



Seller's Property Disclosure

(To be completed by Seller)

This report supersedes any list appearing in the MLS

Property Address: 2823 N Wilderness Ct., Wichita, KS 67226

Seller: Steven Family Trust

Date of Purchase: 1999

Message to the Seller: This statement is a disclosure of the condition of the above described Property known by the SELLER on the date that it is signed. It is not a warranty of any kind by the SELLER(S) or any real estate licensees involved in this transaction, and should not be accepted as a substitute for any inspections or warranties the BUYER(S) may wish to obtain. If you know something important about the Property that is not addressed on the Seller's Property Disclosure, add that information to the form. Prospective Buyers may rely on the information you provide.

Instructions: (1) Complete this form yourself. (2) Answer all questions truthfully and as fully as possible. (3) Attach all available supporting documentation. (4) Use explanation lines as necessary. (5) If you do not have the personal knowledge to answer a question, use the comment lines to explain.

By signing below you acknowledge that the failure to disclose known material information about the Property may result in liability.

Message to the Buyer: Although Seller's Property Disclosure is designed to assist the SELLER in disclosing all known material (important) facts about the Property, there are likely facts about the Property that the SELLER does not know. Therefore, it is important that you take an active role in obtaining the information about the Property.

Instructions: (1) Review this form and any attachments carefully. (2) Verify all important information. (3) Ask about any incomplete or inadequate responses. (4) Inquire about any concerns not addressed on the Seller's Property Disclosure. (5) Obtain professional inspections of the Property. (6) Investigate the surrounding area.

THE FOLLOWING ARE REPRESENTATIONS OF THE SELLER(S) AND ARE NOT INDEPENDENTLY VERIFIED BY THE BROKER(S) OR AGENTS(S).

PART I

APPLIANCES					ELECTRICAL						
		TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.			TRANSFERS TO BUYER			Indicate the condition of the following items by marking only one appropriate box.
None	Does Not Transfer	Working	Not Working	Don't Know		None	Does Not Transfer	Working	Not Working	Don't Know	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke/Fire Detectors
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oven	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Switches/Outlets
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Range (Circle One) <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling Fan(s)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bathroom Vent Fan(s)
					Built in (Circle One) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Telephone Wiring/Blocks/Jacks
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Range Hood	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Door Bell
					Vented Outside (Circle One) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Intercom
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kitchen Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garage Door Opener
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clothes Washer	# of Remotes: 3					Keypad Entry: (Circle One) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clothes Dryer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Aluminum Wiring
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Copper Wiring
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Central Vacuum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	220 Volt
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Exterior Attached Gas Grill						<input checked="" type="checkbox"/> Service Panel Total Amps
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security System
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____						(Circle One) <input checked="" type="checkbox"/> Own <input type="checkbox"/> Rent/Financed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	ADT _____					Company _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Audio/Video Surveillance System
Comments:					Comments:						

PART II

Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.

Attach all relevant documentation for further explanation, including any and all repair reports.

YES	NO	DON'T KNOW	SECTION 1 STRUCTURAL FOUNDATION/WALLS
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are any exterior walls covered with Exterior Insulation & Finish System (synthetic stucco)? If YES, are you aware of any adverse conditions? _____
			Indicate all that apply: <input type="checkbox"/> Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> Slab
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any structural engineer's report(s) available? If YES, Date of Report: _____ Copy Attached? (Mark One): <input type="checkbox"/> YES <input type="checkbox"/> NO
			To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Movement, shifting, deterioration or other problems with walls or foundation?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cracks or flaws in the walls, floors or foundation?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Problems with driveways, walkways, patios, retaining walls, party walls?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Problems with operation of windows or doors, or broken seals?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any corrective actions to items in this section? (Example - Piering, bracing, etc.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any transferable warranties? Date: _____ (If YES, explain below and attach copy.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there insulation in the walls?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there insulation in the floors?
Additional Comments:			
YES	NO	DON'T KNOW	SECTION 2 ROOF/INSULATION
		<input type="checkbox"/>	Age: 2013 Type: Composition
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	To your knowledge, are there any <input type="checkbox"/> PAST <input type="checkbox"/> PRESENT roof leaks? (Mark One) If any, identify details below.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	During your ownership, has the roof ever been <input checked="" type="checkbox"/> REPLACED? <input type="checkbox"/> REPAIRED? (Mark One) If YES, Date: _____ (Identify details below.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any transferable warranties? Date: _____ (If YES, explain below and attach copy.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you know of any problems with chimneys or chases? (If YES, explain below.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you know of any problems with roof, roof structure or rain gutters? (If YES, explain below.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there insulation in the ceiling/attic?
Additional Comments:			
In the past there has been a leak in the garage area when there is a heavy rain and strong winds. Not sure if it is from			
the roof or from another source. The seller has done work on this area in the past but wants to make sure the buyer is a			
aware of this to look into further.			
YES	NO	DON'T KNOW	SECTION 3 MOLD/MILDEW
According to the EPA, molds are part of the natural environment. Molds reproduce by means of tiny spores that are invisible to the naked eye, and float through outdoor and indoor air. Mold may begin growing indoors when mold spores land on surfaces that are wet. Inhaling or touching mold spores may cause allergic reactions in sensitive individuals.			
To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)			
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Presence of any mold/mildew in the property?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any problems created by mold or mildew for occupants of the structure during your ownership?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have you had any inspections for mold or mildew? If YES, Date: April 2025 (If YES, explain below.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Have you received any reports pertaining to mold or mildew on or within the structure? (If YES, attach.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Has the property had any professional mold remediation during your ownership? If YES, Date: _____
Additional Comments: In the basement there are condensation stains and coloration on the ceiling tiles. We had PuroClean out in April of 2025 to take a look. They			
recommended having an HVAC company wrap the duct work as they think it is from condensation from the duct work. They			
recommended wrapping the duct work and replacing the ceiling tiles			

Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.
Attach all relevant documentation for further explanation, including any and all repair reports.

YES	NO	DON'T KNOW	SECTION 4 WATER/SEWAGE SYSTEMS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property connected to City Water?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to Rural Water? If YES, Transfer Fee: _____ District: _____	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to any private water systems? (Mark all that apply.)	
			<input type="checkbox"/> Drinking Well	<input type="checkbox"/> Irrigation Well <input type="checkbox"/> Geo-Thermal Well
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Working?	Type: _____ Location: _____ Depth: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Working?	Type: _____ Location: _____ Depth: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Working?	Type: _____ Location: _____ Depth: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Has the water in any wells shown test results of contamination? (If YES, explain below.)	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a public sewer system? If shared lagoon/septic system, explain below.	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a septic system? Date Last Pumped: _____	
			Tank Size: _____ Location: _____	
			# feet laterals: _____ # Feet infiltrators: _____ Location: _____	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to a lagoon system? Location: _____	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property connected to some other type of waste disposal system? (If YES, explain below.)	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Has the main waste disposal line ever been snaked or scoped?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, is there any problem relating to the waste disposal system?	
Additional Comments:				

YES	NO	DON'T KNOW	SECTION 5 WATER INTRUSION/LEAKS	
<i>To your knowledge, indicate any past or present: (Use Comment Lines for further explanations)</i>				
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any water leakage in or around the fireplace or chimney?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any water leakage around (If YES, mark all that apply.) <input type="checkbox"/> WINDOWS <input type="checkbox"/> SKYLIGHTS <input type="checkbox"/> DOORS?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any leaks occurring in any plumbing, water supply lines, drains, sewer lines, etc.?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any leaks caused by appliances?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any leaks from any condensation drain lines, humidifier, dehumidifier, etc.?	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any water leakage into (If YES, mark all that apply.) <input type="checkbox"/> BASEMENT <input type="checkbox"/> CRAWL SPACE	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any accumulation of water within the basement/crawl space?	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sump Pump(s) Location(s): Basement	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Drain Tiles (If YES, mark all that apply.) <input type="checkbox"/> INTERIOR <input type="checkbox"/> EXTERIOR	
Additional Comments:				

YES	NO	DON'T KNOW	SECTION 6 PEST, WOOD INFESTATION & DRY ROT	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Do you have any knowledge of the following items on/affecting the property? (Mark all that apply.)	
			<input type="checkbox"/> WOOD DESTROYING INSECTS	<input type="checkbox"/> DRY ROT <input type="checkbox"/> OTHER WOOD INFESTATION
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any knowledge of any damage to the property caused by the following items? (Mark all that apply.)	
			<input type="checkbox"/> WOOD DESTROYING INSECTS	<input type="checkbox"/> DRY ROT <input type="checkbox"/> OTHER WOOD INFESTATION
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Have there been any repairs of such damage? (If YES, explain below.)	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property currently under a termite warranty or other coverage by a licensed pest control company?	
			Company: _____ Warranty Expiration Date: _____	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any wood destroying insects control reports in the last 5 years? (If YES, explain below.)	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any professional wood destroying insects control treatments in the last 5 years? (If YES, explain below.)	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any pest control reports in the last 5 years? (If YES, explain below.)	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any professional pest control treatments in the last 5 years? (If YES, explain below.)	

Additional Comments:				
Monthly bug spray and bait for mice				

<div style="display: flex; justify-content: space-between;"> <div> 171 (Rev 10/19) BUYER'S INITIALS: _____ </div> <div> Pg 4 of 7 </div> <div> SELLER'S INITIALS: SAS </div> </div>				
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Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.

Attach all relevant documentation for further explanation, including any and all repair reports.

YES	NO	DON'T KNOW	SECTION 7 ENVIRONMENTAL CONDITIONS
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is the property located in a subdivision with a master drainage plan?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If YES, is the property in compliance?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Has the property ever had any drainage problems during your ownership? (If YES, explain below.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any producing or non-producing gas/oil wells on the property or adjacent property?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do mineral rights convey to buyer? If NO, please define: _____
			Groundwater contamination has been detected in several areas in the State of Kansas.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are you aware of groundwater contamination or other environmental concerns?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any reports or records pertaining to groundwater contamination or other environmental concerns?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any diseased or dead trees and shrubs?
			To your knowledge, are any of the following substances, materials, products on the real property? (YES or NO Only.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Asbestos
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contaminated soil or water (including drinking water)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Landfill or buried materials
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Lead-based paint (If YES, attach disclosure.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Radon gas in house or well Has a mitigation system been installed? (Mark One) <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Methane Gas
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Oil sheers in wet areas
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Radioactive material
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic material disposal (solvents, chemicals, etc.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Underground fuel or chemical storage tanks
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	EMFs (Electro Magnetic Fields)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Urea formaldehyde foam insulation (UFFI)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are you aware if any portion of the property has ever been used for the manufacture of, or storage of, chemicals or equipment used in manufacturing methamphetamine, ecstasy, LSD or any other illegal substances?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, are any of the above conditions present near your property?
Comments:			

YES	NO	DON'T KNOW	SECTION 8 BOUNDARIES/LAND
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Have you had a survey of the property? (If YES, attach copy if available.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are the boundaries of your property marked in any way?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there any fencing on the boundaries of the property?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does fencing belong to the property? If YES, which sides? <u>Owner's side</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are there any features of the property shared in common with adjoining landowners, such as, walls, fences, roads, driveways? (If YES, explain below.)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is the property owner responsible for maintenance of any such shared feature(s)?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, are there any boundary disputes, encroachments, or unrecorded easements?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, is any portion of the property located in a federally designated flood plain?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you currently, or have you ever, paid flood insurance for the property?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	To your knowledge, is any portion of the property located in a designated wetlands area?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do you know of any of the following items that have occurred on the property or in the immediate area? (Mark all that apply.)
			<input type="checkbox"/> EXPANSIVE SOIL <input type="checkbox"/> EARTH MOVEMENT
			<input type="checkbox"/> FILL DIRT <input type="checkbox"/> UPHEAVAL
			<input type="checkbox"/> SLIDING <input type="checkbox"/> EARTH STABILITY PROBLEMS
			<input type="checkbox"/> SETTLING
Comments: There is shared fence			

Answer each question with one answer to the best of your knowledge. Specify relevant details in Additional Comment lines.

Attach all relevant documentation for further explanation, including any and all repair reports.

YES	NO	DON'T KNOW	SECTION 9
SPECIAL ASSESSMENTS AND HOMEOWNER'S ASSOCIATION			
The law requires that the Seller disclose the existence of special assessments against a property.			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any current/pending bonds, assessments, or special taxes that apply to property?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The property may be subject to special assessments or is located in an improvement district? (Refer to relevant tax disclosure - Mark One).
			<input type="checkbox"/> Owner <input checked="" type="checkbox"/> County <input type="checkbox"/> Public Record <input type="checkbox"/> Other: _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property subject to rules or regulations of an active Homeowner's Association?
			Annual Dues? \$770.00 Initiation Fee? \$150.00
			Homeowner's Association contact information: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property subject to a right of first refusal?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the property subject to covenants, conditions, and restrictions of a Homeowner's Association or subdivision restrictions?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Any violations of such covenants and restrictions?
Comments:			
YES	NO	DON'T KNOW	SECTION 10
MISCELLANEOUS			
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Have any improvements or repairs (including, but not limited to, HVAC, plumbing, electrical, structural additions) been made to the property without obtaining required permits ?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are any local, state, or federal agencies requiring repairs, alterations, or corrections of any existing conditions?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the present use of the property a non-conforming use?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have there been any insurance claims during the seller's ownership?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Were repairs made? If so, explain: Roof for hail damage claim
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is there any unrepaired damage due to hail, storm, wind, fire or flood?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any stains, tears, burns, holes, etc., in the property that are not readily visible?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does a pet(s) reside or has a pet(s) ever resided in or on the property?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Is there any damage due to pets, interior/exterior, including, but not limited to, odors, stains, etc.?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do all window and door treatments remain? If NO, please list: _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Does any other personal property remain? If YES, please list: _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the property contain any of the following? (Mark all that apply.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Swimming Pool <input type="checkbox"/> Spa <input type="checkbox"/> Hot Tub <input type="checkbox"/> Sauna <input type="checkbox"/> Water Feature
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If YES, are either of the following heated? <input checked="" type="checkbox"/> Swimming Pool <input type="checkbox"/> Spa If yes, type of heat? Unknown
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are you aware of any past or present problems relating to the swimming pool, spa, hot tub, sauna or water feature? Explain:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is the property in a holistic, conservation or special review district, that requires any alterations or improvements to the Property, be approved by a board or commission?
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Are there any other facts, conditions, or circumstances, on or off site, which could affect the value, beneficial use, or desirability of the property?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Are there any transferable warranties on the property or any of its components?
Comments:			
Any Additional Comments For Part II:			

SELLER'S ACKNOWLEDGEMENT

Seller acknowledges that: the information contained in this disclosure is accurate, true and complete to the best of Seller's knowledge, information and belief; Seller has provided all the information contained in this Seller's Property Disclosure; and that the Broker/Realtor® has not prepared, nor assisted in the preparation of this Disclosure. Seller hereby indemnifies, holds harmless and releases all Brokers/Realtors® involved in the sale of the property from all liability, claims, loss, cost, or damage in connection with the information contained in this Disclosure. Seller hereby authorizes the listing broker to provide copies of this Disclosure to other real estate brokers and agents and prospective buyers of the property.

Seller is occupant: ☒ YES ☐ NO

Seller certifies that the information herein is true and correct to the best of the Seller's knowledge as of the date signed by Seller.

SELLER: Sandra Ammar Steven 04/10/25 SELLER: _____
Date Date

BUYER'S ACKNOWLEDGEMENT AND AGREEMENT

1. I have personally inspected the property. I have been advised to have the property examined by professional inspectors. Subject to any inspections, I agree to purchase the property in its present condition without representations or guarantees of any kind by the Seller or any REALTORS® concerning the condition or value of the property, except as given above or as stated in my contract with the Seller.

2. I acknowledge that neither Seller nor any REALTORS® involved in this transaction is an expert at detecting or repairing physical defects in the property.

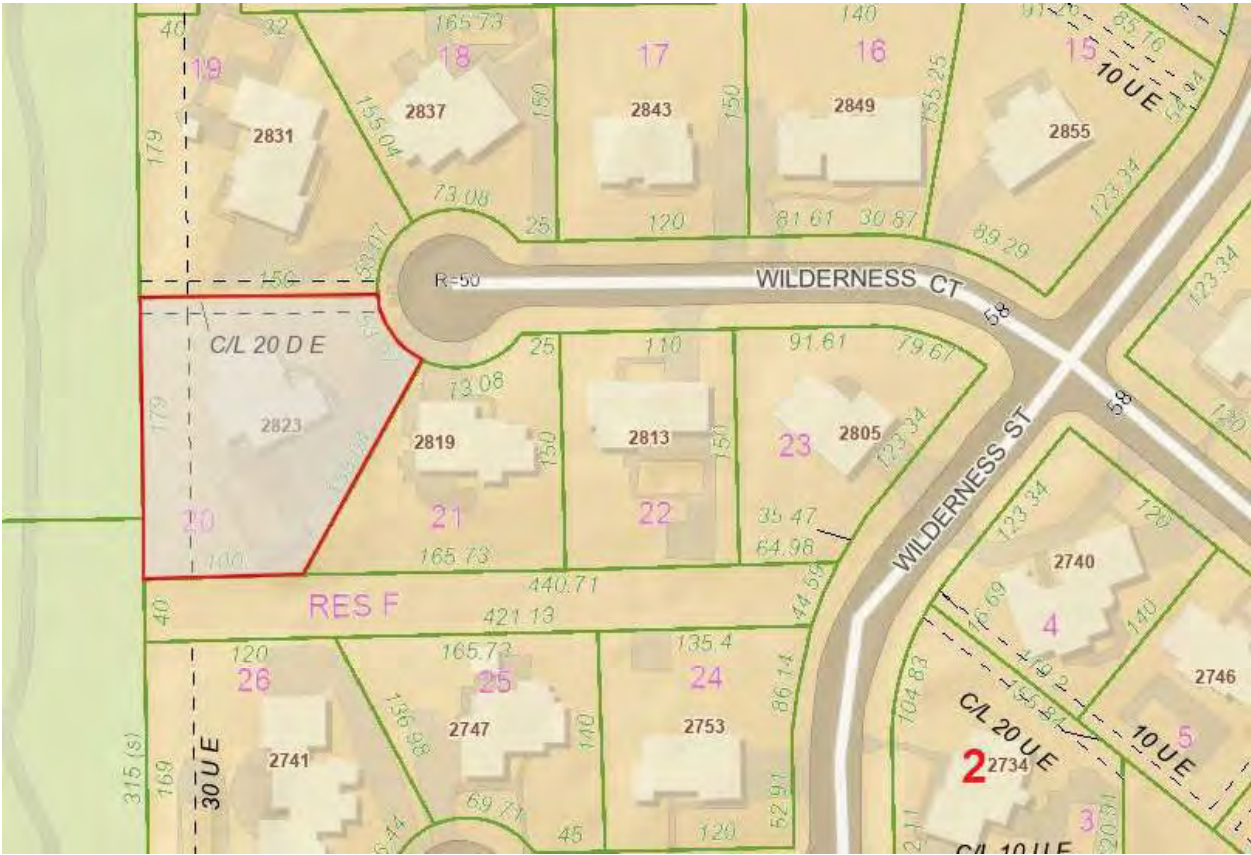
3. I acknowledge that I have been informed that Kansas Law requires persons who are convicted of certain sexually violent crimes after April 14, 1994, to register with the sheriff of the county in which they reside. I have been advised that if I desire information regarding those registrants, I may find information on the home page of the Kansas Bureau of Investigation (KBI) at <http://www.kansas.gov/kbi/> or by contacting the local sheriff's office.

4. I acknowledge that McConnell Air Force Base is located within Sedgwick County and is an operational military Air Force base that is open 24 hours a day and activity at that base may generate noise. The volume, pitch, amount and frequency of noise may be affected by future changes in McConnell Air Force Base activity. I have been informed that if I desire information regarding potential for noise caused by the aircraft operations associated with McConnell Air Force Base and its operations, I may find information by contacting the Metropolitan Area Planning Department.

BUYER: _____ BUYER: _____
Date Date

This form is approved by legal counsel for the REALTORS® of South Central Kansas exclusively for use by members of the REALTORS® of South Central Kansas and other authorized REALTORS®. No warranty is made or implied as to the legal validity or adequacy of this form, or that its use is appropriate for all situations. Copyright 2019.

Exhibit "A"



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Exhibit “B”

2/28/25, 9:40 AM

Property Taxes | Sedgwick County, Kansas

 Home

2823 N WILDERNESS CT WICHITA

Property Description

Property Type	Urban Res Homesite
Legal Description	LOT 20 BLOCK 3 WILDERNESS ADD.
Property Address	2823 N WILDERNESS CT, WICHITA, KS 67226
Owner	STEVEN FAM TR
Mailing Address	2823 N WILDERNESS CT WICHITA KS 67203-2111
Geo Code	C 44155
PIN	00190794
AIN	113050120302400
Quick Ref ID	R39517
Tax Unit	6718 090 WICHITA U-375 MI,PY
Land Use	1101 Single family detached dwelling
2024 Market Land Square Feet	25,529
2024 Total Acres	0.59
2024 Total Ag Acres	0.00
2024 Appraisal Value	\$631,200
2024 Assessment Value	\$72,589

Assessment Values

Year	Class	Land	Improvements	Total	Change
2024	Residential		\$10,845	\$61,744	\$72,589


Sandra Ammar Steven

04/10/25

Residential Structure Characteristics

Year Built	1985
Architectural Style	Conventional
Main Floor Area	1,816
Upper Floor Area	2,072

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Property Taxes | Sedgwick County, Kansas

Above Ground Living Area	3,888
Bedrooms	5
Full Bathrooms	3
Half Bathrooms	3
Basement Type	Full - 4
Total Basement Area	1,740
Condition/Desirability/Utility	GD
Physical Condition	GD
More Details	Documents/Reports

Property Value Estimates

2024 Appraised Value	\$631,200
2024 Value Method	PRIOR
Override Reason	
Method	Value
Cost Estimate	\$765,840
Market Estimate	\$723,500
MRA Estimate	\$741,000
Weighted Estimate	\$702,600
Indexed Estimate	\$0

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04/10/25

* Information on the property card is as of January 1st

Appraisal Values

Year	Class	Land	Improvements	Total	Change
2024	Residential	\$94,300	\$536,900	\$631,200	
2023	Residential	\$94,300	\$536,900	\$631,200	+7%
2022	Residential	\$89,000	\$500,000	\$589,000	+5%

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Property Taxes | Sedgwick County, Kansas

2021	Residential	\$49,400	\$511,500	\$560,900	+4%
2020	Residential	\$49,400	\$489,900	\$539,300	
2019	Residential	\$49,800	\$489,500	\$539,300	+6%
2018	Residential	\$43,200	\$465,600	\$508,800	+2%
2017	Residential	\$80,800	\$418,300	\$499,100	
2016	Residential	\$80,800	\$418,300	\$499,100	+3%
2015	Residential	\$80,800	\$403,800	\$484,600	

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04/10/25

2023	Residential	\$10,845	\$61,744	\$72,589	+7%	2022	Residential	\$10,235	\$57,500	\$67,735	+5%
2021	Residential	\$5,681	\$58,823	\$64,504	+4%	2020	Residential	\$5,681	\$56,339	\$62,020	
2019	Residential	\$5,727	\$56,293	\$62,020	+6%	2018	Residential	\$4,968	\$53,544	\$58,512	+2%
2017	Residential	\$9,292	\$48,105	\$57,397		2016	Residential	\$9,292	\$48,105	\$57,397	+3%
2015	Residential	\$9,292	\$46,437	\$55,729							

2024 Tax Year Special Assessments

Project	Description	Principal	Interest	Total
2639 F	COUNTY SOLID WASTE SOLID WASTE USER FEE	\$0.00	\$0.00	\$5.00
Totals:		\$0.00	\$0.00	\$5.00

Tax Billings

2/28/25, 9:40 AM

Property Taxes | Sedgwick County, Kansas

Tax Year	Tax Rate	General Tax	Specials Tax	Interest	Fees	Total	Paid	Balance
2024	124.281000	\$8,848.92	\$5.00	\$0.00	\$0.00	\$8,853.92	\$8,853.92	\$0.00
2023	123.135000	\$8,841.52	\$8.38	\$0.00	\$0.00	\$8,849.90	\$8,849.90	\$0.00
2022	123.562000	\$8,277.46	\$8.38	\$0.00	\$0.00	\$8,285.84	\$8,285.84	\$0.00
2021	126.253000	\$8,097.84	\$7.90	\$0.00	\$0.00	\$8,105.74	\$8,105.74	\$0.00
2020	127.431000	\$7,857.27	\$7.80	\$0.00	\$0.00	\$7,865.07	\$7,865.07	\$0.00
2019	127.006000	\$7,830.91	\$7.80	\$0.00	\$0.00	\$7,838.71	\$7,838.71	\$0.00
2018	126.522000	\$7,357.06	\$5.88	\$0.00	\$0.00	\$7,362.94	\$7,362.94	\$0.00
2017	127.600000	\$7,277.86	\$5.88	\$0.00	\$0.00	\$7,283.74	\$7,283.74	\$0.00
2016	126.157000	\$7,195.04	\$4.88	\$0.00	\$0.00	\$7,199.92	\$7,199.92	\$0.00
2015	129.190000	\$7,153.62	\$4.88	\$0.00	\$0.00	\$7,158.50	\$7,158.50	\$0.00

Tax Authorities

Tax Authority	Tax Rate
0101 STATE	1.500000
0201 COUNTY	28.701000
0518 CITY OF WICHITA	32.816000
0616 USD 375	13.887000
0616 USD 375 SC	7.975000
0616 USD 375 SG	20.000000
0731 USD 375 BOND	18.404000
0816 USD 375 REC COMM	0.998000

Total: 124.281000

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04/10/25



DON'T LET SCAM ARTISTS STEAL YOUR MONEY!

Because you are going to be involved in a real estate transaction where money is changing hands, **you are a potential target for cyber-criminals**. These sophisticated criminals could:

- Try to hack into your email account or the email of other persons involved in your transaction and direct you to send a wire to the hacker's account.
- They can even send you emails that appear to be from your agent, your closer or another trusted source!



WHEN YOU ARE USING REECENICHOLS, WE WILL NEVER ASK YOU TO WIRE MONEY VIA EMAIL, EVER!

If you receive wiring instructions, even if it appears legitimate, **do not send money to that account**. Always call to verify such instructions.

Closing with another company? Always contact the closer directly before wiring any money. To ensure it's the closing company:

- Do not use a phone number or other contact information from an email.
- Use a business number from another source (such as the closing company's website) to make sure you are actually talking to your closer and not someone intent on stealing your money.
- Do not share your social security number in an email.

I acknowledge the above information:

Authentisign
Sandra Ammar Steven

04/10/25

(Buyer/Seller)

(Date)

(Buyer/Seller)

(Date)



ReeceNichols
REAL ESTATE



Real Estate Brokerage Relationships

Kansas law requires real estate licensees to provide the following information about brokerage relationships to prospective sellers and buyers at the first practical opportunity. This brochure is provided for informational purposes and does not create an obligation to use the broker's services.

Types of Brokerage Relationships: A real estate licensee may work with a buyer or seller as a seller's agent, buyer's agent or transaction broker. The disclosure of the brokerage relationship between all licensees involved and the seller and buyer must be included in any contract for sale and in any lot reservation agreement.

Seller's Agent: The seller's agent represents the seller only, so the buyer may be either unrepresented or represented by another agent. In order to function as a seller's agent, the broker must enter into a written agreement to represent the seller. Under a seller agency agreement, all licensees at the brokerage are seller's agents unless a designated agent is named in the agreement. If a designated agent is named, only the designated agent has the duties of a seller's agent and the supervising broker of the designated agent functions as a transaction broker.

Buyer's Agent: The buyer's agent represents the buyer only, so the seller may be either unrepresented or represented by another agent. In order to function as a buyer's agent, the broker must enter into a written agreement to represent the buyer. Under a buyer agency agreement, all licensees at the brokerage are buyer's agents unless a designated agent is named in the agreement. If a designated agent is named, only the designated agent has the duties of a buyer's agent and the supervising broker of the designated agent functions as a transaction broker.

A Transaction Broker is not an agent for either party and does not advocate the interests of either party. A transaction brokerage agreement can be written or verbal.

Duties and Obligations: Agents and transaction brokers have duties and obligations under K.S.A. 58-30,106, 58-30,107, and 58-30,113, and amendments thereto. A summary of those duties are:

An Agent, either seller's agent or buyer's agent, is responsible for performing the following duties:

- promoting the interests of the client with the utmost good faith, loyalty, and fidelity
- protecting the clients confidences, unless disclosure is required
- presenting all offers in a timely manner
- advising the client to obtain expert advice
- accounting for all money and property received
- disclosing to the client all adverse material facts actually known by the agent
- disclosing to the other party all adverse material facts actually known by the agent

The transaction broker is responsible for performing the following duties:

- protecting the confidences of both parties
- exercising reasonable skill and care
- presenting all offers in a timely manner
- advising the parties regarding the transaction
- suggesting that the parties obtain expert advice
- accounting for all money and property received
- keeping the parties fully informed
- assisting the parties in closing the transaction
- disclosing to the parties all adverse material facts actually known by the transaction broker

Agents and Transaction Brokers have no duty to:

- conduct an independent inspection of the property for the benefit of any party
- conduct an independent investigation of the buyer's financial condition
- independently verify the accuracy or completeness of statements made by the seller, buyer, or any qualified third party.

General Information: Each real estate office has a supervising broker or branch broker who is responsible for the office and the affiliated licensees assigned to the office. Below are the names of the licensee providing this brochure, the supervising/branch broker, and the real estate company.

Licensee

D. A. T.
Supervising/branch broker

ReeceNichols South Central Kansas

Real estate company name approved by the commission

Sandra Ammar Steven

Buyer/Seller Acknowledgement (not required)

Approved by the Kansas Real Estate Commission on October 10, 2017

#2000



Company/Franchise Disclosure Addendum and Waiver

(To be used as an attachment to all agency contracts and sales contracts)

ReeceNichols South Central Kansas

("BROKER") is an

independently owned and operated real estate brokerage and member of ReeceNichols Alliance, Inc.

BROKER is a franchisee and pursuant to the terms of its license agreement, ReeceNichols Alliance, Inc. and ReeceNichols Realtors, Inc. have no legal liability for the conduct and actions of BROKER. BROKER is authorized to use licensor's trade name and insignias.

Jury Waiver & Class Action Waiver. THE PARTIES WILL HAVE ALL THE RIGHTS AND BENEFITS OF ARBITRATION, BUT THEY ARE HEREBY GIVING UP THEIR RIGHTS TO RESOLVE THEIR CLAIMS IN A COURT OR JURY TRIAL. The parties submit their own, individual Claims for resolution in the arbitration. The parties hereby waive the following rights: (a) the right to represent the interests of any other person or join or consolidate any Claims by or against third parties; (b) the right to bring, join, or maintain any Claims (in arbitration or otherwise) where the party or another person seeks to act (i) as a representative or member of a class, collective, or mass action, (ii) in the general-public interest, or (iii) in any private-attorney-general capacity; and (c) the right to participate in a class-action lawsuit or class-wide arbitration; and (d) the right to participate as a representative or member in a class arbitration or any consolidation of individual arbitrations (collectively, the "Class Action Waivers"). The Class Action Waivers will control and supersede any contrary agreements, statements, or rules in the AAA Rules or other arbitration provider's rules. If any part of a section, other than the Class Action Waiver, is determined to be invalid or unenforceable, then the remaining parts will remain fully enforceable. If any part of the Class Action Waiver is determined to be unenforceable against a party or another person, then the party or the other person will have the unilateral right to determine whether to proceed in arbitration the Claims be brought in a court with jurisdiction over the Claims, on the condition that a determination that the Class Action Waivers are unenforceable will be subject to appeal.

**CAREFULLY READ THE TERMS OF THIS FRANCHISE DISCLOSURE/WAIVERADDENDUM BEFORE SIGNING.
WHEN SIGNED, THIS ADDENDUM BECOMES A PART OF LEGALLY BINDING AGENCY CONTRACTS AND SALES
CONTRACTS.**

Sign Where Applicable

<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <i>Sandra Ammar Steven</i> </div> <div style="display: flex; justify-content: space-between;"> SELLER Date </div>	<div style="margin-bottom: 5px;">04/10/25</div>	<div style="display: flex; justify-content: space-between;"> BUYER Date </div>
<div style="display: flex; justify-content: space-between;"> SELLER Date </div>		<div style="display: flex; justify-content: space-between;"> BUYER Date </div>

Approved for ReeceNichols Alliance members use in Kansas and Missouri. Feb 2017.