



SELLER'S PROPERTY CONDITION DISCLOSURE STATEMENT

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Property Address: 550 Arlington Avenue  
westfield NJ 07090 ("Property").

Seller: Lisia Zheng  
Evan Hohlfeld ("Seller").

The purpose of this Disclosure Statement is to disclose, to the best of Seller's knowledge, the condition of the Property, as of the date set forth below. The Seller is aware that he or she is under an obligation to disclose any known material defects in the Property even if not addressed in this printed form. Seller alone is the source of all information contained in this form. All prospective buyers of the Property are cautioned to carefully inspect the Property and to carefully inspect the surrounding area for any off-site conditions that may adversely affect the Property. Moreover, this Disclosure Statement is not intended to be a substitute for prospective buyer's hiring of qualified experts to inspect the Property.

If your Property consists of multiple units, systems and/or features, please provide complete answers on all such units, systems and/or features even if the question is phrased in the singular, such as if a duplex has multiple furnaces, water heaters and fireplaces.

OCCUPANCY

Yes No Unknown

- 1. Age of House, if known 4 years
- 2. Does the Seller currently occupy this Property?  
If not, how long has it been since Seller occupied the Property? \_\_\_\_\_
- 3. What year did the Seller buy the Property? 2020
- 3a. Do you have in your possession the original or a copy of the deed evidencing your ownership of the Property? If "yes," please attach a copy of it to this form.

ROOF

Yes No Unknown

- 4. Age of roof 4 years
- 5. Has roof been replaced or repaired since Seller bought the Property?
- 6. Are you aware of any roof leaks?
- 7. Explain any "yes" answers that you give in this section: \_\_\_\_\_

ATTIC, BASEMENTS AND CRAWL SPACES (Complete only if applicable)

Yes No Unknown

- 8. Does the Property have one or more sump pumps?
- 8a. Are there any problems with the operation of any sump pump?
- 9. Are you aware of any water leakage, accumulation or dampness within the basement or crawl spaces or any other areas within any of the structures on the Property?
- 9a. Are you aware of the presence of any mold or similar natural substance within the basement or crawl spaces or any other areas within any of the structures on the Property?
- 10. Are you aware of any repairs or other attempts to control any water or dampness problem in the basement or crawl space? If "yes," describe the location, nature and date of the repairs: \_\_\_\_\_  
The gas company replaced all gas meters in the area in 2021 which involved minor construction around the gas pipe in the basement.
- 11. Are you aware of any cracks or bulges in the basement floor or foundation walls? If "yes," specify location: \_\_\_\_\_



- 51   12. Are you aware of any restrictions on how the attic may be used as a result of the manner in which
- 52 the attic or roof was constructed?
- 53   13. Is the attic or house ventilated by:  a whole house fan?  an attic fan?
- 54   13a. Are you aware of any problems with the operation of such a fan?
- 55 14. In what manner is access to the attic space provided?
- 56  staircase  pull down stairs  crawl space with aid of ladder or other device
- 57  other \_\_\_\_\_
- 58 15. Explain any "yes" answers that you give in this section: \_\_\_\_\_
- 59 \_\_\_\_\_
- 60 \_\_\_\_\_

**TERMITES/WOOD DESTROYING INSECTS, DRY ROT, PESTS**

- |    | Yes                      | No                                  | Unknown |  |
|----|--------------------------|-------------------------------------|---------|--|
| 63 |                          |                                     |         |  |
| 64 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 16. Are you aware of any termites/wood destroying insects, dry rot, or pests affecting the Property? |
| 65 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 17. Are you aware of any damage to the Property caused by termites/wood destroying insects, dry      |
| 66 |                          |                                     |         | rot, or pests?   |
| 67 | <input type="checkbox"/> | <input type="checkbox"/>            | X       | 18. If "yes," has work been performed to repair the damage?  |
| 68 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 19. Is your Property under contract by a licensed pest control company? If "yes," state the name and |
| 69 |                          |                                     |         | address of the licensed pest control company: _____  |
| 70 |                          |                                     |         | _____  |
| 71 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 20. Are you aware of any termite/pest control inspections or treatments performed on the Property    |
| 72 |                          |                                     |         | in the past?   |
| 73 |                          |                                     |         | 21. Explain any "yes" answers that you give in this section: _____                                   |
| 74 |                          |                                     |         | _____  |
| 75 |                          |                                     |         | _____  |

**STRUCTURAL ITEMS**

- |    | Yes                      | No                                  | Unknown |   |
|----|--------------------------|-------------------------------------|---------|---|
| 77 |                          |                                     |         |   |
| 78 |                          |                                     |         |   |
| 79 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 22. Are you aware of any movement, shifting, or other problems with walls, floors, or foundations,      |
| 80 |                          |                                     |         | including any restrictions on how any space, other than the attic or roof, may be used as a result      |
| 81 |                          |                                     |         | of the manner in which it was constructed?  |
| 82 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 23. Are you aware if the Property or any of the structures on it have ever been damaged by fire,        |
| 83 |                          |                                     |         | smoke, wind or flood?   |
| 84 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 24. Are you aware of any fire retardant plywood used in the construction?                               |
| 85 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 25. Are you aware of any current or past problems with driveways, walkways, patios, sinkholes, or       |
| 86 |                          |                                     |         | retaining walls on the Property?  |
| 87 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 26. Are you aware of any present or past efforts made to repair any problems with the items in this     |
| 88 |                          |                                     |         | section?  |
| 89 |                          |                                     |         | 27. Explain any "yes" answers that you give in this section. Please describe the location and nature of |
| 90 |                          |                                     |         | the problem: _____  |
| 91 |                          |                                     |         | _____   |
| 92 |                          |                                     |         | _____   |

**ADDITIONS/REMODELS**

- |     | Yes                      | No                                  | Unknown |  |
|-----|--------------------------|-------------------------------------|---------|--|
| 94  |                          |                                     |         |  |
| 95  |                          |                                     |         |  |
| 96  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 28. Are you aware of any additions, structural changes or other alterations to the structures on the |
| 97  |                          |                                     |         | Property made by any present or past owners?   |
| 98  | <input type="checkbox"/> | <input type="checkbox"/>            | X       | 29. Were the proper building permits and approvals obtained? Explain any "yes" answers you give      |
| 99  |                          |                                     |         | in this section: _____   |
| 100 |                          |                                     |         | _____  |
| 101 |                          |                                     |         | _____  |

**PLUMBING, WATER AND SEWAGE**

- |     | Yes                      | No                       | Unknown |   |
|-----|--------------------------|--------------------------|---------|---|
| 103 |                          |                          |         |   |
| 104 |                          |                          |         |   |
| 105 |                          |                          |         | 30. What is the source of your drinking water?  |
| 106 |                          |                          |         | <input checked="" type="checkbox"/> Public <input type="checkbox"/> Community System <input type="checkbox"/> Well on Property <input type="checkbox"/> Other (explain) _____ |
| 107 | <input type="checkbox"/> | <input type="checkbox"/> | X       | 31. If your drinking water source is not public, have you performed any tests on the water?   |
| 108 |                          |                          |         | If so, when? _____  |
| 109 |                          |                          |         | Attach a copy of or describe the results: _____   |
| 110 |                          |                          |         | _____   |

- 111    32. Does the wastewater from any clothes washer, dishwasher, or other appliance discharge to any
- 112 location other than the sewer, septic, or other system that services the rest of the Property?
- 113   33. When was well installed? \_\_\_\_\_
- 114 Location of well? \_\_\_\_\_
- 115   34. Do you have a softener, filter, or other water purification system?  Leased  Owned
- 116 35. What is the type of sewage system?
- 117  Public Sewer  Private Sewer  Septic System  Cesspool  Other (explain): \_\_\_\_\_
- 118   x 36. If you answered "septic system," have you ever had the system inspected to confirm that it is a
- 119 true septic system and not a cesspool?
- 120   37. If Septic System, when was it installed? \_\_\_\_\_
- 121 Location? \_\_\_\_\_
- 122   38. When was the Septic System or Cesspool last cleaned and/or serviced? \_\_\_\_\_
- 123   39. Are you aware of any abandoned Septic Systems or Cesspools on your Property?
- 124   x 39a. If "yes," is the closure in accordance with the municipality's ordinance? Explain: \_\_\_\_\_
- 125 \_\_\_\_\_
- 126   40. Are you aware of any leaks, backups, or other problems relating to any of the plumbing systems and
- 127 fixtures (including pipes, sinks, tubs and showers), or of any other water or sewage related problems?
- 128 If "yes," explain \_\_\_\_\_
- 129 \_\_\_\_\_
- 130   41. Are you aware of the presence of any lead piping, including but not limited to any service line,
- 131 piping materials, fixtures, and solder. If "yes," explain: \_\_\_\_\_
- 132 \_\_\_\_\_
- 133   42. Are you aware of any shut off, disconnected, or abandoned wells, underground water or sewage
- 134 tanks, or dry wells on the Property?
- 135    43. Is either the private water or sewage system shared? If "yes," explain: \_\_\_\_\_
- 136 \_\_\_\_\_
- 137 44. Water Heater:  Electric  Fuel Oil  Gas
- 138 Age of Water Heater **4 years** \_\_\_\_\_
- 139    44a. Are you aware of any problems with the water heater?
- 140 45. Explain any "yes" answers that you give in this section: \_\_\_\_\_
- 141 \_\_\_\_\_
- 142 \_\_\_\_\_
- 143 \_\_\_\_\_

**HEATING AND AIR CONDITIONING**

- 144 Yes No Unknown
- 145
- 146 46. Type of Air Conditioning:
- 147  Central one zone  Central multiple zone  Wall/Window Unit  None
- 148 x 47. List any areas of the house that are not air conditioned: **garage**
- 149 \_\_\_\_\_
- 150 x  48. What is the age of Air Conditioning System? **4 years**
- 151 49. Type of heat:  Electric  Fuel Oil  Natural Gas  Propane  Unheated  Other
- 152 x 50. What is the type of heating system? (for example, forced air, hot water or base board, radiator,
- 153 steam heat) **forced air**
- 154 x 51. If it is a centralized heating system, is it one zone or multiple zones? \_\_\_\_\_
- 155 **central multiple zones**
- 156 x 52. Age of furnace **4 years** \_\_\_\_\_ Date of last service: \_\_\_\_\_
- 157 x 53. List any areas of the house that are not heated: **garage**
- 158 \_\_\_\_\_
- 159    54. Are you aware of any tanks on the Property, either above or underground, used to store fuel or
- 160 other substances?
- 161   x 55. If tank is not in use, do you have a closure certificate?
- 162   56. Are you aware of any problems with any items in this section? If "yes," explain: \_\_\_\_\_
- 163 \_\_\_\_\_
- 164 \_\_\_\_\_

**WOODBURNING STOVE OR FIREPLACE**

- 165 Yes No Unknown
- 166
- 167   57. Do you have  wood burning stove?  fireplace?  insert?  other
- 168   57a. Is it presently usable?
- 169    58. If you have a fireplace, when was the flue last cleaned? **gas fireplace**
- 170    58a. Was the flue cleaned by a professional or non-professional? \_\_\_\_\_

171	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	59.	Have you obtained any required permits for any such item?
172	<input type="checkbox"/>	<input checked="" type="checkbox"/>		60.	Are you aware of any problems with any of these items? If "yes," please explain: _____
173					_____
174	<b>ELECTRICAL SYSTEM</b>				
175	Yes	No	Unknown		
176				61.	What type of wiring is in this structure? <input type="checkbox"/> Copper <input type="checkbox"/> Aluminum <input type="checkbox"/> Other <input checked="" type="checkbox"/> Unknown
177				62.	What amp service does the Property have? <input type="checkbox"/> 60 <input type="checkbox"/> 100 <input type="checkbox"/> 150 <input checked="" type="checkbox"/> 200 <input type="checkbox"/> Other <input type="checkbox"/> Unknown
178	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	63.	Does it have 240 volt service? Which are present <input checked="" type="checkbox"/> Circuit Breakers, <input type="checkbox"/> Fuses or <input type="checkbox"/> Both?
179	<input checked="" type="checkbox"/>	<input type="checkbox"/>		64.	Are you aware of any additions to the original service?
180					If "yes," were the additions done by a licensed electrician? Name and address: _____
181					<b>EV charger installed in 2023 by All City Electrical Lighting,</b>
182					<b>Generators &amp; Supplies, 410 Chestnut St, Union NJ 07083</b>
183	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	65.	If "yes," were proper building permits and approvals obtained?
184	<input type="checkbox"/>	<input checked="" type="checkbox"/>		66.	Are you aware of any wall switches, light fixtures or electrical outlets in need of repair?
185				67.	Explain any "yes" answers that you give in this section: _____
186					_____
187					_____
188					
189	<b>LAND (SOILS, DRAINAGE AND BOUNDARIES)</b>				
190	Yes	No	Unknown		
191	<input type="checkbox"/>	<input checked="" type="checkbox"/>		68.	Are you aware of any fill or expansive soil on the Property?
192	<input type="checkbox"/>	<input checked="" type="checkbox"/>		69.	Are you aware of any past or present mining operations in the area in which the Property is located?
193					
194	<input type="checkbox"/>	<input checked="" type="checkbox"/>		70.	Is the Property located in a flood hazard zone?
195	<input type="checkbox"/>	<input checked="" type="checkbox"/>		71.	Are you aware of any drainage or flood problems affecting the Property?
196	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	72.	Are there any areas on the Property which are designated as protected wetlands?
197	<input type="checkbox"/>	<input checked="" type="checkbox"/>		73.	Are you aware of any encroachments, utility easements, boundary line disputes, or drainage or other easements affecting the Property?
198					
199	<input type="checkbox"/>	<input checked="" type="checkbox"/>		74.	Are there any water retention basins on the Property or the adjacent properties?
200	<input type="checkbox"/>	<input checked="" type="checkbox"/>		75.	Are you aware if any part of the Property is being claimed by the State of New Jersey as land presently or formerly covered by tidal water (Riparian claim or lease grant)? Explain: _____
201					_____
202					_____
203					
204	<input type="checkbox"/>	<input checked="" type="checkbox"/>		76.	Are you aware of any shared or common areas (for example, driveways, bridges, docks, walls, bulkheads, etc.) or maintenance agreements regarding the Property?
205					
206			X	77.	Explain any "yes" answers to the preceding questions in this section: _____
207					_____
208					_____
209	<input checked="" type="checkbox"/>	<input type="checkbox"/>		78.	Do you have a survey of the Property?
210					
211	<b>ENVIRONMENTAL HAZARDS</b>				
212	Yes	No	Unknown		
213	<input type="checkbox"/>	<input checked="" type="checkbox"/>		79.	Have you received any written notification from any public agency or private concern informing you that the Property is adversely affected, or may be adversely affected, by a condition that exists on a property in the vicinity of this Property? If "yes," attach a copy of any such notice currently in your possession.
214					
215					
216					
217	<input type="checkbox"/>	<input checked="" type="checkbox"/>		79a.	Are you aware of any condition that exists on any property in the vicinity which adversely affects, or has been identified as possibly adversely affecting, the quality or safety of the air, soil, water, and/or physical structures present on this Property? If "yes," explain: _____
218					_____
219					
220					
221	<input type="checkbox"/>	<input checked="" type="checkbox"/>		80.	Are you aware of any underground storage tanks (UST) or toxic substances now or previously present on this Property or adjacent property (structure or soil), such as polychlorinated biphenyl (PCB), solvents, hydraulic fluid, petro-chemicals, hazardous wastes, pesticides, chromium, thorium, lead or other hazardous substances in the soil? If "yes," explain: _____
222					_____
223					
224					
225					
226	<input type="checkbox"/>	<input checked="" type="checkbox"/>		81.	Are you aware if any underground storage tank has been tested?
227					(Attach a copy of each test report or closure certificate if available.)
228	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	82.	Are you aware if the Property has been tested for the presence of any other toxic substances, such as lead-based paint, urea-formaldehyde foam insulation, asbestos-containing materials, or others?
229					(Attach copy of each test report if available.)
230					

- 231  83. If "yes" to any of the above, explain: \_\_\_\_\_
- 232 \_\_\_\_\_
- 233 \_\_\_\_\_
- 234    83a. If "yes" to any of the above, were any actions taken to correct the problem? Explain: \_\_\_\_\_
- 235 \_\_\_\_\_
- 236 \_\_\_\_\_
- 237    84. Is the Property in a designated Airport Safety Zone?
- 238

**DEED RESTRICTIONS, SPECIAL DESIGNATIONS, HOMEOWNERS ASSOCIATION/CONDOMINIUMS AND CO-OPS**

- | 241 | Yes                      | No                                  | Unknown                             |  |
|-----|--------------------------|-------------------------------------|-------------------------------------|--|
| 242 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | 85. Are you aware if the Property is subject to any deed restrictions or other limitations on how it may be used due to its being situated within a designated historic district, or a protected area like the New Jersey Pinelands, or its being subject to similar legal authorities other than typical local zoning ordinances? |
| 243 |                          |                                     |                                     |  |
| 244 |                          |                                     |                                     |  |
| 245 |                          |                                     |                                     |  |
| 246 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | 86. Is the Property part of a condominium or other common interest ownership plan?   |
| 247 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 86a. If so, is the Property subject to any covenants, conditions, or restrictions as a result of its being part of a condominium or other form of common interest ownership?   |
| 248 |                          |                                     |                                     |  |
| 249 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | 87. As the owner of the Property, are you required to belong to a condominium association or homeowners association, or other similar organization or property owners?   |
| 250 |                          |                                     |                                     |  |
| 251 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 87a. If so, what is the Association's name and telephone number? _____   |
| 252 |                          |                                     |                                     |  |
| 253 | <input type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | 87b. If so, are there any dues or assessments involved?  |
| 254 |                          |                                     |                                     | If "yes," how much? _____  |
| 255 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                                     | 88. Are you aware of any defect, damage, or problem with any common elements or common areas that materially affects the Property?   |
| 256 |                          |                                     |                                     |  |
| 257 |                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 89. Are you aware of any condition or claim which may result in an increase in assessments or fees?  |
| 258 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | 90. Since you purchased the Property, have there been any changes to the rules or by-laws of the Association that impact the Property?   |
| 259 |                          |                                     |                                     |  |
| 260 |                          |                                     |                                     | 91. Explain any "yes" answers you give in this section: _____  |
| 261 |                          |                                     |                                     | _____  |
| 262 |                          |                                     |                                     | _____  |
| 263 |                          |                                     |                                     |  |

**MISCELLANEOUS**

- | 265 | Yes                      | No                                  | Unknown                  |   |
|-----|--------------------------|-------------------------------------|--------------------------|---|
| 266 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                          | 92. Are you aware of any existing or threatened legal action affecting the Property or any condominium or homeowners association to which you, as an owner, belong?   |
| 267 |                          |                                     |                          |   |
| 268 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                          | 93. Are you aware of any violations of Federal, State or local laws or regulations relating to this Property?   |
| 269 |                          |                                     |                          |   |
| 270 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                          | 94. Are you aware of any zoning violations, encroachments on adjacent properties, non-conforming uses, or set-back violations relating to this Property? If so, please state whether the condition is pre-existing non-conformance to present day zoning or a violation to zoning and/or land use laws. _____ |
| 271 |                          |                                     |                          |   |
| 272 |                          |                                     |                          |   |
| 273 |                          |                                     |                          |   |
| 274 |                          |                                     |                          |   |
| 275 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                          | 95. Are you aware of any public improvement, condominium or homeowner association assessments against the Property that remain unpaid? Are you aware of any violations of zoning, housing, building, safety or fire ordinances that remain uncorrected?   |
| 276 |                          |                                     |                          |   |
| 277 |                          |                                     |                          |   |
| 278 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 96. Are there mortgages, encumbrances or liens on this Property?  |
| 279 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                          | 96a. Are you aware of any reason, including a defect in title, that would prevent you from conveying clear title?   |
| 280 |                          |                                     |                          |   |
| 281 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                          | 97. Are you aware of any material defects to the Property, dwelling, or fixtures which are not disclosed elsewhere on this form? (A defect is "material," if a reasonable person would attach importance to its existence or non-existence in deciding whether or how to proceed in the transaction.)         |
| 282 |                          |                                     |                          | If "yes," explain: _____  |
| 283 |                          |                                     |                          | _____   |
| 284 |                          |                                     |                          |   |
| 285 |                          |                                     |                          |   |
| 286 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |                          | 98. Other than water and sewer charges, utility and cable tv fees, your local property taxes, any special assessments and any association dues or membership fees, are there any other fees that you pay on an ongoing basis with respect to this Property, such as garbage collection fees?                  |
| 287 |                          |                                     |                          |   |
| 288 |                          |                                     |                          |   |
| 289 |                          |                                     |                          | 99. Explain any other "yes" answers you give in this section: _____   |
| 290 |                          |                                     |                          | _____   |

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**RADON GAS Instructions to Owners**

By law (N.J.S.A. 26:2D-73), a Property owner who has had his or her Property tested or treated for radon gas may require that information about such testing and treatment be kept confidential until the time that the owner and a buyer enter into a contract of sale, at which time a copy of the test results and evidence of any subsequent mitigation or treatment shall be provided to the buyer. The law also provides that owners may waive, in writing, this right of confidentiality. As the owner(s) of this Property, do you wish to waive this right?

Yes	No	<u>VE</u>	<u>F H</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	(Initials)	(Initials)

If you responded "yes," answer the following questions. If you responded "no," proceed to the next section.

Yes	No	Unknown	
<input checked="" type="checkbox"/>	<input type="checkbox"/>		100. Are you aware if the Property has been tested for radon gas? (Attach a copy of each test report if available.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>		101. Are you aware if the Property has been treated in an effort to mitigate the presence of radon gas? (If "yes," attach a copy of any evidence of such mitigation or treatment.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>		102. Is radon remediation equipment now present in the Property?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		102a. If "yes," is such equipment in good working order?

**MAJOR APPLIANCES AND OTHER ITEMS**

The terms of any final contract executed by the Seller shall be controlling as to what appliances or other items, if any, shall be included in the sale of the Property. Which of the following items are present in the Property? (For items that are not present, indicate "not applicable.")

Yes	No	Unknown	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	103. Electric Garage Door Opener
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	103a. If "yes," are they reversible? Number of Transmitters _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	104. Smoke Detectors
				<input checked="" type="checkbox"/> Battery <input type="checkbox"/> Electric <input type="checkbox"/> Both How many _____
				<input type="checkbox"/> Carbon Monoxide Detectors How many _____
				Location _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	105. With regard to the above items, are you aware that any item is not in working order?
				105a. If "yes," identify each item that is not in working order or defective and explain the nature of the problem: _____
<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	106. <input type="checkbox"/> In-ground pool <input type="checkbox"/> Above-ground pool <input type="checkbox"/> Pool Heater <input type="checkbox"/> Spa/Hot Tub
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	106a. Were proper permits and approvals obtained?
<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	106b. Are you aware of any leaks or other defects with the filter or the walls or other structural or mechanical components of the pool or spa/hot tub?
<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	106c. If an in-ground pool, are you aware of any water seeping behind the walls of the pool?
				107. Indicate which of the following may be included in the sale? (Indicate Y for yes N for no.)
				<input checked="" type="checkbox"/> Refrigerator
				<input checked="" type="checkbox"/> Range
				<input checked="" type="checkbox"/> Microwave Oven
				<input checked="" type="checkbox"/> Dishwasher
				<input type="checkbox"/> Trash Compactor
				<input type="checkbox"/> Garbage Disposal
				<input checked="" type="checkbox"/> In-Ground Sprinkler System
				<input type="checkbox"/> Central Vacuum System
				<input type="checkbox"/> Security System
				<input checked="" type="checkbox"/> Washer
				<input type="checkbox"/> Dryer
				<input type="checkbox"/> Intercom
				<input type="checkbox"/> Other
<input checked="" type="checkbox"/>				108. Of those that may be included, is each in working order? If "no," identify each item not in working order, explain the nature of the problem: _____



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**SOLAR PANEL SYSTEMS**

By completing this section, Seller is acknowledging that the Property is serviced by a Solar Panel System, which means a system of solar panels designed to absorb the sunlight as a source of energy for generating electricity or heating, any and all inverters, net meter, wiring, roof supports and any other equipment pertaining to the Solar Panels (collectively, the “Solar Panel System”). This information may be used, among other purposes, to prepare a Solar Panel Addendum to be affixed to and made a part of a contract of sale for the Property.

Yes No Unknown

- 109. When was the Solar Panel System Installed? \_\_\_\_\_
- 109a. What is the name and contact information of the business that installed the Solar Panel System? \_\_\_\_\_
- 109b. Do you have documents and/or contracts relating to the Solar Panel System? If “yes,” please attach copies to this form.
- 110. Are SRECs available from the Solar Panel System?
- 110a. If SRECs are available, when will the SRECs expire? \_\_\_\_\_
- 111. Is there any storage capacity on the Property for the Solar Panel System?
- 112. Are you aware of any defects in or damage to any component of the Solar Panel System? If yes, explain: \_\_\_\_\_

**Choose one of the following three options:**

- 113a. The Solar Panel System is financed under a power purchase agreement or other type of financing arrangement which requires me/us to make periodic payments to a Solar Panel System provider in order to acquire ownership of the Solar Panel System (“PPA”)? If yes, proceed to **Section A** below.
- 113b. The Solar Panel System is the subject of a lease agreement. If yes, proceed to **Section B** below.
- 113c. I/we own the Solar Panel System outright. If yes, you do not have to answer any further questions.

**SECTION A - THE SOLAR PANEL SYSTEM IS SUBJECT TO A PPA**

- 114. What is the current periodic payment amount? \$ \_\_\_\_\_
- 115. What is the frequency of the periodic payments (check one)?  Monthly  Quarterly
- 116. What is the expiration date of the PPA, which is when you will become the owner of the Solar Panel System? \_\_\_\_\_ (“PPA Expiration Date”)
- 117. Is there a balloon payment that will become due on or before the PPA Expiration Date?
- 118. If there is a balloon payment, what is the amount? \$ \_\_\_\_\_

**Choose one of the following three options:**

- 119a. Buyer will assume my/our obligations under the PPA at Closing.
- 119b. I/we will pay off or otherwise obtain cancellation of the PPA as of the Closing so that the Solar Panel System can be included in the sale free and clear.
- 119c. I/we will remove the Solar Panel System from the Property and pay off or otherwise obtain cancellation of the PPA as of the Closing.

**SECTION B - THE SOLAR PANEL SYSTEM IS SUBJECT TO A LEASE**

- 120. What is the current periodic lease payment amount? \$ \_\_\_\_\_
- 121. What is the frequency of the periodic lease payments (check one)?  Monthly  Quarterly
- 122. What is the expiration date of the lease? \_\_\_\_\_

**Choose one of the following two options:**

- 123a. Buyer will assume our obligations under the lease at Closing.
- 123b. I/we will obtain an early termination of the lease and will remove the Solar Panel System prior to Closing.

**SECTION C - THE SOLAR PANEL SYSTEM IS SUBJECT TO ENERGY CERTIFICATE(S)**

- 124. Are Solar Transition Renewable Energy Certificates (“TREC”) available from the Solar Panel System?
- 124a. If TREC are available, when will the TREC expire? \_\_\_\_\_
- 125. Are Solar Renewable Energy Certificates IIs (“SREC IIs”) available from the Solar Panel System?
- 125a. If SREC IIs are available, when will the SREC IIs expire? \_\_\_\_\_

411 **WATER INTRUSION**

412 Yes No Unknown

413    126. Are you aware of any water leakage, accumulation or dampness, the presence of mold or other similar  
 414 natural substance, or repairs or other attempts to control any water or dampness problem on the  
 415 Property? If yes, please describe the nature of the issue and any attempts to repair or control it: \_\_\_\_\_  
 416 \_\_\_\_\_  
 417 \_\_\_\_\_

If yes, pursuant to New Jersey law, the **buyer** of the real Property is advised to refer to the ‘Mold Guidelines for New Jersey Residents’ pamphlet issued by the New Jersey Department of Health ([njreal.to/mold-guidelines](http://njreal.to/mold-guidelines)) and has the right to request a physical copy of the pamphlet from the real estate broker, broker-salesperson, or salesperson.

423 **FLOOD RISK**

424 Flood risks in New Jersey are growing due to the effects of climate change. Coastal and inland areas may experience significant flooding  
 425 now and in the near future, including in places that were not previously known to flood. For example, by 2050, it is likely that sea-level  
 426 rise will meet or exceed 2.1 feet above 2000 levels, placing over 40,000 New Jersey properties at risk of permanent coastal flooding.  
 427 In addition, precipitation intensity in New Jersey is increasing at levels significantly above historic trends, placing inland properties at  
 428 greater risk of flash flooding. These and other coastal and inland flood risks are expected to increase within the life of a typical mortgage  
 429 originated in or after 2020.

431 To learn more about these impacts, including the flood risk to the Property, visit [njreal.to/flood-disclosure](http://njreal.to/flood-disclosure). To learn more about how to  
 432 prepare for a flood emergency, visit [njreal.to/flood-planning](http://njreal.to/flood-planning).

434 Yes No Unknown

435    127. Is any or all of the Property located wholly or partially in the Special Flood Hazard Area (“100-  
 436 year floodplain”) according to FEMA’s current flood insurance rate maps for your area?

437    128. Is any or all of the Property located wholly or partially in a Moderate Risk Flood Hazard Area  
 438 (“500-year floodplain”) according to FEMA’s current flood insurance rate maps for your area?

439    129. Is the Property subject to any requirement under federal law to obtain and maintain flood  
 440 insurance on the Property?

*Properties in the special flood hazard area, also known as high risk flood zones, on FEMA’s flood insurance rate maps with mortgages from federally regulated or insured lenders are required to obtain and maintain flood insurance. Even when not required, FEMA encourages property owners in high risk, moderate risk, and low risk flood zones to purchase flood insurance that covers the structure and the personal property within the structure. Also note that properties in coastal and riverine areas may be subject to increased risk of flooding over time due to projected sea level rise and increased extreme storms caused by climate change which may not be reflected in current flood insurance rate maps.*

448    130. Have you ever received assistance, or are you aware of any previous owners receiving assistance,  
 449 from FEMA, the U.S. Small Business Administration, or any other federal disaster flood assistance  
 450 for flood damage to the Property?

*For properties that have received federal disaster assistance, the requirement to obtain flood insurance passes down to all future owners. Failure to obtain and maintain flood insurance can result in an individual being ineligible for future assistance.*

454    131. Is there flood insurance on the Property?  
 455 *A standard homeowner’s insurance policy typically does not cover flood damage. You are encouraged to examine your  
 456 policy to determine whether you are covered.*

457    132. Is there a FEMA elevation certificate available for the Property? If so, the elevation certificate  
 458 must be shared with the buyer.

*An elevation certificate is a FEMA form, completed by a licensed surveyor or engineer. The form provides critical information about the flood risk of the Property and is used by flood insurance providers under the National Flood Insurance Program to help determine the appropriate flood insurance rating for the Property. A buyer may be able to use the elevation certificate from a previous owner for their flood insurance policy.*

463    133. Have you ever filed a claim for flood damage to the Property with any insurance provider,  
 464 including the National Flood Insurance Program?

If the claim was approved, what was the amount received? \$ \_\_\_\_\_

466    134. Has the Property experienced any flood damage, water seepage, or pooled water due to a natural  
 467 flood event, such as heavy rainfall, coastal storm surge, tidal inundation, or river overflow?

If so, how many times? \_\_\_\_\_

469 135. Explain any “yes” answers that you give in this section: \_\_\_\_\_  
 470 \_\_\_\_\_



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**ACKNOWLEDGMENT OF SELLER**

The undersigned Seller affirms that the information set forth in this Disclosure Statement is accurate and complete to the best of Seller's knowledge, but is not a warranty as to the condition of the Property. Seller hereby authorizes the real estate brokerage firm representing or assisting the Seller to provide this Disclosure Statement to all prospective buyers of the Property, and to other real estate agents. Seller alone is the source of all information contained in this statement. \*If the Seller relied upon any credible representations of another, the Seller should state the name(s) of the person(s) who made the representation(s) and describe the information that was relied upon.

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DocuSigned by:  
*Lisia Zheng*

9/25/2024 | 10:05 EDT

SELLER-AA241A8604A249B...

DATE

Signed by:  
*C. Moe*

9/26/2024 | 09:53 EDT

SELLER-0D81091C040D406...

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**EXECUTOR, ADMINISTRATOR, TRUSTEE**

(If applicable) The undersigned has never occupied the Property and lacks the personal knowledge necessary to complete this Disclosure Statement.

\_\_\_\_\_  
DATE  
\_\_\_\_\_  
DATE





**Addendum to the Seller's Property Condition Disclosure Statement for:**

550 Arlington Avenue - Westfield

The following items are to be INCLUDED in the sale:

The play structure in the backyard.

The following items are to be EXCLUDED from the sale:

N/A.

The following items are to convey in strictly AS-IS condition:

The play structure in the backyard.

DocuSigned by:  
 Seller:   Lisia Zheng   9/25/2024 | 10:05 EDT Buyer: \_\_\_\_\_  
AA241A8604A249B... (date) (date)

Signed by:  
 Seller:   C. Doe   9/26/2024 | 09:53 EDT Buyer: \_\_\_\_\_  
0D81091C040D406... (date) (date)



Initial  
 MB



**Certified Environmental Radon Services**

P.O. BOX 727  
Farmingdale, NJ 07727  
732-534-4892  
FAX 732-534-4893

NJDEP Radon Laboratory License 13035  
NJDEP Radon Measurement Business License MEB 94012  
NRPP Charcoal Canister AC-8303

**Radon Test Result:**

Aug 17, 2020

550 ARLINGTON AVE  
WESTFIELD/WESTFIELD (UNI)  
NJ 07090

MAIL TO: P.O. BOX 1171  
MADISON, NJ 07940

Test Serial Number: N72618

Exposure Start Time & Date: 08:50 08-10-20  
 Exposure Stop Time & Date: 14:30 08-12-20

Measurement Time & Date: 11:07 8-17-20 = Original Report Date

DMR Input: 2  
 Exposure Time: 53.667 hours  
 Background Counts: 104.202  
 Counting Time: 600 seconds  
 Gross Counts: 1117  
 Canister Weight: Initial/Final 68.4 / 71.0 grams

Radon Concentration: 0.7 pCi/l (picocuries per liter)

(Lab Use Only): Comments:  
 (0=Basement) 0;R;R;CH;B;  
 (1=First Floor) E;14081;;  
 (2=Higher)

Jason Elliott

MES13784

This notice is provided to you by an organization or individual certified by the NJDEP to perform radon gas or radon progeny testing measurements. N.J.S.A. 26:2D-73 requires that no certified person disclose to anyone except the DEP or the department of health the address or owners of a nonpublic building that the person has tested or treated for the presence of radon gas or radon progeny, unless the owner of the building waives in writing this right of confidentiality. In the case of prospective sale of a building that has been tested for radon gas or progeny, the seller shall provide the buyer at the time the contract of sale is entered into, with a copy of the results of that test and evidence of any subsequent mitigation or treatment. Any prospective buyer who contracts for the testing shall have the right to receive the results of that testing. Any questions, comments or complaints regarding the persons performing these measurements, or related mitigation, or safeguarding services, should be directed to the NJDEP, Attn: Radon Section, Bureau of environmental radiation, at 1-800-648-0394.

LIMITATION OF LIABILITY: While we at Certified Environmental Radon Services, and all of our licensed professional technicians, make every effort to maintain quality control including duplicate canister tests, blanks and "spiked" detectors, we make no warranty of any kind, either expressed or implied, for the consequences of false test results. Before any remediation action is taken, it is important that follow-up tests be conducted in accordance with USEPA protocols and NJDEP regulations. It is well known that the radon concentration fluctuates greatly under changing weather conditions. Furthermore, radon tests cannot be CERTIFIED, since there is no chain of custody of the test kit, and the "closed-house" conditions cannot be monitored continuously.