



NEBRASKA REAL ESTATE COMMISSION
SELLER PROPERTY CONDITION DISCLOSURE STATEMENT
Residential Real Property

THIS DISCLOSURE STATEMENT IS BEING COMPLETED AND DELIVERED IN ACCORDANCE WITH NEBRASKA LAW. NEBRASKA LAW REQUIRES THE SELLER TO COMPLETE THIS STATEMENT (NEB. REV. STAT. §76-2,120).

How long has the seller owned the property? 20 years 5 months
Is seller currently occupying the property? (Circle one) YES | NO If yes, how long has the seller occupied the property? _____ year(s)
If no, has the seller ever occupied the property? (Circle one) YES | NO If yes, when? From 7 (year) to 2021 (year)

This disclosure statement concerns the real property located at 174 N. CORNELL STREET
in the city of GORDON, County of SHERIDAN, State of Nebraska and legally described as:
S3' LOT 2, ALL LOT 3, BLOCK 9 Lucas Addition to the City of Gordon,
County of Sheridan, State of Nebraska

This statement is a disclosure of the condition of the real property known by the seller on the date on which this statement is signed. This statement is **NOT a warranty of any kind** by the seller or any agent representing a principal in the transaction, and **should NOT be accepted as a substitute for any inspection or warranty that the purchaser may wish to obtain.** Even though the information provided in this statement is NOT a warranty, the purchaser may rely on the information contained herein in deciding whether and on what terms to purchase the real property. Any agent representing a principal in the transaction may provide a copy of this statement to any other person in connection with any actual or possible sale of the real property. The information provided in this statement is the representation of the seller and NOT the representation of any agent, and is NOT intended to be part of any contract between the seller and purchaser.

Seller please note: you are required to complete this disclosure statement IN FULL. If any particular item or matter does not apply and there is no provision or space for indicating, insert "N/A" in the appropriate box. If age of items is unknown, write "UNK" on the blank provided. If the property has more than one item as listed below please put the numbered in the appropriate box. For example - if the home has three room air conditioners, one working, one not working, and one not included, put a "1" in each of the "Working", "Not Working", and "None/Not Included" boxes for that item, and a "3" on the line provided next to the item description to indicate total number of item. You may also provide additional explanation of any item in the comments section in PART III.

SELLER STATES THAT, TO THE BEST OF THE SELLER'S KNOWLEDGE AS OF THE DATE THIS DISCLOSURE STATEMENT IS COMPLETED AND SIGNED BY THE SELLER, THE CONDITION OF THE REAL PROPERTY IS:

PART I - If there is more than one of any item in this Part, the statement made applies to each and all of such items unless otherwise noted in the Comments section in PART III of this disclosure statement, or number separately as provided in the instructions above. If an item in this Part is not on the property, or will not be included in the sale, check only the "None/Not included" column for that item.

Section A - Appliances	Working	Not Working	Do Not Know If Working	None / Not Included
1. Refrigerator				<input checked="" type="checkbox"/>
2. Clothes Dryer				<input checked="" type="checkbox"/>
3. Clothes Washer				<input checked="" type="checkbox"/>
4. Dishwasher				<input checked="" type="checkbox"/>
5. Garbage Disposal				<input checked="" type="checkbox"/>
6. Freezer				<input checked="" type="checkbox"/>
7. Oven				<input checked="" type="checkbox"/>
8. Range				<input checked="" type="checkbox"/>
9. Cooktop				<input checked="" type="checkbox"/>
10. Microwave oven				<input checked="" type="checkbox"/>
11. Built-in vacuum system and equipment				<input checked="" type="checkbox"/>
12. Range ventilation systems				<input checked="" type="checkbox"/>
13. Gas grill				<input checked="" type="checkbox"/>
14. Room air conditioner (_____ number)				<input checked="" type="checkbox"/>
15. TV antenna / Satellite dish				<input checked="" type="checkbox"/>
16. Trash compactor				<input checked="" type="checkbox"/>

Section B - Electrical Systems	Working	Not Working	Do Not Know If Working	None / Not Included
1. Electrical service panel capacity _____ AMP Capacity (if known) fuse / circuit breakers	<input checked="" type="checkbox"/>			
2. Ceiling fan(s) (<u>2</u> number)	<input checked="" type="checkbox"/>			
3. Garage door opener(s) (_____ number)				<input checked="" type="checkbox"/>
4. Garage door remote(s) (_____ number)				<input checked="" type="checkbox"/>
5. Garage door keypad(s) (_____ number)				<input checked="" type="checkbox"/>
6. Telephone wiring and jacks				<input checked="" type="checkbox"/>
7. Cable TV wiring and jacks				<input checked="" type="checkbox"/>
8. Intercom or sound system wiring				<input checked="" type="checkbox"/>
9. Built-in speakers				<input checked="" type="checkbox"/>
10. Smoke detectors (<u>4</u> number)				<input checked="" type="checkbox"/>
11. Fire alarm				<input checked="" type="checkbox"/>
12. Carbon Monoxide Alarm (_____ number)				<input checked="" type="checkbox"/>
13. Room ventilation/exhaust fan (_____ number)				<input checked="" type="checkbox"/>
14. 220 volt service	<input checked="" type="checkbox"/>			
15. Security System _____ Owned _____ Leased _____ Central station monitoring				<input checked="" type="checkbox"/>
16. Have you experienced any problems with the electrical system or its components? _____ YES <input checked="" type="checkbox"/> NO				<input checked="" type="checkbox"/>

* Seller's Initials DAF Property Address 174 N. Cornell Street Buyer's Initials 11
Gordon, NE. 69343