



# SELLER'S PROPERTY INFORMATION REPORT

TO BE COMPLETED BY SELLER

| Seller's Name(s): |   |                            | Date:                        |               | ,         |
|-------------------|---|----------------------------|------------------------------|---------------|-----------|
|                   |   |                            |                              |               |           |
|                   |   |                            |                              |               |           |
| Property Address  | :   |                            |                              |               |           |
|                   | Street  |                            | City/Town                    |               |           |
| Type of Property: | : □ Single Family Residence,<br>□ Land Only, □ Commercial | ☐ Multi-Family Resider     | nce (duplex, triplex, etc.), | Condominium/T | ownhouse, |
| Use of Property:  | □ Primary Residence, □ Vacat                              | ion Property, 🗌 Rental Pro | operty,  Other:              |               |           |

**INTRODUCTION:** This Report provides information from the Seller based on Seller's personal knowledge concerning the above Property. Unless otherwise disclosed, Seller does not have any expertise in construction, architecture, engineering, surveying or any other skills that would provide Seller with special knowledge concerning the condition of the Property. Other than having owned the Property, Seller has no greater knowledge about the Property than that which could be obtained by a careful inspection performed by or on behalf of a potential buyer. The real estate agents involved with the sale of this Property do not conduct or perform any inspection of the Property. Unless otherwise disclosed, Seller has not inspected or examined those portions of the Property that are generally inaccessible. THIS REPORT DOES NOT CONSTITUTE A WARRANTY OF ANY KIND BY THE SELLER OR BY ANY REAL ESTATE AGENT CONCERNING THE CONDITION OF THE PROPERTY. THIS REPORT IS NOT A SUBSTITUTE FOR A PROPERTY INSPECTION. BUYER HAS THE OPPORTUNITY TO REQUEST THAT SELLER AGREE TO A PROPERTY INSPECTION AS PART OF ANY CONTRACT FOR THE SALE OF THE PROPERTY.

**INSTRUCTIONS TO SELLER:** (1) Complete this form yourself. (2) Answer ALL questions. (3) Disclose conditions that you know about that affect the Property. (4) Attach additional pages to this Report if additional information is required. IF YOU DO NOT KNOW THE FACTS, WRITE "DON'T KNOW." DO NOT GUESS THE ANSWER TO ANY QUESTION.

#### THE STATEMENTS IN THIS REPORT ARE MADE BY THE SELLER. THEY ARE NOT STATEMENTS OR REPRESENTATIONS MADE BY ANY REAL ESTATE AGENT(S).

| 1.     | LAND (SOILS, DRAINAGE, BOUNDARIES AND EASEMENTS)   |  |
|--------|--|--|
| (a)    | Has any fill or off-site material been placed on the Property?                               | □ YES □ NO □ DON'T KNOW                |
| (b)    | Do you know of any sliding, settling, subsidence, earth movement, upheaval or earth          |  |
|        | stability problems that have affected the Property?  | □ YES □ NO □ DON'T KNOW                |
| (c)    | Is the Property located in a federal flood hazard zone or wetlands, public waters or conserv | ation                                  |
|        | zones designated by federal, state or local statute, regulation or ordinance?                | □ YES □ NO □ DON'T KNOW                |
| (d)    | Do you know of any past or present drainage, high water table, or flood problems affecting   |  |
|        | the Property?  | $\Box$ YES $\Box$ NO $\Box$ DON'T KNOW |
| (e)    | Is the Property served by a road maintained by the municipality?                             | $\Box$ YES $\Box$ NO $\Box$ DON'T KNOW |
| (f)    | If the answer to (e) above is "No," how is the road serving the property maintained?         |  |
|        | □ Road Maintenance Agreement □ Homeowners/Road Association □ Private (by owner               | r)                                     |
|        | Annual Cost(s):  |  |
|        | Other (explain)  |  |
| (g)    | Are there public or private landfills or dumps (compacted or otherwise) on the Property?     |  |
| -      | or on any abutting property?   | □ YES □ NO □ DON'T KNOW                |
| (h)    | Are there currently any underground fuel storage tanks                                       |  |
|        | on the Property?   | $\Box$ YES $\Box$ NO $\Box$ DON'T KNOW |
|        | If "yes", Fuel Type:   |  |
| Seller | 's initials Page 1 of 6 Buyer  | 's initials                            |

| (i)        | Have there been any underground fuel storage tanks on the Property in the past?                         | 🗆 YES 🗌 NO 🔲 DON'T KNOW   |
|------------|---|---|
|            | If yes, have they been removed?   | 🗆 YES 🗆 NO 🗆 DON'T KNOW   |
|            | When?         By whom?  |   |
| (j)        | Do you know the location of the boundary lines of the Property?   | 🗆 YES 🗆 NO 🗆 DON'T KNOW   |
| (k)        | Are the boundary lines of the Property marked in any way?   | □ YES □ NO □ DON'T KNOW   |
|            | If yes, how are they marked?  |   |
| (1)        | Has the Property been surveyed?   | □ YES □ NO □ DON'T KNOW   |
|            | If yes, when? By whom?  |   |
| (m)        | Is a copy of the survey available?  | $\Box$ YES $\Box$ NO $\Box$ DON'T KNOW                          |
| (n)        | Are there any easements or rights of way affecting the Property?  | □ YES □ NO □ DON'T KNOW   |
| (0)        | Are there any boundary line disputes, claims of adverse possession, encroachments,                      |   |
|            | shared driveways, party walls or zoning set back violations affecting the Property?                     | $\Box$ YES $\Box$ NO $\Box$ DON'T KNOW                          |
| Fur        | ther explanation of any of the above:   |   |
| 2.         | MECHANICAL, ELECTRICAL, APPLIANCES & OTHER SYSTEMS  |   |
| HE         | ATING/AIR CONDITIONING/HOT WATER SYSTEMS  |   |
|            | Heating System: Base Board Hot Air Radiant Other (explain) Age  | of Furnace/Boiler Don't Know                                    |
|            | Type: Oil Natural Gas Propane Electric Wood Wood Pellet Coal  |   |
|            | ther (explain) (0   |   |
|            | Gallons (or other measure). Provider  | roperty used: Full Time Seasonally                              |
|            | consumption may vary by user, number of occupants and weather conditions                                | 1 5 5   |
|            | Air Conditioning: Yes No If "yes", describe (central, heat pump, window, etc.)                          |   |
|            | ·   |   |
|            | Hot Water System: Hot Water Tank Domestic/Off Boiler On Demand Age of I                                 | Hot Water System Don't Know                                     |
|            | Type: Oil Electric Natural Gas Propane Coal Solar Wood Pellet   |   |
| $\Box C$   | ther (Check all that apply).  |   |
|            | Water Tank is: Owned Rented. If rented, from whom Mor   |   |
|            | Alternative Energy System(s): $\Box$ Solar $\Box$ Wind $\Box$ Hydroelectric $\Box$ Geothermal $\Box$ Ur | known (Check all that apply). Energy                            |
|            | rned to grid: $\Box$ Yes $\Box$ No  |   |
|            | Electrical System: Electrical service panel has:  Fuses  Circuit Breakers  Other (exp                   | plain)  |
|            | n Breaker Amperes Amps Don't Know   |   |
| (f) /      | Are you aware of any problems or conditions that affect any of the above systems? $\Box$ Yes            | $\Box$ No If "yes", explain in detail:                          |
|            |   |   |
|            |   |   |
| Ann        | ual electricity usage: \$ Electric utility provider: P  | roperty used  Full Time  Seasonally                             |
| Elec       | tricity consumption may vary by user, number of occupants, number of appliances and wea                 | ther conditions   |
|            | LEPHONE / INTERNET / TELEVISION   |   |
|            | is landline telephone service present at the Property? $\Box$ Yes $\Box$ No If "yes", current provide   |   |
|            | is cellular telephone service available at the Property? $\Box$ Yes $\Box$ No If "yes", list available  |   |
|            | is internet service present at the Property? $\Box$ Yes $\Box$ No If "yes", current provider:           |   |
| If "y      | res", service is: $\Box$ Dial Up $\Box$ Broadband $\Box$ Cable $\Box$ Satellite $\Box$ DSL              |   |
|            | is television service present at the Property? $\Box$ Yes $\Box$ No If "yes", current provider:         |   |
| If "y      | res", source is: 🗆 Antenna 🗆 Cable 🛛 Satellite 🗆 DSL  |   |
| <u>(k)</u> | OTHER EQUIPMENT AND APPLIANCES INCLUDED IN SALE   |   |
| Che        | ck the items that will be included in the sale of the Property:   |   |
| $\Box E$   | lectric Garage Door Opener - Number of Transmitters Security Alarm System                               | $\square$ $\square$ Owned $\square$ Leased $\square$ Humidifier |
|            |   | w Many?   |
|            | ool Heater  |   |
|            | efrigerator 🗌 Stove 🗌 Microwave Oven 🗍 Washer 🗍 🗌 Dryer 🗌 Dishwasher                                    | □ Trash Compactor □ Intercom                                    |
|            | eiling Fans Sump Pump Well Pump Central Vacuum Freezer Woods  |   |
|            | ndoor/Outdoor Grill $\Box$ Garbage Disposal $\Box$ Hood/Fan $\Box$ Whirlpool Bath $\Box$ A              |   |
|            | Vood/Gas/Pellet/Other Stove (describe)  |   |
|            | HER:  |   |
|            |   |   |

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Are any of the items that will be included in the sale of the Property in need of repair or replacement? 
Yes No, if "yes," explain in detail:

| List equipment and appliances, including any AC units that will be excluded from the sale of the Property: |                |                          |                   |                  |           |  |  |
|--|----------------|--------------------------|-------------------|------------------|-----------|--|--|
| 3. STRUCTURAL COMPONENTS   |                |                          |                   |                  |           |  |  |
| Check any of the following items that have significant defects   | or malfunction | ons or that need signifi | cant repair:      |                  |           |  |  |
|  |                | ☐ Interior Walls         |                   | ☐ Floors         |           |  |  |
| □ Windows □ Doors □ Storms/Screens □ Extended  |                |                          | Sidewalks         | Pool             | Roof      |  |  |
| Outside Retaining Walls Other Structures/Componen  |                |                          |                   |                  |           |  |  |
| If any of the above items are checked, describe the defect,  |                |                          | ignificant repa   | ir:              |           |  |  |
|  |                |                          |                   |                  |           |  |  |
| Has there been significant damage to the Property or any of th   |                |                          |                   |                  |           |  |  |
| $\Box$ Yes $\Box$ No $\Box$ Don't Know If "yes", explain in detail, incl                                   | luding any rep | pairs:                   |                   |                  |           |  |  |
|  |                |                          |                   |                  |           |  |  |
|  |                |                          |                   |                  |           |  |  |
| BASEMENT/CELLAR/CRAWL SPACE:   |                |                          |                   |                  |           |  |  |
| Has there ever been any water leakage, accumulation of water   | : dampness or  | r visible mold within th | ne basement, ce   | llar or any crav | wl space? |  |  |
| □ Yes □ No, if "yes," explain in detail:   |                |                          |                   | j i i            | 1         |  |  |
| Have there been any repairs or other attempts to control any w   | vater or damp  | ness within the baseme   | nt, cellar or cra | wl space?        |           |  |  |
| $\Box$ Yes $\Box$ No $\Box$ Don't Know, if "yes", explain in detail:                                       |                |                          | -,                | 1                |           |  |  |
| Are any of the above recurring problems? $\Box$ Yes $\Box$ No, if "  | 'yes", what ar | e the problems and how   | v often have the  | ey recurred?     |           |  |  |
|  | • · ·          | L                        |                   | •                |           |  |  |
|  |                | _                        |                   | _                |           |  |  |
| Has paint containing lead been used on the Property?   |                |                          | ]YES □NO          |                  |           |  |  |
| <b><u>ROOF:</u></b> $\Box$ Shingle $\Box$ Slate $\Box$ Metal $\Box$ Tile $\Box$ Other (description)        | ribe)          |                          |                   | DON'T KI         | NOW       |  |  |
| Approximate age of roof?   |                |                          |                   |                  |           |  |  |
| Has the roof ever leaked since you have owned the Property?  |                |                          | JYES □NO          | DON'T KI         | NOW       |  |  |
| If "yes", explain:   |                |                          |                   |                  |           |  |  |
| Has the roof been replaced or repaired since you have owned to   | the Property?  |                          | ]YES □NO          | DON'T KN         | NOW       |  |  |
| If "yes," when?  |                |                          |                   |                  |           |  |  |

Are there any current problems with the roof? If "yes," explain: \_\_\_\_\_

## 4. WATER SUPPLY

Special Notice: Water supplies, especially those that are not public or municipal supplies, are affected by many conditions about which Seller may have no knowledge or have any ability to control. These water supply systems can change, deteriorate or fail, often with no warning signs. Seller makes no warranty or representation whatsoever that the water supply, including quality or quantity, will operate or continue to function for any period of time. Inspection of these systems by a qualified inspector is strongly recommended.

As required by law, any seller with a potable water supply that is not served by a public water system shall provide the Purchaser with an informational brochure developed by the Vermont Department of Health regarding Testing Water from Private Water Supplies within 72 hours of the execution of a contract for the purchase of the Property.

#### **TYPE OF WATER SYSTEM:**

| The Property is connected to and serviced by (check all application)               | able boxes):       |   |  |  |
|--|--------------------|---|--|--|
| □ Public or Municipal □ Community □ Private □ Shared                               |                    |   |  |  |
| On-site Off-site Drilled Well Dug Well Sprin                                       | ng 🗌 Lake/Pond     | □ Lake Well □ None □ Don't know             |  |  |
| Water System Features: Cistern/Reservoir/Holding Tank                              | □ Water Softener/C | onditioner CReverse Osmosis CInfrared Light |  |  |
| Ultraviolet Other:   | ne 🗌 Don't know    |   |  |  |
| Water Pipes are: Copper Galvanized Metal Lead PVC (Plastic) Combination Don't know |                    |   |  |  |
| If Drilled Well: Drilled by:   | _ Tag #:           | Depth:                                      |  |  |
|  |                    | ate of driller's report:                    |  |  |
|  |                    | -   |  |  |

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 $\Box$  YES  $\Box$  NO  $\Box$  DON'T KNOW

# **CONDITION OF WATER AND WATER SYSTEM**

| Has the water been tested for coliform b        | pacteria?   |                          |
|---|---|--------------------------|
| $\Box$ Yes $\Box$ No $\Box$ Don't Know If "yes, | " when?   |                          |
| By whom?  | Results:  |                          |
| Has any other water quality or water ch         | emistry testing been done?  Yes No Don't                    | t Know If "yes," when?   |
| By whom?  | Results:<br>': □Own □Rent If rented, from whom              |                          |
| Water softener 🗆 Yes 🗆 No If "yes"              | ': Own Rent If rented, from whom                            | Monthly Rental Fee: \$   |
| Are you aware of low water pressure in          | your water system? $\Box$ Yes $\Box$ No                     |                          |
|   | un low?   | be                       |
| Describe in detail any other problems y         | ou have had with your water system, including wate          | er quality or quantity:  |
|   |   |                          |
| Does the water have any odor, bad taste         | e, cloudiness or discoloration? $\Box$ Yes $\Box$ No If "ye | es", describe in detail: |
| 5   |   |                          |
|   |   |                          |

# 5. SEWER/SEPTIC WASTEWATER SYSTEM

**Special Notice:** Sewer septic and wastewater systems that are not public or municipal systems are not designed to perform indefinitely and are affected by many conditions about which Seller may have no knowledge or have any ability to control. In addition, the useful life of these systems is affected by the amount and type of use, soil conditions, maintenance, the inherent design of these systems and many other factors.

# Seller makes no warranty or representation whatsoever that these systems will operate or continue to function for any period of time. Inspection of these systems by a qualified inspector is recommended. State and local permits may be required for sewer, septic and wastewater systems.

#### **TYPE OF SYSTEM:**

| The Property is connected to and serviced by (check appropriate boxes):                 |   |                  |  |  |
|---|---|------------------|--|--|
| □ Public or Municipal Sewer System □ On-site septic/w                                   | vastewater system Off-site septic/wastewater system | Septic Tank      |  |  |
| New or Alternate Technology (explain technology)  |   | Holding Tanks    |  |  |
| Cesspool Sewage Pump Dry Well Convention  |   |                  |  |  |
| At Grade Other On't know If other, please exp   | plain:  |                  |  |  |
|   |   |                  |  |  |
| CONDITION OF SYSTEM:  |   |                  |  |  |
| If other than public or municipal sewer/wastewater system                               | , answer the following: Date system installed?      |                  |  |  |
| Is the system entirely on your Property? $\Box$ Yes $\Box$ No $\Box$                    | Don't Know. If "no", where is it?                   |                  |  |  |
| Has the system been repaired since you have owned the Property?  Yes No If "yes", when? |   |                  |  |  |
| What was done:  |   |                  |  |  |
| By whom?  |   |                  |  |  |
| Type of septic tank: Concrete Metal Fiberglass  | Other (describe) Don't Know                         | W                |  |  |
| Septic tank capacity (in gallons)   | Don't Know  |                  |  |  |
| Date Septic Tank Last Inspected?  | Don't Know Reports of last inspection/pumping atta  | ached 🗌 Yes 🗌 No |  |  |
| Date Septic Tank Last Pumped? Don't Know By whom?                                       |   |                  |  |  |
| To your knowledge, is any portion of the system in need of                              | f repair or replacement? $\Box$ Yes $\Box$ No       |                  |  |  |
| If "ves." describe in detail:   |   |                  |  |  |

# 6. ADDITIONAL INFORMATION CONCERNING THE PROPERTY

| (a) | Age of building: Main Bldg Additions to Main Bldg Additional Bldgs (a) (b)  |
|-----|---|
| (b) | Is Seller currently occupying the Property?  Yes No If "no," how long has it been since Seller occupied?                          |
| (c) | Has Seller built or caused to be built any of the buildings on the Property, or made any additions, modifications, alterations or |
|     | renovations to any building on the Property?  Yes No If "yes," please explain:  |
| (d) | If "yes," did you obtain all necessary permits and approvals for such work?  Yes  No  |
| (e) | Are any property or development rights (e.g. conservation easements to Land Trusts, etc.) owned by others? If "yes", by whom:     |

| (f) | Has Seller received written notice of any violations of local, state or federal laws, building codes and/or zoning ordinances affecting |
|-----|---|
|     | the Property? $\Box$ Yes $\Box$ No  |

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- (g) Are there any property tax abatements, land use tax stabilization agreements or other special property tax arrangements applicable to the Property? □ Yes □ No □ Don't Know
- (h) Has Seller received notice that the Property will be reassessed by any taxing authority during the next 12 months? 🗆 Yes 🗆 No
- (i) Does the Property have Urea-Formaldehyde Foam Insulation? 
   Yes No Don't Know
- (j) Does the Property have Asbestos and/or Asbestos Materials in the siding-walls-plaster-flooring-insulation-heating system?
   □ Yes □ No □ Don't Know
- (k) Has the Property been tested for Radon Gas? Yes No Don't Know
- (l)
   If "yes," when?
   By whom?
   Results:
- (m) Does the Property have evidence of mold?  $\Box$  Yes  $\Box$  No  $\Box$  Don't Know
- (n) If "yes," what has been done about the mold?
- (o) Are you aware of any off-site conditions in your neighborhood/community that could adversely affect the value or desirability of the Property, such as noise, proposed major new development, relocation or major construction of roads or highways, proposed zoning changes, etc.? □ Yes □ No If "yes " explain in detail;
  - If "yes," explain in detail:
- (p) Is there any infestation by pests that affect the property? □ Yes □ No □ Don't Know If "yes", explain:
- (q) Do you have any knowledge of any damage to the Property caused by pests?  $\Box$  Yes  $\Box$  No  $\Box$  Don't Know
- (r) Is the Property currently under warranty or other coverage by a licensed pest control company? 🗌 Yes 🗌 No 🗋 Don't Know
- (s) Do you know of any termite/pest control reports or treatments for the Property in the last five years? 🗌 Yes 🗋 No 🗋 Don't Know
- (t) Further explanation of answers to any of the above:

# 7. CONDOMINIUMS SUBDIVISIONS/ HOMEOWNERS' ASSOCIATIONS/ROAD MAINTENANCE AGREEMENTS/ROAD MAINTENANCE ASSOCIATIONS

- (a) Is the Property part of a condominium or other common interest ownership regime or is it subject to covenants, conditions and restrictions (CC&R's)? □ Yes □ No □ Don't Know If "yes", Condo docs or CC&R's attached? □ Yes □ No
- (b) Is there any defect, damage, or problem with any common elements or common areas? □ Yes □ No □ Don't Know If "yes", describe below.
- (c) Is there any condition or claim which may result in an increase in assessment or fees?
   □ Yes □ No □ Don't Know If "yes", describe below.
- (d) Are any required stormwater permits current? Yes No Don't Know
- (e) Are there any homeowners' association or "common area" expenses or assessments affecting the Property? □ Yes □ No □ Don't Know
- (f) Are there presently any outstanding special assessment(s) on the Property? □ Yes □ No If "yes," amount:
   \$\_\_\_\_\_\_ Purpose for special assessment(s): \_\_\_\_\_\_
- (g) Are there any anticipated special assessments on the Property: □ Yes □ No If "yes," anticipated amount: \$\_\_\_\_\_

 $\square$  Monthly  $\square$  Quarterly  $\square$  Yearly. Purpose of special assessments: \_\_\_\_\_

Years or term remaining on any outstanding special assessments:

(h) Are there any current actions, disputes or lawsuits pending between the homeowners/condominium owners' association and any other parties? □ Yes □ No □ Don't Know If "yes", describe below.

- (i) Do you know of any violations of local, state, or federal laws or regulations, condominium rules or CC&R's relating to the Property? □Yes □No □Don't Know If "yes", describe below.
- (j) Contact person/manager for condominium/homeowner association: \_\_\_\_\_\_ Phone number/e-mail:

#### Further explanation of answers to any of the above:

\_\_\_\_\_

#### IS THERE ANYTHING ELSE THAT SHOULD BE DISCLOSED ABOUT THE CONDITION OF THE PROPERTY?

(In answering this question, you should be guided by what you would want to know about the condition of the Property if you were buying it.)

#### □ YES □ NO □ DON'T KNOW OF ANYTHING ELSE. If "yes", explain:\_\_\_\_\_

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## **SELLER'S STATEMENT**

Seller is providing the information in this report to reduce the likelihood of DISPUTES or LEGAL ACTION concerning the sale of the Property. The information provided herein does not constitute any warranty, express or implied, by Seller about the Property or any feature of the Property. Seller hereby authorizes any real estate agent to provide a copy of this report to any prospective buyer.

IN DELIVERING THIS REPORT TO A BUYER OR PROSPECTIVE BUYER, NO REPRESENTATION IS MADE BY ANY REAL ESTATE AGENT THAT THEY HAVE ANY INDEPENDENT OR PERSONAL KNOWLEDGE ABOUT THE CONDITION OF THE PROPERTY, THAT THEY HAVE MADE ANY INQUIRY OR INVESTIGATION ABOUT THE CONDITION OF THE PROPERTY OR ANY OF THE INFORMATION PROVIDED IN THIS REPORT BY SELLER OR THAT THEY HAVE VERIFIED THE INFORMATION PROVIDED IN THIS REPORT BY THE SELLER.

| Seller acknowledges that the information provided in this report is correct to the b<br>Seller.  | best of Seller's knowledge as of the date signed by |  |  |  |
|--|---|--|--|--|
| Seller:(signature)   | Date  |  |  |  |
| BUYER/PROSPECTIVE BUYER ACKNOWLEDGES RECEIPT OF A COPY OF THIS REPORT ON THE DATE SET FORTH<br>BELOW. BUYER/PROSPECTIVE BUYER UNDERSTANDS THAT THIS REPORT PROVIDES INFORMATION ABOUT<br>THE PROPERTY MADE BY THE SELLER AS OF THE ABOVE DATE. IT IS NOT A WARRANTY OF ANY KIND BY<br>SELLER OR ANY REAL ESTATE AGENT. THIS REPORT IS NOT A SUBSTITUTE FOR ANY PROPERTY INSPECTION.<br>BUYER/PROSPECTIVE BUYER MAY OBTAIN A PROPERTY INSPECTION. HOWEVER, ANY SUCH INSPECTION<br>MUST BE BY WRITTEN AGREEMENT WITH SELLER. BUYER/PROSPECTIVE BUYER UNDERSTANDS THAT THERE<br>MAY BE MATTERS RELATING TO THE PROPERTY WHICH ARE NOT ADDRESSED IN THIS REPORT. |   |  |  |  |
| Buyer/Prospective Buyer:(signature)  | Date  |  |  |  |
| Buyer/Prospective Buyer:(signature)  | Date  |  |  |  |
| Buyer/Prospective Buyer:(signature)  | Date  |  |  |  |
| Buyer/Prospective Buyer:   | Date  |  |  |  |