

Address: 4012 REKA Drive #G2



List Number	08-14483	Price-List	\$ 119,000
Status	Active	Near	Anchorage
Zip Code	99508	Type	Condominium
Beds	2	Baths	1.50
Acres	0.00	Carpport	1
Garage	0	Latitude	61.204125
Longitude	-149.805793	Unit Floor #	1
Condo Type	4 - Townhouse Style	Year Built	1971
Dues-Amount	272.00	Dues-Frequency	Monthly

Area: 40 - Seward Hwy to Boniface Pkwy
Borough/Census Area: 1A - Anchorage Municipality
Region: 1 - Southcentral Alaska Region
Zoning: R3 - Multiple Family Residential

School-Elementary	Russian Jack	School-Middle	Wendler	School-High	East Anchorage
Energy Rating		Remote Description		SF-Res	962
SF-Gar		SF-Lot	0	LPSqFt\$	123.70
Tax ID	0051617001401	Tax Map #-Mat-Su	N/A	Grid # (Muni Anch)	SW1436
Taxes	\$ 1,675	Tax Year	2008	Construction Status	Existing Structure
Subdivision		Year Remodeled	2008	Year Updated	
Project Name/Unit #	Mountain Ash #G-2				

Directions: East on Reka from Bragaw. First driveway on right, use G-2 carport or guest parking. Building is the left-most one in the group of four behind the carports on the left.

Public Remarks: Full details, property information package on listing licensee web site. Complete remodel with new kitchen, baths, tile and carpet flooring, trim, interior doors, repainted, lights, mirrors, and more -- the works! Turn-key and move-in ready. End unit opens into quiet courtyard well off Reka Dr and buffered from the interior street by the carports. See photos, a close-in living opportunity.

Miscellaneous: Parking Space-Ttl #: 1
Condo/Assoc Info: Association Name: Mountain Ash; Condo Mgmt Contact: James Magowan; Condo Mgmt Phone #: 345-0190
Dues Include: Exterior Maintenance; Grounds Maintenance; Insurance; Refuse; Sewer; Snow Removal; Water
Construction Type: Wood Frame
Exterior Finish: Vinyl

Roof Type: Built-Up/Tar&Gravel; Metal
Dining Room Type: Area
Garage Type: None
Carpport Type: Detached
Heat Type: Baseboard
Fuel-Type: Electric
Sewer-Type: Public
Water-Type: Public

Access Type: Dedicated Road; Maintained; Paved
Wtrfrnt-Access Near: None
Wtrfrnt-Frontage: None
Topography: Level
Mortgage Info: EM Min Deposit: 1,500
New Finance (Terms): AHFC; Cash; Conventional; FHA; VA
Docs Avl for Review: Docs Posted on MLS; Prop Discl Available

Features-Interior : Dishwasher; Disposal; Electric; Microwave; Range/Oven; Refrigerator; Telephone; W &/or Dryer Hookup; Window Coverings; Wood Stove; CO Detector(s); Washer&/or Dryer; Carpet; Smoke Detector(s)

Features-Additional: Cable TV; Covenant/Restriction; Deck/Patio; Fence; Fire Service Area; Landscaping; Road Service Area; End Unit; In City Limits; DSL/Cable Available

Room Name	Room Level	No. of Rooms	Room Name	Room Level	No. of Rooms
Kitchen	1	1	Bedroom	2	2
Living Room	1	1			
Bath-Half	1	1			

LO: Coldwell Banker Best Properties

All information is deemed reliable, but is not guaranteed. All measurements, square footage, etc. are approximations. School boundaries are subject to change. Verification of listing content by all parties is recommended and should be independently verified. See [copyright notice](#).

Prepared by Niel Thomas, ABR, CCIM, CRS on Friday, October 31, 2008 9:28 AM

The information on this sheet has been made available by the MLS and may not be the listing of the provider.

Bill of Sale¹

This form authorized for use ONLY by active Real Estate Licensee Subscribers of Alaska Multiple Listing Service, Inc.



1 Jason N Rivard, for and in consideration of the sum of
2 Ten Dollars shall convey to
3 _____, the following personal property located at:
4 4012 Reka Drive, Anchorage, AK 99508, State of Alaska.

- | | | |
|--|--|--|
| 6 <input checked="" type="checkbox"/> Refrigerator | <input checked="" type="checkbox"/> Oven/Range | ___ Central Vac Attachments |
| 7 <input checked="" type="checkbox"/> Dishwasher | <input checked="" type="checkbox"/> Washer | <input checked="" type="checkbox"/> Window Coverings |
| 8 <input checked="" type="checkbox"/> Microwave | <input checked="" type="checkbox"/> Dryer | ___ Trash Compactor |
| 9 ___ Swing Set | ___ Pool Table | ___ Hot Tub |
| 10 ___ Water Softener | ___ Generator | ___ Workbench/Shelving |
| 11 ___ Satellite Dish | ___ Greenhouse | ___ Dog Kennel/Run |
| 12 ___ Garage Door Opener Remotes | ___ Wall/Ceiling Speakers | ___ Storage shed |
| 13 ___ Chandelier | ___ Other _____ | ___ Other _____ |

14 _____
15 _____

16
17 The Seller herein warrants that said property is free from all liens and encumbrances. If the Purchase and
18 Sale Agreement dated _____ does not record; this Bill of Sale shall become null and void.

19
20 **THE ABOVE DESCRIBED ITEM(S) SHALL BE CONVEYED IN "AS-IS" CONDITION AND NO**
21 **WARRANTIES ARE MADE AS TO THE CONDITION OF THE PERSONAL PROPERTY.**

22
23 All fixtures including, but not limited to, lighting (including chandelier/dining room fixtures), blinds and
24 drapes shall remain with the subject property.

25
26 **SELLER TO LIST THE ITEMS, APPEARING TO BE AFFIXED TO THE PROPERTY, THAT ARE NOT**
27 **INCLUDED WITH THE SALE:**

28 _____
29 _____
30 _____
31 _____
32 _____

33 Dated: 10 _____	Dated: <u>10-22-8</u>
34 Buyer 1: _____	Seller 1: <u>Jason N. Rivard</u>
35 Buyer 2: _____	Seller 2: <u>Eric A. Rivard</u>
36 Buyer 3: _____	Seller 3: _____

Seller's Information Regarding Property

Property Type (check one):

- Single Family
 Zero Lot Line/Town House
 Condominium
 Townhome/PUD
 Duplex* (Including Single Family with an Apartment)
 Other (please specify) _____

Do you currently occupy the property? Yes No If Yes, how long? 6 months

If not a current occupant, have you ever occupied the property? Yes No If so, when? _____

Year Property Built: 1971. If property was built prior to 1978, or if Seller has any knowledge of lead-based paint, Seller must complete Disclosure of Information and Acknowledgment of Lead-based Paint and/or Lead-based Paint Hazards in accordance with Section 1018 of the Residential Lead-Based Paint Hazard Reduction Act of 1992 (also known as Title X) and provide Buyer with the "Protect Your Family From Lead in Your Home" pamphlet. The pamphlet can be found on the Internet at <http://www.epa.gov/lead/leadprot.htm>.

Construction Overview: Wood Frame Manufactured Modular Other: _____

Foundation: Masonry Block Poured Concrete Piling Treated Wood Other: _____

Name of original builder (if known): Not known

Property Features:

Check all items that are **built-in** and will remain with the property. **Also . . .**
Circle those checked items that have known defects or malfunctions. **Also . . .**
Describe the defect or malfunction on the Addendum/Amendment(s) To The Disclosure Statement.

- | | | |
|---|---|---|
| <input type="checkbox"/> Cooktop | <input type="checkbox"/> Wood Stove(s) # of _____ | <input type="checkbox"/> T.V. Antenna |
| <input checked="" type="checkbox"/> Oven(s) # of <u>1</u> | <input type="checkbox"/> Jetted Tub | <input type="checkbox"/> Satellite Dish |
| <input checked="" type="checkbox"/> Rods & Blinds | <input type="checkbox"/> Hot Tub <input type="checkbox"/> Cover | <input checked="" type="checkbox"/> Window Screens |
| <input checked="" type="checkbox"/> Microwave(s) # of <u>1</u> | <input type="checkbox"/> Steam Shower Room | <input type="checkbox"/> Security System |
| <input checked="" type="checkbox"/> Dishwasher | <input type="checkbox"/> Water Softener | <input checked="" type="checkbox"/> Smoke Detector(s) # of <u>2</u> |
| <input type="checkbox"/> Trash Compactor | <input type="checkbox"/> Water Filtering System | <input type="checkbox"/> CO Detectors # of _____ |
| <input checked="" type="checkbox"/> Garbage Disposal | <input type="checkbox"/> Greenhouse <input type="checkbox"/> Attached <input type="checkbox"/> Detached | <input type="checkbox"/> Fire Alarms |
| <input type="checkbox"/> Instant Hot Water Dispenser | <input type="checkbox"/> Ventilating System | <input type="checkbox"/> Auto Garage Door Opener(s) |
| <input type="checkbox"/> Central Vacuum Installed | <input type="checkbox"/> Heating System | # of Opener(s) _____ |
| <input type="checkbox"/> Intercom | <input type="checkbox"/> Storage Shed(s) # of _____ | <input type="checkbox"/> Built-In Refrigerator |
| <input checked="" type="checkbox"/> Paddle Fan(s) # of <u>1</u> | <input type="checkbox"/> Built-In Barbecue | <input type="checkbox"/> Other _____ |

Comments: _____

Structural Components:

Circle only those items that have known defects, malfunctions, or have had major repairs performed within the last five years. **Also . . . Describe** the defect, malfunction, or repair on the Addendum/Amendment(s) To The Disclosure Statement.

- | | | | | |
|--|---|--|--|---|
| <input checked="" type="checkbox"/> Fences/Gates | <input type="checkbox"/> Rain Gutters | <input type="checkbox"/> Insulation | <input type="checkbox"/> Electrical Systems | <input type="checkbox"/> Electronic Air Cleaner |
| <input type="checkbox"/> Driveways | <input type="checkbox"/> Exterior Walls | <input type="checkbox"/> Woodstove(s) # of _____ | <input type="checkbox"/> Sewage Systems | <input type="checkbox"/> Heat Recovery |
| <input type="checkbox"/> Private Walkways | <input type="checkbox"/> Interior Walls | <input type="checkbox"/> Fireplace(s) # of _____ | <input type="checkbox"/> Water Supply | <input type="checkbox"/> Ventilator System |
| <input type="checkbox"/> Retaining Walls | <input checked="" type="checkbox"/> Floors | <input type="checkbox"/> Gas Starter | <input type="checkbox"/> Garage | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Ceilings | <input type="checkbox"/> Chimneys | <input type="checkbox"/> Garage Floor Drain | <input type="checkbox"/> Mechanical |
| <input type="checkbox"/> Crawl Space | <input checked="" type="checkbox"/> Doors | <input type="checkbox"/> Plumbing Systems | <input type="checkbox"/> Carport | <input type="checkbox"/> Filtration |
| <input type="checkbox"/> Roof | <input checked="" type="checkbox"/> Windows | <input type="checkbox"/> Heating Systems | <input type="checkbox"/> Washer/Dryer Hook-ups | <input type="checkbox"/> Pool Cover |
| <input type="checkbox"/> Patio/Decking | <input type="checkbox"/> Skylights | <input type="checkbox"/> Solar Panels | <input type="checkbox"/> Humidifier | <input type="checkbox"/> Hot Water Heater |
| <input type="checkbox"/> Slabs | <input type="checkbox"/> Venting | <input type="checkbox"/> Wind Generators | <input type="checkbox"/> Air Conditioner | |

Other items not covered above? _____

Comments: See page 7

Seller's Initials: JR/SR Date: 10/22/8 Property Address: 4012 Reka Drive, Anchorage, AK 99508 Buyer's Initials: _____ Date: _____

Documentation: Check the documents for the subject property that the seller has available for review:

- | | | |
|--|---|--|
| <input type="checkbox"/> Engineer/Property/Home Inspection Report(s) | <input type="checkbox"/> Written Agreements with Adjacent Property Owners | <input type="checkbox"/> Party Wall Agreement |
| <input type="checkbox"/> Title Information | <input type="checkbox"/> Energy Rating Certificate or PUR-101 | <input type="checkbox"/> Lease/Rental Agreement |
| <input type="checkbox"/> As-Built Survey | <input type="checkbox"/> Resale Certificate | <input type="checkbox"/> Soils Test |
| <input type="checkbox"/> Certificate of Occupancy or PUR-102 | <input type="checkbox"/> Water Rights Certificate | <input type="checkbox"/> Well Log and Water Tests |
| <input type="checkbox"/> Deed Restrictions | <input type="checkbox"/> Subdivision Covenants/Restrictions | <input type="checkbox"/> Hazardous Materials Test(s) |
| <input type="checkbox"/> Other _____ | | <input type="checkbox"/> Other _____ |

Additional Information:

Supply information for the following items:

	<u>Yes</u>	<u>No</u>
To the best of your knowledge, has the property been inspected by an engineer/home inspector in the last 5 years?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
♦ Are you aware of ever having any water in the crawl space, basement, or lower level?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If Yes, how has the problem been resolved?		
<input checked="" type="checkbox"/> Sump Pump(s) <input type="checkbox"/> Curtain Drain <input type="checkbox"/> Rain Gutter/Extension <input type="checkbox"/> Other _____		
When was problem resolved? <u>Not sure.</u>		
Location of each sump pump: <u>3 - 1 under each unit</u>		
♦ To where does the water drain after it leaves the sump pump? <u>The drain pipes</u>		
If gutters, where do downspouts discharge? _____		
♦ Is there a floor drain in the structure, including garage?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, where is it located and where does it drain to? _____		
➤ Roof or Other Leakage:		
Type: <input type="checkbox"/> Asphalt/Composition Shingle <input type="checkbox"/> Cedar Shake <input checked="" type="checkbox"/> Built-up <input type="checkbox"/> Metal <input type="checkbox"/> Other _____		
Age: <u>4 (about)</u> years. Location of attic access? _____		
♦ Are you aware of any ice damming on the roof?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, provide location. _____		
♦ Are you aware of any water leaking into the home? i.e., windows, lights, fireplace, etc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, provide location. _____		
➤ Fireplace and/or Woodstove: Date chimney(s) last cleaned? <u>N/A</u> Who cleaned? _____		
➤ Heating System(s):		
Mark all types that apply: <input checked="" type="checkbox"/> Hot Water Baseboard <input type="checkbox"/> Forced Air <input type="checkbox"/> Radiant Heat <input checked="" type="checkbox"/> Electrical Heat		
<input type="checkbox"/> Wood Stove <input type="checkbox"/> Other _____		
Age: <u>0</u> years. Last Cleaned: _____ Last Inspected: _____		
Source: <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Propane Tank leased or owned? _____ <input type="checkbox"/> Wood <input type="checkbox"/> Coal		
<input type="checkbox"/> Oil with _____ gallon storage which is <input type="checkbox"/> Buried <input type="checkbox"/> Above Ground <input type="checkbox"/> Other _____		
Age of Tank? <u>?</u> years.		
➤ Hot Water Heater:		
Age: <u>?</u> years. Capacity: <u>50</u> gallons. Type: <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Other _____		
➤ Water Supply:		
Type: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Community <input type="checkbox"/> Cistern/Water Tank If Cistern/Water Tank: _____ Size		
<input type="checkbox"/> Other _____		
If Private: Well Depth: _____ feet. Flow Rate: _____ gallons per minute. Date Tested: _____		
♦ Have you had any problems with your water supply?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
♦ Has the water supply been tested in the past 12 months?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, attach all documentation from all tests.		
♦ Are you aware of any contaminants in your water supply, to include but not limited to E-coli, nitrates, heavy metals, arsenic or other contaminants?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
♦ Has the well failed while you have owned the property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
♦ Have you ever had a well pump problem or failure?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
♦ Do you supply water to, or receive water from others?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes, is there a recorded agreement?.....		
♦ Do you have a water rights certificate for this property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>

JR/GR 10/22/8 4012 Reka Drive, Anchorage, AK 99508 _____ / _____ / _____
 Seller's Initials Date Property Address Buyer's Initials Date

Additional Information (Continued):

➤ **Sewer System:**

- Type: Public Private Community Other _____ **Yes** **No**
- Does your sewer system have a lift station/lift pump?
 - If Private: Septic Tank Holding Tank Other: _____
 - Drainfield System: Bed Trench Mound Pit Crib Other _____
 - Innovative Sewer System: Intermittent Sand Filter Biocycle Recirculating Upflow Filter
 - Secondary sewer treatment plant Other _____
 - Has the sewer system failed while you owned the property?
 - If Yes, explain: _____
 - Age of sewer system: _____ Location: _____
 - Have you had any work maintenance or inspections done on the sewer system during your ownership?
 - If Yes, explain: _____
 - Approval/Certification source (and date if known): _____
 - Are you aware of any abandoned sewer systems, leachfields, cribs, etc. on the property?

➤ **Freeze-ups:**

- Have you had any frozen water lines, sewer lines, drains, or heating systems?
- If yes, please explain. _____
- Are there any heat tapes, heat lamps, or other freeze prevention devices?
- Location, and explain use. Electric heaters in crawl space.

➤ **Average Annual Utility Costs:**

Gas	\$ <u>10/month</u> <u>\$120 year</u>	Company/Source: <u>Enstar</u>
Electric	\$ <u>100/month</u> <u>\$1200 year</u>	Company/Source: <u>ML+P</u>
Oil	\$ <u>—</u> /Gallons: _____	Company/Source: _____
Propane	\$ <u>—</u>	Company/Source: _____
Wood	\$ <u>—</u>	Company/Source: _____
Coal	\$ <u>—</u>	Company/Source: _____
Water	\$ <u>—</u>	Company/Source: _____
Sewer	\$ _____	Company/Source: _____
Refuse	\$ _____	Company/Source: _____
Other	\$ _____	Company/Source: _____

To the best of your knowledge, are you aware of any of the following conditions with respect to the subject property? If answer is "Yes," indicate the relevant item number and explain the condition on the Addendum/Amendment(s) to the Disclosure Statement.

➤ **Title:**

- Yes** **No**
1. Do you know of any existing, pending, or potential legal action(s) concerning the property?
 2. Do you know of any street or utility improvements planned that will affect the property?
 3. Road maintenance provided by? HOA
 4. Is the property currently rented or leased?
 - If Yes, expiration date: _____ / _____ / _____
 5. Is there a homeowner's association (HOA) for the property?
 - If Yes, HOA name: Maintain Ash Condominium Association HOA Telephone: (907) 244-3232
 - Mandatory Voluntary Inactive Monthly Dues Amount: \$ 272 per month
 - Are there any levied or pending assessments?
 - Who is responsible for issuing the resale certificate?
 - Name: Jim Magowan Telephone: (907) 244-3232

➤ **Setbacks/Restrictions:**

6. Have you been notified of any proposed zoning changes for the property?
7. Are you aware of features of the property shared in common with adjoining property owners, such as walls, fences, and driveways, whose use or responsibility for maintenance may affect the property?
8. Are there subdivision conditions, covenants, or restrictions?
9. Are you aware of any violations of building codes, zoning, setback requirements, subdivision covenants, borough, or city restrictions on this property?
10. Are you aware of any nonconforming uses of this property?

JR/ER 10/22/8 4012 Reka Drive, Anchorage, AK 99508 _____ / _____ / _____
 Seller's Initials Date Property Address Buyer's Initials Date

Additional Information (Continued):

- | | Yes | No |
|--|-------------------------------------|-------------------------------------|
| 11. Are you aware of any deed, or other private restrictions on the use of the property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 12. Are you aware of any variances being applied for, or granted, on this property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 13. Are you aware of any easements on the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| ➤ Encroachments: | | |
| 14. Does anything on your property encroach (extend) onto your neighbor's property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 15. Does anything on your neighbor's property encroach onto your property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| ➤ Environmental Concerns: | | |
| 16. Are you aware of any substances, materials, or products that may be an environmental hazard such as asbestos, formaldehyde, radon gas, lead-based paint, fuel or chemical storage tanks, contaminated soil, water or by-products from the production of methamphetamines on the subject property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 16a. Are you aware of any mildew or mold issues affecting this property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 17. Are you aware of any underground storage tanks on this property, other than previously referenced fuel or septic tanks? Number of tanks: _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 18. Are you aware if the property is in an avalanche zone/mudslide area? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 19. Are you aware if the property has flooded? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Flood zone designation: _____ | | |
| 20. Are you aware of any erosion/erosion zone or accretion affecting this property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 21. Are you aware of any damage to the property or any of the structures from flood, landslide, avalanche, high winds, fire, earthquake, or other natural causes? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 22. Have you ever filed an insurance claim for any environmental damage to the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 23. Are you aware of a waste disposal site or a gravel pit within a one-mile radius of the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| ➤ Soil Stability: | | |
| 24. Are you aware of any debris burial or filling on any portion of the property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 25. Are you aware of any permafrost or other soil problems which have caused settling, slippage, sliding, or heaving that affect the improvements of the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 26. Are you aware of any drainage, or grading problems that affect this property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| ➤ Construction, Improvements/Remodel: | | |
| 27. Have you remodeled, made any room additions, structural modifications, or improvements? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| If Yes, please describe. Was the work performed with necessary permits in compliance with building codes? | | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Was a final inspection performed, if applicable? | | |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 28. Has a fire ever occurred in the structure?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| ➤ Pest Control or Wood Destroying Organisms: | | |
| 29. Are you aware of any termites, ants, insects, squirrels, vermin, rodents, etc. in the structure?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| a. If Yes, what type? _____ | | |
| b. If Yes, where? _____ | | |
| 30. Has there been damage in the past resulting from termites, ants, insects, squirrels, rodents, etc. in the structure?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| a. If Yes, when? _____ | | |
| b. If Yes, what type? _____ | | |
| c. If Yes, where? _____ | | |
| d. If Yes, describe what was done to resolve the problem: _____ | | |
| ➤ Other: | | |
| 31. Are you aware of any murder or suicide having occurred on the property within the preceding 3 years?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 32. Are you aware of any human burial sites on the property?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

JR / 98 10/22/8 4012 Reka Drive, Anchorage, AK 99508 _____
 Seller's Initials Date Property Address Buyer's Initials Date

Additional Information (Continued):

Yes No

33. Noise

- a. Are you aware of any noise sources that may affect the property, including airplanes, trains, dogs, traffic, race tracks, neighbors, etc?
- b. If Yes, explain: _____

34. Pets

- a. Have there been any pets/animals in the house?
- b. If Yes, what kind? _____

I / We have completed this disclosure statement according to AS 34.70.010 - AS 34.70.200 and these instructions, and the statements are made in good faith and are true and correct to the best of my/our knowledge as of the date signed. I/We authorize any licensees involved or participating in this transaction to provide a copy of this statement to any person or entity in connection with any actual or anticipated transfer of the property or interest in the property.

Seller: Jason N. Ruard Date: 10-22-8
 Seller: Ein A. Ruard Date: 10/22/08

Buyer's Notice and Receipt of Copy

Transferee (Buyer) Awareness Notice: Under AS 34.70.050, Transferee (Buyer) is independently responsible for determining whether a person who has been convicted of a sex offense resides in the vicinity of the property that is the subject of the Transferee's (Buyer's) potential real estate transaction. This information is available at the following locations: Alaska State Trooper Posts, Municipal Police Departments, and on the State of Alaska, Department of Public Safety Internet site: www.dps.state.ak.us.

Transferee (Buyer) Awareness Notice: Under AS 34.70.050, Transferee (Buyer) is independently responsible for determining whether, in the vicinity of the property that is the subject of the transferee's potential real estate transaction, there is an agricultural facility or agricultural operation that might produce odor, fumes, dust, blowing snow, smoke, burning, vibrations, noise, insects, rodents, the operation of machinery including aircraft, and other inconveniences or discomforts as a result of lawful agricultural operations.

The Buyer is urged to inspect the property carefully and to have the property inspected by an expert. Buyer understands that there are aspects of the property of which the Seller may not have knowledge and that this disclosure statement does not encompass those aspects. Buyer also acknowledges that he/she has read and received a signed copy of this statement from the Seller or any licensee involved or participating in this transaction.

Buyer: _____ Date: _____

Buyer: _____ Date: _____

JR/ER 10/22/8 4012 Reka Drive, Anchorage, AK 99508 _____
 Seller's Initials Date Property Address Buyer's Initials Date

**Disclosure of Information and Acknowledgment
Lead-based Paint and/or Lead-based Paint Hazards**



This form authorized for use ONLY by active Real Estate Licensee Subscribers of Alaska Multiple Listing Service, Inc.

1 Address 4012 Reka Drive, Anchorage, AK 99508

2 Legal (the Property) Mountain Ash #G-2

3 **Lead Warning Statement**

4 Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978* is notified that such property
5 may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in
6 young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems,
7 and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is
8 required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession
9 and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is
10 recommended prior to purchase.

11 * EPA and HUD consider "residential dwellings built prior to 1978" to mean housing for which a construction permit was obtained (or if no permit was
12 obtained, housing in which construction was started) before January 1, 1978.

13 **Seller's Disclosure (initial)**

14 JR (a) Presence of lead-based paint and/or lead-based paint hazards (check one below):

15 Known lead-based paint and/or lead-based paint hazards are present in the housing (explain):
16 _____
17 _____

18 Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

19 JR (b) Records and Reports available to the seller (check one below):

20 Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based
21 hazards in the housing (list documents below):
22 _____
23 _____

24 Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

25 **Buyer's Acknowledgment (initial)**

26 _____ (c) Buyer has received copies of all information listed above.

27 _____ (d) Buyer has received the pamphlet *Protect Your Family From Lead in Your Home*.

28 _____ (e) Buyer has (check one below):

29 Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection of the
30 presence of lead-based paint or lead-based paint hazards; or

31 Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-
32 based paint hazards.

33 **Licensee's Acknowledgment (initial)**

34 [Signature] (f) Licensee has informed the seller of the seller's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to
35 ensure compliance.

36 **Certification of Accuracy**

37 The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is
38 true and accurate.

39
40 Buyer 1: _____ Date: _____ Seller 1: [Signature] Date: 10-22-08
41 Buyer 2: _____ Date: _____ Seller 2: [Signature] Date: 10/22/08
42 Buyer 3: _____ Date: _____ Seller 3: [Signature] Date: _____
43 Licensee: _____ Date: _____ Licensee: [Signature] Date: 10/22/08
Niel Thomas