

TENNESSEE RESIDENTIAL PROPERTY CONDITION DISCLOSURE

The Tennessee Residential Property Disclosure Act states that anyone transferring title to residential real property must provide information about the condition of the property. This completed form constitutes that disclosure by the Seller. The information contained in the disclosure are the representations of the owner and are not the representations of the real estate licensee or sales person, if any. This is not a warranty, or a substitute for any professional inspections or warranties that the purchasers may wish to obtain. **Buyers and Sellers should be aware that any sales agreement executed between the parties will supersede this form as to the terms of sale, property included in the sale and any obligations on the part of the seller to repair items identified below and/or the obligation of the buyer to accept such items "as is."**

INSTRUCTIONS TO THE SELLER

Complete this form yourself and answer each question to the best of your knowledge. If an answer is an estimate, clearly label it as such. The Seller hereby authorizes any agent(s) 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 subject property.

PROPERTY ADDRESS 0280 Arno Road CITY Franklin

SELLER'S NAME(S) Julianne Stout PROPERTY AGE 36 yrs

DATE SELLER ACQUIRED THE PROPERTY 10/2003 DO YOU OCCUPY THE PROPERTY? YES

IF NOT OWNER-OCCUPIED, HOW LONG HAS IT BEEN SINCE THE SELLER OCCUPIED THE PROPERTY? N/A

(Check the one that applies) The property is a site-built home non-site built-home

A. THE SUBJECT PROPERTY INCLUDES THE ITEMS CHECKED BELOW:

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Range | <input type="checkbox"/> Wall / Window Air Conditioning | <input type="checkbox"/> Garage Door Opener(s) and remotes. How Many? <u> </u> |
| <input checked="" type="checkbox"/> Oven | <input checked="" type="checkbox"/> Window Screens | <input type="checkbox"/> Intercom |
| <input type="checkbox"/> Microwave | <input checked="" type="checkbox"/> Fireplace(s) (Number) <u>1</u> | <input type="checkbox"/> TV Antenna / Satellite Dish and all components |
| <input type="checkbox"/> Garbage Disposal | <input checked="" type="checkbox"/> Gas Starter for Fireplace | <input type="checkbox"/> Central Vacuum System and attachments |
| <input type="checkbox"/> Trash compactor | <input type="checkbox"/> Gas Fireplace Logs | <input type="checkbox"/> Spa / Whirlpool Tub |
| <input type="checkbox"/> Water Softener | <input type="checkbox"/> Smoke Detector / Fire Alarm | <input type="checkbox"/> Hot Tub |
| <input type="checkbox"/> 220 Volt Wiring | <input checked="" type="checkbox"/> Patio / Decking / Gazebo | <input type="checkbox"/> Sauna |
| <input checked="" type="checkbox"/> Washer / Dryer Hookups | <input type="checkbox"/> Installed Outdoor Cooking Grill | <input checked="" type="checkbox"/> Current Termite contract |
| <input checked="" type="checkbox"/> Dishwasher | <input type="checkbox"/> Irrigation System | <input checked="" type="checkbox"/> Access to Public Streets |
| <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Sump Pump | <input checked="" type="checkbox"/> All Landscaping and all outdoor lighting |
| _____ Age (Approx.) | <input type="checkbox"/> Burglar Alarm / Security System | <input checked="" type="checkbox"/> A key to all exterior doors |
| | Components and controls | <input type="checkbox"/> Rain Gutters |
| | | <input type="checkbox"/> Pool <input type="checkbox"/> In ground <input type="checkbox"/> Above ground |

- | | | | | |
|--|--------------------|--|---|---|
| <input checked="" type="checkbox"/> Central Heating | <u>3 years</u> Age | <input type="checkbox"/> Electric | <input checked="" type="checkbox"/> Gas | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Central Air Conditioning | <u>3 years</u> Age | <input checked="" type="checkbox"/> Electric | <input type="checkbox"/> Gas | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Water Heater | <u>2 years</u> Age | <input type="checkbox"/> Electric | <input checked="" type="checkbox"/> Gas | <input type="checkbox"/> Solar <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Other _____ | | <input type="checkbox"/> Other _____ | | |

- Garage: Attached Not Attached Carport
- Water Supply: City Well Private Utility Other _____
- Gas Supply: Utility Bottled Other _____
- Waste Disposal: City Sewer Septic Tank Other _____
- Roof(s): Type metal Age (approx): 3 years

Other Items: _____

To the best of your knowledge, are any of the above NOT in operating condition? YES NO

