



R.I. REAL ESTATE SALES DISCLOSURE FORM  
RHODE ISLAND ASSOCIATION OF REALTORS®



DATE \_\_\_\_\_ PROPERTY ADDRESS 67 Colvintown Rd

Coventry, RI 02816

Seller Michael & Holly Abney Current Address \_\_\_\_\_

SELLER

Seller has occupied subject property? Yes  No \_\_\_\_\_ If yes, number of years and when: \_\_\_\_\_

"Prior to the signing of an agreement to transfer real estate (vacant land or real property and improvements consisting of a house or building containing one (1) to four (4) dwelling units), Seller is providing Buyer with this written disclosure of all deficient conditions of which Seller has knowledge. This is not a warranty by Seller that no other defective conditions exist, which there may or may not be. Buyer should estimate the cost of repair or replacement of deficient conditions prior to submitting an offer on this real estate. Buyer is advised however not to rely solely upon the representation of Seller made in this disclosure, but to conduct any inspections or investigations which Buyer deems to be necessary to protect his or her best interest." Nothing contained herein shall be construed to impose an affirmative duty on the Seller to conduct inspections as to the condition of this real estate. **It is recommended that a separate sales disclosure form be completed for each unit of a multi-unit property.**

STRUCTURE

Please indicate by a check mark for "Yes" or "No," or mark "UK" (Unknown), if you do not have actual knowledge of the property conditions.

- 1. Year Built 1984 Addition(s): \_\_\_\_\_ Year(s): \_\_\_\_\_
- 2. Roof (Shingles) Age: 5 # of Layers: 2 Previous Repairs: \_\_\_\_\_ Known Defects: N/A
- 3. Fireplaces # \_\_\_\_\_ # Working: \_\_\_\_\_ Maintenance History: \_\_\_\_\_
- 4. Wood/Coal/Gas Stove(s) Yes  No \_\_\_\_\_ If yes, Type Pellet When installed? 11/09 Permit received? Yes \_\_\_\_\_ No
- If yes, attach copy \_\_\_\_\_
- 5. Insulation Wall/Type: Y Ceiling/Type: Y Floor/Type: \_\_\_\_\_ Unknown
- Ureaformaldehyde Insulation: Yes  No \_\_\_\_\_ Unknown \_\_\_\_\_
- 6. Electrical Service Fuses \_\_\_\_\_ Circuit Breakers  Amps 100 Unknown \_\_\_\_\_
- Type: Aluminum Wiring \_\_\_\_\_ Knob & Tube \_\_\_\_\_ BX Cable \_\_\_\_\_ Romex \_\_\_\_\_ Other \_\_\_\_\_ Unknown \_\_\_\_\_
- 7. Heating System Type: FHW Age: 12 If oil fuel, size of tank: \_\_\_\_\_ Number of zones: 2
- Underground tanks on property? Yes \_\_\_\_\_ (Size?) \_\_\_\_\_ No \_\_\_\_\_ Unknown
- Supplemental heating? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, type? \_\_\_\_\_
- 8. Domestic Hot Water Heating Source: GAS If a separate tank, capacity: \_\_\_\_\_ gal. Age \_\_\_\_\_
- Rented? Yes \_\_\_\_\_ No  If yes, Company rented from \_\_\_\_\_
- 9. Air Conditioning Central Air \_\_\_\_\_ Number of zones \_\_\_\_\_ Window Units \_\_\_\_\_ Number of units \_\_\_\_\_ Age \_\_\_\_\_
- Location \_\_\_\_\_ Maintenance History \_\_\_\_\_

Additional Structural Information (Attach additional sheets if necessary.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

UTILITIES

- 10. Sewage System Type (private, public or both): Septic If public system available, is it connected? Yes \_\_\_\_\_ No \_\_\_\_\_
- If public, Outstanding Assessment? Yes \_\_\_\_\_ No \_\_\_\_\_ Minimum Annual Fee: \$ \_\_\_\_\_ Balance \$ \_\_\_\_\_
- If private, Cesspool \_\_\_\_\_ Septic  Leach field \_\_\_\_\_ Galleys \_\_\_\_\_ Unknown \_\_\_\_\_ Other \_\_\_\_\_
- #Bedrooms/per OWTS Design: \_\_\_\_\_ Copy Available? Yes \_\_\_\_\_ No \_\_\_\_\_
- Location: \_\_\_\_\_ Date installed: \_\_\_\_\_
- Maintenance History (Any Failure): \_\_\_\_\_ Sanitation Company used: \_\_\_\_\_
- Last pumped: \_\_\_\_\_ Other Connections (Drywell, etc.): \_\_\_\_\_

"Potential purchasers of real estate in the state of Rhode Island are hereby notified that many properties in the state are still serviced by cesspools as defined in R.I.G.L. Chapter 23-19.15 (The RI Cesspool Phase-Out Act of 2007). Cesspools are a substandard and inadequate means of sewage treatment and disposal, and cesspools often contribute to groundwater and surface water contamination. Requirements for abandonment and replacement of high-risk cesspools as established in R.I.G.L. Chapter 23-19.15 are primarily based upon a cesspool's non-treatment of wastewater and the inherent risks to public health and the environment due to a cesspool's distance from a tidal water area, or a public drinking water resource. Purchasers should consult R.I.G.L. Chapter 23-19.15 for specific cesspool abandonment or replacement requirements. An inspection of property served by an on-site sewage system by a qualified professional is recommended prior to purchase. Pursuant to R.I.G.L. Section 5-20.8-13, potential purchasers shall be permitted a ten (10) day period to conduct an inspection of a property's sewage system to determine if a cesspool exists, and if so, whether it will be subject to the phase-out requirements as established in R.I.G.L. Chapter 23-19.15."

**UTILITIES**

11. **Water System** Public  Filtration System? Yes  No   
 Private  If private: "Buyer understands that this property is, or will be served by a private water supply (well) which may be susceptible to contamination, availability, and potentially harmful to health. If a public water supply is not available, the private water supply must be tested in accordance with regulations established by the RI Department of Health pursuant to R.I.G.L. Section 23-1-5.3. The Seller of that property is required to provide the Buyer with a copy of any private water supply (well) testing results in the Seller's possession and notify the Buyer of any known problems with the private water supply (well)."  
 Dug well or drilled well? \_\_\_\_\_ Depth: \_\_\_\_\_ Location: \_\_\_\_\_  
 Well water inspection certificate available? Yes  No  If yes, attach copy  
 Water Quality Problems? Yes (Explain) \_\_\_\_\_ No   
 Filtration System? Yes  No  Treatment System? Yes  No

Additional Utilities Information (Attach additional sheets if necessary.) \_\_\_\_\_

**MUNICIPAL INFORMATION**

12. **Property Tax** \$ 4295 for fiscal/calendar year ending 2014 Tax Rate: \_\_\_\_\_ Current Exemptions: \_\_\_\_\_

13. **Easements/ Encroachments** Seller is legally required to provide the Buyer with a copy of any previous surveys of the property and documentation of conservation and/or preservation easements and restrictions that are in the Seller's possession and notify the Buyer of any known easements, encroachments, covenants or restrictions of the Seller's property. A Buyer may wish to have a boundary or other survey independently performed at Buyer's expense.  
 Does Seller have a copy of any surveys in his/her possession? Yes  No  If yes, attach copy  
 Does Seller have any knowledge of easement(s), preservation restrictions or right(s) of way on property? Yes  No  If yes, describe \_\_\_\_\_  
 Does Seller have a copy of documentation of conservation and/or preservation easements or restrictions in his/her possession? Yes  No  If yes, attach copy  
 Does Seller have any knowledge of Encroachments? Yes  No  If yes, describe \_\_\_\_\_

14. **Deed** Type of deed to be conveyed: warranty Number of parcels conveying: \_\_\_\_\_

15. **Zoning/ Historical** "Buyers of real estate in the State of Rhode Island are legally obligated to comply with all local real estate ordinances; including, but not limited to ordinances on the number of unrelated persons who may legally reside in a dwelling, as well as ordinances on the number of dwelling units permitted under the local zoning ordinances. If the subject property is located in a historic district, that fact must be disclosed to the buyer, together with the notification that property located in a historic district may be subject to construction, expansion, or renovation limitations. Contact the local building inspection official for details."  
 Classification: R Is the current use a permitted use under the current zoning regulations? Yes  No  Unknown  If no, explain: \_\_\_\_\_  
 Is the current use non-conforming in any other way? Yes  No  Unknown  If yes, explain: \_\_\_\_\_  
 Is this property located in a historic district or subject to historic restrictions? Yes  No  Unknown

16. **Restrictions** Plat or other? Yes (Explain) \_\_\_\_\_ No  Copy available to Buyer: \_\_\_\_\_

17. **Building Permits** Have you applied for or been granted a special permit for this property? Yes  No   
 If yes, explain: \_\_\_\_\_  
 Have building permits been obtained for all required construction and/or renovation while you have owned the property? Yes  No  If no, explain: \_\_\_\_\_

18. **Building Code/or Minimum Housing** Violations: \_\_\_\_\_

19. **Flood Plain** Is the property located in a flood plain? Yes  No  Unknown   
 Is there flood insurance on the property? Yes  No   
 Flood maps and flood insurance rates are subject to change. For more information, contact the Federal Emergency Management Agency (FEMA) Map Service Center, the National Flood Insurance Program (NFIP) coordinator in the municipality, or an insurance agent for more information.

20. **Wetlands** The location of coastal wetlands, bays, fresh water wetlands, ponds, marshes, river banks or swamps, as those terms are defined in R.I.G.L. 2-1 and the associated buffer areas may impact future property development. If known, Seller must disclose to the Buyer any such determination on all or part of the land made by the Department of Environmental Management.  
 Has all or part of property been determined to be coastal wetland, bog, freshwater wetland, pond, marsh, river bank or swamp? Yes (Explain) \_\_\_\_\_  
 No  Unknown

21. **Megan's Law** If the Buyer is concerned about convicted felons in the neighborhood, he/she should contact the local police authority.

22. **Farms** Any farm(s) that may be in the municipality are protected by R.I.G.L. 2-23, the "Right to Farm Law." If Buyer feels that this information is relevant to Buyer's decision to purchase this property, Buyer should investigate further.

Additional Municipal Information (Attach additional sheets if necessary.) \_\_\_\_\_

**CONDO / MULTI UNIT**

**23. Condo/Assoc. Fees** Monthly Condo/Association Fee: \$ \_\_\_\_\_ Heat/Electric/Water Included in Fee? \_\_\_\_\_  
 Working Capital Deposit? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, Amount: \$ \_\_\_\_\_  
 Buyer to pay? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Current Outstanding Assessments: \$ \_\_\_\_\_  
 Fire Alarm System up to date? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Anticipated Future Assessments: Yes \_\_\_\_\_ If yes, describe \_\_\_\_\_  
 No \_\_\_\_\_ Unknown \_\_\_\_\_

**24. Multi-family or Other Rental Property** Are income and expense figures available? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, attach copies  
 Lease(s) period: \_\_\_\_\_ Copies available? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Number of Units: \_\_\_\_\_  
 Are the existing rents current? Yes \_\_\_\_\_ No \_\_\_\_\_ Security Deposits \_\_\_\_\_  
 Are all units legal for the current zoning and use? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Appliances Offered: \_\_\_\_\_

**Additional Condo/Multi Unit Information (Attach additional sheets if necessary.)** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**NOTICES / DISCLOSURES**

**25. Pools & Equipment** Age of pool: N/A Maintenance history: \_\_\_\_\_  
 Was a permit obtained for the pool? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

**26. Lead Contamination** "Every Purchaser of any interest in residential property is notified that such property may present exposure to lead from lead-based hazards 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 property is required to provide the Buyer with any information on lead or lead hazards in paint, interior dust, soil, or water from risk assessments or inspections in the Seller's possession and notify the Buyer of any known or potential lead or lead-based hazards, and must receive a lead disclosure and educational brochure. A risk assessment or inspection for possible lead-based hazards is recommended prior to purchase." Have you ever had a lead paint inspection conducted? Yes \_\_\_\_\_ No   
 If yes, copy of report available? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Lead compliance certificate(s) available? Yes \_\_\_\_\_ No \_\_\_\_\_

**27. Smoke/Carbon Monoxide Detectors** Installed and functioning? Yes  No \_\_\_\_\_ R.I.G.L. 23-28.1 requires certain residential dwellings to be equipped with an approved smoke detector and carbon monoxide detector system. Three-unit dwellings must be equipped with interconnected smoke detectors effective July 1, 2008. Contact the local Fire Marshal to determine the requirements for this Property.

**28. Radon** "Radon has been determined to exist in the State of Rhode Island. Testing for the presence of Radon in residential real estate prior to purchase is advisable."  
 Has building been tested for Radon? Yes \_\_\_\_\_ No  If yes, # of Pico curies/liter: \_\_\_\_\_  
 Copy of test available? Yes \_\_\_\_\_ No  Any action taken? \_\_\_\_\_

**29. Homeowners Insurance Claims History** Are you aware of any homeowners insurance claims pertaining to this property that have been filed while you have owned it? Yes \_\_\_\_\_ No  If yes, please list all claims. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Additional Notices/Disclosures Information (Attach additional sheets if necessary.)** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**STRUCTURE**

Do any defects/malfunctions exist in any of the following? Mark Yes (Y), No (N), Unknown (UK) or Not Applicable (NA).

- | <u>Y</u>                 | <u>N</u>                            | <u>UK</u>                           | <u>NA</u>                           |  | <u>Y</u>                 | <u>N</u>                            | <u>UK</u>                | <u>NA</u>                |                    | <u>Y</u>                 | <u>N</u>                            | <u>UK</u>                | <u>NA</u>                           |              |
|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------|--------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Basement                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Driveway(s)        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Plumbing     |
| <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Bulkhead/Hatchway                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Exterior Walls     | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Sidewalks    |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Ceilings                                     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Floors             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Walls/Fences |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Chimney(s)                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Foundation/Slab(s) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Windows      |
| <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Doors  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Interior Walls     |                          |                                     |                          |                                     |              |
| <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | Other Structural Components (Describe) _____ |                          |                                     |                          |                          |                    |                          |                                     |                          |                                     |              |

If the answer to any of the items is Yes (Y), please explain. (Attach additional sheets if necessary.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EQUIPMENT / SYSTEMS**

Does any item, equipment or system in or on the property and conveying with the sale need repair or replacement? Mark Yes (Y), No (N), Unknown (UK) or Not Applicable (NA).

- | <u>Y</u>                 | <u>N</u>                            | <u>UK</u>                | <u>NA</u>                           |                         | <u>Y</u>                 | <u>N</u>                            | <u>UK</u>                | <u>NA</u>                           |                       | <u>Y</u>                            | <u>N</u>                            | <u>UK</u>                | <u>NA</u>                           |                                       |
|--------------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------|--------------------------|-------------------------------------|--------------------------|-------------------------------------|-----------------------|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Alarm/Security System   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Generator             | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Satellite Dish                        |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Ceiling/Whole House Fan | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | Hot Tub/Sauna         | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Sump Pump                             |
| <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Central Vac/Equipment   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Intercom System       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Trash Compactor                       |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Dishwasher              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Jacuzzi/Whirlpool     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Washer                                |
| <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Dryer                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Kitchen Stove/Oven    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | Doorbell <i>Broken when purchased</i> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Freezer                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Lawn Sprinkler System | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | Living Room Fan <i>purchased</i>      |
| <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Garage Door Opener(s)   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Lighting Fixtures     | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | _____                                 |
| <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Garbage Disposal        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Refrigerator          | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | _____                                 |

If the answer to any of the items is Yes (Y), please explain. (Attach additional sheets if necessary.) The Doorbell and Living room ceiling fan have not worked since 2011. Garbage Disposal not functioning - not compatible w/ Septic.

Summer 2013 - Coventry experienced some flash flooding. A small amount of water got in the basement - cleaned up w/ towels. We re-routed the gutters and added extenders onto them and it hasn't happened again.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CONDITIONS	<p><b>Do any of the following conditions exist? Yes (Y), No (N), Unknown (UK) or Not Applicable (NA).</b></p> <p style="text-align: center;"><b>Y N UK NA</b></p>		<p style="text-align: center;"><b>Y N UK NA</b></p>			
	69	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Asbestos	83	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Water Penetration
	70	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Cemetery or Burial Ground on Property	84	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Wood Rot
	71	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Diseased Tree(s) within 100' of Dwelling/Outbuilding	Previous Flooding:		
	72	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Endangered Species/Habitat on Property	85	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Into the Improvements
	73	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Hazardous or Toxic Waste	86	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Onto the Property
	74	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Hazardous or Toxic Waste Site Within 1 Mile	Structural Repairs:		
	75	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Improper Drainage	87	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Previous Foundation Repairs
	76	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Landfill	88	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Other Structural Repairs
	77	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Mold	Termites or Other Wood-Destroying Insects:		
78	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Previous Fire/Smoke Damage	89	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Active Infestation	
79	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Settling	90	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Previous Treatment	
80	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Soil Movement	91	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Previous Damage Repaired	
81	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Subsurface Structure(s) or Pit(s)	92	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Damage Needing Repair	
82	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Synthetic Stucco / EIFS	93	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Current Service Contract	
<p><b>If the answer to any of the conditions is Yes (Y), please explain. (Attach additional sheets if necessary.)</b></p> <p><u>83 + 86 - Minor water penetration - See page 4</u></p>						
COMMENTS	<p><b>Additional Comments:</b> _____</p> <p>_____</p> <p>_____</p> <p>_____</p>					
	<p><b>STATEMENT</b></p> <p>Any agreement to transfer real estate shall contain an acknowledgment that a completed real estate disclosure form has been provided to the Buyer by the Seller in accordance with the provisions of this section. This form has been designed to meet the Real Estate Disclosure requirements of Rhode Island General Law 5-20.8. Seller acknowledges that the above property information is accurate, true and complete to the best of his knowledge, and that no information concerning the property has been knowingly withheld. Seller further acknowledges that the legal and/or tax consequences of this real estate sale and all transactions related thereto may be best discussed with an attorney, accountant, or other appropriate party and that Seller has not relied on the Listing Licensee(s) for such advice. <b>Seller is obligated to report to the Listing Licensee(s) any known changes prior to sales agreement and prior to closing.</b></p>					
	<p><b>ACKNOWLEDGMENT</b></p> <p>Seller hereby acknowledges that the information set forth above is true and accurate to the best of my (our) knowledge. Seller further agrees to defend and indemnify the Listing Licensee(s) for disclosure of any of the information contained herein. Seller further acknowledges receipt of copy of Seller's R.I. Real Estate Sales Disclosure Form.</p> <p>Date <u>7-28-14</u> Seller <u>Holly Abney</u> Date _____ Seller _____</p> <p>Date <u>7/29/14</u> Seller <u>Michael J. Abney</u> Date _____ Seller _____</p> <p>Buyer/Prospective Buyer acknowledges receipt of Seller's R.I. Real Estate Sales Disclosure Form before purchase. Buyer acknowledges that Broker has not verified the information herein and Buyer has been advised to verify information independently.</p> <p>Date _____ Buyer _____ Date _____ Buyer _____</p> <p>Date _____ Buyer _____ Date _____ Buyer _____</p>					
	<p><b>CHANGES</b></p> <p><b>Changes since property was first listed:</b> _____</p> <p>_____</p> <p>_____</p> <p>Date _____ Seller's Initials _____ Date _____ Buyer's Initials _____</p>					



**Seller's Lead Disclosure**  
Rhode Island Association of REALTORS®



**Housing Sales - Rhode Island State and Federal Lead Disclosure Regulations**  
**Disclosure of Information on Lead-Based Paint and Lead-Based Hazards**

**Lead Warning Statement**

**Federal Law** for Lead Contamination: "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."

**Rhode Island State Law** for Lead Contamination: The Seller of **ANY INTEREST** in Residential property shall disclose to the Buyer any known information on lead-based paint or lead-based hazards in paint, interior dust, soil, or water, or potential lead-based paint or lead-based hazards and their location(s), or potential location(s). This includes any records or reports known and reasonably available to the Seller regarding such hazards or potential exposure to such hazards in the property. The Seller shall maintain copies of any environmental lead inspection report for as long as they own the property. The Buyer shall receive an EPA educational pamphlet containing the insert "What You Should Know About the R.I. Lead Law".

**Seller's Disclosure (initial)**

\_\_\_ (a) Presence of lead in paint, interior dust, soil or water and/or lead-based hazards in paint, interior dust, soil, or water (check one below):

Known lead-based paint and/or lead-based hazards present in the housing (explain).  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_ (b) Records and reports available to the seller (check one below):

Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based hazards in the housing, including the most recent inspection report dated \_\_\_\_\_ (list additional documents below).  
\_\_\_\_\_  
\_\_\_\_\_

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

**Purchaser's Acknowledgment (initial)**

- \_\_\_ (c) Purchaser has received copies of all information listed above.
- \_\_\_ (d) Purchaser has received the pamphlet "Protect Your Family from Lead in Your Home" that includes the R.I. section "What You Should Know About the R.I. Lead Law".
- \_\_\_ (e) Purchaser has received a copy of "Requirements for New Owners of Rental Properties" or "Requirements for Property Owners Who Own Ten or More Residential Rental Units" regarding lead (Housing Resources Commission/R.I. Department of Health), whichever is applicable.
- \_\_\_ (f) Purchaser has (check one below):

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

**Agent's Acknowledgment (initial)**

(g) Agent has informed the seller of the seller's obligations under 42 U.S.C. 4852(d), Section 9.0 of the Rules and Regulations of the R.I. Department of Health and Lead Hazard Mitigation Standards, and is aware of his/her responsibility to ensure compliance.

**Certification of Accuracy**

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

\_\_\_\_\_  
Purchaser Date  
\_\_\_\_\_  
Purchaser Date  
\_\_\_\_\_  
Agent Date

DocuSigned by:  
 3/13/2015  
A88738394B1D480...  
DocuSigned by:  
 3/13/2015  
Seller  
F5B810747414...  
DocuSigned by:  
 3/13/2015  
Agent  
BEDFF74BA42047A...