

SELLER'S DISCLOSURE STATEMENT

Property Address: 2919 ORDWAY ST, NW

Condominium Unit: N/A Cooperative Unit: N/A

Purpose of Statement: This Statement is a disclosure by the Seller of the defects or information actually known by the Seller concerning the property, in compliance with the District of Columbia Residential Real Property Seller Disclosure Act. Unless otherwise advised, the Seller does not possess any expertise in construction, architecture, engineering, or any other specific area related to the construction or condition of the improvements on the property or the land. Also, unless otherwise advised, the Seller has not conducted any inspection of generally inaccessible areas such as the foundation or roof. THIS STATEMENT IS NOT A WARRANTY OF ANY KIND BY THE SELLER OR BY ANY AGENT REPRESENTING THE SELLER IN THIS TRANSACTION, AND IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE BUYER MAY WISH TO OBTAIN.

Seller's Disclosure: The Seller discloses the following information with the knowledge that, even though this is not a warranty, the Seller specifically makes the following statements based on the Seller's actual knowledge at the signing of this document. Upon receiving this statement from the Seller, the Seller's agent is required to provide a copy to the Buyer or the agent of the Buyer. The Seller authorizes its agent(s) to provide a copy of this statement to any prospective buyer or agent of such prospective buyer in connection with any actual or anticipated sale of property. The following are statements made solely by the Seller and are not the statements of the Seller's agent(s), if any. This information is a disclosure only and is not intended to be part of any contract between Buyer and Seller.

If this is a sale of a condominium unit or cooperative unit, or lot in a homeowners association, this disclosure form provides information only as to the unit (as defined in the governing documents of the association) or lot (as defined in the covenants applicable to the lot), and not as to any common elements, common areas or other areas outside of the unit or lot.

A. Property Conditions, Improvements & Additional Information:

	Yes	No	Unknown	N/A
1. Water system:				
Well supplied	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City supplied	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Sewer system:				
Septic tank	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City supplied	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Urea formaldehyde foam insulation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Leaks in roof	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Age of roof				
0-5 years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5-10 years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10-15 years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15+ years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Wall defects	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Floor defects <i>Original historic floors</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Foundation defects	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Window defects	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Evidence of water in basement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Heating system:				
Central	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat Pump	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Age of Heating System:				
0-5 years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5-10 years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10+ years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Air Conditioning System:				
Central	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Window	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electric	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat Pump	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Age of Air Conditioning System:				
0-5 years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5-10 years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10+ years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Plumbing System:				
Copper	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Galvanized	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working order?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any known problems?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	Yes	No	Unknown	N/A
15. Electrical System:				
Working order?	✓			
Any known problems?		✓		
16. History of Infestation				
Termites			✓	
Carpenter Ants			✓	
Rodents			✓	
Other				
17. Environmental Problems				
Asbestos			✓	
Radon Gas - <i>Currently vented</i>			✓	
Formaldehyde			✓	
Contaminated soil			✓	
Other				

Contract w/ Western Pest Control.

Provide explanations of the foregoing responses here. Attach additional sheets if necessary: Roof repainted in last 6 years; Windows: some in bedroom difficult to open; Dr. Pocket Door off track

B. Appliances/Systems/Services: The items below are in working order:

	Yes	No	Unknown	N/A
1. Range/Oven	✓			
2. Dishwasher	✓			
3. Refrigerator	✓			
4. Range hood/fan	✓			
5. Disposal	✓			
6. TV antenna, TV rotor & controls	✓			
7. Storm Windows	✓			
8. Garage door opener & remote control				
9. Alarm system				
10. Intercom system				
11. Central vacuum				
12. Attic fan				
13. Pool heater, wall liner & equip.				
14. Microwave oven	✓			
15. Trash compactor	✓			
16. Ceiling fan	✓			
17. Sauna/hot tub				
18. Lawn sprinkler system	✓			
19. Water heater	✓			
20. Water softener/conditioner				
21. Sump pump	✓			
22. Furnace	✓			
23. Humidifier				
24. Electronic air filter				
25. Solar heating system				
26. Fireplace & chimney	✓			
27. Wood burning system	✓			
28. Smoke Detector(s)	✓			
29. Carbon Monoxide detector(s)				

Provide any explanations of the foregoing responses here. Attach additional sheets if necessary:

UNLESS OTHERWISE AGREED, ALL HOUSEHOLD APPLIANCES ARE SOLD IN WORKING ORDER EXCEPT AS NOTED, WITHOUT WARRANTY BEYOND DATE OF CLOSING.



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C. Other items: Are you aware of the following:

	Yes	No	Unknown	N/A
1. Features of the property shared in common with the adjoining landowners:				
Walls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seller responsible for maintenance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fences	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seller responsible for maintenance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roads	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seller responsible for maintenance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driveways	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seller responsible for maintenance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (list)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seller responsible for maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Encroachments	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Easements	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Zoning violations	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Nonconforming uses	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Structural modifications	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Settling problems	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Flooding problems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Drainage problems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Structural problems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Grading problems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Damage to property from:				
Fire	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wind	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Floods	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Landslides	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Provide any explanations of the foregoing responses here. Attach additional sheets, if necessary.

pear pier refitted per structural engineer's specifications - paperwork available upon request

The Seller has lived in the residence on the property from 6/95 (date) to present (date). The Seller has owned the property since 6/95 (date) and makes the statements herein only since that date. The Seller has indicated above as to the condition of all the items based on information actually known to the Seller.

Seller certifies that the information in this statement is true and correct to the best of Seller's actual knowledge as of the date of Seller's signature.

BUYER SHOULD OBTAIN PROFESSIONAL ADVICE AND INSPECTIONS OF THE PROPERTY TO MORE FULLY DETERMINE THE CONDITION OF THE PROPERTY.

Seller *[Signature]* Date July 10, 2005

Seller _____ Date _____

BUYER HEREBY EXPRESSES AN INTENT TO RESIDE IN THE PROPERTY TO BE TRANSFERRED.

BUYER HAS READ AND ACKNOWLEDGES RECEIPT OF THIS STATEMENT AND ACKNOWLEDGES THAT THIS STATEMENT IS MADE BASED UPON THE SELLER'S ACTUAL KNOWLEDGE AS OF THE ABOVE DATE; IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES WHICH BUYER MAY WISH TO OBTAIN; AND IS NOT A STATEMENT, REPRESENTATION OR WARRANTY BY ANY OF THE SELLER'S AGENTS OR ANY SUB-AGENTS AS TO THE PRESENCE OR ABSENCE OF ANY CONDITION, DEFECT OR MALFUNCTION OR AS TO THE NATURE OF ANY CONDITION, DEFECT OR MALFUNCTION.

Buyer _____ Date _____

Buyer _____ Date _____





Disclosure of Information on Lead-Based Paint and Lead-Based Paint Hazards

SALES

For the sale of Property at: 2919 Ordway St. NW Washington, DC 20008
Property Address

I. SELLER REPRESENTS AND WARRANTS TO LONG & FOSTER, INTENDING THAT SUCH BE RELIED UPON REGARDING THE ABOVE PROPERTY, THAT (each Seller initial ONE of the following and state Year Constructed):

- Property (all portions) was constructed after January 1, 1978. (If initialed, complete section V only.)
- Property (any portion) was constructed before January 1, 1978. (If initialed, complete all sections.)
- Seller is unable to represent and warrant the age of the property. (If initialed, complete all sections.)

Year Constructed: 1916
(per tax records in DC)

SELLER AGREES TO COMPLY WITH REQUIREMENTS OF THE FEDERAL RESIDENTIAL LEAD-BASED PAINT HAZARD REDUCTION ACT OF 1992.

Lead Warning Statement

Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

II. Seller's Disclosure (each Seller complete items 'a' and 'b' below)

a. Presence of lead-based paint and/or lead-based paint hazards (initial and complete (i) or (ii) below):

(i) Known lead-based paint and/or lead-based paint hazards are present in the housing (explain)

(ii) Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

b. Records and reports available to the Seller (initial and complete (i) or (ii) below):

(i) Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

(ii) Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

III. Purchaser's Acknowledgment (each Purchaser initial and complete items c, d, e and f below)

c. Purchaser has read the Lead Warning Statement above.

d. Purchaser has received copies of all information listed above. (if none listed, check here.)

e. Purchaser has received the pamphlet *Protect Your Family from Lead in Your Home*.

f. Purchaser has (each Purchaser initial (i) or (ii) below):

(i) Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

(ii) Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

IV. Agent's Acknowledgment (initial item 'g' below)

g. Agent has informed the Seller of the Seller's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

V. Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

Seller [Signature] Date 7-10-05

Purchaser _____ Date _____

Seller _____ Date _____

Purchaser _____ Date _____

Agent [Signature] Date 7.10.05

Agent _____ Date _____





Greater Capital Area Association of REALTORS® , Inc.
INCLUSIONS/EXCLUSIONS DISCLOSURE AND ATTACHMENT TO LISTING AGREEMENT

ADDRESS 2919 Oldway St, NW

FOR USE WITH REGIONAL CONTRACT

PERSONAL PROPERTY, FIXTURES, AND UTILITIES: Unless otherwise negotiated in a contract of sale, the purchase price shall include the following personal property and fixtures: A. Any existing built-in heating and central air conditioning equipment, plumbing and lighting fixtures, sump pump, attic fans, storm windows, storm doors, screens, installed wall-to-wall carpeting, window shades, blinds, smoke and heat detectors, tv antennas, exterior trees and shrubs and B. The items marked YES below as currently installed or offered.

Included Yes No	Included Yes No	Included Yes No	Included Yes No
<input checked="" type="checkbox"/> <input type="checkbox"/> Stove or Range	<input checked="" type="checkbox"/> <input type="checkbox"/> Disposer	<input checked="" type="checkbox"/> <input type="checkbox"/> Ceiling Fan(s) # <u>1</u>	<input type="checkbox"/> <input type="checkbox"/> Alarm System <input type="checkbox"/> Leased
<input type="checkbox"/> <input checked="" type="checkbox"/> Cooktop	<input type="checkbox"/> <input checked="" type="checkbox"/> Freezer	<input checked="" type="checkbox"/> <input type="checkbox"/> Washer	<input type="checkbox"/> <input checked="" type="checkbox"/> Intercom
<input type="checkbox"/> <input checked="" type="checkbox"/> Wall Oven(s) # _____	<input type="checkbox"/> <input checked="" type="checkbox"/> Window Fan(s) # _____	<input checked="" type="checkbox"/> <input type="checkbox"/> Dryer	<input type="checkbox"/> <input checked="" type="checkbox"/> Storage Shed(s) # _____
<input checked="" type="checkbox"/> <input type="checkbox"/> Refrigerator(s) # _____	<input checked="" type="checkbox"/> <input type="checkbox"/> Window A/C Unit(s) # <u>1</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> Furnace Humidifier	<input type="checkbox"/> <input checked="" type="checkbox"/> Garage Opener(s) # _____
<input checked="" type="checkbox"/> <input type="checkbox"/> w/ice maker	<input type="checkbox"/> <input checked="" type="checkbox"/> Pool, Equip. & Cover ^{Per contract}	<input type="checkbox"/> <input checked="" type="checkbox"/> Electronic Air Filter	<input type="checkbox"/> <input checked="" type="checkbox"/> w/remote(s) # _____
<input checked="" type="checkbox"/> <input type="checkbox"/> Dishwasher	<input type="checkbox"/> <input checked="" type="checkbox"/> Hot Tub, Equip. & Cover	<input type="checkbox"/> <input checked="" type="checkbox"/> Central Vacuum	<input type="checkbox"/> <input checked="" type="checkbox"/> Playground Equipment
<input checked="" type="checkbox"/> <input type="checkbox"/> Built-in Microwave	<input type="checkbox"/> <input checked="" type="checkbox"/> Satellite Dish & Equip.	<input type="checkbox"/> <input checked="" type="checkbox"/> Water Treatment System	<input type="checkbox"/> <input checked="" type="checkbox"/> Wood Stove
<input type="checkbox"/> <input checked="" type="checkbox"/> Trash Compactor	<input checked="" type="checkbox"/> <input type="checkbox"/> Window Treatments	<input type="checkbox"/> <input checked="" type="checkbox"/> Exhaust Fan(s)	<input type="checkbox"/> <input checked="" type="checkbox"/> Fireplace Screen/Door

ADDITIONAL INCLUSIONS (SPECIFY): All lower level appliances convey

ADDITIONAL EXCLUSIONS (SPECIFY): DR light fixture

FOR USE WITH MAR CONTRACT

INCLUSIONS/EXCLUSION: Unless otherwise negotiated in a contract of sale, the purchase price shall include all permanently attached fixtures, including all smoke detectors. Certain other now existing items which may be considered personal property, whether installed or stored upon the property, are included or excluded, as follows (if neither column is checked, it shall be considered excluded):

Included Yes	Included Yes	Included Yes	Included Yes
<input type="checkbox"/> Stove or Range	<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Ceiling Fan(s) # _____	<input type="checkbox"/> Alarm System <input type="checkbox"/> Leased
<input type="checkbox"/> Cooktop	<input type="checkbox"/> Freezer	<input type="checkbox"/> Clothes Washer	<input type="checkbox"/> Intercom
<input type="checkbox"/> Wall Oven(s) # _____	<input type="checkbox"/> Window Fan(s) # _____	<input type="checkbox"/> Clothes Dryer	<input type="checkbox"/> Storage Shed(s) # _____
<input type="checkbox"/> Refrigerator(s) # _____	<input type="checkbox"/> Fireplace Screen/Door	<input type="checkbox"/> Furnace Humidifier	<input type="checkbox"/> Garage Opener(s) # _____
<input type="checkbox"/> w/ice maker	<input type="checkbox"/> Pool, Equip. & Cover	<input type="checkbox"/> Electronic Air Filter	<input type="checkbox"/> w/remote(s) # _____
<input type="checkbox"/> Built-in Microwave	<input type="checkbox"/> Hot Tub, Equip. & Cover	<input type="checkbox"/> Water Filter	<input type="checkbox"/> Playground Equipment
<input type="checkbox"/> Trash Compactor	<input checked="" type="checkbox"/> Screens	<input type="checkbox"/> Water Softener	<input type="checkbox"/> Wood Stove
<input type="checkbox"/> Exist. W/W Carpet	<input type="checkbox"/> Storm Windows	<input type="checkbox"/> Drapery/Curtains	<input type="checkbox"/> T.V. Antenna
<input type="checkbox"/> Garbage Disposer	<input type="checkbox"/> Storm Doors	<input type="checkbox"/> Drapery Curtain Rods	<input type="checkbox"/> Satellite Dish
<input type="checkbox"/> Exhaust Fan(s)	<input type="checkbox"/> Window A/C Unit(s) # _____	<input type="checkbox"/> Shades/Blinds	<input type="checkbox"/> Central Vacuum

ADDITIONAL INCLUSIONS (SPECIFY): _____

ADDITIONAL EXCLUSIONS (SPECIFY): _____

WATER, SEWAGE, HEATING AND CENTRAL AIR CONDITIONING: (Check all that apply)

Water Supply: Public Well _____ Hot Water: Oil Gas Elec. Other _____
 Sewage Disposal: Public Septic #BR _____ Air Conditioning: Oil Gas Elec. Heat Pump Other _____
 Heating: Oil Gas Elec. Heat Pump Other _____

I/We, the Seller(s) of the above referenced property, have completed these checklists disclosing what conveys with the property and give permission to make this information available to prospective buyers.

[Signature] _____
 Seller Date 7-10-05

 Seller Date

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