



SELLER'S PROPERTY CONDITION DISCLOSURE STATEMENT

(This disclosure shall be completed by the seller. This is a disclosure required by law. If you do not understand this form, seek legal advice.)

Seller David Becking Property Address 24825 VERA Road

This Disclosure Statement concerns the real property identified above situated in the City of Hermosa

County of Custer, State of South Dakota.

THIS STATEMENT IS A DISCLOSURE OF THE CONDITION OF THE ABOVE DESCRIBED PROPERTY IN COMPLIANCE WITH § 43-4-38. IT IS NOT A WARRANTY OF ANY KIND BY THE SELLER OR ANY AGENT REPRESENTING ANY PARTY IN THIS TRANSACTION AND IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE PARTIES MAY WISH TO OBTAIN.

Seller hereby authorizes any agent representing any party in this transaction to provide a copy of this statement to any person or entity in connection with any actual or anticipated sale of the property.

IF ANY MATERIAL FACT CHANGES BEFORE CONVEYANCE OF TITLE TO THIS PROPERTY, THE SELLER MUST DISCLOSE SUCH MATERIAL FACT WITH A WRITTEN AMENDMENT TO THIS DISCLOSURE STATEMENT.

I. LOT OR TITLE INFORMATION

If the answer is yes to any of the following, please explain under additional comments or on an attached separate sheet.

1. When did you purchase or build the home? 2012 - 2013
2. Were there any title problems when you purchased the property? Yes ☒ No
3. Are there any recorded liens or financial instruments against the property, other than a first mortgage? Yes ☒ No
4. Are there any unrecorded liens or financial instruments against the property, other than a first mortgage; or have any materials or services been provided in the past one hundred twenty days that would create a lien against the property under chapter 44-9? Yes ☒ No Unknown
5. Are there any easements which have been granted in connection with the property (other than normal utility easements for public water and sewer, gas and electric service, telephone service, cable television service, drainage, and sidewalks)? ☒ Yes No Unknown Access
6. Are there any problems related to establishing the lot lines/boundaries? Yes ☒ No Unknown
7. Do you have a location survey in your possession or a copy of the recorded plat? If yes, attach a copy. ☒ Yes No Unknown
8. Are you aware of any encroachments or shared features, from or on adjoining property (i.e. fences, driveway, sheds, outbuildings, or other improvements)? ☒ Yes No
9. Are you aware of any covenants or restrictions affecting the use of the property in accordance with local law? If yes, attach a copy of the covenants and restrictions. Yes ☒ No
10. Are you aware of any current or pending litigation, foreclosure, zoning, building code or restrictive covenant violation notices, mechanic's liens, judgments, special assessments, zoning changes, or changes that could affect your property? Yes ☒ No
11. Is the property currently occupied by the owner? ☒ Yes No
12. Does the property currently receive the owner occupied tax reduction pursuant to SDCL 10-13-39? Yes ☒ No
13. Is the property currently part of a property tax freeze for any reason? Yes No ☒ Unknown

INITIALS: SELLER D. / B. PURCHASER /



Mount Rushmore Area Association of REALTORS
dba Mount Rushmore Area MLS, Inc.



14. Is the property leased? Yes ☒ No
15. If leased, does the property use comply with local zoning laws? ☒ Yes No ?
16. Does this property or any portion of this property receive rent? Yes ☒ No
If yes, how much \$ _____ and how often _____?
17. Do you pay any mandatory fees or special assessments to a homeowners' or condominium association? Yes ☒ No
If yes, what are the fees or assessments? \$ _____ per _____ (i.e. annually, semi-annually, monthly)
Payable to whom: _____ For what purpose? _____
18. Are you aware if the property has ever had standing water in either the front, rear, or side yard more than forty-eight hours after heavy rain? Yes ☒ No
19. Is the property located in or near a flood plain? Yes ☒ No Unknown
20. Are wetlands located upon any part of the property? Yes ☒ No Unknown
21. Are you aware of any private transfer fee obligations, as defined pursuant to § 43-4-48, that would require a purchaser or seller of the property to pay a fee or charge upon the transfer of the property, regardless of whether the fee or charge is a fixed amount or is determined as a percentage of the value of the property? Yes ☒ No Unknown
If yes, what are the fees or charges? \$ _____ per _____ (i.e. annually, semi-annually, monthly)

II. STRUCTURAL INFORMATION

If the answer is yes to any of the following, please explain under additional comments or on an attached separate sheet.

1. Are you aware of any water penetration problems in the walls, windows, doors, basement, or crawl space?
Yes ☒ No
2. What water damage related repairs, if any, have been made? NONE
If any, when? _____
3. Are you aware if drain tile is installed on the property? ☒ Yes No
4. Are you aware of any interior cracked walls or floors, or cracks or defects in exterior driveways, sidewalks, patios, or other hard surface areas? Yes ☒ No
What related repairs, if any, have been made? _____
5. Are you aware of any roof leakage, past or present? Yes ☒ No
Type of roof covering: Steel Age: 3 yrs
What roof repairs, if any, have been made, when and by whom? NONE
Describe any existing unrepaired damage to the roof: NONE
6. Are you aware of insulation in:
the ceiling/attic? ☒ Yes No the walls? ☒ Yes No the floors? ☒ Yes No
7. Are you aware of any pest infestation or damage, either past or present? Yes ☒ No
8. Are you aware of the property having been treated for any pest infestation or damage? Yes ☒ No
If yes, who treated it and when? _____
9. Are you aware of any work upon the property which required a building, plumbing, electrical, or any other permit?
☒ Yes No
If yes, describe the work: New Construction
Was a permit obtained? ☒ Yes No Was the work approved by an inspector? ☒ Yes No

INITIALS: SELLER P/B PURCHASER _____ / _____



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10. Are you aware of any past or present damage to the property (i.e. fire, smoke, wind, floods, hail, or snow)?

Yes ☒ No ☐ If yes, describe _____

Have any insurance claims been made? Yes ☒ No ☐ Unknown

Was an insurance payment received? Yes ☒ No ☐ Unknown

Has the damage been repaired? Yes ☒ No ☐ If yes, describe in detail: _____

11. Are you aware of any problems with sewer blockage or backup, past or present? Yes ☒ No ☐

12. Are you aware of any drainage, leakage, or runoff from any sewer, septic tank, storage tank, or drain on the property into any adjoining lake, stream, or waterway? Yes ☒ No ☐ If yes, describe in detail: _____

III. SYSTEMS/UTILITIES INFORMATION

	None/Not Included	Working	Not Working
1. 220 Volt Service		<input checked="" type="checkbox"/>	
2. Air Exchanger			
3. Air Purifier			
4. Attic Fan			
5. Burglar Alarm & Security System			<input checked="" type="checkbox"/>
6. Ceiling Fan		<input checked="" type="checkbox"/>	
7. Central Air – Electric	<input checked="" type="checkbox"/>		
8. Central Air – Water Cooled	<input checked="" type="checkbox"/>		
9. Cistern	<input checked="" type="checkbox"/>		
10. Dishwasher		<input checked="" type="checkbox"/>	
11. Disposal	<input checked="" type="checkbox"/>		
12. Doorbell		<input checked="" type="checkbox"/>	
13. Fireplace	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
14. Fireplace Insert	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
15. Garage Door/Opener Control(s)		<input checked="" type="checkbox"/>	
16. Garage Wiring		<input checked="" type="checkbox"/>	
17. Heating System		<input checked="" type="checkbox"/>	
18. Hot Tub, Whirlpool, and Controls		<input checked="" type="checkbox"/>	
19. Humidifier	<input checked="" type="checkbox"/>		
20. Intercom	<input checked="" type="checkbox"/>		
21. Light Fixtures		<input checked="" type="checkbox"/>	
22. Microwave/Hood		<input checked="" type="checkbox"/>	
23. Plumbing and Fixtures		<input checked="" type="checkbox"/>	
24. Pool and Equipment	<input checked="" type="checkbox"/>		
25. Propane Tank	<input checked="" type="checkbox"/>		
26. Radon System	<input checked="" type="checkbox"/>		
27. Sauna	<input checked="" type="checkbox"/>		
28. Septic/Leaching Field		<input checked="" type="checkbox"/>	
29. Sewer Systems/Drains		<input checked="" type="checkbox"/>	
30. Smoke/Fire Alarm		<input checked="" type="checkbox"/>	
31. Solar House – Heating	<input checked="" type="checkbox"/>		
32. Sump Pump(s)	<input checked="" type="checkbox"/>		
33. Switches and Outlets		<input checked="" type="checkbox"/>	
34. Underground Sprinkler and Heads	<input checked="" type="checkbox"/>		
35. Vent Fan		<input checked="" type="checkbox"/>	
36. Water Heater – Electric or Gas		<input checked="" type="checkbox"/>	
37. Water Purifier	<input checked="" type="checkbox"/>		
38. Water Softener – Leased or Owned	<input checked="" type="checkbox"/>		
39. Well and Pump		<input checked="" type="checkbox"/>	
40. Wood Burning Stove		<input checked="" type="checkbox"/>	

INITIALS: SELLER ____ / ____ PURCHASER ____ / ____



IV. HAZARDOUS CONDITIONS

Are you aware of any existing hazardous conditions of the property and are you aware of any tests having been performed?

	Existing Conditions		Tests Performed	
	Yes	No	Yes	No
1. Methane Gas		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
2. Lead Paint		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
3. Radon Gas (House)		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
4. Radon Gas (Well)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
5. Radioactive Materials		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
6. Landfill, Mineshaft		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
7. Expansive Soil		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
8. Mold		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
9. Toxic Materials		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
10. Urea Formaldehyde Foam Insulations		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
11. Asbestos Insulation		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
12. Buried Fuel Tanks		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
13. Chemical Storage Tanks		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
14. Fire Retardant Treated Plywood	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
15. Production of Methamphetamines		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>

If the answer is yes to any of the questions above, please explain in additional comments or on an attached separate sheet.

V. MISCELLANEOUS INFORMATION

1. Is the street or road located at the end of the driveway to the property public or private?

☒ Public ☐ Private

2. Is there a written road maintenance agreement? Yes ☐ No ☐

If yes, attach a copy of the maintenance agreement.

3. When was the fireplace/wood stove/chimney flue last cleaned? Nov - 2015

4. Within the previous twelve months prior to signing this document, are you aware of any of the following occurring on the subject property?

a. A human death by homicide or suicide? Yes ☐ No ☒

If yes, explain: _____

b. Other felony committed against the property or a person on the property? Yes ☐ No ☒

If yes, explain: _____

5. Is the water source (select one) Public ☐ or Private? ☒

6. If private, what is the date and result of the last water test? 2012 - Aug

7. Is the sewer system (select one) Public ☐ or Private? ☒

8. If private, what is the date of the last time the septic tank was pumped? Aug 2012

9. Are there broken window panes or seals? Yes ☐ No ☒

If yes, specify: _____

10. Are there any items attached to the property that will not be left, such as: towel bars, mirrors, swag lamps and hooks, curtain rods, window coverings, light fixtures, clothes lines, swing sets, storage sheds, ceiling fans, basketball hoops, mail boxes, etc. ☒ Yes ☐ No

If yes, please list Table & chairs

11. Are you aware of any other material facts or problems that have not been disclosed on this form?

Yes ☒ No ☐ If yes, explain: _____

INITIALS: SELLER D/B PURCHASER /



VI. ADDITIONAL COMMENTS (ATTACH ADDITIONAL PAGES IF NECESSARY)

Built in 2012 + 2013 ALL new appliances
in 2013. New stove (Pellet) 2015.
Double ingate in shop + over bedrooms

CLOSING SECTION

The Seller hereby certifies that the information contained herein is true and correct to the best of the Seller's information, knowledge, and belief as of the date of the Seller's signature below. If any of these conditions change before conveyance of title to this property, the change will be disclosed in a written amendment to this disclosure statement.

David Becking 11-10-15

Seller

Date

Seller

Date

THE SELLER AND THE PURCHASER MAY WISH TO OBTAIN PROFESSIONAL ADVICE AND INSPECTIONS OF THE PROPERTY TO OBTAIN A TRUE REPORT AS TO THE CONDITION OF THE PROPERTY AND TO PROVIDE FOR APPROPRIATE PROVISIONS IN ANY CONTRACT OF SALE AS NEGOTIATED BETWEEN THE SELLER AND THE PURCHASER WITH RESPECT TO SUCH PROFESSIONAL ADVICE AND INSPECTIONS.

I/We acknowledge receipt of a copy of this statement on the date appearing beside my/our signature(s) below. Any agent representing any party to this transaction makes no representations and is not responsible for any conditions existing in the property.

Purchaser

Date

Purchaser

Date