History of Property

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

Address: 321 3rd Ave

City: Onalaska State: WI Zip: 54650

		Last Serviced – By Whom?
Age of home?	1876	
Age of roof? + garage	09	Geier construction
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?	2007	Rammes
Age of central air?	2007	Hamrose
Age of water heater?	08	maxwell white
Age of water softener? ☐ Rented ☐ Owned	N/A	
Fireplace (heat source, etc.)?		
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	1930's Fire
Has electrical system been upgraded?	☒ YES ☐ NO	Circuit breakers
GFI Outlets? ☒ YES ☐ NO	Location(s)?	
Has Insulation been added?	☐ YES ☐ NO	
Are there keys for all doors?	☐ YES ☐ NO	Unknown
Do you know who the builder was?	☐ YES ☐ NO	~~Wiebe Terpstra~~
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:

Humidifier attached to furnace turned off.

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Current Homeowners Insurance Co. American Family
Have you made an insurance claims that have not been repaired? ☐ YES ☒ NO, If so, what? _____

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

Utility Companies:

Gas:	Xcel	Avg. Cost:
Electric:	Xcel	Avg. Cost:
Phone:		Avg. Cost:
Cable:		Avg. Cost:
Water/Sewer:		Avg. Cost:

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

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

How is refuse handled? _____

If refuse is picked up at the house, which day is trash day? Tuesday AM OR ☐ Not Applicable
Yard clipping Wednesday morning

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.

Rhonda Lively
Signature Signature

I acknowledge receipt of this report:

Signature Signature