

## SELLER'S PROPERTY DISCLOSURE

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### NOTICE FOR NORTH DAKOTA PROPERTY:

This form is designed to guide you, the Seller(s), in making the legally required disclosures and to assist you to avoid inadvertent nondisclosures of material facts as required by statute. You must disclose all material facts you are aware could adversely and significantly affect an ordinary Buyer's use and enjoyment of the Property or any intended use of the Property of which you are aware, even if not specifically asked in this form. Additional space for disclosure is provided on the last page of this form. You may attach any additional information as necessary.

Refer to North Dakota Century Code 47-10-02.1 for more detail on requirements of the statute.

**DATE:** \_\_\_\_\_

### PROPERTY ADDRESS:

Name of Seller(s): HeinsCo, LLC

Street Address: 501 1st St NE

City: Hankinson State: ND Zip Code: 58041 County: Richland

### THIS IS NOT A WARRANTY:

This disclosure is not a warranty or guarantee of any kind by Seller(s), Broker(s) or Agent(s) representing or assisting any party in the transaction; and, it is not a substitute for inspections or warranties which the parties may wish to obtain. Seller(s) is only providing information of which Seller(s) is aware. Broker(s)/Agent(s) is not a property inspector and has little or no information regarding the condition of this Property.

Seller(s) authorizes Broker(s) and Agent(s) to provide the following information to prospective Buyer(s). Information presented in this form is not intended to be part of any PURCHASE AGREEMENT between Buyer(s) and Seller(s).

### SELLER(s):

- Seller(s) is to personally complete this form. Please include the Property address on every page.
- Please answer all line items, even if the answer is "Unknown."
- If more space is needed, place additional disclosures on Page 9 and include the line number(s) being referenced.
- Seller(s) is obligated to continue to notify Buyer(s) in writing of any facts that differ from the facts disclosed here (new or changed) of which Seller(s) is aware that occur up to the time of closing. Seller(s) must disclose new or changed facts by using the AMENDMENT TO SELLER'S PROPERTY DISCLOSURE.

### BUYER(s):

- Buyer(s) are encouraged to thoroughly inspect the Property personally or have it inspected by a third party and to inquire about any specific areas of concern.
- **NOTE:** If Seller(s) answers "Unknown" to any of the questions listed below, it does not necessarily mean that it does not exist on the Property. "Unknown" may mean the Seller(s) is unaware that it exists on the Property.

### SELLER(s) & BUYER(s):

- THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.
- The following information applies to all structures, such as garage(s), outbuilding(s), shed(s), etc.
- Please initial by any changed answers or mistakes made on this form.

Buyer(s) Initials \_\_\_\_\_

Seller(s) Initials HC \_\_\_\_\_

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## 41 GENERAL INFORMATION

|   |  | YES                      | NO                                  |
|---|--|--------------------------|-------------------------------------|
| 1 | When did you purchase or build the home? <u>2024</u>   |                          |                                     |
| 2 | Has the home been occupied continuously for the past 12 months?<br>If No, Explain: <u>New Build</u>  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3 | Type of title evidence. <input type="checkbox"/> Abstract <input type="checkbox"/> Owner's Title Insurance <input checked="" type="checkbox"/> Unknown   |                          |                                     |
| 4 | Is the Property on a public or private road? <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Public - not maintained<br>If Private or Public not maintained, Explain: |                          |                                     |

## 42 STRUCTURAL ELEMENTS (UNK = Unknown, NA = Not Applicable)

|   |  | YES                                 | NO                                  | UNK                      | NA                                  |
|---|--|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 1 | Has the structure been altered? (Additions, altered roof lines, changes to load bearing walls, etc.)<br>If Yes, Explain:   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2 | Was a permit obtained to alter the structure?<br>If No, Explain:   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3 | Have you or anyone else performed work on the Property which required a building, plumbing, electrical, or other permits?<br>If Yes, Explain: <u>New Build All state inspections passed All local Inspections passed</u>   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 4 | Was a permit obtained?<br>If No, Explain:  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 5 | Was the work approved by an inspector?<br>If No, Explain:  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 6 | Is there, or has there been, water seepage, sewer back up, and/or dampness?<br>If Yes, Explain:  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 7 | Have waterproofing repairs been made?<br>If Yes, Explain:  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8 | Type of basement/foundation. (Check One) <input type="checkbox"/> brick <input type="checkbox"/> concrete block <input checked="" type="checkbox"/> concrete poured<br><input type="checkbox"/> stone <input type="checkbox"/> insulated concrete forms <input type="checkbox"/> wood <input type="checkbox"/> other<br>If Other, Explain: |                                     |                                     |                          |                                     |

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|   | YES                                 | NO                                  | UNK                      | NA                                  |
|---|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 9 Are there cracked or bulged floors or walls in the basement?<br>If Yes, Explain:  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 10 Is drain and/or sump pump installed and working properly?<br>If Yes, where does it drain to:   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11 Are all structures located within the boundaries of Property?<br>If No, Explain:   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 12 Was any structure moved to this site?<br>If Yes, Explain:  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 13 Are there cracks in the driveway, garage floor, sidewalks, patio, retaining walls, or other outside hard surface areas?<br>If Yes, Explain:        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 14 What is the age of the roofing material on the home?<br><u>0</u> Year(s) <input type="checkbox"/> Unknown <u>new Metal Roofing</u>                 |                                     |                                     |                          |                                     |
| 15 What is the age of the roofing material on the garage/out buildings?<br><u>0</u> Year(s) <input type="checkbox"/> Unknown <u>new Metal Roofing</u> |                                     |                                     |                          |                                     |
| 16 Does the roof leak, or has the roof ever leaked?<br>If Yes, Explain:   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 17 Has there been interior damage from a roof leak, condensation, or ice buildup?<br>If Yes, Explain:   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 18 Has there been damage to any roof or shingles?<br>If Yes, Explain:   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 19 Was insulation added to the structure?<br>If Yes, Explain: <u>Blow In Fiberglass to R60 + Fiberglass Batt</u>                                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 20 Are you aware of dry rot in the building?<br>If Yes, Explain:  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

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|   | YES                                 | NO                                  | UNK                      | NA                                  |
|---|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 21 Has the Property or its improvements been damaged? (Check all applicable)<br><input type="checkbox"/> fire <input type="checkbox"/> smoke <input type="checkbox"/> wind <input type="checkbox"/> floods <input type="checkbox"/> hail <input type="checkbox"/> snow <input type="checkbox"/> frozen pipes <input type="checkbox"/> broken water line)<br>If Yes, was the damage repaired? Explain: | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 22 Have damage claims been paid to you by insurance coverage?<br>If Yes, Explain:   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 23 Do rain gutters and downspouts work? <i>6" Seamless Gutters</i><br>If No, Explain: <i>3x4 Downspouts with Tip Upends</i>   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 24 Are exterior and interior locks operable? <i>All locks Keyed</i><br>Will keys be provided for each? <i>The same</i>  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 25 Are all the window screens available?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            |
| 26 Are there damaged screens?<br>If Yes, Explain:   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 27 Are all the storm windows available?   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 28 Are there broken windows or broken seals?  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 29 Are skylights in working condition? (i.e., no leaking, condensation, or mechanical)  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 30 Is the fireplace/wood burner in working order?<br>If No, Skip to Number 33.  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 31 Is the fan, chimney, or flue in working order?   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 32 Has the fireplace/wood burner/chimney/flue been cleaned?<br>If Yes, When:  | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 33 Are you aware of any rough-in for future amenities that were added during construction or remodel of the home? (i.e., Plumbing rough-in for future wet-bar, bathroom, sprinkler. Electrical rough-in for hot tub, pool, sound system, generator. Heat rough-in for future gas, electric baseboard, garage heater. Gas for future fireplace, grill, firepits, etc.)<br>If Yes, What types?          | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 34 Are there additional Property conditions that have not been described above? (i.e., slanted floors, sticking windows, settling, distorted door frames, sagging ceilings, siding irregularities, stained or damaged floor coverings, etc.)<br>If Yes, Explain:  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

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43 **UTILITIES (UNK = Unknown, NA = Not Applicable)**

|   | YES                      | NO                       | UNK                      | NA                                  |
|---|--------------------------|--------------------------|--------------------------|-------------------------------------|
| 1 Are there wells on the above-described Property? If Yes, see WELL DISCLOSURE.                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2 Is there a private sewer system on or serving the Property? If Yes, see PRIVATE SEWAGE TREATMENT SYSTEM DISCLOSURE. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3 Utilities provided by:  |                          |                          |                          |                                     |
| Gas: _____  |                          |                          |                          |                                     |
| Electrical: _____   |                          |                          |                          |                                     |
| Water: _____  |                          |                          |                          |                                     |
| Trash Pick Up: _____  |                          |                          |                          |                                     |
| Other: _____  |                          |                          |                          |                                     |
| Mailbox Number: _____   |                          |                          |                          |                                     |
| Average Monthly Cost: _____   |                          |                          |                          |                                     |
| Average Monthly Cost: _____   |                          |                          |                          |                                     |
| Average Monthly Cost: _____   |                          |                          |                          |                                     |
| Average Monthly Cost: _____   |                          |                          |                          |                                     |
| Average Monthly Cost: _____   |                          |                          |                          |                                     |
| Key: <input type="checkbox"/> YES <input type="checkbox"/> NO   |                          |                          |                          |                                     |

44 **LAND USE (UNK = Unknown, NA = Not Applicable)**

|  | YES                      | NO                       | UNK                                 | NA                                  |
|--|--------------------------|--------------------------|-------------------------------------|-------------------------------------|
| 1 Are there covenants, deed restrictions, or reservations?<br>If Yes, Explain:                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 2 Have you received notice from any governmental authority of future assessments?<br>If Yes, Explain:                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 3 Are there zoning infractions, non-conforming uses, or violations?<br>If Yes, Explain:                              | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 4 Are there encroachments, easements, life estate, right of first refusal, or existing lease(s)?<br>If Yes, Explain: | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 5 Is the Property part of a Homeowner's Association?<br>If Yes, See HOA INFORMATION.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 6 Is the Property a Condominium?<br>If Yes, See CONDO INFORMATION.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 7 Are there shared features with adjoining property such as walls, fenced, and/or driveways?<br>If Yes, Explain:     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

45 **ENVIRONMENTAL CONCERNS (UNK = Unknown, NA = Not Applicable)**

46 **To your knowledge, have any of the following existed or do they currently exist on the Property:**

|   | YES                                 | NO                       | UNK                      | NA                       |
|---|-------------------------------------|--------------------------|--------------------------|--------------------------|
| 1 Fill dirt? If Yes, Explain:<br><u>Property was raised + compacted To Allow For Good Drainage Home is 12" Higher Than curb</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|    |  | YES                      | NO                                  | UNK                      | NA                                  |
|----|--|--------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 2  | Asbestos? If Yes, Explain:   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3  | Insect, animal, or pest infestations? If Yes, Explain:   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4  | Hazardous wastes/substances? If Yes, Explain:  | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5  | Underground storage tanks? If Yes, Explain:  | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6  | Drainage/standing water issues? If Yes, Explain:   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 7  | Illicit drug production/sales? If Yes, Explain:  | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8  | Methamphetamine production? If Yes, Explain:   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9  | Signs of soil expansion, contraction, or movement other than situations related to normal conditions? If Yes, Explain: | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 10 | Any suspected microbial/fungal growth? If Yes, Explain:  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 11 | Has there been confirmed black mold on the Property? If Yes, Explain:  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 12 | Is urea-formaldehyde foam insulation present? If Yes, Explain:   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 13 | Are there or have there been pets on the Property? If Yes, Explain:  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

47 **RADON DISCLOSURE (UNK = Unknown, NA = Not Applicable)**

|   |   | YES                      | NO                                  | UNK                      | NA                       |
|---|---|--------------------------|-------------------------------------|--------------------------|--------------------------|
| 1 | Has the Property been tested for radon? If Yes, attach the most current records and reports pertaining to radon concentrations, mitigation, or remediation. If a mitigation system has been installed, include the system description and documents.<br>If Yes, Explain: <i>Stego Poly Placed under slcs with All seams Taped to blockout Any Radon</i> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | Are you aware of any radon gas levels in the home that exceed EPA standards?<br>If Yes, Explain:  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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48 **FLOOD DISCLOSURE – INCLUDING OVERLAND AND RIVER FLOODING**

49 This is intended to provide information to prospective Buyer(s) concerning high water elevation flood events  
50 including overland and river flooding that may impact the Property.

51 **Note:** Whether or not Seller(s) currently carries flood insurance, it may be required in the future. Flood  
52 insurance premiums are increasing, and in some cases will rise by a substantial amount over the premiums  
53 previously charged for flood insurance for the Property. As a result, Buyer(s) should not rely on the premiums  
54 paid for flood insurance on this Property previously as an indication of the premiums that will apply after  
55 Buyer(s) completes their purchase.

|   | YES                      | NO                                  | UNK                                 | NA                                  |
|---|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| 1 Is the Property in a designated 100-year floodplain?<br>If Yes, see FLOOD DISCLOSURE.   | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 2 Has the Property been impacted by high water elevation flood events<br>including overland and river flooding? If Yes, see FLOOD DISCLOSURE. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 3 Do you carry flood insurance?<br>If Yes, Explain:   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 4 Is the flood insurance transferrable?<br>If Yes, Explain:   | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

56 **PROPERTY TAX/SPECIALS DISCLOSURE**

57 Check appropriate box:

58 ☐ Yes ☒ No There is an exclusion from market value for home improvements on this Property. Any valuation  
59 exclusion shall terminate upon sale of the Property, and the Property's estimated market value for property  
60 tax purposes shall increase. If a valuation exclusion exists, Buyer(s) is encouraged to look into the resulting  
61 tax consequences.

62 ☐ Yes ☒ No Preferential property tax treatment: Is the Property subject to any preferential property tax  
63 status or any other credits affecting the Property (e.g. Disability, Green Acres, CRP, RIM, Rural Preserve,  
64 etc.)?

65 If Yes, Explain:

66

67 If Yes, would these terminate upon the sale of the Property? ☐ Yes ☒ No If Yes, Explain:

68

69 Security System Equipment (Check One) ☐ Owned ☐ Leased ☒ N/A

70 Security System Service Contract is transferrable (Check One) ☐ Yes ☐ No ☒ N/A

71 Terms of Security System Contract (Explain):

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Seller(s) Initials Hc



## 72 SYSTEMS & APPLIANCES

73 Answers below do not guarantee item is included or not included in sale. See PURCHASE AGREEMENT for  
 74 inclusions/exclusions.

75 **NI = Not Included, WK = Working, NW = Not Working, UNK = Unknown, N/A = Not applicable.**

|    | NI | WK                                  | NW                       | UNK                      | N/A                                 |                              | NI                       | WK                                  | NW                       | UNK                      | N/A                                 |
|----|----|-------------------------------------|--------------------------|--------------------------|-------------------------------------|------------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
| 1  |    |                                     |                          |                          |                                     |                              |                          |                                     |                          |                          |                                     |
| 2  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Oven                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 3  |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plumbing Fixtures            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 4  |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plumbing Systems             | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 5  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Pool & Equipment             | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Range                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 7  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Range Hood                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 8  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Refrigerator                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 9  |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Satellite Dish               | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 10 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Sauna                        | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Septic Tank                  | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Smoke Detector<br>(Battery)  | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 13 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Smoke Detector<br>(Hardwire) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 14 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Solar Collector(s)           | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 15 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Sump Pump(s)                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 16 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Supplemental<br>Heater(s)    | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Trash Compactor              | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 18 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Wall Air Conditioner(s)      | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 19 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Washer                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 20 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Washer/Dryer<br>Hookups      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 21 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water Heater(s)              | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 22 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Water Softener               | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 23 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Water Treatment<br>System    | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 24 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Window Air<br>Conditioner    | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 25 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Window Treatments            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 26 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Wood Burning Stove           | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 27 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Other: <i>Boiler</i>         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 28 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Other:                       | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 39 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Other:                       | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 30 |    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | Other:                       | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 31 |    | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Audio Visual System          | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Buyer(s) Initials \_\_\_\_\_

Seller(s) Initials HC



76 **ADDITIONAL DISCLOSURES:**

All The OSB Sheeting on the home is 1P Flame Block  
 Metal Roofing, In Floor heat with a combi-Boiler To also heat hot water  
 with a Forced Air Furnace/A/C Backup + ERV Air exchanger  
 Garage is 100 percent finished with paint + trim  
 All wire + penetrations were sealed with Fire caulking  
 Rubber mulch landscaping on west side of house  
 3-Trees planted with Rubber mulch Rings  
 Mail Box is in with white Rock landscaping + solar light up house number  
 Upgraded Appliance Package, including All in one washer dryer Heat Pump  
 lawn is seeded.  
 Oversized Driveway + Back Patio  
 Quartz Countertops in kitchen + Bathrooms

77 **FOREIGN INVESTMENT IN REAL PROPERTY TAX ACT ("FIRPTA"):**

78 As a general rule, 26 U.S. Code 1445 (hereinafter "FIRPTA") requires a transferee (Buyer(s)) of a United States  
 79 real property interest to withhold a tax from the proceeds of any disposition of the real property interest if the  
 80 transferor (Seller(s)) is a foreign person (any person other than a United States person), unless an exception  
 81 to the FIRPTA withholding requirements applies. Exemptions from the general rule are set forth in the  
 82 FIRPTA. Due to the complexity of the FIRPTA, both the Buyer(s) and the Seller(s) are advised to seek  
 83 appropriate legal and tax advice regarding FIRPTA compliance, since failure to adhere to the FIRPTA  
 84 withholding rules could result in legal liability to both the Buyer(s) and Seller(s) and their Broker(s)/Agent(s)  
 85 or qualified substitutes.

86 Seller(s) hereby represents and warrants that Seller(s) ☐ IS ☒ IS NOT a foreign person, as defined by the  
 87 FIRPTA. This representation of the Seller(s) shall survive closing. Seller's Broker(s)/Agent(s) and Buyer's  
 88 Broker(s)/Agent(s), and any qualified substitute, as those terms are defined by the FIRPTA, may rely upon  
 89 this representation.

90 If the Seller(s) represents that it is a foreign person, the Buyer(s) may be subject to income tax withholding  
 91 requirements, and the Buyer(s) could be personally liable for failing to withhold a tax from the proceeds of the  
 92 real estate disposition, if none of the enumerated exemptions to the FIRPTA apply to the transaction. If the  
 93 Seller(s) represents that it is a foreign person, but that one of the exemptions to the FIRPTA apply, Buyer(s)  
 94 may require Seller(s) to provide specific documentation as prescribed by the FIRPTA to verify, under penalty  
 95 of perjury, that one of the exemptions to the FIRPTA withholding requirements applies to the transaction. If  
 96 the Seller(s) represents that it is not a foreign person, the Buyer(s), or its Broker(s)/Agent(s) or qualified  
 97 substitutes, may require the Seller(s) to provide specific documentation as prescribed by the FIRPTA to verify,  
 98 under penalty of perjury, that the Seller(s) is not a foreign person. On or before closing, the Buyer(s) and  
 99 Seller(s) agree to complete, execute, and deliver any affidavit, instrument, or statement which may reasonably  
 100 be required to comply with FIRPTA requirements.

Buyer(s) Initials \_\_\_\_\_

Seller(s) Initials HC \_\_\_\_\_

Address: 501 1st St NE  
Hankinson ND 58041

101 **SELLER'S STATEMENT: (TO BE SIGNED AT TIME OF LISTING)**

102 Seller(s) hereby states the condition of the Property to be as stated above and authorizes any Broker(s) or  
 103 Agent(s) representing any parties in this transaction to provide a copy of this Statement to any person or  
 104 entity in connection with any actual or anticipated sale of the Property. Seller(s) hereby acknowledges that  
 105 the information provided in this document is true and accurate to the best of Seller's knowledge as of the date  
 106 listed below. Seller(s) is obligated to continue to notify Buyer(s) in writing of any facts that differ from the  
 107 facts disclosed here (new or changed) of which Seller(s) is aware that occur up to the time of closing. See  
 108 SELLER'S PROPERTY DISCLOSURE AMENDMENT/ADDENDUM.

109 HeinsCo LLC 8-18-24 HeinsCo LLC 8-18-24  
 110 Seller Signature **HeinsCo, LLC** Date Seller Signature Date

111 **BUYER'S ACKNOWLEDGEMENT: (TO BE SIGNED AT THE TIME OF PURCHASE AGREEMENT)**

112 Buyer(s) acknowledges receipt of this Seller's Disclosure. Buyer(s) acknowledges that Broker(s) and Agent(s)  
 113 representing the sale of this Property have not made statements concerning the condition of the Property other  
 114 than those listed in this Seller's Disclosure. Buyer(s) acknowledges that Buyer(s) has been advised to verify  
 115 the information listed in this Statement independently.

116 **Buyer(s) acknowledges and understands that this document is not intended to be a warranty of**  
 117 **any kind or a substitute for any inspection of the Property Buyer(s) may wish to obtain.**

118 \_\_\_\_\_  
 119 Buyer Signature Date Buyer Signature Date