



RE/MAX[®]
Professionals, Inc.
 Littleton, Colorado
 (303) 932-3306

THIS FORM HAS IMPORTANT LEGAL
 CONSEQUENCES AND THE PARTIES SHOULD
 CONSULT LEGAL AND TAX OR
 OTHER COUNSEL BEFORE SIGNING.

**SELLER'S PROPERTY
 DISCLOSURE**
 (ALL TYPES OF PROPERTIES)

THIS DISCLOSURE SHOULD BE COMPLETED BY SELLER, NOT BY BROKER.

Seller states that the information contained in this Disclosure is correct to the best of Seller's CURRENT ACTUAL KNOWLEDGE as of this Date. Any changes will be disclosed by Seller to Buyer promptly after discovery. Seller hereby receipts for a copy of this Disclosure. If the Property is part of a Common Interest Community, this Disclosure is limited to the Property or Unit itself, except as stated in Section L. Broker may deliver a copy of this Disclosure to prospective buyers.

Note: If an item is not present at the Property insert "N/A" in the Comments column. The Contract to Buy and Sell Real Estate, not this Disclosure form, determines whether an item is included or excluded.

Date: July 3, 2008

Property Address: 12657 W. PROGRESS AVE LITTLETON COLORADO 80127

Seller: OLON PLUNK AND RHONDA PLUNK

I. IMPROVEMENTS

If this box is checked, there are no structures or improvements on the Property; do not complete Sections A - G.

A. STRUCTURAL CONDITIONS	Yes	No	Do Not Know	COMMENTS
1 Structural problems		X		
2 Moisture and/or water problems	X	X		frozen outside faucet repaired, toilet repair
3 Damage due to termites, other insects or rodents		X		
4 Damage due to hail, wind, fire or flood		X		
5 Cracks, heaving or settling problems		X		
6 Exterior wall or window problems		X		
7 Exterior Artificial Stucco (EIFS)		X		
8 Any additions or alterations made		X		
9 Building code violations		X		

B. ROOF	Yes	No	Do Not Know	COMMENTS
1 Roof problems	X			Chimney cap replaced
2 Roof material <u>wood</u> Age <u>14</u>				
3 Roof leak: Past	X			See Chimney cap replaced.
4 Roof leak: Present		X		
5 Damage to roof: Past	X			small area replaced on front of house
6 Damage to roof: Present		X		
7 Roof under warranty until ____ . Transferable ____		X		
8 Roof work done while under current roof warranty		X		
9 Skylight problems <u>N/A</u>				
10 Gutter or downspout problems		X		

IN WORKING CONDITION

C. APPLIANCES	Yes	No	Do Not Know	Age If Known	COMMENTS
1 Built-in vacuum system & accessories <u>N/A</u>					
2 Clothes dryer <u>N/A</u>					
3 Clothes washer <u>N/A</u>					
4 Dishwasher	X			14	
5 Disposal	X			14	
6 Freezer <u>N/A</u>					
7 Gas Grill <u>N/A</u>					
8 Hood <u>N/A</u>					
9 Microwave oven	X			14	
10 Oven	X			14	
11 Range	X			4	
12 Refrigerator <u>N/A</u>					
13 T.V. antenna: <input type="checkbox"/> Owned <input type="checkbox"/> Leased <u>N/A</u>					
14 Satellite system or DSS dish: <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased	X			5	Not in service
15 Trash Compactor <u>N/A</u>					

The printed portions of this form, except *differentiated* additions, have been approved by the Colorado Real Estate Commission. (SPD 19-8-07) (Mandatory 1-08)

		IN WORKING CONDITION				
D.	ELECTRICAL & TELECOMMUNICATIONS	Yes	No	Do Not Know	Age If Known	COMMENTS
1	Security system: <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased	X			14	not in servio
2	Smoke/fire detectors: <input type="checkbox"/> Battery <input checked="" type="checkbox"/> Hardwire	X			14	
3	Light fixtures	X		X		
4	Switches & outlets	X			14	
5	Aluminum wiring			X		
6	Electrical: Phase _____ Voltage <u>220/110</u>	X				
7	Telecommunications (T1, fiber, cable, satellite)	X				
8	Inside telephone wiring & blocks/jacks	X				
9	Abandoned communication cables: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
10	Ceiling fans	X				6 fans 3 remotes
11	Garage door opener	X				
12	Garage door control(s) # <u>3</u>	X				
13	Intercom/ <u>doorbell</u>	X				
14	In-wall speakers	X				
15	220 volt service	X				
16	Landscape lighting <u>NIA</u>					

		IN WORKING CONDITION				
E.	MECHANICAL	Yes	No	Do Not Know	Age If Known	COMMENTS
1	Air conditioning:					
	Evaporative cooler <u>NA</u>					
	Window units <u>NA</u>					
	Central	X				
	Computer room <u>NIA</u>					
2	Attic/whole house fan	X				
3	Vent fans	X				
4	Humidifier <u>NIA</u>					
5	Air purifier <u>NIA</u>					
6	Sauna <u>NIA</u>					
7	Hot tub or spa <u>NIA</u>					
8	Steam room/shower <u>NIA</u>					
9	Pool <u>NIA</u>					
10	Heating system:					
	Type <u>Forced air</u> Fuel <u>Gas</u>					
	Type _____ Fuel _____	X				
11	Water heater: Number of <u>2</u>					
	Fuel type <u>gas</u> Capacity <u>100g total</u>	X				
12	Fireplace: Type _____ Fuel <u>gas</u>	X				2 fireplaces
13	Fireplace insert <u>NIA</u>					
14	Stove: Type _____ Fuel _____ <u>NIA</u>					
15	When was fireplace/wood stove, chimney/flue last cleaned:					
	Date: _____ <input checked="" type="checkbox"/> Do not know			X		
16	Fuel tanks: <input type="checkbox"/> Owned <input type="checkbox"/> Leased <u>NIA</u>					
17	Radiant heating system: <input type="checkbox"/> Interior <input type="checkbox"/> Exterior					
	Hose Type _____ <u>NIA</u>					
18	Overhead door	X				
19	Entry gate system <u>NIA</u>					
20	Elevator/escalators <u>NIA</u>					
21	Lift/hoist/crane <u>NIA</u>					

		IN WORKING CONDITION				
F.	WATER, SEWER & OTHER UTILITIES	Yes	No	Do Not Know	Age If Known	COMMENTS
1	Water filter system: <input type="checkbox"/> Owned <input type="checkbox"/> Leased <u>NIA</u>					
2	Water softener: <input type="checkbox"/> Owned <input type="checkbox"/> Leased <u>NIA</u>					
3	Sewage problems:					
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Do not know					
4	Lift station (sewage ejector pump)	X				
5	Drainage, storm sewers, retention ponds	X				
6	Gray water storage/use <u>NIA</u>					
7	Plumbing problems:					
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Do not know					
8	Sump pump <u>NIA</u>					
9	Underground sprinkler system	X				
10	Fire sprinkler system <u>NIA</u>					

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