, not this Disclosure, determines whether an item is included or excluded; if there is an inconsistency between this Disclosure and the Contract, the Contract controls.

Date: _____

Property Address: _____

Seller: _____

Year Built: _____

I. IMPROVEMENTS

If this box is checked, there are no structures or improvements on the Property; do not complete Parts A-E.

A.	STRUCTURAL CONDITIONS If you know of any of the following problems EVER EXISTING check the "Yes" column:	Yes	Comments
1	Structural problems	<input type="checkbox"/>	
2	Moisture and/or water problems	<input type="checkbox"/>	
3	Damage due to termites, other insects, birds, animals or rodents	<input type="checkbox"/>	
4	Damage due to hail, wind, fire, flood or other casualty	<input type="checkbox"/>	
5	Cracks, heaving or settling problems	<input type="checkbox"/>	
6		<input type="checkbox"/>	
7		<input type="checkbox"/>	

B.	ROOF If you know of any of the following problems EVER EXISTING check the "Yes" column:	Yes	Comments
1	Roof leak	<input type="checkbox"/>	
2	Damage to roof	<input type="checkbox"/>	
3	Skylight problems	<input type="checkbox"/>	
4	Gutter or downspout problems	<input type="checkbox"/>	

5	Other Roof problems	<input type="checkbox"/>	
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B-1.	ROOF – Other Information: Do you know of the following on the Property:	Yes	Comments
1	Roof under warranty until _____ Transferable _____	<input type="checkbox"/>	
2	Roof work done while under current roof warranty	<input type="checkbox"/>	
3	Roof material: _____ Age _____	<input type="checkbox"/>	
4		<input type="checkbox"/>	
5		<input type="checkbox"/>	

C.	ELECTRICAL & TELECOMMUNICATIONS If you know of any problems NOW EXISTING with the following check the “Yes” column:	Yes	Comments
1		<input type="checkbox"/>	
2		<input type="checkbox"/>	

C-1.	ELECTRICAL & TELECOMMUNICATIONS – Other Information: Do you know of the following on the Property:	Yes	Comments
1	220 volt service	<input type="checkbox"/>	
2	Aluminum wiring at the outlets (110)	<input type="checkbox"/>	
3	Electrical Service: Amps _____	<input type="checkbox"/>	
4	Garage door control(s) # _____	<input type="checkbox"/>	
5		<input type="checkbox"/>	
6		<input type="checkbox"/>	

D.	MECHANICAL If you know of any problems NOW EXISTING with the following check the “Yes” column:	Yes	Comments
1		<input type="checkbox"/>	
2		<input type="checkbox"/>	

E.	VENTILATION, AIR, HEAT If you know of any problems NOW EXISTING with the following check the “Yes” column:	Yes	Comments
1	Heating System	<input type="checkbox"/>	
2		<input type="checkbox"/>	
3		<input type="checkbox"/>	

E-1.	VENTILATION, AIR, HEAT - Other Information: Do you know of the following on the Property:	Yes	Age If Known	Comments
1	Heating system: Type _____ Fuel _____ Type _____ Fuel _____	<input type="checkbox"/>		
2		<input type="checkbox"/>		
3		<input type="checkbox"/>		

F.	WATER SUPPLY Do you know of the following on the Property:
1	Type of water supply: <input type="checkbox"/> Public <input type="checkbox"/> Community <input type="checkbox"/> Well <input type="checkbox"/> Shared Well <input type="checkbox"/> Cistern <input type="checkbox"/> None If the Property is served by a Well, a copy of the Well Permit <input type="checkbox"/> Is <input type="checkbox"/> Is Not attached. Well Permit #: _____ <input type="checkbox"/> Drilling Records <input type="checkbox"/> Are <input type="checkbox"/> Are not attached. Shared Well Agreement <input type="checkbox"/> Yes <input type="checkbox"/> No.

G.	WATER If you know of any problems NOW EXISTING with the following check the "Yes" column:	Yes	Comments
1	Water system (including lines and water pressure)	<input type="checkbox"/>	
2	Water heater(s)	<input type="checkbox"/>	
3	Water filter system	<input type="checkbox"/>	
4	Water softener	<input type="checkbox"/>	
5	Well	<input type="checkbox"/>	
6	Water System Pump	<input type="checkbox"/>	
9		<input type="checkbox"/>	
10		<input type="checkbox"/>	

G-1.	WATER – Other Information: Do you know of the following on the Property:	Yes	Age If Known	Comments
1	Water heater: Number of _____ Fuel type _____ Capacity _____	<input type="checkbox"/>		
4	Well Metered	<input type="checkbox"/>		
5	Well – Date of last inspection _____	<input type="checkbox"/>		
6	Galvanized pipe	<input type="checkbox"/>		
7	Polybutylene pipe	<input type="checkbox"/>		
8		<input type="checkbox"/>		
9		<input type="checkbox"/>		

H.	SEWER If you know of any problems NOW EXISTING with the following check the "Yes" column:	Yes	Comments
1	Sewage system (including sewer lines)	<input type="checkbox"/>	
2	Lift station (sewage ejector pump)	<input type="checkbox"/>	
3	Sump pump(s) # of _____	<input type="checkbox"/>	
4	Grey water storage/use	<input type="checkbox"/>	
5		<input type="checkbox"/>	

H-1.	SEWER – Other Information: Do you know of the following on the Property:
1	Type of sanitary sewer service: <input type="checkbox"/> Public <input type="checkbox"/> Community <input type="checkbox"/> Septic System <input type="checkbox"/> None <input type="checkbox"/> Other _____ If the Property is served by an on-site septic system, provide buyer with a copy of the permit. Type of septic system: <input type="checkbox"/> Tank <input type="checkbox"/> Leach <input type="checkbox"/> Lagoon
2	If a septic system, date latest Individual Use Permit issued: _____
3	If a septic system, date of latest inspection: _____
4	If a septic system, date of latest pumping: _____
5	

6	
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I.	FLOODING AND DRAINAGE If you know of any problem EVER EXISTING on the Property check the "Yes" column:	Yes	Comments
1	Flooding or drainage	<input type="checkbox"/>	
2		<input type="checkbox"/>	

I-1.	DRAINAGE AND RETENTION PONDS – Other Information Do you know of the following on the Property:	Yes	Comments
1	Drainage, retention ponds	<input type="checkbox"/>	
2		<input type="checkbox"/>	

J.	OTHER DISCLOSURES – INCLUSIONS If you know of any problems NOW EXISTING with the following check the "Yes" column:	Yes	Comments
1	Included fixtures and equipment	<input type="checkbox"/>	
2	Stains on carpet	<input type="checkbox"/>	
3	Floors and sub-floors	<input type="checkbox"/>	
4		<input type="checkbox"/>	
5		<input type="checkbox"/>	

II. GENERAL

K.	USE, ZONING & LEGAL ISSUES If you know of any of the following EVER EXISTING check the "Yes" column:	Yes	Comments
1	Zoning violation, variance, conditional use, violation of an enforceable PUD or non-conforming use	<input type="checkbox"/>	
2	Notice or threat of condemnation proceedings	<input type="checkbox"/>	
3	Notice of any adverse conditions from any governmental or quasi-governmental agency that have not been resolved	<input type="checkbox"/>	
4	Notice of zoning action related to the Property	<input type="checkbox"/>	
5	Building code, city or county violations	<input type="checkbox"/>	
6	Violation of restrictive covenants or owners' association rules or regulations	<input type="checkbox"/>	
7	Any building or improvements constructed within the past one year from this Date without approval by the owner's association or the designated approving body	<input type="checkbox"/>	
8	Any additions or alterations made	<input type="checkbox"/>	
9	Notice of ADA complaint or report	<input type="checkbox"/>	
10	Other legal action	<input type="checkbox"/>	
11	Current use of the Property	<input type="checkbox"/>	
12		<input type="checkbox"/>	
13		<input type="checkbox"/>	

L.	ACCESS & PARKING If you know of any of the following EVER EXISTING check the "Yes" column:	Yes	Comments
1	Any access problems	<input type="checkbox"/>	
2	Roads, driveways, trails or paths through the Property used by others	<input type="checkbox"/>	
3	Public highway or county road bordering the Property	<input type="checkbox"/>	
4	Any proposed or existing transportation project that affects or is expected to affect the Property	<input type="checkbox"/>	
5	Encroachments, boundary disputes or unrecorded easements	<input type="checkbox"/>	
6	Shared or common areas with adjoining properties	<input type="checkbox"/>	
7	Requirements for curb, gravel/paving, landscaping	<input type="checkbox"/>	
8		<input type="checkbox"/>	
9		<input type="checkbox"/>	

M.	ENVIRONMENTAL CONDITIONS If you know of any of the following EVER EXISTING on any part of the Property check the "Yes" column:	Yes	Comments
1	Hazardous materials on the Property, such as radioactive, toxic, or biohazardous materials, asbestos, pesticides, herbicides, wastewater sludge, radon, methane, mill tailings, solvents or petroleum products	<input type="checkbox"/>	
2	Underground storage tanks	<input type="checkbox"/>	
3	Aboveground storage tanks	<input type="checkbox"/>	
4	Underground transmission lines	<input type="checkbox"/>	
5	Used as, situated on, or adjoining a dump, land fill or municipal solid waste land fill	<input type="checkbox"/>	
6	Monitoring wells or test equipment	<input type="checkbox"/>	
7	Sliding, settling, upheaval, movement or instability of earth or expansive soils on the Property	<input type="checkbox"/>	
8	Mine shafts, tunnels or abandoned wells on the Property	<input type="checkbox"/>	
9	Within governmentally designated geological hazard or sensitive area	<input type="checkbox"/>	
10	Within governmentally designated flood plain or wetland area	<input type="checkbox"/>	
11	Dead, diseased or infested trees or shrubs	<input type="checkbox"/>	
12	Environmental assessments, studies or reports done involving the physical condition of the Property	<input type="checkbox"/>	
13	Used for any mining, graveling, or other natural resource extraction operations such as oil and gas wells	<input type="checkbox"/>	
14	Other environmental problems	<input type="checkbox"/>	
15		<input type="checkbox"/>	
16		<input type="checkbox"/>	

N.	OTHER DISCLOSURES – GENERAL If you know of any of the following NOW EXISTING check the "Yes" column:	Yes	Comments
1	Any part of the Property now leased to others (written or oral)	<input type="checkbox"/>	
2	Written reports of any building, site, roofing, soils or	<input type="checkbox"/>	

	engineering investigations or studies of the Property	<input type="checkbox"/>	
3	Any property insurance claim ever submitted for the Property (whether paid or not)	<input type="checkbox"/>	
4	Structural, architectural and engineering plans and/or specifications for any existing improvements	<input type="checkbox"/>	
5	Property was previously used as a methamphetamine laboratory and not remediated to state standards	<input type="checkbox"/>	
6	Government special improvements approved, but not yet installed, that may become a lien against the Property	<input type="checkbox"/>	
7	Signs: <input type="checkbox"/> Owned <input type="checkbox"/> Leased	<input type="checkbox"/>	
8	Signs: Government or private restriction problems	<input type="checkbox"/>	
9	Pending: (1) litigation or (2) other dispute resolution proceeding regarding the Property	<input type="checkbox"/>	
10		<input type="checkbox"/>	
11		<input type="checkbox"/>	

III. LAND – AGRICULTURAL

O.	CROPS, LIVESTOCK & LEASES If you know of any of the following conditions that NOW EXIST check the “Yes” column:	Yes	Comments
1	Crops being grown on the Property	<input type="checkbox"/>	
2	Seller owns all crops	<input type="checkbox"/>	
3	Livestock on the Property	<input type="checkbox"/>	
4	Any land leased from others: <input type="checkbox"/> State <input type="checkbox"/> BLM <input type="checkbox"/> Federal <input type="checkbox"/> Private <input type="checkbox"/> Other _____	<input type="checkbox"/>	
5		<input type="checkbox"/>	
6		<input type="checkbox"/>	

P.	NOXIOUS WEEDS If you know of any of the following conditions NOW EXIST check the “Yes” column:	Yes	Comments
1	Have any noxious weeds on the Property been identified?	<input type="checkbox"/>	
2	Have there been any weed enforcement actions on the Property?	<input type="checkbox"/>	
3	Has a noxious weed management plan for the Property been entered into?	<input type="checkbox"/>	
4	Have noxious weed management actions been implemented?	<input type="checkbox"/>	
5	Have herbicides been applied?	<input type="checkbox"/>	
6		<input type="checkbox"/>	
7		<input type="checkbox"/>	

The Colorado Noxious Weed Management Act (35-5.5-101-119 C.R.S) enables County and City governments to implement noxious weeds management programs to reclaim infested acres and protect weed-free land. For a directory of county weed supervisors call 303-239-4173 or see: www.colorado.gov/ag/weeds.

6. Seller does not warrant that the Property is fit for Buyer's intended purposes or use of the Property. Disclosure of the condition of an item is not to be construed as a warranty of its continued operability or as a representation or warranty that such item is fit for Buyer's intended purposes.

7. Buyer receipts for a copy of this Disclosure.

Buyer

Date

Buyer

Date