

ECIAR 14 Pg 1/5

MLS# \_\_\_\_\_

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# Iowa - Residential Property Seller Disclosure Statement



(To be completed by Seller at time of listing; completed form to be provided to Buyer prior to Buyer making a written offer to purchase.)

**Property Address:** 14880 208th Street, Zwingle, IA 52079

(Sellers(s): please print property address including City, State and Zip Code)

**Property Owner:** Elizabeth Jean Dunne Revocable Trust c/o Lisa J. Clark & Kimberly A. Callahan

(Sellers(s): please print property ownership)

**Purpose:** Completion of Section 1 of this form is required under Chapter 558A of the Iowa code which mandates the Seller(s) disclose condition and information about the property, unless exempt:

## Exempt Properties:

Properties exempted from the Seller's disclosure requirement include (IA Code 558A): Bare ground; property containing 5 or more dwellings units; court ordered transfers; transfers by a power of attorney; foreclosures; lenders selling foreclosed properties; transfers by a fiduciary in the course of the administration of a decedent's estate, guardianship, conservatorship, or trust. This exemption shall not apply to a transfer of real estate in which the fiduciary is a living natural person and was an occupant in possession of the real estate at any time within the twelve consecutive months immediately preceding the date of transfer; between joint tenants, or tenants in common; to or from any governmental division; quit claim deeds; intra family transfers; between divorcing spouses; commercial or agricultural property which has no dwellings. Seller(s) certifies that the property is exempt from the requirement(s) of Iowa Code 558A because one of the above exemptions apply. **Seller acknowledges requirement that Buyer be provided with the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health. Buyer acknowledges receipt of the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.**

If claiming an exemption, sign here and stop.

Kimberly A. Callahan  
 Seller \_\_\_\_\_ Date \_\_\_\_\_  
Lisa J. Clark  
 Seller \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
 Buyer \_\_\_\_\_ Date \_\_\_\_\_  
 \_\_\_\_\_  
 Buyer \_\_\_\_\_ Date \_\_\_\_\_

## INSTRUCTIONS TO SELLER(S):

1. Complete this form yourself and fill in all mandatory blanks.
2. Report known conditions materially affecting the property and utilize ordinary care in obtaining the information.
3. Provide information in good faith and make all reasonable effort to ascertain the required information.
4. Additional pages or reports may be attached.
5. If some items do not apply to the property, indicate that it is not applicable ( N/A ).
6. If the required information is **unknown** or is **unavailable** following a reasonable effort, use an approximation of the information, or indicate that the information is **unknown** ( UNK ). All **approximations** must be identified as **approximations** ( AP ).
7. Keep a copy of this statement with your other important papers.

## SELLER(S) DISCLOSURE STATEMENT:

Seller discloses the following information regarding the property and certifies this information is true and accurate to the best of Seller's or Seller's Representative's knowledge as of the date signed. Seller authorizes Agent to provide a copy of this statement to any person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. This statement shall not be a warranty of any kind by Seller or Seller's Agent and shall not be intended as a substitute for any inspection or warranty the purchaser may wish to obtain. The following are representations made by the Seller and are not the representations of Agent.

**The Agent has no independent knowledge of the condition of the property except that which is written on this form. Seller advises Buyer to obtain independent inspections relevant to Buyer**

## SECTION 1 IS MANDATORY UNDER IOWA CHAPTER 558A EACH AND EVERY LINE MUST BE ADDRESSED AND MARKED

### DISCLOSURES:

The Seller(s) has owned the property since: \_\_\_\_\_

1. **Basement/Foundation:** Any known water or other problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UNK
2. **Roof:** Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UNK  
 Any known repairs/replacements ? ..... ☐ Yes ☐ No ☐ N/A ☐ UNK  
 If yes, date of: (check all that apply) ☐ repairs \_\_\_\_\_ ☐ replacement \_\_\_\_\_

To be completed  
By Client ONLY

Seller(s) Initials

EC JC

Buyer(s) Initials

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3. **Well and Pump:** Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 Any known repairs/replacements? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date of: (check all that apply) ☐ repairs \_\_\_\_\_ ☐ replacement \_\_\_\_\_  
 Well Information (type/depth/diameter/age) \_\_\_\_\_ ☐ N/A ☐ UN  
 Has the water been tested? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date of last report: \_\_\_\_\_ and results: \_\_\_\_\_  
 \_\_\_\_\_
4. **Septic Tanks/Drain Fields:** Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 Location of tank \_\_\_\_\_ Age \_\_\_\_\_ ☐ N/A ☐ UN  
 Has the system been pumped within the last 3 years? ☐ Yes-Date: \_\_\_\_\_ ☐ No ☐ N/A ☐ UN  
 Has the system been inspected by an IA DNR Certified Inspector? ☐ Yes-Date: \_\_\_\_\_ ☐ No ☐ N/A ☐ UN
5. **Sewer System:** Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 Any known repairs/replacements? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date of: (check all that apply) ☐ repairs \_\_\_\_\_ ☐ replacement \_\_\_\_\_
6. **Heating System(s):** Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 Any known repairs/replacements? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date of: (check all that apply) ☐ repairs \_\_\_\_\_ ☐ replacement \_\_\_\_\_
7. **Central Cooling System(s):** Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 Any known repairs/replacements? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date of: (check all that apply) ☐ repairs \_\_\_\_\_ ☐ replacement \_\_\_\_\_
8. **Plumbing System(s):** Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 Any known repairs/replacements? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date of: (check all that apply) ☐ repairs \_\_\_\_\_ ☐ replacement \_\_\_\_\_
9. **Electrical System(s):** Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 Any known repairs/replacements? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date of: (check all that apply) ☐ repairs \_\_\_\_\_ ☐ replacement \_\_\_\_\_
10. **Pest Infestation** (wood destroying insects, bats, snakes, rodents, destructive animals, etc.):  
 Any known problems? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date(s) of treatment: \_\_\_\_\_  
 Previous Infestation/structural damage? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
 If yes, date of: (check all that apply) ☐ repairs \_\_\_\_\_ ☐ replacement \_\_\_\_\_

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KC SC

Buyer(s) Initials

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11. **Asbestos:** Any known to be present in the structure? ..... ☐ Yes ☐ No ☐ N/A ☐ UN

12. **Radon:** Any known tests for the presence of radon gas?..... ☐ Yes ☐ No ☐ N/A ☐ UN  
If yes, date of last report: \_\_\_\_\_ and results: \_\_\_\_\_ pCi/L

13. **Lead Based Paint:** Any known to be present in the structure? ..... ☐ Yes ☐ No ☐ N/A ☐ UN

14. **Lead Service Lines:** Are there currently, or have there ever been, any  
lead water service lines present?..... ☐ Yes ☐ No ☐ N/A ☐ UN  
If yes, please provide more information \_\_\_\_\_

15. Any known encroachments, easements, "common areas" (facilities like pools, tennis courts, walkways, or other areas co-owned with others), zoning matters, nonconforming uses, or a Homeowners Association which has any authority over the property? ..... ☐ Yes ☐ No ☐ N/A ☐ UN

16. Features of the property known to be shared in common with adjoining landowners, such as walls, fences, roads and driveways whose use or maintenance responsibility may have an effect on the property? ..... ☐ Yes ☐ No ☐ N/A ☐ UN

17. **Structural Damage:** Any known structural damage? ..... ☐ Yes ☐ No ☐ N/A ☐ UN

18. **Physical Problems:** Any known settling, flooding, drainage or grading problems? ... ☐ Yes ☐ No ☐ N/A ☐ UN

19. **Flood Plain:** Is any of the property located in a flood plain? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
If yes, what is the flood plain designation? \_\_\_\_\_

20. **Zoning:** What is the zoning classification of the property? \_\_\_\_\_ ☐ N/A ☐ UN

21. **Covenants:** Is the property subject to restrictive covenants? ..... ☐ Yes ☐ No ☐ N/A ☐ UN  
If yes, attach a copy OR state where true, current copy of the covenants can be obtained: (check all that apply)  
☐ Attached to this property disclosure ☐ At the \_\_\_\_\_ county recorders office  
☐ Other: \_\_\_\_\_

You **MUST** explain any "YES" response(s) for above questions. Use additional sheets as necessary:

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**SECTION 2, OPTIONAL INFORMATION:** This information is optional and not required by statute. Section 2 is for the convenience of Buyer/Seller and is not mandatory.

22. Has there been a property/casualty loss resulting in an insurance claim in excess of \$5,000? ☐ Yes ☐ No ☐ N/A ☐ UNK  
If yes, indicate Type: \_\_\_\_\_ Date of repairs: \_\_\_\_\_

23. **Roof:** Type of Exterior Roofing: \_\_\_\_\_ or ☐ UNK Year Installed: \_\_\_\_\_ or ☐ UNK

24. **Attic Insulation:** Type: \_\_\_\_\_ ☐ UNK Amount: \_\_\_\_\_ ☐ UNK  
R-Value: \_\_\_\_\_ ☐ UNK

25. **Water Supply:** Type: ☐ Public ☐ Community ☐ Private Well ☐ Shared Well  
Any known problems?..... ☐ Yes ☐ No ☐ N/A ☐ UNK

26. **Sewer Type:** Type: ☐ Public ☐ Community ☐ Private

27. **Ground Water Hazard Statement:** Are there any known (Check all that apply): ☐ Wells ☐ Geo-Thermal  
☐ Solid Waste Disposal ☐ Hazardous Waste ☐ Underground Storage Tanks ☐ Private Burial Site  
If yes, please explain: \_\_\_\_\_

28. **Appliances/Systems/Services** (check all that apply):

|                   | Included?                           | Working?                                                                |                          |                          |                                    | Included?                  | Working?                 |                          |                          |
|-------------------|-------------------------------------|-------------------------------------------------------------------------|--------------------------|--------------------------|------------------------------------|----------------------------|--------------------------|--------------------------|--------------------------|
|                   |                                     | Yes                                                                     | No                       | Unk                      |                                    |                            | Yes                      | No                       | Unk                      |
| Refrigerator      | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Lawn Sprinkler System              | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Range/Oven        | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Pool Heater Wall liner & Equipment | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Microwave         | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | EV Charger                         | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Dishwasher        | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Carbon Monoxide Detector           | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Disposal          | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Smoke Alarms                       | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hood/Fan          | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Gar. Door Opener                   | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Washer            | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Gar. Opener Remotes                | <input type="checkbox"/> # | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Dryer             | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Solar Panels                       | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Window A/C        | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Furn. Humidifier                   | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sauna/Hot Tub     | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Air Exchanger                      | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attic Fan         | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Whole House Dehumidifier           | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Landscape Lights  | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Fireplace/Chimney                  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ceiling Fan(s)    | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Windows                            | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Water Filter Sys. | <input type="checkbox"/>            | Leased <input type="checkbox"/> Y <input type="checkbox"/> N            | <input type="checkbox"/> | <input type="checkbox"/> | Window Treatments                  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Water Softener    | <input type="checkbox"/>            | Leased <input type="checkbox"/> Y <input type="checkbox"/> N            | <input type="checkbox"/> | <input type="checkbox"/> | Alarm System                       | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| LP Tank           | <input checked="" type="checkbox"/> | Leased <input checked="" type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> | Water Heater                       | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sump Pump         | <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"/> |
| Video Door Bell   | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Invisible Dog Fence Transmitter    | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Storage Shed      | <input type="checkbox"/>            | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | Invisible Pet Collars              | <input type="checkbox"/> # | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**All Household Appliances are sold in working order except as noted and are not under warranty beyond the date of closing.** Warranties may be available for purchase from independent warranty companies

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29. **Mold:** Has property been tested for the presence of mold? ..... ☐ Yes ☐ No ☐ N/A ☐ UNK  
If yes, date of test: \_\_\_\_\_ (attach results)

30. **Heating System(s):** Type: \_\_\_\_\_ or ☐ UNK Year Installed: \_\_\_\_\_ or ☐ UNK

31. **Cooling System(s):** Type: \_\_\_\_\_ or ☐ UNK Year Installed: \_\_\_\_\_ or ☐ UNK

32. **Radon System:** Is a radon system installed?..... ☐ Yes ☐ No ☐ N/A ☐ UNK  
If yes, is the Radon System: ☐ Passive with a pipe ☐ Active with a fan

33. **Any improvements made by seller since purchase?** ..... ☐ Yes ☐ No ☐ N/A ☐ UNK  
If yes, please explain. Use additional sheets as necessary: \_\_\_\_\_

34. **Is seller or seller's representative related to the listing agent or broker?** ..... ☐ Yes ☐ No ☐ N/A ☐ UNK

35. **Has the Seller received any notice of assessment, or have outstanding assessments with a government Municipality or HOA?** ..... ☐ Yes ☐ No ☐ N/A ☐ UNK  
If yes, please explain: \_\_\_\_\_

36. **Received notice of code or zoning violations from any municipality?** ..... ☐ Yes ☐ No ☐ N/A ☐ UNK  
If yes, please explain: \_\_\_\_\_

37. **Association Fees;** Yearly \$ \_\_\_\_\_ ..... ☐ N/A ☐ UNK  
List items covered by fees: \_\_\_\_\_

38. **Are you aware of current or previous bed bugs, bats, rodent infestations or defects caused by animal, reptile or insect infestations, including infestations impacting trees, such as, but not limited to Emerald Ash Borer?** ☐ Yes ☐ No ☐ N/A ☐ UNK  
If yes, please explain: \_\_\_\_\_

39. **Electric Service Provider** \_\_\_\_\_ **Gas/Propane Service Provider** \_\_\_\_\_  
**Current Internet Provider** \_\_\_\_\_

40. **Any Transferable Contracts?** (e.g. Security System, Home Warranty, Pest Treatment, Conservation Reserve or Forest Reserve Programs, etc.) \_\_\_\_\_

**Disclosures must be signed by all parties to the transaction**

**SELLER(S) DISCLOSURE:** Seller(s) disclose the information regarding this property based on information known or reasonably available to the Seller(s). The Seller(s) certifies that as of the date signed, this information is true and accurate to the best of my/our knowledge. If any changes occur between the date Seller(s) completes this form and the date of closing which would result in any of the above disclosures being inaccurate, Seller(s) shall immediately disclose such changes to Buyer(s). Seller acknowledges requirement that Buyer be provided with the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.

Lisa J. Clark  
Seller  
dotloop verified  
10/06/26 11:22 AM  
CDT  
OCPT-GU45-WRII-ICVS  
Date

\_\_\_\_\_  
Seller Date

**BUYER(S) ACKNOWLEDGEMENT:** Buyer(s) acknowledges receipt of a copy of this Real Estate Disclosure Statement. This statement is not intended to be a warranty or to substitute for any inspection the Buyer(s) may wish to obtain. **Buyer(s) hereby acknowledges receipt of a copy of this Real Estate Disclosure Statement. This statement is not intended to be a warranty or substitute for any inspection the buyer(s) may wish to obtain. Buyer acknowledges receipt of the "Iowa Radon Home-Buyers and Sellers Fact Sheet" prepared by the Iowa Department of Public Health.**

\_\_\_\_\_  
Buyer Date

\_\_\_\_\_  
Buyer Date