

**SELLER DISCLOSURE STATEMENT
IMPROVED PROPERTY**

SELLER: Ronald N Pace Patti Ann Pace
Seller Seller

To be used in transfers of improved residential real property, including residential dwellings up to four units, new construction, dwellings in a residential common interest community not subject to a public offering statement, condominiums not subject to a public offering statement, certain timeshares, and manufactured and mobile homes. See RCW Chapter 64.06 for further information.

INSTRUCTIONS TO THE SELLER

Please complete the following form. Do not leave any spaces blank. If the question clearly does not apply to the property check "NA." If the answer is "yes" to any asterisked (*) item(s), please explain on attached sheets. Please refer to the line number(s) of the question(s) when you provide your explanation(s). For your protection you must date and initial each page of this disclosure statement and each attachment. Delivery of the disclosure statement must occur not later than five (5) business days, unless otherwise agreed, after mutual acceptance of a written purchase and sale agreement between Buyer and Seller.

NOTICE TO THE BUYER

THE FOLLOWING DISCLOSURES ARE MADE BY THE SELLER ABOUT THE CONDITION OF THE PROPERTY LOCATED AT 3632 Critter Way, CITY KEttle Falls, STATE WA, ZIP 99141, COUNTY Stevens ("THE PROPERTY") OR AS LEGALLY DESCRIBED ON THE ATTACHED EXHIBIT A.

SELLER MAKES THE FOLLOWING DISCLOSURES OF EXISTING MATERIAL FACTS OR MATERIAL DEFECTS TO BUYER BASED ON SELLER'S ACTUAL KNOWLEDGE OF THE PROPERTY AT THE TIME SELLER COMPLETES THIS DISCLOSURE STATEMENT. UNLESS YOU AND SELLER OTHERWISE AGREE IN WRITING, YOU HAVE THREE (3) BUSINESS DAYS FROM THE DAY SELLER OR SELLER'S AGENT DELIVERS THIS DISCLOSURE STATEMENT TO YOU TO RESCIND THE AGREEMENT BY DELIVERING A SEPARATELY SIGNED WRITTEN STATEMENT OF RESCISSION TO SELLER OR SELLER'S AGENT. IF THE SELLER DOES NOT GIVE YOU A COMPLETED DISCLOSURE STATEMENT, THEN YOU MAY WAIVE THE RIGHT TO RESCIND PRIOR TO OR AFTER THE TIME YOU ENTER INTO A PURCHASE AND SALE AGREEMENT.

THE FOLLOWING ARE DISCLOSURES MADE BY SELLER AND ARE NOT THE REPRESENTATIONS OF ANY REAL ESTATE LICENSEE OR OTHER PARTY. THIS INFORMATION IS FOR DISCLOSURE ONLY AND IS NOT INTENDED TO BE A PART OF ANY WRITTEN AGREEMENT BETWEEN BUYER AND SELLER.

FOR A MORE COMPREHENSIVE EXAMINATION OF THE SPECIFIC CONDITION OF THIS PROPERTY YOU ARE ADVISED TO OBTAIN AND PAY FOR THE SERVICES OF QUALIFIED EXPERTS TO INSPECT THE PROPERTY, WHICH MAY INCLUDE, WITHOUT LIMITATION, ARCHITECTS, ENGINEERS, LAND SURVEYORS, PLUMBERS, ELECTRICIANS, ROOFERS, BUILDING INSPECTORS, ON-SITE WASTEWATER TREATMENT INSPECTORS, OR STRUCTURAL PEST INSPECTORS. THE PROSPECTIVE BUYER AND SELLER MAY WISH TO OBTAIN PROFESSIONAL ADVICE OR INSPECTIONS OF THE PROPERTY OR TO PROVIDE APPROPRIATE PROVISIONS IN A CONTRACT BETWEEN THEM WITH RESPECT TO ANY ADVICE, INSPECTION, DEFECTS OR WARRANTIES.

Seller is / is not occupying the Property.

I. SELLER'S DISCLOSURES:

If you answer "Yes" to a question with an asterisk (), please explain your answer and attach documents, if available and not otherwise publicly recorded. If necessary, use an attached sheet.

	YES	NO	DON'T KNOW	N/A
1. TITLE				
A. Do you have legal authority to sell the property? If no, please explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*B. Is title to the property subject to any of the following?				
(1) First right of refusal	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Option	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) Lease or rental agreement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) Life estate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*C. Are there any encroachments, boundary agreements, or boundary disputes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*D. Is there a private road or easement agreement for access to the property?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*E. Are there any rights-of-way, easements, or access limitations that may affect the Buyer's use of the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*F. Are there any written agreements for joint maintenance of an easement or right-of-way?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*G. Is there any study, survey project, or notice that would adversely affect the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*H. Are there any pending or existing assessments against the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
*I. Are there any zoning violations, nonconforming uses, or any unusual restrictions on the property that would affect future construction or remodeling?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

R.P 7-29-24 PP July 29, 2024
SELLER'S INITIALS Date SELLER'S INITIALS Date

Form 17
Seller Disclosure Statement
Rev. 8/21
Page 2 of 6

**SELLER DISCLOSURE STATEMENT
IMPROVED PROPERTY**

(Continued)

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- | | YES | NO | DON'T KNOW | N/A | 54 |
|---|-------------------------------------|-------------------------------------|--------------------------|--------------------------|----|
| *J. Is there a boundary survey for the property? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 55 |
| *K. Are there any covenants, conditions, or restrictions recorded against the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 56 |

NOTICE TO BUYER: Covenants or deed restrictions based on race, creed, sexual orientation, or other protected class were voided by RCW 49.60.224 and are unenforceable. Washington law allows for the illegal language to be struck by bringing an action in superior court or by the free recording of a restrictive covenant modification document. Many county auditor websites provide a short form with instructions on this process.

2. WATER 63

A. Household Water 64

- (1) The source of water for the property is: Private or publicly owned water system 65
 Private well serving only the subject property Other water system 66
 *If shared, are there any written agreements? *house + land 37 acres shared* 67
- * (2) Is there an easement (recorded or unrecorded) for access to and/or maintenance of the water source? *NEIGHBORS* 68
 69
- * (3) Are there any problems or repairs needed? 70
- (4) During your ownership, has the source provided an adequate year-round supply of potable water? 71
 If no, please explain: _____ 72
- * (5) Are there any water treatment systems for the property? 73
 If yes, are they: Leased Owned 74
- * (6) Are there any water rights for the property associated with its domestic water supply, such as a water right permit, certificate, or claim? 75
 (a) If yes, has the water right permit, certificate, or claim been assigned, transferred, or changed? 76
 (b) If yes, has all or any portion of the water right not been used for five or more successive years? 77
 78
- * (7) Are there any defects in the operation of the water system (e.g. pipes, tank, pump, etc.)? 79

B. Irrigation Water 80

- (1) Are there any irrigation water rights for the property, such as a water right permit, certificate, or claim? 81
 82
- * (a) If yes, has all or any portion of the water right not been used for five or more successive years? 83
 84
- * (b) If so, is the certificate available? (If yes, please attach a copy.) 85
- * (c) If so, has the water right permit, certificate, or claim been assigned, transferred, or changed? 86
- * (2) Does the property receive irrigation water from a ditch company, irrigation district, or other entity? 87
 If so, please identify the entity that supplies water to the property: _____ 88
 _____ 89

C. Outdoor Sprinkler System 90

- (1) Is there an outdoor sprinkler system for the property? 91
- * (2) If yes, are there any defects in the system? 92
- * (3) If yes, is the sprinkler system connected to irrigation water? 93

3. SEWER/ON-SITE SEWAGE SYSTEM 94

A. The property is served by: 95

- Public sewer system On-site sewage system (including pipes, tanks, drainfields, and all other component parts) 96
 Other disposal system 97
 Please describe: *2 Septic systems on property - one not connected* 98

- B. If public sewer system service is available to the property, is the house connected to the sewer main? 99
 100

If no, please explain: _____ 101

R.P 7-29-24
SELLER'S INITIALS Date

DS
PP July 29, 2024
SELLER'S INITIALS Date

**SELLER DISCLOSURE STATEMENT
IMPROVED PROPERTY**

(Continued)

- | | YES | NO | DON'T KNOW | N/A | 102 |
|---|-------------------------------------|-------------------------------------|--------------------------|--------------------------|-----|
| *C. Is the property subject to any sewage system fees or charges in addition to those covered in your regularly billed sewer or on-site sewage system maintenance service?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 103 |
| D. If the property is connected to an on-site sewage system: | | | | | 104 |
| *(1) Was a permit issued for its construction, and was it approved by the local health department or district following its construction?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 105 |
| (2) When was it last pumped? <u>2022</u> | | | | | 106 |
| *(3) Are there any defects in the operation of the on-site sewage system? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 107 |
| (4) When was it last inspected? <u>2022</u> | | | | | 108 |
| By whom: <u>X</u> | | | | | 109 |
| (5) For how many bedrooms was the on-site sewage system approved? <u>2</u> bedrooms | | | <input type="checkbox"/> | <input type="checkbox"/> | 110 |
| E. Are all plumbing fixtures, including laundry drain, connected to the sewer/on-site sewage system? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 111 |
| If no, please explain: _____ | | | | | 112 |
| *F. Have there been any changes or repairs to the on-site sewage system? <u>Good condition</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 113 |
| G. Is the on-site sewage system, including the drainfield, located entirely within the boundaries of the property? <u>New system in place</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 114 |
| If no, please explain: _____ | | | | | 115 |
| *H. Does the on-site sewage system require monitoring and maintenance services more frequently than once a year? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 116 |

NOTICE: IF THIS RESIDENTIAL REAL PROPERTY DISCLOSURE IS BEING COMPLETED FOR NEW CONSTRUCTION WHICH HAS NEVER BEEN OCCUPIED, SELLER IS NOT REQUIRED TO COMPLETE THE QUESTIONS LISTED IN ITEM 4 (STRUCTURAL) OR ITEM 5 (SYSTEMS AND FIXTURES).

4. STRUCTURAL

- | | | | | | |
|---|---|--|--------------------------|-------------------------------------|-----|
| *A. Has the roof leaked within the last 5 years?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 122 |
| *B. Has the basement flooded or leaked? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 123 |
| *C. Have there been any conversions, additions or remodeling? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 124 |
| *(1) If yes, were all building permits obtained? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 125 |
| *(2) If yes, were all final inspections obtained? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 126 |
| D. Do you know the age of the house? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 127 |
| If yes, year of original construction: <u>1980</u> | | | | | 128 |
| *E. Has there been any settling, slippage, or sliding of the property or its improvements? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 129 |
| *F. Are there any defects with the following: (If yes, please check applicable items and explain) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 130 |
| <input type="checkbox"/> Foundations | <input type="checkbox"/> Decks | <input type="checkbox"/> Exterior Walls | | | 131 |
| <input type="checkbox"/> Chimneys | <input type="checkbox"/> Interior Walls | <input type="checkbox"/> Fire Alarms | | | 132 |
| <input type="checkbox"/> Doors | <input type="checkbox"/> Windows | <input type="checkbox"/> Patio | | | 133 |
| <input type="checkbox"/> Ceilings | <input type="checkbox"/> Slab Floors | <input type="checkbox"/> Driveways | | | 134 |
| <input type="checkbox"/> Pools | <input type="checkbox"/> Hot Tub | <input type="checkbox"/> Sauna | | | 135 |
| <input type="checkbox"/> Sidewalks | <input type="checkbox"/> Outbuildings | <input type="checkbox"/> Fireplaces | | | 136 |
| <input type="checkbox"/> Garage Floors | <input type="checkbox"/> Walkways | <input type="checkbox"/> Siding | | | 137 |
| <input type="checkbox"/> Wood Stoves | <input type="checkbox"/> Elevators | <input type="checkbox"/> Incline Elevators | | | 138 |
| <input type="checkbox"/> Stairway Chair Lifts | <input type="checkbox"/> Wheelchair Lifts | <input type="checkbox"/> Other _____ | | | 139 |
| *G. Was a structural pest or "whole house" inspection done? <u>2019</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 140 |
| If yes, when and by whom was the inspection completed? | | | | | 141 |
| _____ | | | | | 142 |
| H. During your ownership, has the property had any wood destroying organism or pest infestation?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 143 |
| I. Is the attic insulated?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 144 |
| J. Is the basement insulated? <u>basement ceiling</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 145 |

RP 7.29.24
SELLER'S INITIALS Date

PP July 29, 2024
SELLER'S INITIALS Date

SELLER DISCLOSURE STATEMENT
IMPROVED PROPERTY

(Continued)

5. SYSTEMS AND FIXTURES

- | | YES | NO | DON'T KNOW | N/A | 150 |
|--|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-----|
| *A. If any of the following systems or fixtures are included with the transfer, are there any defects?
If yes, please explain: _____ | | | | | 151 |
| Electrical system, including wiring, switches, outlets, and service | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 154 |
| Plumbing system, including pipes, faucets, fixtures, and toilets | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 155 |
| Hot water tank | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 156 |
| Garbage disposal | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 157 |
| Appliances: <u>Sold As-Is</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 158 |
| Sump pump | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 159 |
| Heating and cooling systems | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 160 |
| Security system: <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased <u>Starlink internet - phone</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 31 |
| Other: <u>4 cameras</u> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 162 |
| *B. If any of the following fixtures or property is included with the transfer, are they leased?
(If yes, please attach copy of lease.) | | | | | 163 |
| Security System: <u>4 cameras</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 165 |
| Tanks (type): <u>Propane</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 166 |
| Satellite dish: <u>OWN - Starlink</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 167 |
| Other: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 168 |
| *C. Are any of the following kinds of wood burning appliances present at the property? | | | | | 169 |
| (1) Woodstove? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 170 |
| (2) Fireplace insert? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 171 |
| (3) Pellet stove? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 172 |
| (4) Fireplace? <u>Gas/propane stove</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 173 |
| If yes, are all of the (1) woodstoves or (2) fireplace inserts certified by the U.S. Environmental
Protection Agency as clean burning appliances to improve air quality and public health? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 174 |
| D. Is the property located within a city, county, or district or within a department of natural
resources fire protection zone that provides fire protection services? <u>10 minutes</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 176 |
| E. Is the property equipped with carbon monoxide alarms? (Note: Pursuant to RCW 19.27.530, Seller
must equip the residence with carbon monoxide alarms as required by the state building code.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 178 |
| F. Is the property equipped with smoke detection devices? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 180 |
| (Note: Pursuant to RCW 43.44.110, if the property is not equipped with at least one smoke
detection device, at least one must be provided by the seller.) | | | | | 181 |
| G. Does the property currently have internet service? <u>Starlink</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 182 |
| Provider: _____ | | | | | 184 |

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6. HOMEOWNERS' ASSOCIATION/Common INTERESTS

- | | | | | | |
|--|--------------------------|-------------------------------------|--------------------------|-------------------------------------|-----|
| A. Is there a Homeowners' Association? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 185 |
| Name of Association and contact information for an officer, director, employee, or other authorized
agent, if any, who may provide the association's financial statements, minutes, bylaws, fining policy,
and other information that is not publicly available: _____ | | | | | 186 |
| B. Are there regular periodic assessments? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 188 |
| \$ _____ per <input type="checkbox"/> month <input type="checkbox"/> year | | | | | 189 |
| <input type="checkbox"/> Other: _____ | | | | | 190 |
| *C. Are there any pending special assessments? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 191 |
| *D. Are there any shared "common areas" or any joint maintenance agreements (facilities
such as walls, fences, landscaping, pools, tennis courts, walkways, or other areas
co-owned in undivided interest with others)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 192 |

7. ENVIRONMENTAL

- | | | | | | |
|--|--------------------------|-------------------------------------|--------------------------|--------------------------|-----|
| *A. Have there been any flooding, standing water, or drainage problems on the property
that affect the property or access to the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 193 |
| *B. Does any part of the property contain fill dirt, waste, or other fill material? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 194 |
| *C. Is there any material damage to the property from fire, wind, floods, beach movements,
earthquake, expansive soils, or landslides? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 195 |
| D. Are there any shorelines, wetlands, floodplains, or critical areas on the property? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 196 |
| *E. Are there any substances, materials, or products in or on the property that may be environmental
concerns, such as asbestos, formaldehyde, radon gas, lead-based paint, fuel or chemical
storage tanks, or contaminated soil or water? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 197 |
| *F. Has the property been used for commercial or industrial purposes? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 198 |

R.P. 7.29.24
SELLER'S INITIALS Date

PP July 29, 2024
SELLER'S INITIALS Date

**SELLER DISCLOSURE STATEMENT
IMPROVED PROPERTY**

(Continued)

	YES	NO	DON'T KNOW	N/A	
*G. Is there any soil or groundwater contamination?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	208 209 210
*H. Are there transmission poles or other electrical utility equipment installed, maintained, or buried on the property that do not provide utility service to the structures on the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	211 212
*I. Has the property been used as a legal or illegal dumping site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	213
*J. Has the property been used as an illegal drug manufacturing site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	214
*K. Are there any radio towers in the area that cause interference with cellular telephone reception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	215
8. LEAD BASED PAINT (Applicable if the house was built before 1978).				<input type="checkbox"/>	216
A. Presence of lead-based paint and/or lead-based paint hazards (check one below):					217
<input type="checkbox"/> Known lead-based paint and/or lead-based paint hazards are present in the housing (explain). _____					218 219
<input checked="" type="checkbox"/> Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.					220
B. Records and reports available to the Seller (check one below):					221
<input type="checkbox"/> Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below). _____					222 223 224
<input checked="" type="checkbox"/> Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.					225
9. MANUFACTURED AND MOBILE HOMES					226
If the property includes a manufactured or mobile home,					227
*A. Did you make any alterations to the home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	228
If yes, please describe the alterations: _____					229
*B. Did any previous owner make any alterations to the home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	230
*C. If alterations were made, were permits or variances for these alterations obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	231
10. FULL DISCLOSURE BY SELLERS					232
A. Other conditions or defects:					233
*Are there any other existing material defects affecting the property that a prospective buyer should know about?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	234 235
B. Verification					236
The foregoing answers and attached explanations (if any) are complete and correct to the best of Seller's knowledge and Seller has received a copy hereof. Seller agrees to defend, indemnify and hold real estate licensees harmless from and against any and all claims that the above information is inaccurate. Seller authorizes real estate licensees, if any, to deliver a copy of this disclosure statement to other real estate licensees and all prospective buyers of the property.					237 238 239 240
<u>R.P 7-29-24</u> _____ <u>Patti Pace</u> _____ <u>July 29, 2024</u> _____					241
Seller _____ Date _____ Seller B6BE6AE482... _____ Date _____					

If the answer is "Yes" to any asterisked (*) items, please explain below (use additional sheets if necessary). Please refer to the line number(s) of the question(s).

Replaced all plumbing inside house 2018

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245
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255
256

**SELLER DISCLOSURE STATEMENT
IMPROVED PROPERTY**

(Continued)

II. NOTICES TO THE BUYER

1. SEX OFFENDER REGISTRATION

INFORMATION REGARDING REGISTERED SEX OFFENDERS MAY BE OBTAINED FROM LOCAL LAW ENFORCEMENT AGENCIES. THIS NOTICE IS INTENDED ONLY TO INFORM YOU OF WHERE TO OBTAIN THIS INFORMATION AND IS NOT AN INDICATION OF THE PRESENCE OF REGISTERED SEX OFFENDERS.

2. PROXIMITY TO FARMING/WORKING FOREST

THIS NOTICE IS TO INFORM YOU THAT THE REAL PROPERTY YOU ARE CONSIDERING FOR PURCHASE MAY LIE IN CLOSE PROXIMITY TO A FARM OR WORKING FOREST. THE OPERATION OF A FARM OR WORKING FOREST INVOLVES USUAL AND CUSTOMARY AGRICULTURAL PRACTICES OR FOREST PRACTICES, WHICH ARE PROTECTED UNDER RCW 7.48.305, THE WASHINGTON RIGHT TO FARM ACT.

3. OIL TANK INSURANCE

THIS NOTICE IS TO INFORM YOU THAT IF THE REAL PROPERTY YOU ARE CONSIDERING FOR PURCHASE UTILIZES AN OIL TANK FOR HEATING PURPOSES, NO COST INSURANCE MAY BE AVAILABLE FROM THE POLLUTION LIABILITY INSURANCE AGENCY.

III. BUYER'S ACKNOWLEDGEMENT

1. BUYER HEREBY ACKNOWLEDGES THAT:

- A. Buyer has a duty to pay diligent attention to any material defects that are known to Buyer or can be known to Buyer by utilizing diligent attention and observation.
- B. The disclosures set forth in this statement and in any amendments to this statement are made only by the Seller and not by any real estate licensee or other party.
- C. Buyer acknowledges that, pursuant to RCW 64.06.050(2), real estate licensees are not liable for inaccurate information provided by Seller, except to the extent that real estate licensees know of such inaccurate information.
- D. This information is for disclosure only and is not intended to be a part of the written agreement between the Buyer and Seller.
- E. Buyer (which term includes all persons signing the "Buyer's acceptance" portion of this disclosure statement below) has received a copy of this Disclosure Statement (including attachments, if any) bearing Seller's signature(s).
- F. If the house was built prior to 1978, Buyer acknowledges receipt of the pamphlet *Protect Your Family From Lead in Your Home*.

DISCLOSURES CONTAINED IN THIS DISCLOSURE STATEMENT ARE PROVIDED BY SELLER BASED ON SELLER'S ACTUAL KNOWLEDGE OF THE PROPERTY AT THE TIME SELLER COMPLETES THIS DISCLOSURE. UNLESS BUYER AND SELLER OTHERWISE AGREE IN WRITING, BUYER SHALL HAVE THREE (3) BUSINESS DAYS FROM THE DAY SELLER OR SELLER'S AGENT DELIVERS THIS DISCLOSURE STATEMENT TO RESCIND THE AGREEMENT BY DELIVERING A SEPARATELY SIGNED WRITTEN STATEMENT OF RESCISSION TO SELLER OR SELLER'S AGENT. YOU MAY WAIVE THE RIGHT TO RESCIND PRIOR TO OR AFTER THE TIME YOU ENTER INTO A SALE AGREEMENT.

BUYER HEREBY ACKNOWLEDGES RECEIPT OF A COPY OF THIS DISCLOSURE STATEMENT AND ACKNOWLEDGES THAT THE DISCLOSURES MADE HEREIN ARE THOSE OF THE SELLER ONLY, AND NOT OF ANY REAL ESTATE LICENSEE OR OTHER PARTY.

Buyer Date Buyer Date

2. BUYER'S WAIVER OF RIGHT TO REVOKE OFFER

Buyer has read and reviewed the Seller's responses to this Seller Disclosure Statement. Buyer approves this statement and waives Buyer's right to revoke Buyer's offer based on this disclosure.

Buyer Date Buyer Date

3. BUYER'S WAIVER OF RIGHT TO RECEIVE COMPLETED SELLER DISCLOSURE STATEMENT

Buyer has been advised of Buyer's right to receive a completed Seller Disclosure Statement. Buyer waives that right. However, if the answer to any of the questions in the section entitled "Environmental" would be "yes," Buyer may not waive the receipt of the "Environmental" section of the Seller Disclosure Statement.

Buyer Date Buyer Date

RP 7.29.24 DS
PP July 29, 2024
SELLER'S INITIALS Date SELLER'S INITIALS Date

Form 22K
Identification of Utilities Addendum
Rev. 3/21
Page 1 of 1

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ALL RIGHTS RESERVED

IDENTIFICATION OF UTILITIES ADDENDUM TO PURCHASE AND SALE AGREEMENT

The following is part of the Purchase and Sale Agreement dated _____ 1
 between _____ ("Buyer") 2
Buyer Buyer
 and Ronald N Pace Patti Ann Pace ("Seller") 3
Seller Seller
 concerning 3632 Critter Way Kettle Falls WA 99141 (the "Property"). 4
Address City State Zip

Pursuant to RCW 60.80, Buyer and Seller request the Closing Agent to administer the disbursement of closing funds necessary to satisfy unpaid utility charges, if any, affecting the Property. The names and addresses of all utilities providing service to the Property and having lien rights are as follows:

WATER DISTRICT:	<u>Drilled Well</u>			
	Name		e-mail or website (optional)	

	Address			

	City, State, Zip		Fax No. (optional)	
SEWER DISTRICT:	<u>Private Septic</u>			
	Name		e-mail or website (optional)	

	Address			

	City, State, Zip		Fax No. (optional)	
IRRIGATION DISTRICT:	<u>NA</u>			
	Name		e-mail or website (optional)	

	Address			

	City, State, Zip		Fax No. (optional)	
GARBAGE:	<u>NA</u>			
	Name		e-mail or website (optional)	

	Address			

	City, State, Zip		Fax No. (optional)	
ELECTRICITY:	<u>Avista</u>			
	Name		e-mail or website (optional)	

	Address			

	City, State, Zip		Fax No. (optional)	
GAS:	<u>Propane Tank</u>			
	Name		e-mail or website (optional)	

	Address			

	City, State, Zip		Fax No. (optional)	
SPECIAL DISTRICT(S): (local improvement districts or utility local improvement districts)				
	Name		e-mail or website (optional)	

	Address			

	City, State, Zip		Fax No. (optional)	

If the above information has not been filled in at the time of mutual acceptance of this Agreement, then (1) within _____ days (5 if not filled in) of mutual acceptance of this Agreement, Seller shall provide the Listing Broker or Buyer Broker with the names and addresses of all utility providers having lien rights affecting the Property and (2) Buyer and Seller authorize Listing Broker or Buyer Broker to insert into this Addendum the names and addresses of the utility providers identified by Seller.

Nothing in this Addendum shall be construed to diminish or alter the Seller's obligation to pay all utility charges (including unbilled charges). Buyer understands that the Listing Broker and Buyer Broker are not responsible for, or to insure payment of, Seller's utility charges.

_____	_____	<u>RP</u>	<u>7.29.24</u>	^{DS} <u>pp</u>	<u>July 29, 2024</u>
Buyer's Initials	Date	Buyer's Initials	Date	Seller's Initials	Date

FIRPTA CERTIFICATION

The Foreign Investment in Real Property Tax Act ("FIRPTA"), 26 U.S.C. 1445, provides that a buyer of a U.S. real property interest must withhold tax if Seller is a foreign person, unless one of the exceptions in the Act applies. The following will inform Buyer and Closing Agent whether tax withholding is required.

Note: The above law applies to foreign corporations, partnerships, trusts, estates and other foreign entities, as well as to foreign individuals. If Seller is a corporation, partnership, trust, estate or other entity, the terms "I" and "my" as used below means the corporation or other entity. A "real property interest" includes full or part ownership of land and/or improvements thereon; leaseholds; options to acquire any of the foregoing; and an interest in foreign corporations, partnerships, trusts or other entities holding U.S. real estate.

SELLER CERTIFICATION. Seller hereby certifies the following:

PROPERTY. I am the Seller of real property at:

3632 Critter Way Kettle Falls WA 99141
Address City State Zip

or (if no street address) legally described on the attached.

CITIZENSHIP STATUS. I AM AM NOT a non-resident alien (or a foreign corporation, foreign partnership, foreign trust, foreign estate or other foreign business entity) for purposes of U.S. income taxation.

TAXPAYER I.D. NUMBER.

My U.S. taxpayer identification number (e.g. social security number) is _____
(Tax I.D. number to be provided by Seller at Closing)

ADDRESS.

My home address is 4515 Vickery Ave E Kettle Falls WA 99141
Address City State Zip

Under penalties of perjury, I declare that I have examined this Certification and to the best of my knowledge and belief it is true, correct and complete. I understand that this Certification may be disclosed to the Internal Revenue Service ("IRS") and that any false statement I have made here could be punished by fine, imprisonment, or both.

R.P. 7.29.24 Patti Pace July 29, 2024
Seller Date Seller Date

BUYER CERTIFICATION (Only applicable if Seller is a non-resident alien).

If Seller is a non-resident alien, and has not obtained a release from the IRS, then Closing Agent must withhold 15% of the amount realized from the sale and pay it to the IRS, unless Buyer certifies that the selected statement below is correct:

Amount Realized (\$300,000 or less) and Family Residence = No Tax. (a) I certify that the total price that I am to pay for the property, including liabilities assumed and all other consideration to Seller, does not exceed \$300,000; and (b) I certify that I or a member of my family* have definite plans to reside on the property for at least 50% of the time that the property is used by any person during each of the first two twelve month periods following the date of this sale. If Buyer certifies these statements, there is no tax.

Amount Realized (more than \$300,000, but not exceeding \$1,000,000) and Family Residence = 10% Tax. (a) I certify that the total price that I am to pay for the property, including liabilities assumed and all other consideration to Seller, exceeds \$300,000, but does not exceed \$1,000,000; and (b) I certify that I or a member of my family* have definite plans to reside on the property for at least 50% of the time that the property is used by any person during each of the first two twelve month periods following the date of this sale. If Buyer certifies these statements, then Closing Agent must withhold 10% of the amount realized from the sale and pay it to the IRS.

* (Defined in 11 U.S.C. 267(c)(4). It includes brothers, sisters, spouse, ancestors and lineal descendants).

Under penalties of perjury, I declare that I have examined this Certification and to the best of my knowledge and belief both statements are true, correct and complete. I understand that this Certification may be disclosed to the IRS and that any false statement I have made here could be punished by fine, imprisonment, or both.

Buyer Date Buyer Date

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

WATER WELL REPORT

492691

State of Washington Date Printed: 27-Sep-2013 Log No. 0
 Construction / Decommission: Original Construction Notice

CURRENT
 Notice of Intent No.: WE16566
 Unique Ecology Well I.D. No BHW709
 Water Right Permit Number:

OWNER: PACE, RON & PATTI
 OWNER ADD 4515 VICKERY AVENUE EAST
 TACOMA, WA 98442

Well Add 3632 CRITTER WAY
 City: Kettle Falls, WA 99141 County: Stevens
 Location: SW 1/4 NE 1/4 Sec 02 T 38 R 38 EW
 Lat/Long: (s, t, r still) Lat Deg Lat Min/Sec
 REQUIRED) Long Deg Long Min/Sec
 Tax Parcel No.: 1978901

PROPOSED USE: DOMESTIC
 TYPE OF WORK: Owners's Well Number: (If more than one well) 1
 NEW WELL Method: ROTARY

DIMENSIONS: Diameter of well: 6 inches
 Drilled 120 ft. Depth of completed well 120 ft.

CONSTRUCTION DETAILS: Casing installed WELDED
 Liner installed: 6 " Dia from +2 ft. to 111 ft.
 " Dia from ft. to ft. 5 " Dia from 108 ft. to 115 ft.
 " Dia from ft. to ft. " Dia from ft. to ft.

Perforations: No Used In:
 Type of perforator used
 SIZE of perforations in. by in.
 Perforations from ft. to ft.
 Perforations from ft. to ft.
 Perforations from ft. to ft.

Screens: 1 K-Pac Location: 108
 Manufacture's Name ALLOY
 Type: STAINLESS Model No
 Diam. 5 slot size: .12 from 115 ft. to 120 ft.
 Diam. slot size: from ft. to ft.

Gravel/Filter packed: No Size of Gravel
 Material placed fro ft. to ft.

Surface seal: Yes To what depth 20 ft.
 Seal method: Material used in seal BENTONITE
 Did any strata contain unusable water No
 Type of water Depth of strata
 Method of sealing strata off

PUMP: Manufacture's name
 Type: H.P. 0

WATER LEVELS Land-surface elevation above mean sea level: 0 ft.
 Static level 70 ft. below top of well Date 07/23/2013
 Artesian Pressure lbs per square inch Date
 Artesian water controlled by

WELL TESTS: Drawdown is amount water level is lowered below static level.
 Was a pump test made No If yes, by whom
 Yield: gal/min with ft drawdown after
 Yield: gal/min with ft drawdown after
 Yield: gal/min with ft drawdown after

Recovery data (time taken as zero when pump turned off)(water level measured from well top to water level)
 Time: Water Level Time: Water Level Time: Water Level
 gal/min ft drawdown after hrs.
 Air test 25 gal/min w/ stem set at 120 ft. for 1 hours
 Artesian flow gpm Date
 Temperature of water Was a chemical analysis made No

CONSTRUCTION OR DECOMMISSION PROCEDURE
 Formation: Describe by color, character, size of material and structure. Show thickness of aquifers and the kind and nature of the material in each stratum penetrated. Show at least one entry for each change in formation.

Material	From	To
SILTY SAND GRAVEL	0	4
COARSE GRAVEL W/SILTY SAND CEMENTED LA	4	71
SAND COARSE	71	74
COARSE SAND & GRAVEL W/SILT	74	80
COARSE GRAVEL W/SILTY SAND W/WATER	80	120

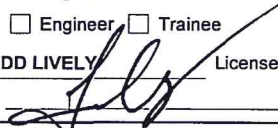
RECEIVED
OCT 07 2013

Notes: DEPARTMENT OF ECOLOGY
 1 - 6" DRIVE SHOE EASTERN REGIONAL OFFICE

Work starte 07/23/2013 Complete 07/23/2013

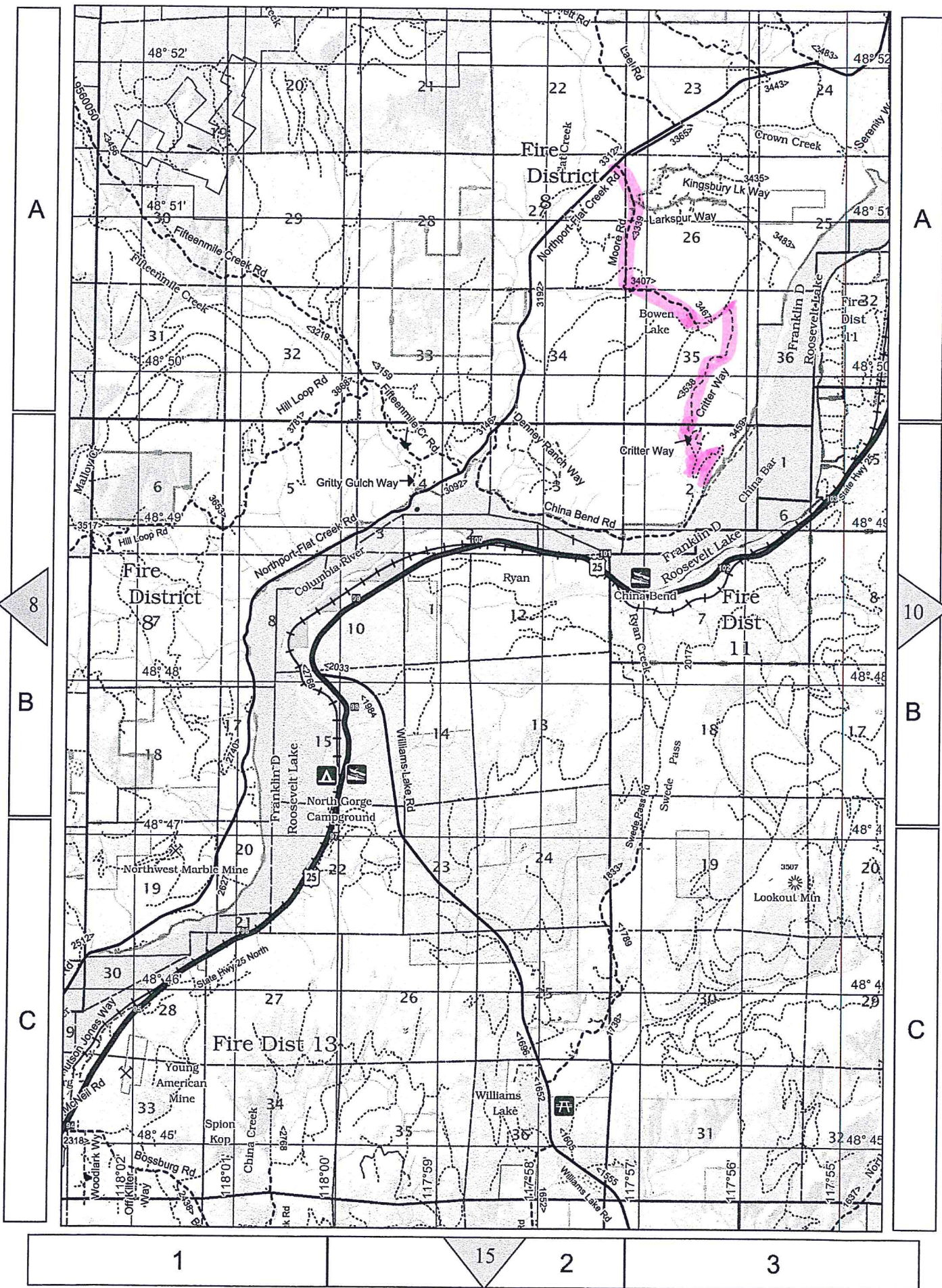
WELL CONSTRUCTION CERTIFICATION:
 I constructed and/or accept responsibility for construction of this well and its compliance with all Washington well construction standards. Materials used and the information reported are true to my best knowledge and belief.

Driller Engineer Trainee
 Name: TODD LIVELY License No.: 2321

Signature: 
 If trainee, Licensed driller License No.:
 Licensed Driller Signature

Drilling Company:
 NAME: FOGLE PUMP & SUPPLY, INC. Shop: COLVILLE
 ADDRESS: 316 W. 5TH
 Colville, WA 99114
 Phone: 509-684-2569 Toll Free: 800-533-6518
 E-Mail: jeanne@foglepump.com
 FAX: 509-684-3032 WEB Site: www.foglepump.com

Contractor's Registration No.: FOGLEPS095L4 Date Log Created: 9/27/2013



Stevens County Parcel Map

This site is down for updates between 12am and 2am daily.

