

SELLER DISCLOSURE OF PROPERTY CONDITION



To be delivered prior to buyer making Offer to Buy Real Estate)

(10 be delivered prior to buyer making Otter to buy Real Estate)
Property Owner(s) & Address: Christie Scase and Sandra Steinbach
2374 149th Lane, Carlisle, IA 50047
Purpose of Disclosure: Completion of Section I this form is required under Chapter 558A of the Iowa code which mandates the Seller(s) disclose condition and information about the property, unless exempt:
Exempt Properties: Properties exempted from the Seller's disclosure requirement include (IA Code 558A): Bare ground; property containing 5 or more dwellings units; court ordered transfers; transfers by a power of attorney; foreclosures; lenders selling foreclosed properties; fiduciaries in the course of an administration of an decedent's estate, guardianship, conservatorship, or trust; between joint tenants, or tenants in common; to or from any governmental division; quit claim deeds; intra family transfers; between divorcing spouses; commercial or agricultural property which has no dwellings. Seller(s) certifies that the property is exempt from the requirement(s) of Iowa Code 558A because one of the above exemptions apply. If so, you may stop here.
Seller Date Seller Date
Seller Date Seller Date
Buyer Date Buyer Date
utilize ordinary care in obtaining the information. (3) Provide information in good faith and make a reasonable effort to ascertain the required information. (4) Additional pages or reports may be attached. (5) If some items do not apply to your property, write "NA" (not applicable). (6) All approximations must be identified "AP". If you do not know the facts, write or check UNKNOWN. (7) Keep a copy of this statement. Seller's Disclosure Statement: Seller discloses the following information regarding the property and certifies this information is true and accurate to the best of my/our knowledge as of the date signed. Seller authorizes Agent to provide a copy of this statement to any person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. This statement shall not be a warranty of any kind by Seller or Seller's Agent and shall not be intended as a substitute for any inspection or warranty the purchaser may wish to obtain. The following are representations made by Seller and are not by any Agent acting on behalf of the Seller. The Agent has no independent knowledge of the condition of the property except that which is written on this form. Seller advises Buyer to obtain independent inspections relevant to Buyer. Seller initials Buyer initials Buyer initials
I. Property Conditions, Improvements and Additional Information: (Section I is Mandatory) 1. Basement/Foundation: Has there been known water or other problems? Yes \(\sigma\) No \(\mathbb{N}\) Unknown \(\sigma\) If yes,
please explain:
2. Roof: Any known problems? Yes No Unknown Type Prior to shingle repairement were done 2016(49) Unknown Date of repairs replacement Two 2023 Unknown Describe: roof replaced following hail damage - See Certification of high impact shingle installation.
3. Well and pump: Any known problems? Yes \(\) No \(\) Unknown \(\) Type of well (depth/diameter), age and date of repair: \(\) \\ \ \ \) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \\ \(\)
4. Septic tanks/drain fields: Any known problems? Yes no Unknown Location of tank off NE corner Unknown AgeZy Unknown See Time of Transfer Inspection Report for diagram of Has the system been inspected within 2 years or pumped/cleaned within 3 years? Location.

	Date of repairs N/A
6.	Heating system(s): Any known problems? Yes \(\sigma\) No \(\sigma\) Any known repairs/replacement? Yes \(\sigma\) No \(\sigma\)
_	Date of repairs Routine maintenance annually by City Wide Heating & Cooling.
7.	Central Cooling system(s): Any known problems? Yes No Any known repairs/replacement? Yes No Date of repairs Same as heating.
8.	Plumbing system(s): Any known problems? Yes \(\subseteq \) No \(\subseteq \) Any known repairs/replacement? Yes \(\subseteq \) No \(\subseteq \) Date of repairs \(\frac{\text{faucet repairs as weeded}{\text{as needed}} \).
	Electrical system(s): Any known problems? Yes \(\) No \(\) Any known repairs/replacement? Yes \(\) No \(\) Date of repairs, minor repairs completed & whole house surge protector, restalled following highling strikes
10	. Pest Infestation: (wood-destroying insects, bats, snakes, rodents, destructive/troublesome animals, etc.) 32023 Any known problems? Yes ☐ No ☒ Unknown ☐ Date of treatment Previous Infestation/Structural Damage? Yes ☐ No ☒ Date of repairs
11.	. Asbestos: Is asbestos present in any form in the property? Yes \(\Boxed{\omega}\) No \(\Boxed{\omega}\) Unknown \(\Boxed{\omega}\) If yes, explain:
12.	Radon: Any known tests for the presence of radon gas? Yes No I If yes, test results? After mitigation Date of last report reclease any testing results. If not, Check here
13.	Lead Based Paint: Known to be present or has the property been tested for the presence of lead based paint? Yes \(\sigma\) No \(\sigma\) Unknown \(\sigma\) If yes, what were the test results?
	Has the lead disclosure form and pamphlet been provided? Yes ☐ No ☐
14.	Any known encroachments, easements, "common areas" (facilities like pools, tennis courts, walkways or other areas co-owned with others), zoning matters, nonconforming uses, or a Homeowners Association which has any authority over the property? Yes \(\bigcap\) No \(\mathbb{Z}\) Unknown \(\bigcap\)
15.	Features of the property known to be shared in common with adjoining landowners, such as walls, fences, roads and driveways whose use or maintenance responsibility may have an effect on the property? Yes No D Unknown Common portion of driveway subject to read maintenance agreement.
16.	Structural Damage: Any known structural damage? Yes & No Unknown D See Addendum
	Physical Problems: Any known settling, flooding, drainage or grading problems? Yes \(\sigma\) No \(\sigma\) Unknown \(\sigma\)
18.	Is the property located in a flood plain? Yes 🗖 No 🔀 Unknown 🗖 If yes, flood plain designation
19.	Do you know the zoning classification of this property? Yes \ No \ Unknown \
20.	Covenants: Is the property subject to restrictive covenants? Yes \(\superantom{No \(\s)}}}}}}}}}})}}}}}}}\)
	Addendum
	You MUST explain any "Yes" responses above (Attach additional sheets if necessary): attached.
	Seller initials & Buyer initials

· II. Appliances/Systems/Services (Note: Section II is for the convenience of Buyer/Seller and is not mandatory):

Notice: Items marked "included" are intended to remain with the property after sale. However, included items may be negotiable between Buyer and Seller, and requested items should be in writing as either included or excluded in any Offer to Buy/Purchase Agreement. The Offer to Buy/Purchase Agreement shall be the final terms of any agreement.

	Included	Working Yes No		Rente Yes			Included	Working? Yes No	OR Unknown
Range/Oven Dishwasher Refrigerator				3		Lawn Sprinkler System Solar Heating System Pool Heater, Wall		88	
Hood/Fan Disposal TV receiving - att			Ö			liner & equipment Well & Pump Smoke Alarm		2000	
Equipment Sump Pump Alarm System Central AC Window AC Central Vacuum Gas Grill Attic Fan Intercom Microwave Trash Compactor Ceiling Fan Water Softener/ Conditioner						Septic Tank & Drain field City Water System / rural System City Sewer System Plumbing System Central Heating System Water Heater Windows Fireplace/Chimney × 2 Wood Burning System Furnace Humidifier Sauna/Hot tub Locks and Keys Dryer	ten.		
LP Tanks Keys & Locks Swing Set Basketball Hoop	See Below			Ш	u	Sauna/Hot tub Locks and Keys Dryer Washer Storage Shed- 40×32 detached gare	ye/work	Eshop.	
Underground "Pet fence" Pet Collars Garage door opener					collars emotes	Boat Dock Boat Hoist			
Exceptions/Expl	anations for	"NO" r	esponses a	bove:		and the second s			The state of the s
* LP tank I	eased from	Warren	County O	11. Re	enamm	g propave subject to proca	hòn al t	ime of s	;ale,
ALL HOUSEHO Warranties may b						WARRANTY BEYON	D DATE	OF CLO	DSING.
		Sellei	initials 0	28	S B	uyer initials			
III. Additional	l Non-Mai	idatory	Request	ed It	ems:	Are you as the Seller aware	of any o	f the follo	wing:
1. Any significar	nt structural	modificat	tion or alte	ration	to pro	perty? Yes 🗖 No 🔀 Unkno	own □Pl ®	ease expl	ain:
	od(s) or other	er conditi	ons? Yes	X No	☐ Un	over \$5,000, or major dam known [] If yes, has the da			from fire,

association of which you have knowledge? Yes \(\Boxed{\omega}\) No \(\Boxed{\omega}\) Unknown \(\Boxed{\omega}\)
4. Mold: Does property contain toxic mold that adversely affects the property or occupants? Yes □ No ☑ Unknown □
5. Private burial grounds: Does property contain any private burial ground? Yes \(\bigcap\) No \(\bigcap\) Unknown \(\bigcap\)
6. Neighborhood or Stigmatizing conditions or problems affecting this property? Yes ☐ No ☑ Unknown ☐
7. Energy Efficiency Testing: Has the property been tested for energy efficiency? Yes \(\bigcap\) No \(\bigcap\) Unknown \(\bigcap\) If yes, what were the test results?
8. Attic Insulation: Type Blown in cellulose Unknown Amount Unknown
9. Are you aware of any area environmental concerns? Yes \(\Bigcap\) No \(\Bigcap\) Unknown \(\Bigcap\) If yes, please explain:
10. Are you related to the listing agent? Yes \(\bar{\Box}\) No \(\bar{\Box}\) If yes, how?
11. Where survey of property may be found: Oak Tree Acres - plat map
If the answer to any item is yes, please explain. Attach additional sheets, if necessary:
See Addewdum re: storm damage & repairs.
Seller has owned the property since home was constructed seller has indicated above the history and condition of all the items based solely on the information known or reasonably available to the Seller(s). If any changes occur in the structural/mechanical/appliance systems of this property from the date of this form to the date of closing, Seller will immediately disclose the changes to Buyer. In no event shall the parties hold Broker liable for any representations not directly made by Broker or Broker's affiliated licensees (brokers and salespersons). Seller hereby acknowledges Seller has retained a copy of this statement.
Seller acknowledges requirement that Buyer be provided with the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.
Seller Christie Scare Seller Sandra Steinbach
Buyer hereby acknowledges receipt of a copy of this statement. This statement is not intended to be a warranty or to substitute for any inspection the buyer(s) may wish to obtain.
Buyer acknowledges receipt of the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.
Buyer Buyer

2374 149th Lane, Carlisle - Seller Disclosure Addendum

Home was damaged by two storm events in 2023.

- 1) Hail storm on April 4, 2023, caused damage to roof, gutters, and garage door.
 - a. Shingles were replaced in June of 2023, by Bakeris Roofing, Runnels Installed Owens Corning TruDefinition Duration Flex, Class 4 UL rated high impact shingles qualifying for greater than 20% reduction of State Farm homeowner insurance premium.
 - b. Gutters and downspouts were replaced in September of 2023 by National Gutter Systems, Carlisle.
 - c. Garage door was replaced in October of 2023.
- 2) Lightning strike on June 30, 2023, caused minor electrical and structural damage and appliance failures.
 - a. House and detached garage wiring and electrical systems were fully inspected as soon as possible after the strike and no significant damage was found. Evidence of arcing was found on a few light fixtures and outlets and these were replaced. We also had a whole house surge protector installed near the electric meter.
 - b. The concussion from the strike cracked a piece of drywall in the upstairs SW bedroom and buckled front porch ceiling soffit. The damaged drywall was repaired and the bedroom was repainted. The porch soffit and light fixtures were replaced.
 - c. Damaged appliances, including the garage door opener, washer, and dryer were replaced.

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2374 149th Lane, Carlisle - Repairs & Maintenance

2002 - Home built - Fleishman Construction, Carlisle - General Contractor

Aug. 2007 - Water Furnace geothermal installed - City Wide Heating & Cooling

May 2018 – Radon mitigation system installed – Radon Systems of Iowa

June 2018 - Kitchen counter replacement - Countertops by Willett, Des Moines

Aug. 2020 - Whole house humidifier installed - City Wide Heating & Cooling

May 2023 - majority of interior painted - Harmony Painting, Des Moines

June 2023 – new roof - Owens Corning Flex (class 4) high impact shingles (qualified for >20% homeowners' insurance discount) – Bakeris Roofing, Runnells

July 2023 – Garage door opener – Adams Door Company, Des Moines & All smoke detectors replaced

Aug. 2023 - Exterior painted - Harmony Painting, Des Moines

Sept. 2023 - Gutters & downspouts replaced - National Gutter Systems, Carlisle

Oct. 2023 - New garage door - Adams Door Company, Des Moines

Age of Appliances:

Refrigerator 2023 Washer & Dryer 2024 Microwave 2021 Wall ovens 2017 Dishwasher 2017

sellers: cp & f8



Roofing Installation Information and Certification for Reduction in Residential Insurance Premiums

Notice to Homeowner. Completion of this certificate may entitle you to a reduction in your residential insurance premium. This certification form is solely for the purpose of enabling residential property owners to apply for a reduction in their residential insurance premium and it is not to be construed as any type of express or implied warranty by the manufacturer, supplier, installer, State Farm Fire and Casualty Company or State Farm Lloyds. Premium reductions are not available for roofs (other than qualifying metal roofs) that have been overlaid onto existing roofs.

Note: To receive a premium reduction for qualifying metal products, you must accept an exclusion of certain damages to metal roof products outlined in an endorsement that will be a part of your policy. You have a choice whether to request the premium reduction and accept the exclusion of damages to metal roofs, Submission of this form to State Farm is one part of your request and your acceptance of the exclusion of damages. See your agent for details.

individual shingle, tile, shake, panel, sheet, etc. must be labeled with the following information. In signing on the line below, the contractor agrees that the roof covering product packaging indicates either the UL classification under UL Standard 2218 or the F classification under FM Standard 4473, the manufacturer's name, the date of manufacture, and the brand name, and that a label from the packaging has been supplied to the owner of the residence. The contractor also agrees that each Individual shingle, tile, shak panel, sheet, etc. of roof covering is separately labeled with either the UL Standard 2218 classification, or the FM Standard 44.									
Street Address: 10 391 NE University Ave City: Runnells State: Towa ZIP Code: 5c237 Phone: 515-967-8199 License Number, if any: Address of Residence (Installer/Inspector must complete the following information before signing form) Name of Owner: Christic State: Home Phone: 515-967-0964 Address: 2374 149 Labe State: Towa State Phone: 515-226-2261 City: Cardiste State: Towa ZIP Code: 5c647 Policy Number: 15-60-X793-7 I. Bryce Kieste Roof Installation: It is listed as complying with Underwriters' Laboratory Standard 2218, Impact Standards for Impact Resistance Prepared Roof Covering Materials, or as complying with Pactory Mutual Standard 4473, Standards for Impact Resistant Testing of Rigid Roofing Materials by impacting with Freezer loe Balls. The impact resistant roof covering was installed on the entire roofing surface, including the main areas of the roof and the hips and ridges (Including the ridge vent systems). The physic properties of the product used in hip and ridge applications must be of like kind and quelity to that of the installed approved product he entire roof covering has not been overlaid onto existing roofing material (other than qualifying metal roofs), and is free of defects damage, including haid damage. Manufacturer's Name: Owen Standard 218 approved products, and after July 1, 2005 for FM Standard 4473 approved products, earindividual shingle, tile, shake, panel, sheet, etc. must be albeled with either following information. In signing on the line below, it contractor agrees that the roof covering base specially in the packaging indicates either the U. Classification under FM Standard 4218 or the Fidals approved product of manufacturer's name, the date of manufacture, and brand name, and that a label for the packaging has been supplied to the owner of the residence. The contractor also agrees that the roof covering is separately labeled with either the U. Standard 2218 classification, or the FM Standard 4473 decision and with the manufacturer's name, the date of manufacture, and br	Name of Roofing Compan	y: Baken	is Rosfina						
State: Jowa IP Code: 5c237 Phone: 515 - 967 - 8199 License Number, if any: Address of Residence (Installer/Inspector must complete the following Information before signing form) Name of Owner: Chystre 545 e 5andra 5fewbard Home Phone: 515 - 967 - 964 Address: 2374 1497 Live State: Towa IP Code: 5cc47 City: Christe State: Towa IP Code: 5cc47 Policy Number: 15 BD - X793 - 7 I. Bryce Kiester Root Covering Materials, or as complying with Drawnters' Laboratory Standard 2218, Impact Standard for Impact Resistance Prepared Roof Covering Materials, or as complying with Pactory Mutual Standard 4473, Specification Test Standards for Impact Resistance Prepared Roof Covering Materials by Impacting with Freezer toe Balls. The impact resistant roof covering was installed on the entire roofing surface, including the main areas of the roof and the hips and ridges (Including the ridge vent systems). The physic properties of the product used in hip and ridge applications must be of like kind and quality to that of the installed approved product surfame was not been overlaid onto existing roofing material (other than qualitying metal roofs), and is free of defects damage, including the aid manage. Manufacturer's Name: Owen Standard 2218 approved products, and after July 1, 2005 for FM Standard 4473 approved products, earindividual shingle, tile, shake, panel, sheet, etc. must be labeled with the following information. In signing on the line below, the packaging has been supplied to the owner of the residence. The contractor sales agrees that the roof covering is separately labeled with the following information. In signing on the line below, the packaging has been supplied to the owner of the residence. The contractor size agrees that the roof covering is separately labeled with either the UL Standard 2218 cassification, or the FM Standard 44. classification, and with the manufacturer's name, the date of manufacture, and the brand name, and that a label for the packaging has been supplied to the owner of the residence. Th	Street Address: 10			10					
Address of Residence (Installer/Inspector must complete the following information before signing form) Name of Owner: Christie State I Standard Stewbard Home Phone: 515-987-0964 Address: 2374 1495 Lase Cett Office Phone: 515-220-2201 City: Christe State: June 2 ZIP Code: 50047 Policy Number: 15-60-X793-7 I. Bryce Letter Roof Company roofing company, do hereby certify that I have inspected or installed, in accordance with the manufacturer's specifications on the abordesoribed residence, a roof shingle, tile, panel, sheet, etc. appearing on the State Farm® Qualifying Roofing Products Listing as of the abordesoribed residence, a roof shingle, tile, panel, sheet, etc. appearing on the State Farm® Qualifying Roofing Products Listing as of the entire roofing surface, including the main areas of the roof and the hips and ridges (Including the ridge vent systems). The physis properties of the product used in hip and ridge applications must be of like kind and quality to that of the installed approved product had manage, including hail damage. Went Standard 218 approved product used in hip and ridge applications must be of like kind and quality to that of the installed approved product sadmage, including hail damage. Went Standard 2018 approved product used in hip and ridge applications must be of like kind and quality to that of the installed approved product sadmage, including hail damage. Went Standard 218 approved product used in hip and ridge applications must be of like kind and quality to that of the installed approved product sadmage, including hail damage. Went Standard 218 approved product used in hip and ridge applications must be of like kind and quality to that of the installed approved product sadmage, including hail damage. Went Standard 218 approved product sadmage, including the ridge vent is signification: Class 3 Vear Manufacturer's Name: Went Standard 2218 approved products, and after July 1, 2005 for FM Standard 4473 approved products, earindividual shingle, tile, shake, panel, she			. /	State:	Inwa		ZIP Code:	50237	11
Name of Owner: Address: 2374 149 Luse State: Stat	Phone: 515-967-8	199 Lice	nse Number, if any:						
Address: 2374 149 Luse State: Time State: Time State: Time State: Time State: Time State: Time State: State: Time State: State: Time State: Time State: State	Address of Residence (I	nstaller/inspector	must complete the	e followi	ng Informatio	n before signing	form)		
Address: 2374 149 Lase City: Cartiste State: Targo Tip Code: 50047 Policy Number: 15 BD - X793-7 I. Bruce Klester Roof-Trug Print Name Print Name Company roofing company, do hereby certify that I have inspected or installed, in accordance with the manufacturer's specifications on the abo described residence, a roof shingle, tile, panel, sheet, etc. appearing on the State Farm® Qualifying Roofing Products Listing as of the date of installation. It is listed as complying with Underwriters' Laboratory Standard 2218, impact Standard for Impact Resistance Prepared Roof Covering Materials, or as complying with Factory Mutual Standard 4473. Specification Test Standards for Impact Resistance Prepared Roof Covering Materials, or as complying with Factory Mutual Standard 4473. Specification Test Standards for Impact Resistance Prepared Roof Covering Materials, or as complying with Freezer loe Balls. The impact resistant roof covering was installed on the entire roofing surface, including the main areas of the roof and the hips and ridges (including the ridge vent systems). The physic properties of the product used in hip and ridge applications must be of like kind and qualify to that of the installed approved product he roofing material (other than qualifying metal roofs), and is free of defects damage, including hail damage. Manufacturer's Name: Duens Corning Product Color: Teast UL 2218 / FM4473 Classification: Class 3 After January 1, 1999 for UL Standard 2218 approved products, and after July 1, 2005 for FM Standard 4473 approved products, each including shingle, tile, shake, panel, sheet, etc. must be labeled with the following information. In signing on the line below, to contractor agrees that the roof covering product packaging indicates either the UL classification under UL Standard 2218 or the Ficalsalification under FM Standard 4473, the manufacturer's name, the date of manufacture, and the brand name, and that a label from the packaging has been supplied to the owner of the residence. The contrac	Name of Owner:	istie Sease	+ Sandra -	Steink	rach	Home Phone:	515-91	00-0964	1
Bryce Kiester Print Name Print Name Company roofing company, do hereby certify that I have inspected or installed, in accordance with the manufacturer's specifications on the abordescribed residence, a roof shingle, tile, panel, sheet, etc. appearing on the State Farm® Qualifying Roofing Products Listing as of to date of installation. It is listed as complying with Underwriters' Laboratory Standard 2218, Impact Standard for Impact Resistance Prepared Roof Covering Materials, or as complying with Factory Mutual Standard 4473, Specification Test Standards for Impa Resistent Testing of Rigid Roofing Materials by Impacting with Freezer loe Balls. The impact resistant roof covering was installed over the entire roofing surface, including the main areas of the roof and the hips and ridges (including the ridge vent systems). The physic properties of the product used in hip and ridge applications must be of like kind and quality to that of the installed approved product. The roof covering has not been overlaid onto existing roofing material (other than qualifying metal roofs), and is free of defects damage, including hail damage. Manufacturer's Name: Brand Name: Wear Manufacturer's Name: Due S Corning Product Color: Detection: Class 3 Class 4 Class 6 Class 6 Class 7	Address: 2374 149	7" Lane			Ces	C. Office Phone:	515	236-22	201
Bryce Kiester Print Name Print Name Company roofing company, do hereby certify that I have inspected or installed, in accordance with the manufacturer's specifications on the abord described residence, a roof shingle, tile, panel, sheet, etc. appearing on the State Farm® Qualifying Roofing Products Listing as of to date of installation. It is listed as complying with Underwriters' Laboratory Standard 2218, Impact Standard for Impact Resistance Prepared Roof Covering Materials, or as complying with Factory Mutual Standard 473, Specification Test Standards for Impa Resistant Testing of Rigid Roofing Materials by Impacting with Freezer loe Balls. The impact resistant roof covering was installed on the entire roofing surface, including the main areas of the roof and the hips and ridges (including the ridge vent systems). The physic properties of the product used in hip and ridge applications must be of like kind and quality to that of the installed approved product. The roof covering has not been overlaid onto existing roofing material (other than qualifying metal roofs), and is free of defects damage, including hail damage. Manufacturer's Name: Definition Devantor Product Color: Devantor Product Color: Devantor Class 3 Class 4 UL 2218 / FM4473 Classification: Class 3 Class 4 Class 6 Class 6 Class 6 Class 7	City: Carlisle			State:	Towar	-	ZIP Code:	50047	
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	individual shingle, tile, sha contractor agrees that the classification under FM Sta the packaging has been s	ake, panel, sheet, roof covering proc andard 4473, the mupplied to the own covering is separa	etc. must be labe duct packaging indi- nanufacturer's name er of the residence ately labeled with e	eled with cates either the date. The contitue the continue of the contitue the contitue of the	the following ner the UL cli e of manufac ntractor also UL Standard	information. In sassification under ture, and the brar agrees that each 2218 classificati	igning on t UL Standa id name, ar Individual	the line be ard 2218 or and that a la shingle, tile	elow, the r the FM abel from e. shake.
Any intentional misrepresentation relating to the completion or presentation of this form constitutes fraud.	classification, and with the					ime.	6-	20 -	23