History of Property

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

Address: 2533 17th St. S

City: LaCrosse State: WI Zip: 54601

Age of Home? (1920) 98 YEARS

Age of roof? 12 YEARS Serviced by: NA

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 — NO M.L.

Comments: REPLACED ROOF 12 YEARS AGO BY OWNER

Age of furnace? 8 YEARS Serviced by: SCHNEIDER

Age of central air? 8 YEARS Serviced by: SCHNEIDER

Age of water heater? 2 MONTHS Serviced by: INSTALLED BY OWNER

Age of water softener? NA Serviced by:

☐ Rented ☐ Owned

Fireplace (heat source, etc.)? GAS Serviced by: ORIGINAL EQUIPMENT

Age of well? NA Serviced by:

Depth of well? NA Serviced by:

When Septic was last pumped? NA Serviced by:

Septic pumped how often? NA Serviced by:

Septic sized for how many bedrooms? NA

Is anything on property not connected to the septic that should be?	☐ YES	☒ NO	Serviced by:
Sewer line ever cleaned out or broken?	☒ YES	☐ NO	Serviced by: CAMERA + CLEANED
Have you ever paid flood insurance?	☐ YES	☒ NO	Serviced by: -NO BLOCKAGE-
Was property ever damaged by fire?	☐ YES	☒ NO	Serviced by:
Has electrical system been upgraded?	☐ YES	☒ NO	Serviced by:
GFI Outlets?	☒ YES	☐ NO	
Location(s)?	BEDROOM - BATHROOM - KITCHEN		

Has insulation been added?	☐ YES	☒ NO	Serviced by: By OWNER
Are there keys for all doors?	☒ YES	☐ NO	Serviced by:
Do you know who the builder was?	☐ YES	☒ NO	Serviced by:
Has the property been surveyed?	☐ YES	☒ NO	Serviced by:

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. 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:	GAS + ELECTRIC → 120.00 / mo
Electric:	XCEL	Avg. Cost:	
Phone:	NONE	Avg. Cost:	—
Cable:	~~XFIN~~ NONE	Avg. Cost:	—
Water/Sewer:	CITY LA CROSSE	Avg. Cost:	120.00 / 3 MO.

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? CITY LA CROSSE PICK UP ONCE A WEEK

If refuse is picked up at the house, which day is trash day? FRIDAY 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: SCHNEIDER Type of work: 3 YEAR CHECK UP ~~FIN~~ IN 2025
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.

X _____ MICHAEL A. LYDON
Signature Signature

I acknowledge receipt of this report:

_____
Signature Signature