RESIDENTIAL PROPERTY SELLER DISCLOSURE STATEMENT

This form is approved by the Iowa City Area Association of REALTORS®

EQUAL HOUSING OPPORTUNITY

Address of Property: 130 S Dubuque St Solon, IA 52333 Unit #310

PURPOSE: Use this statement to disclose information as required by Iowa Code Chapter 558A. This law requires certain sellers of residential property that includes at least one (1) but no more than four (4) dwelling units to disclose information about the property to be sold. The following disclosures are made by the seller(s) and not by any agent on behalf of the seller(s).

INSTRUCTIONS TO SELLER(S): (1) Seller(s) must complete this statement. Complete all questions, or attach reports allowed by Iowa Code Section 558.A.4; (2) Disclose all known conditions materially affecting this property; (3) If an item does not apply to this property, check the "N/A" box as not applicable; (4) You must provide information in good faith and make a reasonable effort to ascertain the required information. If the required information is unknown or is unavailable following a reasonable effort, use an approximation of the information and indicate by using "AP", or if the information is unknown indicate by checking the "UNK" box; (5) Additional pages may be attached to this form as needed; (6) Keep a copy of this statement with your other important papers.

N/A only to be used if component is not a part of the property.

1. Basement/Foundation: Any known water or other problems? Yes ☐ No ☐ N/A ☑ UNK ☐
   If yes, explain:
   Dates of repairs and/or replacement:

2. Roof: Any known problems? Yes ☑ No ☐ N/A ☐ UNK ☐
   Any known repairs? Yes ☑ No ☐ N/A ☐ UNK ☐
   If yes to either, explain: Hail Damage
   Dates of repairs and/or replacement: Fall 2025
   Age of Roof?

3. Well and Pump: Yes ☐ No ☐ N/A ☑ UNK ☐
   Any known problems? Yes ☐ No ☐ N/A ☐ UNK ☐
   If yes, explain:
   Dates of repairs and/or replacement:
   Any known water tests? Yes ☐ No ☐ N/A ☐ UNK ☐
   If yes, date of last report:
   Results of last report:

4. Septic Tanks / Drainage Fields: Yes ☐ No ☐ N/A ☑ UNK ☐
   Any known problems? Yes ☐ No ☐ N/A ☐ UNK ☐
   If yes, explain:
   Date of repairs and/or replacement:
   Location of septic tank:
   Date tank was last cleaned/pumped:
   Septic Tank Size (gallons):

5. Sewer System: Yes ☑ No ☐ N/A ☐ UNK ☐
   Any known problems? Yes ☐ No ☑ N/A ☐ UNK ☐
   Any known repairs? Yes ☐ No ☑ N/A ☐ UNK ☐
   If yes to either, explain:
   Date of repairs and/or replacement:

6. Heating System(s): Yes ☑ No ☐ N/A ☐ UNK ☐
   Any known problems? Yes ☑ No ☐ N/A ☐ UNK ☐
   Any known repairs? Yes ☑ No ☐ N/A ☐ UNK ☐
   If yes to either, explain: Manufacturer replaced blower motor
   Dates of repairs and/or replacement: 2026
   Age of Heating System?

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7. Central Cooling System(s): Yes ☑ No ☐ N/A ☐ UNK ☐
Any known problems? Yes ☑ No ☐ N/A ☐ UNK ☐
Any known repairs? Yes ☑ No ☐ N/A ☐ UNK ☐
If yes to either, explain: Manufacturer replaced blower motor
Dates of repair and/or replacement: 2026
Age of Central Cooling System?

8. Plumbing System(s): Yes ☑ No ☐ N/A ☐ UNK ☐
Any known problems? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, explain:
Dates of repairs and/or replacement:
Are there currently or have there ever been any lead services lines present? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, explain:

9. Electrical System(s): Yes ☑ No ☐ N/A ☐ UNK ☐
Any known problems? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, explain:
Dates of repairs and/or replacement:

10. Pest Infestation (e.g., termites, carpenter ants): Any known problems? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, date(s) of treatment(s):
Any known structural damage? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, explain:
Dates of repairs and/or replacements:

11. Asbestos: Any known to be present in the structure? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, explain:

12. Radon: Any known tests for the presence of radon gas? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, date of last report:
Results of last report:

13. Lead-Based Paint: Any known to be present in the structure? Yes ☐ No ☑ N/A ☐ UNK ☐
Was the dwelling constructed prior to January 1, 1978? Yes ☐ No ☐ N/A ☐ UNK ☐
If yes, complete the "Disclosure of Information and Acknowledgement re: Lead-Based Paint and/or Lead-Based Paint Hazards"

14. Flood Plain: Is the property located in a flood plain? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, what is the flood plain designation?

15. Zoning: Do you know the zoning classification of the property? Yes ☐ No ☐ N/A ☐ UNK ☐
If yes, what is the zoning classification? Commercial

16. Covenants: Is the property subject to restrictive covenants? Yes ☑ No ☐ N/A ☐ UNK ☐
If yes, attach a copy or state where a true current copy of the covenants can be obtained: See Agent

17. Shared or Co-Owned Features: Are features of the property known to be shared in common with adjoining landowners, such as walls, fences, roads, and driveways whose use and/or maintenance responsibility may have an effect on the property? Yes ☑ No ☐ N/A ☐ UNK ☐
If yes, explain: See Daclarations

Any known "common areas" such as pools, tennis courts, walkways or other areas co-owned with others, or a Homeowners' Association which has any authority over the property? Yes ☑ No ☐ N/A ☐ UNK ☐
If yes, explain: See Daclarations

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18. Physical Problems: Any known settling, flooding, drainage or grading problems? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, explain:

19. Structural Damage: Any known structural damage? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, explain:

20. Emerald Ash Borer: Any known Ash trees located on the property? Yes ☐ No ☑ N/A ☐ UNK ☐
Date(s) of Treatment? If Any.

21. Insurance Claims: Roof replace Yes ☑ No ☐ N/A ☐ UNK ☐
Any known insurance claims?
If yes, explain: Hail damage replaced fall 2025

22. LP Tank:
Rented or Owned Yes ☐ No ☑ N/A ☐ UNK ☐
If rented, please list company Rented ☐ Owned ☐
Any known problems?
If yes, explain: Yes ☐ No ☐ N/A ☐ UNK ☐
Dates of repairs and/or replacement:

23. Water Softener:
Rented or Owned Yes ☑ No ☐ N/A ☐ UNK ☐
If rented, please list company Rented ☐ Owned ☑
Any known problems?
If yes, explain: Yes ☐ No ☑ N/A ☐ UNK ☐
Dates of repairs and/or replacement:

24. Rented/Leased Equipment? Yes ☐ No ☑ N/A ☐ UNK ☐
If yes, please list the equipment staying with the property

Any Additional Information:

Please use additional sheets as necessary.

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SELLER(S) DISCLOSURE STATEMENT IS NOT REQUIRED IN THE FOLLOWING INSTANCES: (1) Property contains no dwelling units or more than four dwelling units; (2) The transfer is made pursuant to court order; (3) The transfer is by mortgagor or mortgagee incident to a foreclosure or deed in lieu of foreclosure, or is incident to contract forfeiture; (4) transfers by a fiduciary in the course of the administration of a decedent's estate, guardianship, conservatorship, or trust. This exemption shall not apply to a transfer of real estate in which the fiduciary is a living natural person and was an occupant in possession of the real estate at any time within the twelve consecutive months immediately preceding the date of transfer; (5) A transfer between joint tenants or tenants in common; (6) A transfer to a spouse or a lineal descendent of the transferor; (7) A transfer between spouses as a result of dissolution of marriage or legal separation; (8) A transfer to or from a governmental body; (9) A transfer by quit claim deed; (10) A transfer by a power of attorney.

SELLER(S) DISCLOSURE: Seller(s) discloses the information regarding this property based on information known or reasonably available to the Seller(s). The Seller(s) has owned the property since 4.4.2017. The Seller(s) certifies that as of the date signed, this information is true and accurate to the best of my/our knowledge. Seller(s) acknowledge(s) the requirement that Buyer(s) be provided with the "*Iowa Radon Home-Buyers and Seller Fact Sheet*" prepared by the Iowa Department of Public Health.

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Seller date

Seller date

BUYER(S) ACKNOWLEDGEMENT: Buyer(s) acknowledges receipt of a copy of this Real Estate Disclosure Statement. This statement is not intended to be a warranty or to substitute for any inspection the buyer(s) wish to obtain. Buyer(s) acknowledge receipt of the "*Iowa Radon Home-Buyers and Seller Fact Sheet*" prepared by the Iowa Department of Public Health.

Buyer date

Buyer date

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