

PRIVATE SEWAGE TREATMENT SYSTEM DISCLOSURE

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1 **DATE:** 8/22/2025
 2 **Street Address:** 4099 55th Ave SE
 3 **City:** Medina **State:** ND **Zip Code:** 58467 **County:** Stutsman

4 This disclosure is not a warranty of any kind by the Seller(s) or any Broker(s) or Agent(s) representing or
 5 assisting any party(s) in this transaction and is not a substitute for any inspections or warranties the party(s)
 6 may wish to obtain.

7 **LOCATION MAP:** ☐ IS ATTACHED ☐ IS NOT ATTACHED

8 **SELLER(S) INFORMATION:**

9 The Seller(s) discloses the following information with the knowledge that even though this is not a warranty,
 10 prospective Buyer(s) may rely on this information in deciding whether, and on what terms, to purchase the
 11 Property. The Seller(s) authorizes any Broker(s) or Agent(s) representing any party in this transaction to
 12 provide a copy of this Statement to any person or entity in connection with any actual or anticipated sale of
 13 the Property. Unless the Buyer(s) or Seller(s) agree to the contrary in writing before the closing of the sale, a
 14 Seller(s) who fails to disclose the existence of known status or an individual sewage treatment system at the
 15 time of the sale, and who knew or had reason to know of the existence or known status of the system, is liable
 16 to the Buyer(s) for costs relating to bringing the system into compliance with individual sewage treatment
 17 system rules and for reasonable attorney's fees or collection of costs from the Seller(s). Legal action by the
 18 Buyer(s) must be commenced within two years after the date on which the Buyer(s) closed the purchase of the
 19 Property where the system is located, and if no legal action is timely commenced, the right of Buyer(s) is
 20 waived. Legal requirements may exist relating to various aspects of location and status of individual sewage
 21 treatment systems. Buyer(s) is advised to contact the local unit(s) of government, state agency or qualified
 22 professional which regulates individual sewage treatment systems for further information about these issues.
 23 The following representation is made by the Seller(s) to the extent of the Seller's actual knowledge.

24 **This information is a disclosure and not intended to be part of any contract between the Buyer(s)**
 25 **and Seller(s).**

26 **PRIVATE SEWAGE SYSTEM DISCLOSURE:**

27 The Seller(s) certifies that the following type of private sewage system is on or serving the above-described
 28 Property.

29 Check appropriate sewage system and indicate on LOCATION MAP.

30 ☒ Septic Tank: ☒ with Drain Field ☐ with Mound System ☐ Seepage Tank ☐ with Open End
 31 ☐ Sealed System (holding tank) ☐ Straight-Pipe System
 32 ☐ Other (describe): _____
 33

34 Is the sewage system(s) currently in use? ☒ Yes ☐ No

35 **NOTE: If any water-using appliances, bedrooms or bathrooms have been added to the Property**
 36 **since the current system was installed, the system may no longer comply with sewage treatment**
 37 **system laws and regulations. Describe:** n/a

38
 39 Is the sewage system(s) in compliance with applicable sewage system laws and rules?

40 ☒ Yes ☐ No ☐ Unknown

41 Date system installed: Fall 2022 Installer Name/Phone: Kepido Contracting 701-361-8887

Buyer(s) Initials LM

Seller(s) Initials DM

42 **ADDRESS:** 4099 55th Ave SE Medina ND 58467

43 **TANK:** Size: 1000 Last Pumped: mid 2023 How Often Pumped: once since installed

44 **DRAIN FIELD:** Size: unknown **LOCATION:** See LOCATION MAP.

45 Describe work performed to the system since you have owned the Property:

46 none

47

48 Date work performed/by whom: n/a

49 Is the sewage system entirely within Property boundary lines including set back requirements?

50 ☒ **Yes** ☐ **No** – Location: _____ ☐ **Unknown**

51 Is the system shared? ☐ **Yes** # of units on system: _____ ☒ **No** ☐ **Unknown**

52 If Yes, is there an easement for the location/shared system? ☐ **Yes** ☐ **No**

53 Any fees associated with the sewage system? ☐ **Yes** Amount: _____ ☒ **No**

54 If Yes, Explain: _____

55 Approximate number of people using the system regularly: 2; Showers/baths taken per

56 week: 14; Laundry loads per week: 6.

57 Distance between well and sewage treatment systems: n/a.

58 Have you received any notices from any government agencies relating to the subsurface sewage treatment

59 system? ☐ **Yes** (Attach notices) ☒ **No**

60 Any known defects in the sewage treatment system? ☐ **Yes** ☒ **No**

61 If Yes, Explain: _____

SELLER'S STATEMENT: (TO BE SIGNED AT THE TIME OF LISTING)

Seller(s) hereby acknowledges that the information provided in this document is true and accurate to the best of the Seller's knowledge as of the date listed below. If any of the information becomes inaccurate after it is delivered to the Buyer(s) and before closing, the Seller(s) shall notify Buyer(s) and any Broker(s)/Agent(s) representing any party(s) to the transaction in writing of such change.

67 [Signature] 8-22-25 [Signature] 8-22-25

68 Seller Signature Date Seller Signature Date

BUYER'S ACKNOWLEDGMENT (TO BE SIGNED AT THE TIME OF THE PURCHASE AGREEMENT)

Buyer(s) acknowledges receipt of this Seller's Disclosure. Buyer(s) acknowledges that Broker(s) and Agent(s) representing the sale of this Property have not made statements concerning the condition of the Property other than those listed in this Seller's Disclosure. Buyer(s) acknowledges that Buyer(s) has been advised to verify the information listed in this statement independently. **Buyer(s) acknowledges and understands that this document is not intended to be a warranty or any kind or a substitute for any inspections of the Property Buyer(s) may wish to obtain.**

76 _____

77 Buyer Signature Date Buyer Signature Date

SELLER'S PROPERTY DISCLOSURE

This form approved by the North Dakota Association of REALTORS®, which disclaims any liability out of use or misuse of this form. Only REALTORS® licensed in North Dakota are authorized to use this form in compliance with NDAR's Statewide Forms Policy.

1 NOTICE FOR NORTH DAKOTA PROPERTY:

2 This form is designed to guide Seller(s) in making the legally required disclosures and to assist Seller(s) to avoid
3 inadvertent nondisclosures of material facts as required by statute. Seller(s) must disclose all material facts Seller(s) is
4 aware could adversely and significantly affect an ordinary buyer's use and enjoyment of the Property or any intended use
5 of the Property of which Seller(s) is aware, even if not specifically asked in this form. Additional space for disclosure is
6 provided on the last page of this form. Seller(s) may attach any additional information as necessary.
7 Refer to North Dakota Century Code 47-10-02.1 for more detail on requirements of the statute.

8 **DATE:** 08/22/2025

9 **PROPERTY ADDRESS:**

10 **SELLER(s):** Darren and Lorie Martel
11 **Street Address:** 4099 55th Ave SE
12 **City:** Medina **State:** ND **Zip Code:** 58467 **County:** Stutsman

13 **THIS IS NOT A WARRANTY:**

14 This disclosure is not a warranty or guarantee of any kind by Seller(s), Broker(s) or Agent(s) representing or
15 assisting any party in the transaction; and, it is not a substitute for inspections or warranties which the parties
16 may wish to obtain. Seller(s) is only providing information of which Seller(s) is aware. Broker(s)/Agent(s) is
17 not a property inspector and has little or no information regarding the condition of this Property.

18 Seller(s) authorizes Broker(s) and Agent(s) to provide the following information to prospective Buyer(s).
19 Information presented in this form is not intended to be part of any PURCHASE AGREEMENT between
20 Buyer(s) and Seller(s).

21 **SELLER(s):**

- 22 • Seller(s) is to personally complete this form. Please include the Property address on every page.
- 23 • Answer all line items, even if the answer is "Unknown."
- 24 • If more space is needed, place additional disclosures on Page 9 and include the line number(s) being
25 referenced.
- 26 • Seller(s) is obligated to continue to notify Buyer(s) in writing of any facts that differ from the facts
27 disclosed here (new or changed) of which Seller(s) is aware that occur up to the time of closing.
28 Seller(s) must disclose new or changed facts on the SELLER'S PROPERTY DISCLOSURE
29 ADDENDUM/AMENDMENT or in writing.

30 **BUYER(s):**

- 31 • Buyer(s) is encouraged to thoroughly inspect the Property personally or have it inspected by a third
32 party and to inquire about any specific areas of concern.
- 33 • **NOTE:** If Seller(s) answers "Unknown" to any of the questions listed below, it does not necessarily
34 mean that it does not exist on the Property. "Unknown" may mean Seller(s) is unaware that it exists
35 on the Property.
- 36 • Buyer(s) is responsible for reviewing any zoning or regulatory use restrictions affecting the
37 Property, including but not limited to mineral rights, airport zoning regulations, and municipal
38 ordinances.

39 **SELLER(s) & BUYER(s):**

- 40 • THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.
- 41 • The following information applies to all structures, such as garage(s), outbuilding(s), shed(s), etc.
- 42 • Initial by any changed answers or mistakes made on this form.

Buyer(s) Initials LM

Seller(s) Initials DM



43 GENERAL INFORMATION

		YES	NO
1	When did you purchase or build the home? <u>fall 2022</u>		
2	Has the home been occupied continuously for the past 12 months? If No, Explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	Type of title evidence. <input checked="" type="checkbox"/> Abstract <input type="checkbox"/> Owner's Title Insurance <input type="checkbox"/> Unknown		
4	Is the Property on a public or private road? <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Public – not maintained If Private or Public not maintained, Explain:		

44 STRUCTURAL ELEMENTS (UNK = Unknown, NA = Not Applicable)

		YES	NO	UNK	NA
1	Has the structure been altered? (Additions, altered roof lines, changes to load bearing walls, etc.) If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Was a permit obtained to alter the structure? If No, Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3	Have you or anyone else performed work on the Property which required a building, plumbing, electrical, or other permits? If Yes, Explain: <u>shop to the south had new powerline trenched to building to restore power</u> <u>shop to the north had new powerline trenched to building for new power service</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Was a permit obtained? If No, Explain: <u>both performed by electrical contractors</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5	Was the work approved by an inspector? If No, Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6	Is there, or has there been, water seepage, sewer back up, and/or dampness? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Have waterproofing repairs been made? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Type of basement/foundation. (Check one) <input type="checkbox"/> Brick <input type="checkbox"/> Concrete block <input checked="" type="checkbox"/> Concrete poured <input type="checkbox"/> Stone <input type="checkbox"/> Insulated concrete forms <input type="checkbox"/> Wood <input type="checkbox"/> Other If Other, Explain:				

Buyer(s) Initials LM

Seller(s) Initials DM



	YES	NO	UNK	NA
9 Are there cracked or bulged floors or walls in the basement? If Yes, Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Is drain and/or sump pump installed and working properly? If Yes, where does it drain to: <i>floor drain in garage is just a holding tank</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Are all structures located within the boundaries of the Property? If No, Explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Was any structure moved to this site? If Yes, Explain: <i>house</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Are there cracks in the driveway, garage floor, sidewalks, patio, retaining walls, or other outside hard surface areas? If Yes, Explain: <i>driveway, sidewalk & garage floor have cracks</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 What is the age of the roofing material on the home? <u>3</u> Year(s)			<input type="checkbox"/>	
15 What is the age of the roofing material on the garage/out buildings? <u>5-10</u> Year(s)			<input type="checkbox"/>	
16 Does the roof leak, or has the roof ever leaked? If Yes, Explain: <i>shop to the south had a wet spot on floor under chimney after a rain, added chalking & haven't noticed it again</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Has there been interior damage from a roof leak, condensation, or ice buildup? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Has there been damage to any roof or shingles? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19 Was insulation added to the structure? If Yes, Explain: <i>shop to the south</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Are you aware of dry rot in the building? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Buyer(s) Initials AM

Seller(s) Initials DM



	YES	NO	UNK	NA
21 Has the Property or its improvements been damaged? (Check all applicable) <input type="checkbox"/> Fire <input type="checkbox"/> Smoke <input type="checkbox"/> Wind <input type="checkbox"/> Floods <input type="checkbox"/> Hail <input type="checkbox"/> Snow <input type="checkbox"/> Frozen pipes <input type="checkbox"/> Broken water line If Yes, was the damage repaired? Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22 Have damage claims been paid to you by insurance coverage? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23 Do rain gutters and downspouts work? If No, Explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24 Are exterior and interior locks operable? Will keys be provided for each?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 Are all the window screens available?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26 Are there damaged screens? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27 Are all the storm windows available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
28 Are there broken windows or broken seals?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29 Are skylights in working condition? (i.e., no leaking, condensation, or mechanical)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
30 Is the fireplace/wood burner in working order? If No, Skip to Number 33. <i>in shop to south</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31 Is the fan, chimney, or flue in working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32 Has the fireplace/wood burner/chimney/flue been cleaned? If Yes, When:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33 Has the vents/ductwork ever been cleaned? If Yes, When:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34 Are you aware of any rough-in for future amenities that were added during construction or remodel of the home? (i.e., Plumbing rough-in for future wet-bar, bathroom, sprinkler. Electrical rough-in for hot tub, pool, sound system, generator. Heat rough-in for future gas, electric baseboard, garage heater. Gas for future fireplace, grill, firepits, etc.) If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35 Are there additional Property conditions that have not been described above? (i.e., slanted floors, sticking windows, settling, distorted door frames, sagging ceilings, siding irregularities, stained or damaged floor coverings, etc.) If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Buyer(s) Initials AM

 Seller(s) Initials DM



45 UTILITIES (UNK = Unknown, NA = Not Applicable)

		YES	NO	UNK	NA
1	Are there wells on the above-described Property? If Yes, see WELL DISCLOSURE.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Is there a Rural Water membership serving the Property? If Yes, provide membership transfer information.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Is there a private sewer system on or serving the Property? If Yes, see PRIVATE SEWAGE TREATMENT SYSTEM DISCLOSURE.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Have you ever scoped or snaked the sewer lines? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Utilities provided by: Gas: <u>can change whenever</u> Electrical: <u>Northern Plains Electric Co-op</u> Water: <u>Stutsman Rural Water District</u> Trash Pick Up: <u>n/a</u> Other: _____ Mailbox Number: <u>4099</u>	Average Monthly Cost: <u>Summer fill 70-80%</u> Average Monthly Cost: <u>\$140.00</u> Average Monthly Cost: <u>\$58.88</u> Average Monthly Cost: _____ Average Monthly Cost: _____ Key: <input type="checkbox"/> YES <input type="checkbox"/> NO			

46 LAND USE (UNK = Unknown, NA = Not Applicable)

		YES	NO	UNK	NA
1	Are there covenants, deed restrictions, or reservations? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Have you received notice from any governmental authority of future assessments? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Are there zoning infractions, non-conforming uses, or violations? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Are there encroachments, easements, life estate, right of first refusal, or existing lease(s)? If Yes, Explain: <u>USFW easement to not fill or drain water areas</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Is the Property part of a Homeowner's Association? If Yes, See HOA/CONDO ASSOCIATION DISCLOSURE.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Is the Property a Condominium? If Yes, See HOA/CONDO ASSOCIATION DISCLOSURE.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Are there shared features with adjoining property such as walls, fences, and/or driveways? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Buyer(s) Initials LM

Seller(s) Initials DM

47 **ENVIRONMENTAL CONCERNS (UNK = Unknown, NA = Not Applicable)**

48 **To your knowledge, have any of the following existed or do they currently exist on the Property:**

	YES	NO	UNK	NA
1 Fill dirt? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Asbestos? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Insect, animal, or pest infestations? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Hazardous waste/substances? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Underground storage tanks? If Yes, Explain: <i>septic tank between house & lake (holding tank)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Drainage/standing water issues? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Smoking inside any structures? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Illicit drug production/sales/usage? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Methamphetamine production/sales/usage? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Signs of soil expansion, contraction, or movement other than situations related to normal conditions? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Any suspected microbial/fungal growth? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Has there been confirmed black mold on the Property? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Is urea-formaldehyde foam insulation present? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Are there or have there been pets on the Property? If Yes, Explain: <i>one yellow lab in house, cat outside</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Are there any dead, dying or diseased trees/shrubs on the Property? If Yes, Explain: <i>no known diseases</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Buyer(s) Initials LM

Seller(s) Initials DM



49 **RADON DISCLOSURE**

50 *Radon gas is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities,*
 51 *may present health risks to persons who are exposed to it over time. Levels of radon that exceed federal guidelines have been*
 52 *found in buildings on residential real property in North Dakota. Additional information regarding radon and radon testing*
 53 *may be obtained from your local public health unit or the state department of environmental quality.*

See RADON DISCLOSURE as required by North Dakota Century Code.

54 **FLOOD DISCLOSURE – INCLUDING OVERLAND AND RIVER FLOODING**

55 This is intended to provide information to prospective Buyer(s) concerning high water elevation flood events,
 56 including overland and river flooding that may impact the Property.

57 **Note:** Whether or not Seller(s) currently carries flood insurance, it may be required in the future. Flood
 58 insurance premiums are increasing, and in some cases will rise by a substantial amount over the premiums
 59 previously charged for flood insurance for the Property. As a result, Buyer(s) should not rely on the premiums
 60 paid for flood insurance on this Property previously as an indication of the premiums that will apply after
 61 Buyer(s) completes their purchase.

		YES	NO	UNK	NA
1	Is the Property in a designated 100-year floodplain? If Yes, see FLOOD DISCLOSURE.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Has the Property been impacted by high water elevation flood events including overland and river flooding? If Yes, see FLOOD DISCLOSURE.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Do you carry flood insurance? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Is the flood insurance transferable? If Yes, Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

62 **PROPERTY TAX/SPECIALS DISCLOSURE**

63 Check appropriate box:

64 ☐ Yes ☒ No Is there an exclusion from market value for home improvements on this Property. Any valuation
 65 exclusion shall terminate upon sale of the Property, and the Property's estimated market value for property
 66 tax purposes shall increase. If a valuation exclusion exists, Buyer(s) is encouraged to look into the resulting
 67 tax consequences.

68 ☐ Yes ☒ No Is the Property subject to any preferential property tax status or any other credits affecting
 69 the Property (e.g. Disability, Green Acres, CRP, RIM, Rural Preserve, Primary Residence Credit, etc.)?
 70 If Yes, Explain:

71 _____
 72 _____
 73 _____

74 If Yes, would these terminate upon the sale of the Property? ☐ Yes ☐ No If Yes, Explain:

75 _____
 76 _____
 77 _____

Buyer(s) Initials LM

Seller(s) Initials DM



78 **SYSTEMS & APPLIANCES**

79 Answers below do not guarantee item is included or not included in sale. See PURCHASE AGREEMENT for
80 inclusions/exclusions.

81 **NI = Not Included, WK = Working, NW = Not Working, UNK = Unknown, N/A = Not applicable.**

		NI	WK	NW	UNK	N/A		NI	WK	NW	UNK	N/A
1												
2	Air Exchanger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Oven	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Antenna & Cable	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing Fixtures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Attic Fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plumbing Systems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Bathroom Vent Fan(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pool & Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6	Carbon Monoxide Detectors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Range	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Ceiling Fan(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Range Hood	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Central Air Cooling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refrigerator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Central Heating System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Satellite Dish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10	Central Vacuum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sauna	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Dehumidifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Septic Tank	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Dishwasher	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke Detector (Battery)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Doorbells	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke Detector (Hardwire)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Drain Tile System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Solar Collector(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15	Dryer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sump Pump(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16	Electrical Systems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supplemental Heater(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17	Electronic Air Purifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18	Exhaust Fan(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wall Air Conditioner(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19	Fire Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	Freezer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washer/Dryer Hookups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	Furnace Humidifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Heater(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	Garage Door Auto Reverse	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Softener	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23	Garage Door Controls	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Treatment System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
24	Garage Door Openers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Window Air Conditioner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
25	Garbage Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Window Treatments	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26	Hot Tub	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wood Burning Stove	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27	Incinerator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28	Intercom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	Lawn Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	Microwave Oven	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>
31	Security System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Audio Visual System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Buyer(s) Initials LM

Seller(s) Initials DM



82 **SECURITY SYSTEM:**

83 Security System Equipment (Check one) ☒ Owned ☐ Leased ☐ N/A
84 Security System Service Contract is transferable (Check one) ☐ Yes ☐ No ☒ N/A
85 Terms of Security System Contract (Explain): N/A
86 _____

87 **ADDITIONAL DISCLOSURES:**

88 **FOREIGN INVESTMENT IN REAL PROPERTY TAX ACT ("FIRPTA"):**

89 As a general rule, 26 U.S. Code 1445 (hereinafter "FIRPTA") requires a transferee (Buyer(s)) of a United States
90 real property interest to withhold a tax from the proceeds of any disposition of the real property interest if the
91 transferor (Seller(s)) is a foreign person (any person other than a United States person), unless an exception
92 to the FIRPTA withholding requirements applies. Exemptions from the general rule are set forth in the
93 FIRPTA. Due to the complexity of the FIRPTA, both the Buyer(s) and the Seller(s) are advised to seek
94 appropriate legal and tax advice regarding FIRPTA compliance, since failure to adhere to the FIRPTA
95 withholding rules could result in legal liability to both the Buyer(s) and Seller(s) and their Broker(s)/Agent(s)
96 or qualified substitutes.

97 Seller(s) hereby represents and warrants that Seller(s) ☐ IS ☒ IS NOT a foreign person, as defined by the
98 FIRPTA. This representation of the Seller(s) shall survive closing. Seller's Broker(s)/Agent(s) and Buyer's
99 Broker(s)/Agent(s), and any qualified substitute, as those terms are defined by the FIRPTA, may rely upon
100 this representation.

101 If the Seller(s) represents that it is a foreign person, the Buyer(s) may be subject to income tax withholding
102 requirements, and the Buyer(s) could be personally liable for failing to withhold a tax from the proceeds of the
103 real estate disposition, if none of the enumerated exemptions to the FIRPTA apply to the transaction. If the
104 Seller(s) represents that it is a foreign person, but that one of the exemptions to the FIRPTA apply, Buyer(s)
105 may require Seller(s) to provide specific documentation as prescribed by the FIRPTA to verify, under penalty
106 of perjury, that one of the exemptions to the FIRPTA withholding requirements applies to the transaction. If
107 the Seller(s) represents that it is not a foreign person, the Buyer(s), or its Broker(s)/Agent(s) or qualified

Buyer(s) Initials LM

Seller(s) Initials DM



108 substitutes, may require the Seller(s) to provide specific documentation as prescribed by the FIRPTA to verify,
109 under penalty of perjury, that the Seller(s) is not a foreign person. On or before closing, the Buyer(s) and
110 Seller(s) agree to complete, execute, and deliver any affidavit, instrument, or statement which may reasonably
111 be required to comply with FIRPTA requirements.

112 **SELLER'S STATEMENT: (TO BE SIGNED AT TIME OF LISTING)**

113 Seller(s) hereby states the condition of the Property to be as stated above and authorizes any Broker(s) or
114 Agent(s) representing any party in this transaction to provide a copy of this Statement to any person or entity
115 in connection with any actual or anticipated sale of the Property. Seller(s) hereby acknowledges that the
116 information provided in this document is true and accurate to the best of Seller's knowledge as of the date
117 listed below. Seller(s) is obligated to continue to notify Buyer(s) in writing of any facts that differ from the
118 facts disclosed here (new or changed) of which Seller(s) is aware that occur up to the time of closing. See
119 SELLER'S PROPERTY DISCLOSURE AMENDMENT/ADDENDUM.

120 Don Mate 8-22-25
121 Seller Signature Date
122 [Signature] 8-22-25
123 Seller Signature Date

122 **BUYER'S ACKNOWLEDGEMENT: (TO BE SIGNED AT THE TIME OF PURCHASE AGREEMENT)**
123 Buyer(s) acknowledges receipt of this Agreement.

123 Buyer(s) acknowledges receipt of this Seller's Disclosure. Buyer(s) acknowledges that Broker(s) and Agent(s)
124 representing the sale of this Property have not made statements concerning the condition of the Property other
125 than those listed in this Seller's Disclosure. Buyer(s) acknowledges that Buyer(s) has been advised to verify
126 the information listed in this Statement independently.

127 Buyer(s) acknowledges and understands that this document is not intended to be a warranty of
128 any kind or a substitute for any inspection of the Property Buyer(s) may wish to obtain.

129 _____
 130 Buyer Signature Date Buyer Signature Date