

The printed portions of this form, except differentiated additions, have been approved by the Colorado Real Estate Commission (SPD29-5-09) (Mandatory 7-09)

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

**SELLER'S PROPERTY DISCLOSURE  
(RESIDENTIAL)**

**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 or if an item is not to be included in the sale, mark the "N/A" column. The Contract to Buy and Sell Real Estate, not this Disclosure form, determines whether an item is included or excluded; if there is an inconsistency between this form and the Contract, the Contract controls.**

Date: **6/14/2010**

Property Address: **5920 S YANK WAY LITTLETON 80127**

Seller: **LY HUYNH and JACK VO**

I. IMPROVEMENTS						
A. STRUCTURAL CONDITIONS	Do any of the following conditions now exist or have they ever existed:				COMMENTS	
	Yes	No	Do Not Know	N/A		
1		<input checked="" type="checkbox"/>				
2		<input checked="" type="checkbox"/>				
3		<input checked="" type="checkbox"/>				
4		<input checked="" type="checkbox"/>				
5		<input checked="" type="checkbox"/>				
6		<input checked="" type="checkbox"/>				
7		<input checked="" type="checkbox"/>				
8		<input checked="" type="checkbox"/>				
9		<input checked="" type="checkbox"/>				
B. ROOF	Yes	No	Do Not Know	N/A	COMMENTS	
1		<input checked="" type="checkbox"/>				
2						
3		<input checked="" type="checkbox"/>				
4		<input checked="" type="checkbox"/>				
5		<input checked="" type="checkbox"/>				
6		<input checked="" type="checkbox"/>				
7			<input checked="" type="checkbox"/>			
8		<input checked="" type="checkbox"/>				
9				<input checked="" type="checkbox"/>		
10		<input checked="" type="checkbox"/>				
IN WORKING CONDITION						
C. APPLIANCES	Yes	No	Do Not Know	Age If Known	N/A	COMMENTS
1					<input checked="" type="checkbox"/>	
2		<input checked="" type="checkbox"/>				
3		<input checked="" type="checkbox"/>				
4	<input checked="" type="checkbox"/>					
5	<input checked="" type="checkbox"/>					

6	Freezer		<input checked="" type="checkbox"/>				
7	Gas grill					<input checked="" type="checkbox"/>	
8	Hood	<input checked="" type="checkbox"/>					
9	Microwave oven	<input checked="" type="checkbox"/>					
10	Oven	<input checked="" type="checkbox"/>					
11	Range	<input checked="" type="checkbox"/>					
12	Refrigerator	<input checked="" type="checkbox"/>					
13	T.V. antenna <input type="checkbox"/> Owned <input type="checkbox"/> Leased					<input checked="" type="checkbox"/>	
14	Satellite system or DSS dish <input type="checkbox"/> Owned <input type="checkbox"/> Leased					<input checked="" type="checkbox"/>	
15	Trash compactor					<input checked="" type="checkbox"/>	

**IN WORKING CONDITION**

D.	ELECTRICAL & TELECOMMUNICATIONS	IN WORKING CONDITION		Do Not Know	Age If Known	N/A	COMMENTS
		Yes	No				
1	Security system: <input type="checkbox"/> Owned <input type="checkbox"/> Leased					<input checked="" type="checkbox"/>	
2	Smoke/fire detectors: <input checked="" type="checkbox"/> Battery <input type="checkbox"/> Hardwire	<input checked="" type="checkbox"/>					
3	Carbon Monoxide Alarm Battery <input type="checkbox"/> Hardwire			<input checked="" type="checkbox"/>			
4	Light fixtures	<input checked="" type="checkbox"/>					
5	Switches & outlets	<input checked="" type="checkbox"/>					
6	Aluminum wiring (110)			<input checked="" type="checkbox"/>			
7	Electrical: Amps			<input checked="" type="checkbox"/>			
8	Telecommunications (T1, fiber, cable, satellite)	<input checked="" type="checkbox"/>					
9	Inside telephone wiring & blocks/jacks	<input checked="" type="checkbox"/>					
10	Ceiling fans					<input checked="" type="checkbox"/>	
11	Garage door opener	<input checked="" type="checkbox"/>					
12	Garage door control(s) # 0816	<input checked="" type="checkbox"/>					
13	Intercom/doorbell	<input checked="" type="checkbox"/>					
14	In-wall speakers					<input checked="" type="checkbox"/>	
15	220 volt service	<input checked="" type="checkbox"/>					
16	Landscape lighting					<input checked="" type="checkbox"/>	

**IN WORKING CONDITION**

E.	MECHANICAL	IN WORKING CONDITION		Do Not Know	Age If Known	N/A	COMMENTS
		Yes	No				
1	Air conditioning:						
	Evaporative cooler					<input checked="" type="checkbox"/>	
	Window units					<input checked="" type="checkbox"/>	
	Central	<input checked="" type="checkbox"/>					
2	Attic/whole house fan					<input checked="" type="checkbox"/>	
3	Vent fans					<input checked="" type="checkbox"/>	
4	Humidifier					<input checked="" type="checkbox"/>	
5	Air purifier					<input checked="" type="checkbox"/>	
6	Sauna					<input checked="" type="checkbox"/>	
7	Hot tub or spa					<input checked="" type="checkbox"/>	
8	Steam room/shower					<input checked="" type="checkbox"/>	
9	Pool					<input checked="" type="checkbox"/>	
10	Heating system: Type Central Fuel Gas Type Fuel	<input checked="" type="checkbox"/>					
11	Water heater: Number of 1 Fuel type Gas Capacity	<input checked="" type="checkbox"/>					
12	Fireplace: Type Fuel Gas	<input checked="" type="checkbox"/>					
13	Fireplace insert			<input checked="" type="checkbox"/>			
14	Stove: Type Fuel Electric	<input checked="" type="checkbox"/>					
15	When was fireplace/wood stove, chimney/flue last cleaned: Date: <input checked="" type="checkbox"/> Do not know			<input checked="" type="checkbox"/>			
16	Fuel tanks: <input type="checkbox"/> Owned <input type="checkbox"/> Leased			<input checked="" type="checkbox"/>			
17	Radiant heating system <input type="checkbox"/> Interior <input type="checkbox"/> Exterior Hose Type						

Buyer(s) Initials \_\_\_\_\_

Seller(s) Initials \_\_\_\_\_

18	Overhead door						<input checked="" type="checkbox"/>	
19	Entry gate system						<input checked="" type="checkbox"/>	
20	Elevator						<input checked="" type="checkbox"/>	
<b>IN WORKING CONDITION</b>								
<b>F.</b>	<b>WATER, SEWER &amp; OTHER UTILITIES</b>	<b>Yes</b>	<b>No</b>	<b>Do Not Know</b>	<b>Age If Known</b>	<b>N/A</b>	<b>COMMENTS</b>	
1	Water filter system <input type="checkbox"/> Owned <input type="checkbox"/> Leased						<input checked="" type="checkbox"/>	
2	Water softener <input type="checkbox"/> Owned <input type="checkbox"/> Leased						<input checked="" type="checkbox"/>	
3	Sewage problems <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Do not know							
4	Lift station (sewage ejector pump)			<input checked="" type="checkbox"/>				
5	Drainage, storm sewers, retention ponds			<input checked="" type="checkbox"/>				
6	Grey water storage/use			<input checked="" type="checkbox"/>				
7	Plumbing problems <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Do not know							
8	Sump pump			<input checked="" type="checkbox"/>				
9	Underground sprinkler system			<input checked="" type="checkbox"/>				
10	Fire sprinkler system			<input checked="" type="checkbox"/>				
11	Polybutylene pipe <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Do not know							
12	Galvanized pipe <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Do not know							
13	Backflow prevention device <input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Fire <input type="checkbox"/> Sewage			<input checked="" type="checkbox"/>				
14	Irrigation pump						<input checked="" type="checkbox"/>	
15	Well pump						<input checked="" type="checkbox"/>	
<b>G.</b>	<b>OTHER DISCLOSURES—IMPROVEMENTS</b>	<b>Yes</b>	<b>No</b>	<b>Do Not Know</b>	<b>N/A</b>	<b>COMMENTS</b>		
1	Included fixtures and equipment in working condition							
2								
3								
4								

<b>II. GENERAL</b>								
<b>H.</b>	<b>USE, ZONING &amp; LEGAL ISSUES</b>	<b>Yes</b>	<b>No</b>	<b>Do Not Know</b>	<b>N/A</b>	<b>COMMENTS</b>		
1	Zoning violation, variance, conditional use, enforceable PUD or non-conforming use			<input checked="" type="checkbox"/>				
2	Notice or threat of condemnation proceedings			<input checked="" type="checkbox"/>				
3	Notice of any adverse conditions from any governmental or quasi-governmental agency that have not been resolved			<input checked="" type="checkbox"/>				
4	Violation of restrictive covenants or owners' association rules or regulations			<input checked="" type="checkbox"/>				
5	Any building or improvements constructed within the past one year from this Date without approval by the Association or the designated approving body			<input checked="" type="checkbox"/>				
6	Notice of zoning action related to the Property			<input checked="" type="checkbox"/>				
7	Other legal action			<input checked="" type="checkbox"/>				
<b>I.</b>	<b>ACCESS, PARKING, DRAINAGE &amp; SIGNAGE</b>	<b>Yes</b>	<b>No</b>	<b>Do Not Know</b>	<b>N/A</b>	<b>COMMENTS</b>		
1	Any access problems			<input checked="" type="checkbox"/>				
2	Roads, driveways, trails or paths through the Property used by others			<input checked="" type="checkbox"/>				
3	Public highway or county road bordering the Property			<input checked="" type="checkbox"/>				
4	Any proposed or existing transportation project that affects or is expected to affect the Property			<input checked="" type="checkbox"/>				
5	Encroachments, boundary disputes or unrecorded easements			<input checked="" type="checkbox"/>				
6	Shared or common areas with adjoining properties			<input checked="" type="checkbox"/>				
7	Requirements for curb, gravel/paving, landscaping			<input checked="" type="checkbox"/>				
8	Flooding or drainage problems: Past			<input checked="" type="checkbox"/>				

Buyer(s) Initials \_\_\_\_\_

Seller(s) Initials \_\_\_\_\_

9	Flooding or drainage problems: Present			<input checked="" type="checkbox"/>		
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J.	WATER & SEWER SUPPLY	Yes	No	Do Not Know	N/A	COMMENTS
1	Water Rights Type			<input checked="" type="checkbox"/>		
2	Water tap fees paid in full			<input checked="" type="checkbox"/>		
3	Sewer tap fees paid in full			<input checked="" type="checkbox"/>		
4	Subject to augmentation plan		<input checked="" type="checkbox"/>			
5	Well required to be metered		<input checked="" type="checkbox"/>			
6	Type of water supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Community <input type="checkbox"/> Well <input type="checkbox"/> Shared Well <input type="checkbox"/> Cistern <input type="checkbox"/> None If the Property is served by a Well, a copy of the Well Permit <input type="checkbox"/> Is <input type="checkbox"/> Is Not attached. Well Permit #: _____ <input type="checkbox"/> Drilling Records <input type="checkbox"/> Are <input type="checkbox"/> Are Not attached. Shared Well Agreement <input type="checkbox"/> Yes <input type="checkbox"/> No . The Water Provider for the Property can be contacted at: Name: _____ Address: _____ Web Site: _____ Phone No.: _____ <input type="checkbox"/> There is neither a Well nor a Water Provider for the Property. The source of potable water for the Property is [describe source]:  <b>SOME WATER PROVIDERS RELY, TO VARYING DEGREES, ON NONRENEWABLE GROUND WATER. YOU MAY WISH TO CONTACT YOUR PROVIDER (OR INVESTIGATE THE DESCRIBED SOURCE) TO DETERMINE THE LONG-TERM SUFFICIENCY OF THE PROVIDER'S WATER SUPPLIES.</b>					
7	Type of sanitary sewer service: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Community <input type="checkbox"/> Septic System <input type="checkbox"/> None <input type="checkbox"/> Other <input type="checkbox"/> If the Property is served by an on-site septic system, supply to buyer a copy of the permit. Type of septic system: <input type="checkbox"/> Tank <input type="checkbox"/> Leach <input type="checkbox"/> Lagoon					

  

K.	ENVIRONMENTAL CONDITIONS	Yes	No	Do Not Know	N/A	COMMENTS
	Do any of the following conditions now exist or have they ever existed:					
1	Hazardous materials on the Property, such as radioactive, toxic, or biohazardous materials, asbestos, pesticides, herbicides, wastewater sludge, radon, methane, mill tailings, solvents or petroleum products		<input checked="" type="checkbox"/>			
2	Underground storage tanks			<input checked="" type="checkbox"/>		
3	Aboveground storage tanks		<input checked="" type="checkbox"/>			
4	Underground transmission lines			<input checked="" type="checkbox"/>		
5	Pets kept on the Property		<input checked="" type="checkbox"/>			
6	Property used as, situated on, or adjoining a dump, land fill or municipal solid waste land fill		<input checked="" type="checkbox"/>			
7	Monitoring wells or test equipment		<input checked="" type="checkbox"/>			
8	Sliding, settling, upheaval, movement or instability of earth or expansive soils of the Property			<input checked="" type="checkbox"/>		
9	Mine shafts, tunnels or abandoned wells on the Property			<input checked="" type="checkbox"/>		
10	Within governmentally designated geological hazard or sensitive area			<input checked="" type="checkbox"/>		
11	Within governmentally designated flood plain or wetland area			<input checked="" type="checkbox"/>		
12	Dead, diseased or infested trees or shrubs			<input checked="" type="checkbox"/>		
13	Environmental assessments, studies or reports done involving the physical condition of the Property			<input checked="" type="checkbox"/>		
14	Property used for any mining, graveling, or other natural resource extraction operations such as oil and gas wells		<input checked="" type="checkbox"/>			
15	Interior of Improvements of Property tobacco smoke-free			<input checked="" type="checkbox"/>		
16	Other environmental problems			<input checked="" type="checkbox"/>		

  

L.	COMMON INTEREST COMMUNITY ASSOCIATION PROPERTY	Yes	No	Do Not Know	N/A	COMMENTS
1	Property is part of an owners' association	<input checked="" type="checkbox"/>				
2	Special assessments or increases in regular assessments approved by owners' association but not yet implemented		<input checked="" type="checkbox"/>			
3	Has the Association made demand or commenced a lawsuit against a builder or contractor alleging defective construction of improvements of the Association Property (common area or property owned or controlled by the Association but outside the Seller's Property or Unit).			<input checked="" type="checkbox"/>		

Buyer(s) Initials \_\_\_\_\_

Seller(s) Initials \_\_\_\_\_

