



# SELLER'S PROPERTY DISCLOSURE STATEMENT EXHIBIT " A "



2007 Printing

For property located at 5724 Highway 138 SW Oxford, Georgia, 30057  
together with all improvements thereon ("Property")

**NOTICE TO BUYER AND SELLER:** This disclosure statement is designed to assist Seller in disclosing to prospective buyers material adverse facts relating to the physical condition of Property that may not be readily observable, disclosing historical information and past problems with Property, and identifying those fixtures/items that are included with the sale of Property. All questions are to be answered with respect to the above referenced Property.

IF THE ANSWERS TO ANY OF THE QUESTIONS LISTED BELOW ARE "YES," SELLER SHALL EXPLAIN IN DETAIL IN THE "ADDITIONAL EXPLANATIONS" OR IN DISCLOSURES SECTION, PAGE 5.

	Yes	No	Don't Know
<b>1. OCCUPANCY:</b>			
(a) Is Property vacant? If yes, how long has it been since Seller occupied Property? _____	_____	<u>X</u>	_____
(b) Are there any leases, written or verbal, on Property or any part thereof?	<u>X</u>	_____	_____
<b>2. SOIL, TREES, SHRUBS AND BOUNDARIES:</b>			
(a) Are there any landfills (other than foundation backfill), graves, mine shafts, trash dumps or wells (in use or abandoned) on Property?	_____	<u>X</u>	<u>X</u>
(b) Is there any sliding, settling (other than normal settling), earth movement, sinkholes, upheaval, or earth stability/expansive soil problems?	_____	<u>X</u>	_____
(c) Are there any diseased or dead trees on Property?	_____	_____	<u>X</u>
(d) Are there any encroachments (known or recorded), leases, unrecorded easements, or boundary line disputes?	_____	<u>X</u>	_____
<b>3. TERMITES, DRY-ROT, PESTS, AND WOOD-DESTROYING ORGANISMS:</b>			
(a) Is there any past or present damage to Property caused by infiltrating pests, termites, dry-rot, or other wood-destroying organisms?	_____	_____	<u>X</u>
(b) Is your Property currently under a transferable bond, warranty or other coverage for termites or other wood destroying organisms by a licensed pest control company? If yes, check type of coverage: <input type="checkbox"/> re-treatment and repair; or <input type="checkbox"/> re-treatment	_____	<u>X</u>	_____
(c) Is there a cost to transfer the bond, warranty or other coverage? If yes, what is the cost? \$ <u>N/A</u>	_____	_____	_____
(d) Is there a cost to maintain the bond, warranty or other coverage? If yes, what is the annual cost? \$ <u>N/A</u>	_____	_____	<u>X</u>
(e) Have any termite/pest control reports or treatments for Property been done in the last five (5) years?	_____	_____	<u>X</u>
(f) Does any dwelling or garage on Property have any untreated wood or exterior siding/cladding, such as rigid board insulation, foam plastic, synthetic stucco, hard coat stucco, wood or masonry siding (excluding brick), below grade or within six inches of finished grade?	_____	_____	<u>X</u>
<b>4. STRUCTURAL ITEMS, ADDITIONS AND ALTERATIONS:</b>			
(a) What year was the main residential dwelling constructed? <u>1980</u>			
(b) Has there been any movement, shifting, settling (other than normal settling), cracking, deterioration, or other structural problems with any dwelling or garage on Property?	_____	<u>X</u>	_____
(c) Has there been any additional structural bracing, underpinning, or other structural reinforcement added to any dwelling or garage on Property?	_____	<u>X</u>	_____
(d) Are there any problems with driveways, walkways, patios, or retaining walls on Property?	_____	<u>X</u>	_____
(e) Have there been any additions, structural changes, or any other major alterations to the original improvements on the Property?	_____	<u>X</u>	_____
(f) Has there been any work done on the Property where required permits and/or approvals (public or private) were not obtained?	_____	<u>X</u>	_____
(g) Has any work been done to Property that was not in compliance with building codes or zoning regulations?	_____	<u>X</u>	_____
(h) Does any part of the exterior siding or cladding of any dwelling or garage on Property consist of synthetic stucco?	_____	<u>X</u>	_____

**5. LEAD-BASED PAINT:** Was any part of the residential dwelling on Property constructed prior to 1978?  
 Yes  Don't Know  No (If no, proceed to paragraph 14.)  
If you have answered "Yes" or "Don't Know" the Lead-Based Paint Exhibit F54 must be executed by the parties and the Lead-Based Paint Pamphlet F55 must be provided to the buyer.

6. ROOF, GUTTERS AND DOWNSPOUTS:

- (a) Approximate age of roof: 3 years.
- (b) Has the roof, or any part thereof, been repaired during Sellers ownership?
- (c) Are there any roof leaks or other problems with the roof, roof flashing, gutters or downspouts?

Yes	No	Don't Know
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. DRAINAGE, FLOODING AND MOISTURE:

- (a) Has there been any water leakage, water accumulation, or dampness within the basement, crawl space or other parts of the main dwelling at or below grade?
- (b) Have any repairs been made to control any water or dampness problems in the basement, crawl space, or other parts of the main dwelling at or below grade?
- (c) Is the Property or any improvements thereon located in a flood zone?
- (d) Does water regularly stand on Property for more than one (1) day after it has rained?
- (e) Has there been any past flooding on Property?
- (f) Are there any problems with siding or exterior cladding, swelling, chipping, delaminating or retaining moisture?
- (g) Does mold appear on interior heated and cooled portions of any dwelling on Property other than on the walls, floors or ceilings of showers, sinks, and bathtubs?

Yes	No	Don't Know
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

8. PLUMBING RELATED ITEMS:

- (a) What is your drinking water source:  public  private  well on property
- (b) If your drinking water is from a well, has it been tested within the past twelve (12) months?
- (c) Do you have a water softener, filter or purifier? If yes,  leased  owned
- (d) What is the type of sewage system:  public  private  septic tank
- (e) Is the main dwelling served by sewage pump or lift system?
- (f) Do you know if any septic tank or cesspool on Property has ever been professionally serviced? If yes, please give the date of last service: July 2007
- (g) Do you know of any past or present leaks, backups, or other similar problems relating to any of the plumbing, water and/or sewage-related items?
- (h) Is there any polybutylene plumbing, other than primary service line, on Property?

Yes	No	Don't Know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

9. OTHER SYSTEMS AND COMPONENTS:

- (a) What type of heating system(s) serve the main dwelling?  gas  electric  water pump  other
- (b) What is the approximate age of heating system(s): 10 years
- (c) What type of air conditioning system(s) serve the main dwelling?  gas  electric  other
- (d) What is the approximate age of air conditioning system(s) \_\_\_\_\_ years
- (e) Is any portion of the main dwelling not served by a central or zoned heating and/or air conditioning system?
- (f) How is water heated in the main dwelling?  electric  gas  solar
- (g) What is the approximate age of water heater: 4 years
- (h) Does the main dwelling have aluminum wiring other than the primary service line?
- (i) Is there any system or appliance which is leased or for which the buyer must pay a transfer fee to continue to use? If yes, what is the transfer fee? \$ \_\_\_\_\_  
If yes, what is the current use fee to be paid by the Buyer? \$ \_\_\_\_\_
- (j) Are any fireplaces not working or in need of repair?
- (k) When was each fireplace, wood stove or chimney/flue last cleaned? Date(s): \_\_\_\_\_

Yes	No	Don't Know
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

10. TOXIC SUBSTANCES:

- (a) Are there any underground tanks, toxic or hazardous substances on Property (structure or soil) such as asbestos, urea-formaldehyde, methane gas, radioactive material, radon, mold, benzene or other environmental contaminants?
- (b) Has Property ever been tested for radon, lead, mold or any other potentially toxic substances?

Yes	No	Don't Know
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

11. COVENANTS, FEES AND ASSESSMENTS:

- (a) Is Property part of a condominium, community association or subject to covenants, conditions and restrictions (CC & Rs)?
- (b) Is there a mandatory community association fee or assessment? If yes, what is the amount? \$ N/A per \_\_\_\_\_  
Is there an initiation fee? If yes, what amount? \$ N/A
- (c) Are there any recreational facilities in the community for which the obligation to pay and the right to use are optional? If yes, please describe the nature of the facilities and the optional fee or charge. N/A
- (d) In purchasing Property, will any initiation, transfer, or other similar fee be owed to the Association? If yes, what is the amount? \$ N/A
- (e) Are there any special assessments approved by but yet not owing or due to a community Association that are not yet owed or due?

Yes	No	Don't Know
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**12. OTHER MATTERS:**

- (a) Have there been any inspections of Property in the past year?  
If yes, by whom and of what type? \_\_\_\_\_
- (b) Does Property contain any building products which are or have been the subject of class action lawsuits, litigation or legal claims alleging that the product is defective?  
If yes, please identify the product or products and the general location of each on Property: \_\_\_\_\_
- (c) Is there or has there been in the past any litigation involving Property or any improvement therein alleging negligent or improper construction defects, termites, and/or title problems?
- (d) Has there been any award or payment of money in lieu of repairs for such a defective building product?
- (e) Has any release been signed that would limit a future owner from making any claims in connection with Property?
- (f) Has there been any fire, flood or wind damage which required repairs to Property in excess of \$500.00?
- (g) Approximately how many insurance claims have been filed on Property since you owned it?
- (h) Are any fixtures or appliances included in the sale in need of repair?
- (i) Have any repairs been made to the electrical, plumbing, or heating and air condition systems, or any part thereof?
- (j) Was any dwelling on Property or portion thereof (excluding mobile, modular and manufactured dwelling) moved to the site from another location?

Yes	No	Don't Know
_____	<u>X</u>	_____
_____	<u>X</u>	_____
_____	<u>X</u>	_____
_____	<u>X</u>	_____
_____	<u>X</u>	_____
_____	<u>X</u>	_____
_____	<u>X</u>	_____
_____	<u>X</u>	_____
_____	<u>X</u>	_____
_____	<u>X</u>	_____

**13. FIXTURES/ITEMS:** (Check (☑) only those fixtures/items below that are included in the sale of Property. Unless otherwise indicated, if there is more than one item (such as a second refrigerator or two chandeliers or three smoke detectors), all such fixtures/items checked are included in the sale of Property. Those fixtures/items listed below that are not checked shall not be included in the sale of Property.

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Air Conditioning Window Unit         | <input type="checkbox"/> Garage Door Opener                                      | <input type="checkbox"/> Speakers (Built-In)                             |
| <input type="checkbox"/> Air Purifier                                    | <input type="checkbox"/> Remote Control  | <input type="checkbox"/> Sprinkler System                                |
| <input type="checkbox"/> Alarm System (Burglar)                          | <input type="checkbox"/> Garbage Disposal  | <input type="checkbox"/> Statuary  |
| <input type="checkbox"/> Leased <input type="checkbox"/> Owned           | <input type="checkbox"/> Gas Grille  | <input type="checkbox"/> Stepping Stones                                 |
| <input type="checkbox"/> Alarm System (Smoke/Fire)                       | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing         | <input type="checkbox"/> Storage Building                                |
| <input type="checkbox"/> Leased <input type="checkbox"/> Owned           | <input type="checkbox"/> Gazebo  | <input type="checkbox"/> Stove   |
| <input type="checkbox"/> Arbor   | <input type="checkbox"/> Hot Tub   | <input type="checkbox"/> Gas <input type="checkbox"/> Electric           |
| <input type="checkbox"/> Attic Fan (Whole House Fan)                     | <input type="checkbox"/> Humidifier  | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing |
| <input type="checkbox"/> Attic Ventilator Fan                            | <input type="checkbox"/> Ice Maker   | <input type="checkbox"/> Sump Pump                                       |
| <input type="checkbox"/> Awning  | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing         | <input type="checkbox"/> Surface Unit Cook Top                           |
| <input type="checkbox"/> Basketball Post & Goal                          | <input type="checkbox"/> Intercom  | <input type="checkbox"/> Gas <input type="checkbox"/> Electric           |
| <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Jetted Tub  | <input type="checkbox"/> Swimming Pool                                   |
| <input type="checkbox"/> Birdhouses                                      | <input type="checkbox"/> Landscaping Lights                                      | <input type="checkbox"/> Above Ground                                    |
| <input type="checkbox"/> Boat Dock                                       | <input type="checkbox"/> Light Fixtures  | <input type="checkbox"/> Swimming Pool Equipment                         |
| <input type="checkbox"/> Carbon Monoxide Detector                        | (Except Chandeliers)   | (List below)   |
| <input checked="" type="checkbox"/> Ceiling Fan                          | <input type="checkbox"/> Mailbox   | <input type="checkbox"/> Swing Set                                       |
| <input type="checkbox"/> Chandelier                                      | <input type="checkbox"/> Microwave Oven  | <input type="checkbox"/> Switch Plate Covers                             |
| <input type="checkbox"/> Closet Shelving System                          | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing         | <input type="checkbox"/> Telephone Jacks/Wires                           |
| <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Mirror (Attached)                                       | <input type="checkbox"/> Television Antenna                              |
| <input type="checkbox"/> Dehumidifier                                    | <input checked="" type="checkbox"/> Outbuilding                                  | <input type="checkbox"/> Television Cable/Jacks                          |
| <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Outdoor Bench   | <input type="checkbox"/> Thermostat (Programmable)                       |
| <input type="checkbox"/> Dishwasher                                      | <input type="checkbox"/> Playhouse   | <input type="checkbox"/> Trash Compactor                                 |
| <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing | <input type="checkbox"/> Porch swing   | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing |
| <input type="checkbox"/> Dog House                                       | <input type="checkbox"/> Propane Gas Tanks                                       | <input type="checkbox"/> Tree House                                      |
| <input type="checkbox"/> Door & Window Hardware                          | <input type="checkbox"/> Above ground <input checked="" type="checkbox"/> Buried | <input type="checkbox"/> Trellis   |
| <input type="checkbox"/> Dryer   | <input type="checkbox"/> Leased <input type="checkbox"/> Owned                   | <input type="checkbox"/> Vacuum System (Built-In)                        |
| <input type="checkbox"/> Gas <input type="checkbox"/> Electric           | <input type="checkbox"/> Radio (Built-In)  | <input type="checkbox"/> Vacuum Attachments                              |
| <input type="checkbox"/> Fence (Invisible)                               | <input type="checkbox"/> Refrigerator  | <input checked="" type="checkbox"/> Vent Hood                            |
| <input type="checkbox"/> Fence Pet Collar                                | <input type="checkbox"/> Satellite Dish/Receiver                                 | <input type="checkbox"/> Washing Machine                                 |
| <input type="checkbox"/> Fireplace                                       | <input type="checkbox"/> Sauna   | <input type="checkbox"/> Water Purification System                       |
| <input type="checkbox"/> Gas Logs  | <input type="checkbox"/> Septic Pump   | <input type="checkbox"/> Water Softener System                           |
| <input type="checkbox"/> Screen/Door                                     | <input type="checkbox"/> Shelving Unit & System                                  | <input type="checkbox"/> Weather Vane                                    |
| <input checked="" type="checkbox"/> Wood Burning Insert                  | <input type="checkbox"/> Built-In <input type="checkbox"/> Free Standing         | <input type="checkbox"/> Well Pump                                       |
| <input type="checkbox"/> Flag Pole                                       | <input type="checkbox"/> Shower Head/Sprayer                                     | <input type="checkbox"/> Window Screens                                  |
|  | <input type="checkbox"/> Smoke Detector  | <input type="checkbox"/> Window Treatments                               |
|  | <input type="checkbox"/> Battery Operated <input type="checkbox"/> Hard Wired    | <input type="checkbox"/> Wine Cooler                                     |

Other fixtures/items included in the sale of Property shall be: \_\_\_\_\_

Other fixtures/items not included in the sale of Property shall be: \_\_\_\_\_

The common law of fixtures shall apply to fixtures not addressed herein. Those fixtures/items that are not included in the sale of Property shall remain Property of Seller and shall be removed prior to closing or the transfer of possession of Property to Buyer, whichever is later. Seller shall lose the right to remove any such fixtures/items not timely removed. In removing all fixtures/items, Seller shall use reasonable care to prevent damage and, if necessary, to restore Property to its original condition.

14. AGRICULTURAL DISCLOSURE: Is Property within, partially within, or adjacent to any property zoned or identified on an approved county land use plan as agricultural or forestry use?  Yes  No  Don't Know

It is the policy of this state and this community to conserve, protect, and encourage the development and improvement of farm and forest land for the production of food, fiber, and other products, and also for its natural and environmental value. This notice is to inform prospective property owners or other persons or entities leasing or acquiring an interest in real property that property in which they are about to acquire an interest lies within, partially within, or adjacent to an area zoned, used, or identified for farm and forest activities and that farm and forest activities occur in the area. Such farm and forest activities may include intensive operations that cause discomfort and inconveniences that involve, but are not limited to, noises, odors, fumes, dust, smoke, insects, operations of machinery during any 24 hour period, storage and disposal of manure, and the application by spraying or otherwise of chemical fertilizers, soil amendments, herbicides, and pesticides. One or more of these inconveniences may occur as the result of farm or forest activities which are in conformance with existing laws and regulations and accepted customs and standards.

(a) ADDITIONAL EXPLANATIONS OR DISCLOSURES:

MARK BOX IF ADDITIONAL PAGES ARE ATTACHED.

(b) SELLER'S REPRESENTATION:

To the best of Seller's knowledge and belief, the information contained in this Seller's Property Disclosure Statement is accurate and complete as of the date signed by Seller. It should not be a substitute for Buyer inspecting Property or obtaining any warranties with regard to Property that Buyer may wish to obtain. Seller hereby authorizes Broker to provide this Seller's Property Disclosure Statement to prospective buyers of Property and to real estate Brokers and their affiliated Licensees. Seller agrees to promptly update this Seller's Property Disclosure Statement and to provide any Buyer and Broker with a revised copy of the same if there are any material changes in the answers to the questions contained herein.

Is each individual named below a U.S. Citizen or resident alien?  Yes  No  
Has each individual named below been a Georgia resident for the past two years?  Yes  No  
Has Property been Seller's primary residence for at least two of the last five years?  Yes  No

Seller: Patty R. Plunkett

Date: 9-11, 2007

Seller: Alvin Trent

Date: 9-11, 2007

(c) RECEIPT AND ACKNOWLEDGMENT BY BUYER:

I acknowledge receipt of this Seller's Property Disclosure Statement. I understand that, except as stated in the Purchase and Sale Agreement, Property is being sold in its present condition, without warranties or guarantees of any kind by Seller or Brokers. No representations concerning the condition of Property are being relied upon by Buyer except as disclosed herein or stated in the Purchase and Sale Agreement.

Buyer: \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_\_\_

Buyer: \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_\_\_