

Owner's Property Disclosure Statement

| | WNER(S) NAME(S): | | 704 07 00741 0 | ADI 50 51 00404 | |
|--|---|--|---|--|--|
| | ROPERTY ADDRESS: | 111/ ALBE | ERCA ST, CORAL G | ABLES, FL 33134 | |
| | ATE HOME BUILT: | | | | |
| | ATE OWNER PURCHASED PRO | | | | |
| | ROPERTY IS PRESENTLY: 🔀 | | | | |
| IF L | LEASED, is the lease Writte | n 🔲 Oral. Termination date | e of lease is: | | |
| | The info | ormation Disclosed Is Give | n To The Best Of Ov | ner's Knowledge | |
| factors about the control of the con | OTICE TO THE BUYER/TENAI acts that materially affect the valuesigned to assist Owner in comvaluating the property being concove-referenced address. It is not any inspections or warranties this disclosure is not intended to ther parties involved in the transwer's property to prospective Butters. | ue of the property being solo aplying with the disclosure re- asidered. This disclosure sta ot a warranty of any kind by the parties may wish to obtain be a part of any contract fo saction rely upon and may | d and that are not rea equirements under F atement concerns the the Owner or any Lice in. It is based only up or sale and purchase | adily observable. This disclosificated Law and to assist the econdition of the real properensee in this transaction. It is pon Owner's knowledge of proor lease agreement. Real es | sure statement is Buyer/Tenant in rty located at the s not a substitute operty condition. state agents and |
| rep pag | ISTRUCTIONS TO THE OWNE sport(s) when completing this for ages with your signature if addit becific matter, then "UNKNOWN" | m; (3) describe conditions af tional space is required; (5) | fecting property to the answer all questions | e best of your knowledge; (4 s; (6) if you have no knowle | attach additional ad |
| The | he following representations are | made by the Owner(s) and a | re not representation | s of any real estate licensees: | : |
| 1. (| claims & assessments: a. Are you aware of existing, assessments (including home maintenance fees) affecting the | owner's association, condo n | naintenance fees, pro | posed increases in assessme | ents and/or |
| | b. Have any local, state or fec required? ☑NO ☐YES If " | | | | ty are |
| 2. | PROPERTY USE/DEED RES a. Are you aware of any Hom may affect the use, future resa | eowner Association, Condo | Association, deed res | trictions, covenants, or reserv | |
| | b. Are you aware of any prop | posed changes that affect or | may affect the use, fi | uture resale or value of the pr | operty? |
| | ☑NO ☐YES If "Yes", pleas | = | = | · | |
| | • | | | | |
| 3. \$ | a. Are you aware of any struc hurricanes, flood, hail, lightnin | tural damage which may hav | | | |
| | b. Are you aware of any pas | • | • | | |
| | walls on the property? | NO TYES | | patios, porches, seawalls, pod | _ |
| | d. Are you aware of any past space or attic? ☐ NO YYES | or present water leaks, wate | r accumulation or dan | npness within the house, base | ement, crawl |
| | space or attic? NO YYES | section are "Yes", please exp | plain: <u>SMA</u> | IIL grage | Low |
| | WZS MX. | | | $\overline{}$ | |
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| 4. | PROPERTY-RELATED ITEMS: | | | | |
|-----------|--|--|--|--|--|
| | a. Have you ever had the property surveyed? NO YES | | | | |
| | b. Is there an existing elevation certificate? NO YES | | | | |
| | c. The Flood Zone is: The Base Flood Elevation (BFE) is: d. Are you aware of any walls, driveways, fences, structures or other features shared in common with adjoining | | | | |
| | landowners, or any encroachments, boundary line disputes, setback violations or easements (other than utility or drainage | | | | |
| | easements) affecting the property? NO YES If "Yes". Please explain: | | | | |
| | | | | | |
| | e. Do you have an existing flood insurance policy? NO YES | | | | |
| 5. | TERMITES, DRY ROT, PESTS, WOOD DESTROYING ORGANISMS: | | | | |
| | a. Do you have any knowledge of termites, dry rot, pests or wood destroying organisms on or affecting property? | | | | |
| | YES YES | | | | |
| | b. Do you have any knowledge of any damage to the property caused by termites, dry rot, pests or wood destroying organisms? PNO TYES | | | | |
| | c. Have you ever had the property inspected for termites, dry rot, pests or wood destroying organisms? | | | | |
| | NO ☐YES If "Yes", Date of Inspection: | | | | |
| | d. Has the property been treated for termites, dry rot, pests or wood destroying organisms? NO YES | | | | |
| | If "Yes", please indicate Date of Treatment Type of Treatment | | | | |
| | Company Name: | | | | |
| | e. Is your property currently under warranty or other coverage by a licensed pest control company? NO YES | | | | |
| | If "Yes", Company Name: | | | | |
| | If any of your answers in this section are trest, prease explain. | | | | |
| | | | | | |
| B. | PERMITS: | | | | |
| | a. Are you aware of any improvements, modifications or additions to the property, whether by you or by others, that have been constructed in violation of applicable building codes or without necessary permits? ☐NO ☐YES | | | | |
| | b. Are you aware of any open permits, (i.e., active or expired permits) on the property which have not been closed by a | | | | |
| | or Are you aware of any open permits, (i.e., active or expired permits) on the property which have not been closed by a final inspection? [₹NO [] YES | | | | |
| | If any of your answers in this section are "Yes", please explain: | | | | |
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| , | | | | | |
| | ROOF-RELATED ITEMS: a. Approximate age of roof: | | | | |
| | b. Have you replaced the roof? NO YES If "Yes", when?: | | | | |
| | c. Is there a warranty on the roof? NO YES If "Yes" is the warranty transferable? NO YES | | | | |
| | Name of Company: | | | | |
| | d. Has the roof ever leaked since you've owned the property? NO YES If "Yes", what has been done to correct the | | | | |
| | leaks? Date of repair(s): | | | | |
| | e. Has the roof been inspected within the last 12 months? NO YES If "Yes", please explain: | | | | |
| | | | | | |
| 3. | PLUMBING-RELATED ITEMS: | | | | |
| | What is your drinking water source? Public Private Well Other | | | | |
| | b. If your drinking water is from a well or other source, when was your water last checked for safety and what were the | | | | |
| | results of the tests? | | | | |
| | c. What is the water source for your sprinkler system? | | | | |
| | d. Do you have a water conditioning system? NO YES If "Yes" is it LEASED? or OWNED? | | | | |
| | e. What is the type of sewage system? Public Sewer Private Sewer Septic Tank Cesspool | | | | |
| | When was the septic tank/cesspool last serviced? | | | | |
| | f. Are any storage tanks stored or buried on the property? NO YES If "Yes", where? | | | | |
| | | | | | |

| | g. Do you know of any leaks, backups, breaks, or other problems relating to any of the plumbing, water, sewage/septic system or sprinkler system? MO MYES If "Yes", please explain: | | | | | | |
|-----|---|--|--|--|--|--|--|
| 9. | ELECTRICAL SYSTEMS: a. Does Property have: Circuit breakers? ☐ NO ☑ YES Fuses? ☐ NO ☑ YES | | | | | | |
| | a. Does Property have: Circuit breakers? ☐ NO ☑ YES b. Are you aware of any damaged, dangerous, malfunctioning or un-permitted switches, receptacles, circuits, fans, lights, fuses or wiring? ☑ NO ☐ YES | | | | | | |
| | c. Are you aware of any conditions that materially affect the value or operating capacity of the electrical system? NO TYES If any of your answers to the section are "Yes", please explain: | | | | | | |
| 10. | POOL/HOT TUBS/SPAS: a. Does the property have a swimming pool? NO YES Hot Tub? NO YES Spa? NO YES | | | | | | |
| | If "Yes", was the certificate of completion received after October1, 2000 for the pool/hot tub/spa? NO YES b. Are there any problems in need of repair to the pool, pool lines, pool-related equipment, hot tub, and/or spa? NO YES | | | | | | |
| | c. Are there any electrical problems with the pool, pool related equipment, hot tub and/or spa? NO YES | | | | | | |
| | d. Do the following Pool Safety features (as defined by Chapter 515, Florida Statutes.) comply with the law: Enclosure meeting barrier requirements? NO YES Approved Safety Pool Cover? NO YES | | | | | | |
| | Required door and window exit alarms? NO YES Required door/gate locks? NO YES If any of your answers in this section are "No", please explain: | | | | | | |
| 11. | MAJOR APPLIANCES AND EQUIPMENT: a. Are there existing problems with the appliances and/or equipment in the home, including the sprinkler system and security system? ✓ NO ☐ YES If "Yes", please explain: b. Are there service contracts or warranties on appliances and/or equipment? ☐ NO ☐ YES If "Yes", please explain: | | | | | | |
| | Are any of these gas appliances? NO YES Lawn Sprinkler System? NO YES Is there a timer? NO YES Garage door openers? NO YES Hurricane Shutters? NO YES Other items included in this sale: | | | | | | |
| 12. | HEATING AND AIR CONDITIONING: a. Is the air conditioning ② Central? or □ Window? Number of units? | | | | | | |
| | b. How old is the air conditioner? | | | | | | |
| | c. Are you aware of any defects and/or any malfunctioning, circulation, electrical, cooling, leakage, overheating, or condensation problems pertaining to the air conditioning/heating since you have owned the property? | | | | | | |
| | If "Yes", please explain: | | | | | | |
| 13. | DOCKS/DAVITS/PIERS AND SEAWALLS: a. Are you aware of any conditions that may affect the desirability, use or function of the dock, davits or pier or seawall? NO YES If "Yes", please explain: | | | | | | |
| | b. Was a federal, state or local government permit required for the construction or maintenance of the dock, davits, pier, or seawall? NO YES UNKNOWN If "Yes", were all appropriate permits and approvals issued for the construction and maintenance of such structures? NO YES UNKNOWN If "No", please explain: | | | | | | |
| 14. | MOLD AND TOXIC SUBSTANCES: a. Are you aware of any past or present instances of mold or water/moisture intrusion in the structure(s) on the property? MO YES If "Yes", please explain: | | | | | | |
| | b. Are you aware of any past or present damage to the structure(s) on the property that resulted from water/moisture intrusion, including, but not limited to, the presence of mold? MO MES If "yes", please explain: | | | | | | |
| | | | | | | | |

| c. Are you aware of any und asbestos, PCB's, accumulat | c. Are you aware of any underground tanks or toxic substances present on the property (structure or spill) such as asbestos, PCB's, accumulated radon, lead paint, chinese/defective drywall, above ground or buried oil or gas tanks, or other | | | | |
|--|--|---|--|--|--|
| GANO ☐ YES | | | | | |
| If "Yes", please explain: | s or other corrective or remedial procedures that | | | | |
| d. Are you aware of any repair | s or other corrective or remedial procedures that | were undertaken as a result of the matters | | | |
| | YES If "Yes", please explain: | | | | |
| or desirability of the property, su | NT: groundition or proposed change in your neighborh ch as noise or other nuisances, electric or magne ppments or roadways, or blasting? ➢NO ☐ YE | etic field levels, threat of condemnation or | | | |
| | | | | | |
| | nangroves, archeological sites, historical preserva the property? | | | | |
| • | ffecting or which may affect the value of the prop | <u> </u> | | | |
| atement to prospective Buyer/Tena riting within five (5) business days a ecome inaccurate or incorrect in an wner; | Owner hereby authorizes disclosure of the informant of the property. Owner understands and agree after Owner becomes aware that any information y way during the term of the pending purchase by Susana Beatriz Parameters | es that Owner will notify the Buyer/Tenant in set forth in this disclosure statement has | | | |
| signature) | (pinit hante) | , , | | | |
| | 1 | Date: | | | |
| wner:signature) | (print name) | Date | | | |
| ave it inspected by a third party, and ervious questions listed above, Own IO" may mean that the Owner is ur | ENANT: Buyer/Tenant is encouraged to thorough to inquire about any specific areas of concern. In the result of the matter in the result of the matter in question exists on the property of the sign of the date s | NOTE: If Owner answers "NO" to any of the question does not exist on the property. roperty. orm to disclose Owner's knowledge of the | | | |
| arranty of any kind. The informatio ot intended to be a substitute for an ofessional inspection is encourage pairs, if any. Buyer/Tenant unders | n contained in the disclosure is limited to informa y inspection or professional advice the Buyer/Te d and may be helpful to verify the condition of the tands these representations are not made by an | ation which the Owner has knowledge. It is enant may wish to obtain. An independent e property and to determine the cost of | | | |
| cknowledges having received a cop | y of this disclosure statement. | • | | | |
| iver/Tenant | 1 | Date: | | | |
| signature) | (print name) | but | | | |
| .n.or/Toponts | | Peto | | | |
| uyer/Tenant: | / (print name) | Date: | | | |