History of Property

A supplement to the Seller's Property Condition Report for property located at:

Address: 748 Elizabeth Lane

City: Onalaska State: WI Zip: 54650

		Last Serviced – By Whom?
Age of home?	25	
Age of roof?	25	
Has there been any interior damage from ice buildup?	☐ YES ☑ NO	
Has there been any leakage?	☐ YES ☑ NO	
Has there been any repairs or replacement made to the roof?	☐ YES ☒ NO	
Comments:		
Age of furnace?	6	
Age of central air?	6	
Age of water heater?	11	
Age of water softener?	1	
☐ Rented ☒ Owned		
Fireplace (heat source, etc.)?	N/A	
Age of well?	N/A	
Depth of well?	N/A	
When Septic was last pumped?	N/A	
Septic pumped how often?	N/A	
Septic sized for how many bedrooms?	N/A	
Is anything on property not connected to the septic that should be?	☐ YES ☐ NO	
Sewer line ever cleaned out or broken?	☐ YES ☒ NO	
Have you ever paid flood insurance?	☐ YES ☒ NO	
Was property ever damaged by fire?	☐ YES ☒ NO	
Has electrical system been upgraded?	☐ YES ☐ NO	
GFI Outlets? ☒ YES ☐ NO	Location(s)?	
Has insulation been added?	☐ YES ☒ NO	
Are there keys for all doors?	☒ YES ☐ NO	
Do you know who the builder was?	☐ YES ☒ NO	
Has the property been surveyed?	☐ YES ☐ NO	

Basement, Crawlspace, Slab:

Cracked floor/walls	☐ YES	☒ NO	Leakage/seepage	☐ YES	☒ NO
Drain tile problem	☐ YES	☒ NO	Sewer backup	☐ YES	☒ NO
Flooding	☐ YES	☒ NO	Wet floors/walls	☐ YES	☒ NO
Foundation problem	☐ YES	☒ NO			

Comments:

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Current Homeowners Insurance Co. State Farm

Notice of property reassessment, special assessments (municipal improvements)? Please specify:

Utility Companies:

Gas:	XCeL	Avg. Cost:	> #200 mo Ave
Electric:	XCeL	Avg. Cost:	
Phone:		Avg. Cost:	
Cable:	TDS	Avg. Cost:	75.00 mo
Water/Sewer:	city	Avg. Cost:	100 mo.

If you are not using cable, is it available to this house? ☐ YES ☐ NO

Do you have access to high speed internet connection? If YES, please specify services. ☐ YES ☐ NO ☐ Cable ☐ DSL ☐ Satellite

How is refuse handled? city

If refuse is picked up at the house, which day is trash day? Thurs. OR ☐ Not Applicable

Do you have pets? If YES, please specify type of pet and number of each. ☐ YES ☐ NO

Type of pet:		Number:	
Type of pet:		Number:	
Type of pet:		Number:	

Please list any contractors used for furnace cleaning, plumbing or electrical problems, etc.:

Name of contractor:		Type of work:	
Name of contractor:		Type of work:	
Name of contractor:		Type of work:	
Name of contractor:		Type of work:	

Please note any other information a new homeowner would find useful to know about this property or the neighborhood:

The information contained in this report is true and correct to the best of my knowledge.

Signature

Signature

I acknowledge receipt of this report:

Signature

Signature