



CITY OF MAPLEWOOD
 1830 County Road B East
 Maplewood, MN 55109
 (651) 770-4560 Fax (651) 770-4506

Address

Disclosure Report
Maplewood Truth-In-Sale of Housing
 (Carefully read this entire report)

THIS REPORT IS NOT A WARRANTY, BY THE CITY OF MAPLEWOOD OR EVALUATOR OF THE FUTURE USEFUL LIFE, OR THE FUTURE CONDITION OF ANY BUILDING COMPONENT OR FIXTURE.

Notice: A copy of this Report must be publicly displayed at the premises when the house is shown to prospective buyers, and a copy of this Report must be provided to the buyer prior to the time of signing a Purchase Agreement.

Address of Evaluated Dwelling: _____

Owner's Name: _____

Owner's Address: _____
include City & State if **NOT** Maplewood, and ALL Zip codes, **EVEN IN** Maplewood

Type of Dwelling: **Single Family** ____ **Duplex** ____ **Townhouse** ____ **Condo*** ____

*For condominium units, this evaluation includes only those items located within the residential units and does not include the common use areas, or other nonresidential areas of the structure.

Comments:

SELLER'S DISCLOSURE STATEMENT: To be completed by the Seller or their representative.

Date

**RATING
KEY:**

"M" = Meets minimum standards - the item conforms to minimum standards of maintenance
 "B" = Below minimum standards - the item is below minimum standards
 "C" = Comments - the item cannot be adequately evaluated or it has some deficiency, but the deficiency is insufficient to make the item below minimum standards
 "H" = Hazardous - the item in its present condition may endanger the health and safety of the occupant
 Any item marked "B", "C", or "H" must have a written comment about the item. Additional comment sheets may be attached if needed.
 "Y" = Yes "N" = No "NV" = Not Visible/Viewed "NA" = Not Applicable

This Report:

1. is intended to provide basic information to the home buyer and seller prior to the time of sale. Minimum standards for this report are as contained in the Maplewood City Code.
2. is not warranty, by the City of Maplewood, of the condition of the building or any building component, nor of the accuracy of this report.
3. covers only the items listed on the form and only those items visible at the time of the evaluation. The Evaluator is not required to ignite the heating plant, use a ladder to observe the condition of the roofing, disassemble items or evaluate inaccessible areas.
4. may be based upon different standards than the lender, Federal Housing Administration (FHA) or Veterans Administration (VA).
5. is valid for one year from the date of issue and only for the owner named on this report.

Questions about this report should be directed to the evaluator, seller of the seller's agent.

Complaints about this report should be directed to the Community Development Department, Maplewood City Hall, 1830 County Road B East, Maplewood, MN 55109, (651) 770-4560.

Page 1 of _____

Property Address: _____

See Page 1 for Rating Key

Item #

Comments

Specify location(s), where necessary

BASEMENT/CELLAR

- 1. Stairs and handrails _____
- 2. Basement/cellar floor _____
- 3. Foundation _____
- 4. Evidence of dampness or staining _____
- 5. First floor, floor system _____
- 6. Beams and columns _____

ELECTRICAL SERVICE(S) # of Services _____

- 7. Service size:
Amps: 30 _____ 60 _____ 100 _____ 150 _____ Other _____
Volts: 115 _____ 115/220 _____

BASEMENT ONLY:

- 8. Electrical service installation/grounding _____
- 9. Electrical wiring, outlets and fixtures _____

PLUMBING SYSTEM

- 10. Floor drain(s) (basement) _____
- 11. Waste and vent piping (all floors) _____
- 12. Water piping (all floors) _____
- 13. Gas piping (all floors) _____
- 14. Water heater(s), installation _____
- 15. Water heater(s), venting _____
- 16. Plumbing fixtures (basement) _____

HEATING SYSTEM(S) # of _____

- 17. Heating plant(s): Type: _____ Fuel: _____
 - a. Installation and visible condition _____
 - b. Viewed in operation _____
 - c. Combustion venting _____

The Evaluator is not required to ignite the heating plant(s), except during heating season, between October 15 and April 15.

- 18. Additional heating unit(s) Type: _____ Fuel: _____
 - a. Installation and visible condition _____
 - b. Viewed in operation _____
 - c. Combustion venting _____

19. **ADDITIONAL COMMENTS (1 through 18)** _____

EVALUATOR: _____ DATE: _____

Property Address: _____

See Page 1 for Rating Key Item # Comments

Where there are multiple rooms to a category, the Evaluator must specify the room to which a Comment is related.

KITCHEN

- 20. Walls and ceiling _____
- 21. Floor condition and ceiling height _____
- 22. Evidence of dampness or staining _____
- 23. Electrical outlets and fixtures _____
- 24. Plumbing fixtures _____
- 25. Water flow _____
- 26. Window size/openable area/mechanical exhaust _____
- 27. Condition of doors/windows/mech. exhaust . . . _____

LIVING AND DINING ROOM(S)

- 28. Walls and ceiling _____
- 29. Floor condition and ceiling height _____
- 30. Evidence of dampness or staining _____
- 31. Electrical outlets and fixtures _____
- 32. Window size and openable area _____
- 33. Window and door condition _____

HALLWAYS, STAIRS AND ENTRIES

- 34. Walls, ceilings and floors _____
- 35. Evidence of dampness or staining _____
- 36. Stairs and handrails to upper floors _____
- 37. Electrical outlets and fixtures _____
- 38. Window and door condition _____
- 39. Smoke detector(s) _____
- Properly located _____
- Hard-wired _____

BATHROOM(S)

- 40. Walls and ceiling _____
- 41. Floor condition and ceiling height _____
- 42. Evidence of dampness or staining _____
- 43. Electrical outlets and fixtures _____
- 44. Plumbing fixtures _____
- 45. Water flow _____
- 46. Window size/openable area/mechanical exhaust _____
- 47. Condition of windows/doors/mech. exhaust . . . _____

SLEEPING ROOM(S)

- 48. Walls and ceiling _____
- 49. Floor condition, area, and ceiling height _____
- 50. Evidence of dampness or staining _____
- 51. Electrical outlets and fixtures _____
- 52. Window size and openable area _____
- 53. Window and door condition _____

ENCLOSED PORCHES AND OTHER ROOMS

- 54. Walls and floor condition _____
- 55. Evidence of dampness or staining _____
- 56. Electrical outlets and fixtures _____
- 57. Window and door condition _____

ATTIC SPACE (Visible Areas)

- 58. Roof boards and rafters _____
- 59. Evidence of dampness or staining _____
- 60. Electrical wiring/outlets/fixtures _____
- 61. Ventilation _____

62. **ADDITIONAL COMMENTS (20 through 61)** _____

EVALUATOR: _____ DATE: _____

Property Address: _____

See Page 1 for Rating Key

Item #

Comments

EXTERIOR (Visible Areas)

- 63. Foundation _____
- 64. Basement/cellar windows _____
- 65. Drainage (grade) _____
- 66. Exterior walls _____
- 67. Doors (frames/storms/screens) _____
- 68. Windows (frames/storms/screens) _____
- 69. Open porches, stairways and decks _____
- 70. Cornice and trim _____
- 71. Roof structure and covering _____
- 72. Gutters and downspouts _____
- 73. Chimneys _____
- 74. Outlets, fixtures and service entrance _____

GARAGE

- 75. Roof structure and covering _____
- 76. Wall structure and covering _____
- 77. Slab condition _____
- 78. Garage doors _____
- 79. Garage opener- (see important notice #6) _____
- 80. Electrical wiring, outlets and fixtures _____
- 81. **ADDITIONAL COMMENTS (62 through 80)** _____

FIREPLACE/WOODSTOVES # of

- 82. Dampers installed in fireplaces _____
- 83. Installation _____
- 84. Condition _____

SUPPLEMENTAL INFORMATION No determination is made whether items meet minimum standards (Y/N, NA, NV, only)

INSULATION Y/N Type Inches/Depth

- 85. Attic Insulation _____
- 86. Foundation Insulation _____
- 87. Kneewall Insulation _____
- 88. Rim Joist Insulation _____

89. **ADDITIONAL COMMENTS (81 through 88)** _____

I hereby certify that the above report is made in compliance with the Maplewood City Code, and that I have utilized the care and diligence, reasonable and ordinary, for meeting the certification standards prescribed by the Truth-in-Sale of Housing Ordinance Article XII of Chapter 9. I have found no instance of non-compliance with the items listed above as of the date of this report, except those designated herein.

Evaluator Signature

Phone Number

Date

Page ____ of ____
Rev 1/1/2002

Printed Name: _____

IMPORTANT NOTICES

1. Rainleaders connected to the sanitary sewer system must be disconnected.
2. Any house built before 1950 may have lead paint on/in it. If children eat lead paint, they can be poisoned. For more information call the Environmental Health Officer, (651) 770-4560.
3. The City of Maplewood or the Evaluator are not responsible for the determination of the presence of airborne particles such as asbestos, noxious gases, such as radon or other conditions of the air quality that may be present, nor the conditions which may cause the above.
4. Automatic garage door openers should reverse upon striking an object. If it does not reverse, it poses a serious hazard and should be repaired or replaced immediately.