



**SELLER'S PROPERTY DISCLOSURE**  
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NORTHEAST FLORIDA ASSOCIATION OF REALTORS®, INC.



**NOTICE TO SELLER**

In Florida, a seller of residential property is obligated to disclose to a buyer all facts known to a seller that materially and adversely affect the value of the Property being sold which are not readily observable by a buyer. This Disclosure is designed to assist a seller in complying with the disclosure requirements under Florida law and to assist a buyer in evaluating the Property described below ("the Property"). All parties, including the listing real estate Broker(s) and cooperating Broker(s), may wish to refer to this information when they evaluate, market or present the Property to prospective buyers.

**NOTICE TO BUYER**

This Disclosure is not a warranty by SELLER or a representation of any kind by any REALTOR to this transaction and is not considered a substitute for inspections or warranties a buyer may wish to obtain. This Disclosure is based only upon SELLER's knowledge of the Property's condition as of the date signed by SELLER.

SELLER \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Year Built: \_\_\_\_\_ Date SELLER purchased Property: \_\_\_\_\_

Is each individual named above a U.S. Citizen or resident alien? ☐ Yes ☐ No

Do you currently occupy the Property? ☐ Yes ☐ No

If not, when did you vacate the Property? \_\_\_\_\_

Is the Property tenant occupied? ☐ Yes ☐ No

If yes, is there a written lease? ☐ Yes ☐ No

Date lease began \_\_\_\_\_ Deposit amount \$ \_\_\_\_\_ Date lease ends \_\_\_\_\_

Monthly payment due under lease \$ \_\_\_\_\_ Date payable \_\_\_\_\_

1. **PROPERTY INFORMATION:** The Property has the items checked below, which are installed and, to SELLER's actual knowledge, are in working condition unless otherwise indicated:

<input type="checkbox"/> Range	Brand: _____
<input type="checkbox"/> Oven	Brand: _____
<input type="checkbox"/> Dishwasher	Brand: _____
<input type="checkbox"/> Disposal	Brand: _____
<input type="checkbox"/> Trash Compactor	Brand: _____
<input type="checkbox"/> Ceiling Fans - Number of fans: _____	
<input type="checkbox"/> Intercom	
<input type="checkbox"/> Audio Visual System Wiring	
<input type="checkbox"/> Light Fixtures	
<input type="checkbox"/> Bathroom Mirrors	
<input type="checkbox"/> Drapery Hardware	
<input type="checkbox"/> All Window Treatments	
<input type="checkbox"/> Garage Door Opener(s) and Number of Control(s): _____	
<input type="checkbox"/> Security Gate and other Access Devices	
<input type="checkbox"/> Pool Heater	
<input type="checkbox"/> Storage Shed	
<input type="checkbox"/> Mounted/Installed Speakers	
<input type="checkbox"/> TV Antennae/Satellite Dish	<input type="checkbox"/> Owned <input type="checkbox"/> Leased
<input type="checkbox"/> Water Softener/Treatment System	<input type="checkbox"/> Owned <input type="checkbox"/> Leased
<input type="checkbox"/> Storm Shutters and Panels	
<input type="checkbox"/> Spa or Hot Tub with Heater	
<input type="checkbox"/> Sauna	
<input type="checkbox"/> Built In Grill	<input type="checkbox"/> Gas Supply: <input type="checkbox"/> Utility <input type="checkbox"/> Bottled/Tank
<input type="checkbox"/> Irrigation System	<input type="checkbox"/> Full <input type="checkbox"/> Partial
<input type="checkbox"/> Water Heater:	<input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Solar Brand: _____

<input type="checkbox"/> Refrigerator	Brand: _____
<input type="checkbox"/> Microwave Oven	Brand: _____
<input type="checkbox"/> Washer	Brand: _____
<input type="checkbox"/> Dryer	Brand: _____
<input type="checkbox"/> Fireplace	<input type="checkbox"/> Gas Logs <input type="checkbox"/> Wood burning <input type="checkbox"/> Electric
<input type="checkbox"/> Smoke Detectors	
<input type="checkbox"/> Security System	<input type="checkbox"/> Owned <input type="checkbox"/> Leased
<input type="checkbox"/> Window/Wall a/c(s) - Number of units: _____	
<input type="checkbox"/> Built In Generator	
<input type="checkbox"/> Wine Cooler	<input type="checkbox"/> Built-in <input type="checkbox"/> Free Standing
<input type="checkbox"/> In-ground Pool	
<input type="checkbox"/> Above Ground Pool	
<input type="checkbox"/> Pool Fence/Barrier	
<input type="checkbox"/> Pool Sweep	
<input type="checkbox"/> Solar Panels	
<input type="checkbox"/> Individual Mail Box	
<input type="checkbox"/> Cluster Mail Box and Key - Box Number _____	

**2. CLAIMS AND ASSESSMENTS:**

- a. Are you aware of any existing, pending or proposed legal or administrative action affecting the Property? ☐ Yes ☐ No
- b. Are you aware of any existing or proposed municipal or county special assessments affecting the Property? ☐ Yes ☐ No
- c. Have any local, state or federal authorities notified you that repairs, alterations or corrections to the Property are required? ☐ Yes ☐ No
- d. Are you aware of any existing, pending or proposed legal action or administrative action affecting homeowners'/condominium association common areas (such as clubhouse, pools, tennis courts, walkways or other areas)? ☐ Yes ☐ No

If yes to any of these items, please explain: \_\_\_\_\_

**3. DEED/HOMEOWNERS'/CONDOMINIUM ASSOCIATION RESTRICTIONS:**

- a. Are there any deed, homeowners' or condominium restrictions? ☐ Yes ☐ No
- b. Is there a mandatory homeowners' or condominium association? ☐ Yes ☐ No

If yes, please see Homeowners' Association/Community Disclosure Addendum or Condominium Rider

Fees are payable to: \_\_\_\_\_

Payee's address: \_\_\_\_\_

Payee's phone number: \_\_\_\_\_

- ☐ Homeowners' Association fees and assessments are payable in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_
- ☐ Master Association fees and assessments are payable in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_
- ☐ Condominium Association maintenance fees are payable in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_
- ☐ Condominium Association special assessment fees are payable in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_
- ☐ \_\_\_\_\_ fees or assessments are payable in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_
- ☐ \_\_\_\_\_ fees or assessments are payable in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_
- ☐ \_\_\_\_\_ Association transfer/access fees payable by BUYER \$ \_\_\_\_\_
- ☐ \_\_\_\_\_ Association Capital Contribution fee payable by BUYER \$ \_\_\_\_\_

- c. Are you aware of any pending special assessment(s)? If yes please explain: ☐ Yes ☐ No

- d. Are all of your Association fees current? ☐ Yes ☐ No
- e. Are you aware of any proposed changes to any of the restrictions? ☐ Yes ☐ No
- f. Are there any resale restrictions? ☐ Yes ☐ No
- g. Are there any restrictions to leasing the Property? ☐ Yes ☐ No
- h. Are you aware of any violations of the restrictive covenants affecting the Property including failure to obtain Association approval for improvements or changes to the Property? ☐ Yes ☐ No
- i. Is the Property part of a Community Development District (CDD)? ☐ Yes ☐ No

If yes, please see Community Development District Acknowledgment.

**4. ENVIRONMENT:**

- a. Was the Property built before 1978? ☐ Yes ☐ No
- If yes, complete the Lead-Based Paint Disclosure.
- b. Are there or have there been any substances, materials or products which may be an environmental hazard such as, but not limited to, asbestos, urea formaldehyde, methamphetamine, radon gas, mold, lead-based paint, defective drywall, defective flooring, fuel oil, propane or chemical storage tanks (active or abandoned), or contaminated soil or water on the Property? ☐ Yes ☐ No ☐ Unknown
- c. Has there been any clean up, repair or remediation of the Property due to any of the substances, materials or products listed in subsection (b) above? ☐ Yes ☐ No ☐ Unknown
- d. Are there any wetlands, conservation easements/buffers, archeological sites or other environmentally sensitive areas located on the Property active or abandoned? ☐ Yes ☐ No ☐ Unknown

If yes to any of these items, please explain: \_\_\_\_\_

**5. ROADS/LAND USE**

- a. Are access roads ☐ Public ☐ Private?
- b. Is the Property zoned for its current use? ☐ Yes ☐ No ☐ Unknown
- c. Are there any restrictions governing reconstruction of the Property following casualty loss or damage (e.g. for oceanfront or historic district properties)? ☐ Yes ☐ No ☐ Unknown

If yes to any of these items, please explain: \_\_\_\_\_

**6. ADDITIONS/REMODELING/INSURANCE CLAIMS**

- a. Has there been any structural damage or damage to personal property which may have resulted from casualties including, but not limited to, fire, wind, water, flood, hail or sinkholes? ☐Yes ☐No ☐Unknown
- b. If yes, are you aware if any insurance claims were filed? ☐Yes ☐No
- c. Have you made any additions, structural changes or other alterations to the Property? ☐Yes ☐No
- If yes, did you obtain all necessary permits?** ☐Yes ☐No
- d. Was any of the work in violation of any building codes? ☐Yes ☐No
- e. Were there any additions, structural changes or other alterations made to the Property by any previous owner? ☐Yes ☐No ☐Unknown
- f. Please provide the name of any contractor or individual who constructed any addition or made any structural change to the Property. \_\_\_\_\_
- g. Are you aware of any active or open permits on the Property which have not been closed by a final inspection? ☐Yes ☐No
- If yes to any of these items, please explain:** \_\_\_\_\_

**7. ROOF-RELATED ITEMS**

- a. What is the approximate age of the roof? \_\_\_\_\_ ☐Unknown
- b. Has the roof leaked during your ownership of the Property? ☐Yes ☐No
- If yes, what was done to correct the leak(s)?** \_\_\_\_\_
- c. Has the roof been replaced or repaired during your ownership of the Property? ☐Yes ☐No
- If replaced or repaired, please provide the date and name of contractor** \_\_\_\_\_
- \_\_\_\_\_ is there a transferable warranty? ☐Yes ☐No
- If yes, please provide a copy of the warranty.**

**8. POOL/SPA OR HOT TUB**

- a. Does the Property have any of the following?
- Pool/Spa Heater ☐Yes ☐No Type: ☐Gas ☐Electric ☐Solar
- Pool Sweep ☐Yes ☐No
- Spa/Hot Tub ☐Yes ☐No Type: ☐Gas ☐Electric
- b. Have repairs ever been made to any item mentioned above? ☐Yes ☐No ☐Unknown
- If yes, please explain** \_\_\_\_\_
- c. What type of pool/spa or hot tub chlorination system do you have? (salt or chlorine) \_\_\_\_\_
- d. The pool/spa has the following safety features (as defined by Section 515, Florida Statutes):
- ☐ Enclosure that meets the pool barrier requirements ☐ Approved safety pool cover
- ☐ Required door and window exit alarms ☐ Required door locks

**9. HEATING AND AIR CONDITIONING**

- Please indicate existing equipment:
- a. Air Conditioning: ☐Central ☐Electric Brand Name: \_\_\_\_\_ Age \_\_\_\_\_
- b. Heating: ☐Central ☐Electric ☐Gas ☐Fuel Oil Brand Name: \_\_\_\_\_ Age \_\_\_\_\_
- c. If heat pump, type: \_\_\_\_\_
- d. Air condenser age \_\_\_\_\_ Air handler age \_\_\_\_\_
- e. Window/Wall Unit (s) \_\_\_\_\_ Number and location of units included in sale: \_\_\_\_\_
- f. Solar Heating: ☐Owned ☐Leased
- g. Do you have any fuel storage tanks? ☐Yes ☐No
- If yes,** ☐ Underground ☐ Above ground ☐ Both
- h. Are you aware of any malfunction, condensation problem or defect regarding these items or ductwork since you have owned the Property? ☐Yes ☐No
- If yes, explain:** \_\_\_\_\_

**10. WATER INTRUSION**

- a. Are you aware of any past or present water intrusion, accumulation of water or dampness affecting the Property, including any crawl spaces? ☐Yes ☐No
- If yes, please explain** \_\_\_\_\_
- b. Are you aware of any attempts to control any water or dampness problems, including in any crawl spaces? ☐Yes ☐No
- c. Are you aware of any insurance claims filed for water intrusion? ☐Yes ☐No
- If yes, please indicate when and the disposition** \_\_\_\_\_

**11. SINKHOLES, SETTLING AND SOIL MOVEMENT**

- a. Are you aware of any past or present settling, soil movement or sinkhole(s) affecting the Property? ☐ Yes ☐ No  
If yes, please explain: \_\_\_\_\_
- b. Are you aware of any insurance claims filed for a sinkhole with an insurance company? ☐ Yes ☐ No  
If yes, has the claim has been completely settled with your homeowner's insurance company? ☐ Yes ☐ No  
If yes, was the full amount of the claim proceeds used to repair the sinkhole damage? ☐ Yes ☐ No

**12. WINDOWS/DOORS/LOCKS**

- a. Are the windows insulated glass? ☐ Yes ☐ No ☐ Unknown
- b. Are any windows low "e" filtered windows? ☐ Yes ☐ No ☐ Unknown
- c. Are there any fogged windows? ☐ Yes ☐ No
- d. Are any windows broken or cracked? ☐ Yes ☐ No
- e. Do all operable windows open, stay open, close and lock properly? ☐ Yes ☐ No
- f. Are any screens missing or damaged? ☐ Yes ☐ No
- g. Do all doors operate properly? ☐ Yes ☐ No

**13. PLUMBING**

- a. Are you aware of any problems with the plumbing system? ☐ Yes ☐ No
- b. Are you aware of any polybutylene pipes on the Property? ☐ Yes ☐ No
- c. Are you aware of any leaks, back-ups, water or sewer/septic tank problems? ☐ Yes ☐ No
- d. What is your drinking water supply source? ☐ Public ☐ Private ☐ Well on Property ☐ Shared well
- e. If your water is from a well, have there ever been repairs/replacements to the well or pump? ☐ Yes ☐ No ☐ Unknown
- f. Has the well water ever been tested? ☐ Yes ☐ No ☐ Unknown
- g. Do you have a separate water supply source for irrigation? ☐ Yes ☐ No
- h. If yes, ☐ Irrigation Meter ☐ Shallow Well
- i. What type of sewage system do you have? ☐ Public ☐ Private ☐ Septic Tank(s)  
If septic, how many? \_\_\_\_\_ Locations: \_\_\_\_\_  
When was septic tank last pumped? \_\_\_\_\_ Age of septic tank if known: \_\_\_\_\_  
Age of drain field if known: \_\_\_\_\_
- j. Number of water heaters? \_\_\_\_\_ ☐ Electric ☐ Gas ☐ Solar ☐ Tankless  
If yes to any of these items, please explain: \_\_\_\_\_

**14. ELECTRICAL SYSTEM**

- a. Are you aware of any damaged or malfunctioning switches, receptacles, wiring or any problem with the electrical system? ☐ Yes ☐ No  
If yes, please explain: \_\_\_\_\_
- b. Does the Property have any aluminum wiring? ☐ Yes ☐ No ☐ Unknown

**15. EXCLUSIONS/LEASED SYSTEMS**

- a. Are there any items that are affixed to the Property that are excluded from the sale? ☐ Yes ☐ No  
If yes, please itemize: \_\_\_\_\_
- b. Is there any leased equipment included in the sale? ☐ Yes ☐ No  
If yes, please itemize: \_\_\_\_\_

**16. WOOD-DESTROYING ORGANISMS**

- a. Are you aware of any past or present infestation or damage to the Property caused by any wood-destroying organisms, including fungi? ☐ Yes ☐ No  
If yes, please explain: \_\_\_\_\_
- b. Is the Property currently under service agreement or bond for wood-destroying organisms with a licensed pest control company? ☐ Yes ☐ No  
If yes, with what company and renewal date? \_\_\_\_\_  
Is the service agreement or bond transferable? ☐ Yes ☐ No  
If yes, please attach a copy of the service agreement or bond.
- c. Do you know of any wood-destroying organism reports on the Property issued in the past five years? ☐ Yes ☐ No  
If yes, please explain and attached a copy if available: \_\_\_\_\_

**17. FLOOD ZONE/DRAINAGE/BOUNDARIES**

- a. Is any portion of the Property in a special flood hazard area for which a lender may require flood insurance? ☐ Yes ☐ No  
If yes, please attach a copy of the flood elevation certificate if available.

- b. Are you aware of any past or present drainage/flood problems affecting the Property? ☐ Yes ☐ No
- c. Are you aware of any encroachments or boundary line disputes affecting the Property? ☐ Yes ☐ No
- d. Are you aware of any shared access/driveway, dock, well or other joint use agreements? ☐ Yes ☐ No  
If yes, ☐ oral ☐ written. If written, please attach a copy.
- e. Are you aware of any easements affecting the Property other than utility easements? ☐ Yes ☐ No
- f. Do you have a survey map of the Property? ☐ Yes ☐ No  
If yes, please attach a copy.

#### 18. OTHER MATTERS

- a. Does anyone, including any owner's association, have a right of first refusal or an option to buy the Property? ☐ Yes ☐ No
- b. Are you aware of any existing or threatened legal action affecting you or the Property? ☐ Yes ☐ No
- c. Does the Property currently have homestead tax exemption? If yes, for which year? ☐ Yes ☐ No
- d. Water/Sewer Provider: \_\_\_\_\_  
Garbage Pick-up Provider: \_\_\_\_\_ Gas/Fuel oil Provider: \_\_\_\_\_  
Electricity Provider: \_\_\_\_\_
- e. Is there anything else you feel you should disclose to a prospective buyer that may materially adversely affect the value or desirability of the Property? ☐ Yes ☐ No  
If yes to any of these items, please explain: \_\_\_\_\_

SELLER represents that the information set forth in this Property Disclosure is accurate and complete to the best of SELLER's knowledge. SELLER does not intend this Disclosure to be a warranty or guaranty of any kind. SELLER hereby authorizes the listing Broker to provide a copy of this Disclosure to prospective buyers of the Property and to real estate brokers and licensees. SELLER shall notify the listing Broker in writing immediately if any information set forth in this Disclosure becomes inaccurate or incorrect.

SELLER \_\_\_\_\_ DATE \_\_\_\_\_ SELLER \_\_\_\_\_ DATE \_\_\_\_\_

SELLER \_\_\_\_\_ DATE \_\_\_\_\_ SELLER \_\_\_\_\_ DATE \_\_\_\_\_

#### RECEIPT AND ACKNOWLEDGMENT BY BUYER

BUYER hereby acknowledges receipt of a copy of this Property Disclosure. BUYER is strongly advised to obtain Property inspection(s) as provided for in the Purchase and Sale Agreement and Deposit Receipt. BUYER should select professionals with appropriate qualifications to conduct inspections. BUYER acknowledges that this Property Disclosure is not intended as a warranty or guaranty of any kind by SELLER.

BUYER hereby acknowledges that SELLER's representations are made to BUYER based on SELLER's knowledge and, further, that it is BUYER's responsibility to have the Property inspected. The statements in this Disclosure are those of SELLER only. The Brokers and their licensees do not warrant or guarantee the statements contained in this Property Disclosure or the condition of the Property and are not responsible for the condition of the Property. BUYER understands that the Property is being sold in its present condition unless otherwise agreed upon in the Purchase and Sale Agreement and Deposit Receipt.

BUYER \_\_\_\_\_ DATE \_\_\_\_\_ BUYER \_\_\_\_\_ DATE \_\_\_\_\_

BUYER \_\_\_\_\_ DATE \_\_\_\_\_ BUYER \_\_\_\_\_ DATE \_\_\_\_\_