

# SELLER'S PROPERTY CONDITION DISCLOSURE STATEMENT

RESIDENTIAL-SDCL 43-4-44

Seller(s) THE CHICKEN CORP  
 Property Address 22 W 2nd Ave Sisseton, SD 57242  
 Property Legal Description LOTS B, 14, 15 & N1/4' of Lot 14 B1K118 City of Sisseton Roberts Co. SD

This Disclosure Statement concerns the real property identified above and offered for sale. This disclosure is required by law to be completed by sellers of real property and given to potential buyers. **This form can have important legal consequences. If you do not understand this form, you should seek advice from a competent source.**

Seller states that the information contained in this disclosure fully reflects the Seller's knowledge of the matters disclosed as of the date affixed to the form. If any material fact changes prior to closing, the seller MUST disclose that change in a written amendment to this disclosure statement and give the same to the buyer.

This statement is a DISCLOSURE OF THE CONDITION OF THE PROPERTY DESCRIBED ABOVE in compliance with South Dakota law § 43-4-38. It is NOT A WARRANTY of ANY KIND by the Seller or anyone representing any party in a transaction. It is NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES either party may wish to obtain.

Seller hereby authorizes any agent representing any party in this transaction to provide a copy of this statement to any person or entity in connection with any actual or anticipated sale of the property.

## I. LOT OR TITLE INFORMATION

1. When did you purchase or build the home? \_\_\_\_\_ / \_\_\_\_\_  
Month Year

	LOT OR TITLE INFORMATION	Yes	No	Don't Know	N/A	Comments
2.	Are there any recorded liens or financial instruments against the property, other than a first mortgage?	<input checked="" type="checkbox"/>				BANK
3.	Are there any unrecorded liens or financial instruments against the property, other than a first mortgage; or have any materials or services been provided in the past one hundred twenty (120) days that would create a lien against the property under chapter 44-9?			<input checked="" type="checkbox"/>		
4.	Are there any easements that have been granted in connection with the property (other than normal utility easements for public water and sewer, gas and electric service, telephone service, cable television service, drainage, and sidewalks)?			<input checked="" type="checkbox"/>		
5.	Are there any problems related to establishing the lot lines/boundaries?			<input checked="" type="checkbox"/>		
6.	Do you have a location survey in your possession or a copy of the recorded plat?			<input checked="" type="checkbox"/>		If yes, attach a copy.
7.	Are you aware of any encroachments or shared features, from or on adjoining property (e.g., fences, driveway, sheds, outbuildings, or other improvements)?			<input checked="" type="checkbox"/>		
8.	Are you aware of any covenants or restrictions affecting the use of the property in accordance with local law?			<input checked="" type="checkbox"/>		If yes, attach a copy.
9.	Are you aware of any current or pending litigation, foreclosure, zoning, building code or restrictive covenant violation notices, mechanic's liens, judgments, special assessments, zoning changes, or changes that could affect your property?		<input checked="" type="checkbox"/>			
10.	Is the property currently occupied by the owner?		<input checked="" type="checkbox"/>			
11.	Does the property currently receive the owner-occupied tax reduction pursuant to SDCL 10-13-39?			<input checked="" type="checkbox"/>		
12.	Is the property currently part of a property tax freeze for any reason?			<input checked="" type="checkbox"/>		
13.	Is the property leased?		<input checked="" type="checkbox"/>			

	LOT OR TITLE INFORMATION	Yes	No	Don't Know	N/A	Comments
14.	If leased, does the property use comply with applicable local ordinances?			X		
15.	Does this property or any portion of this property receive rent?			X		If yes, how much \$ _____ and how often _____
16.	Do you pay any mandatory fees or special assessments to a homeowners' or condominium association?		Y			If yes, what are the fees or assessments? \$ _____ per _____ (annually, semi-annually, monthly) Payable to whom: _____ For what purpose: _____
17.	Are you aware if the property has ever had water in either the front, rear, or side yard for more than forty-eight (48) hours?			X		
18.	Is the property located in a flood plain?		X			
19.	Are federally protected wetlands located upon any part of the property?		X			
20.	Has the property been designated as a historic property by a local governing body pursuant to SDCL 1-19B-20?			Y		
21.	Is the property located within an established historic district?			Y		
22.	Are you aware of any private transfer fee obligations, as defined pursuant to § 43-4-48, that would require a buyer or seller of the property to pay a fee or charge upon the transfer of the property, regardless of whether the fee or charge is a fixed amount or is determined as a percentage of the value of the property?			X		If yes, what are the fees or charges? \$ _____ per _____ (annually, semi-annually, monthly)

Additional Comments \_\_\_\_\_

## II. STRUCTURAL INFORMATION

	STRUCTURAL INFORMATION	Yes	No	Don't Know	N/A	Comments
1.	Are you aware of any water penetration in the walls, windows, doors, basement, or crawl space?			X		
2.	Have any water damage related repairs been made?			X		
3.	Are there any unrepaired water-related damages that remain?			Y		
4.	Are you aware if drain tile is installed on the property?			Y		
5.	Are you aware of any interior cracked walls, ceilings, or floors, or cracks or defects in exterior driveways, sidewalks, patios, or other hard surface areas?			X		
6.	Type of roof covering:			X		
7.	Age of roof covering, if known:			X		
8.	Are you aware of any roof leakage, past or present?			X		
9.	Have any roof repairs been made? When and by whom?			Y		
10.	Is there any existing unrepaired damage to the roof?			X		
11.	Are you aware of insulation in ceiling/attic?			Y		
12.	Are you aware of insulation in walls?			X		
13.	Are you aware of insulation in the floors?			X		
14.	Are you aware of any pest infestation or damage, either past or present?			X		
15.	Are you aware of the property having been treated or repaired for any pest infestation or damage?			X		If yes, who treated it and when?
16.	Are you aware of any work upon the property which required a building, plumbing, electrical, or any other permit?	X				RECENT REMOVAL
17.	Was a permit obtained for work performed upon the property?			Y		
18.	Was the work approved by an inspector as required by local or state ordinance?			Y		
19.	Are you aware of any past or present damage to the property (e.g., fire, smoke, wind, floods, hail, or snow)?			X		
20.	Have any insurance claims been made for damage to the property?		X			



	STRUCTURAL INFORMATION	Yes	No	Don't Know	N/A	Comments
21.	Was an insurance payment received for damage to the property?		<input checked="" type="checkbox"/>			
22.	Has the damage to the property been repaired?			<input checked="" type="checkbox"/>		
23.	Are there any unrepaired damages to the property from the insurance claim?			<input checked="" type="checkbox"/>		
24.	Are you aware of any problems with sewer blockage or backup, past or present?			<input checked="" type="checkbox"/>		
25.	Are you aware of any drainage, leakage, or runoff from any sewer, septic tank, storage tank, or drain on the property into any adjoining lake, stream, or waterway?			<input checked="" type="checkbox"/>		

Additional Comments \_\_\_\_\_

### III. SYSTEMS/UTILITIES INFORMATION

	SYSTEMS/UTILITIES INFORMATION	Working	Not Working	None	Comments
1.	Air Conditioning System	<input checked="" type="checkbox"/>			Age of system, if known:
2.	Air Exchanger	<input checked="" type="checkbox"/>			
3.	Air Purifier			<input checked="" type="checkbox"/>	
4.	Attic Fan			<input checked="" type="checkbox"/>	
5.	Bathroom Whirlpool and Controls			<input checked="" type="checkbox"/>	
6.	Burglar Alarm & Security System			<input checked="" type="checkbox"/>	
7.	Ceiling Fan(s)				?
8.	Central Air - Electric				?
9.	Central Air - Water Cooled				?
10.	Cistern				?
11.	Dishwasher	<input checked="" type="checkbox"/>			
12.	Disposal	<input checked="" type="checkbox"/>			?
13.	Doorbell				?
14.	Fireplace				?
15.	Fireplace Insert				?
16.	Garage Door(s)	<input checked="" type="checkbox"/>			?
17.	Garage Door Opener(s)				?
18.	Garage Door Control(s)				?
19.	Garage Wiring				?
20.	Home Heating System(s) Type:				Age of system, if known: ?
21.	Hot Tub and Controls				?
22.	Humidifier				?
23.	In-Floor Heat				?
24.	Intercom		<input checked="" type="checkbox"/>		
25.	Light Fixtures	<input checked="" type="checkbox"/>			
26.	Microwave	<input checked="" type="checkbox"/>			
27.	Microwave Hood	<input checked="" type="checkbox"/>			
28.	Plumbing and Fixtures	<input checked="" type="checkbox"/>			
29.	Pool and Equipment		<input checked="" type="checkbox"/>		
30.	Propane Tank (select one): Leased ___ Owned ___				If leased, from where: ?
31.	Radon System				?
32.	Sauna		<input checked="" type="checkbox"/>		
33.	Septic/Leaching Field				?
34.	Sewer Systems/Drains				?
35.	Smart Home System		<input checked="" type="checkbox"/>		Smart Home System includes:
36.	Smoke/Fire Alarm(s)	<input checked="" type="checkbox"/>			
37.	Solar House - Heating		<input checked="" type="checkbox"/>		
38.	Sump Pump(s)				?
39.	Switches and Outlets	<input checked="" type="checkbox"/>			

	SYSTEMS/UTILITIES INFORMATION	Working	Not Working	None	Comments
40.	Underground Sprinkler and Heads			X	
41.	Vent Fan – Kitchen				?
42.	Vent Fan – Bathroom				?
43.	Water Heater (select one): Electric ___ Gas ___	X			Age of system, if known: ?
44.	Water Purifier (select one): Leased ___ Owned ___		X		If leased, from where:
45.	Water Softener (select one): Leased ___ Owned ___		X		If leased, from where:
46.	Well and Pump				?
47.	Wood Burning Stove		X		

Additional Comments \_\_\_\_\_

#### IV. HAZARDOUS CONDITIONS

Are you aware of any existing hazardous conditions of the property and are you aware of any tests having been performed? If the answer is yes to any of the questions below, please explain in additional comments or on an attached separate sheet.

	HAZARDOUS CONDITIONS	Existing Conditions		Tests Performed		Comments
		Yes	No	Yes	No	
1.	Methane Gas					?
2.	Lead Paint					?
3.	Radon Gas (House)					?
4.	Radon Gas (Well)					?
5.	Radioactive Materials					?
6.	Landfill, Mineshaft					?
7.	Expansive Soil					?
8.	Mold					?
9.	Toxic Materials					?
10.	Urea Formaldehyde Foam Insulations					?
11.	Asbestos Insulation					?
12.	Buried Fuel Tanks					?
13.	Chemical Storage Tanks					?
14.	Fire Retardant Treated Plywood					?
15.	Production of Methamphetamines					?
16.	Use of Methamphetamines					?

#### V. MISCELLANEOUS INFORMATION

	MISCELLANEOUS INFORMATION	Yes	No	Don't Know	N/A	Comments
1.	Is the street or road located at the end of the driveway to the property public or private? Public <input checked="" type="checkbox"/> Private ___					
2.	Is there a written road maintenance agreement? If yes, attach a copy of the maintenance agreement.			X		
3.	Has the fireplace/wood stove/chimney flue been cleaned? If yes, please provide date of service.			X		
4.	Since you have owned the property, are you aware of a human death by homicide or suicide occurring on the property?			X		
5.	Is the water source (select one): Public <input checked="" type="checkbox"/> Private ___					If private, what is the date and result of the last water test?

	MISCELLANEOUS INFORMATION	Yes	No	Don't Know	N/A	Comments
6.	Is the sewer system (select one): Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>					if private, what is the date of the last time septic tank was pumped?
7.	Are there broken window panes or seals?			<input checked="" type="checkbox"/>		
8.	Are there any items attached to the property that will not be left (e.g., towel bars, mirrors, curtain rods, window coverings, light fixtures, clothes lines, swing sets, storage sheds, ceiling fans, basketball hoops, mail boxes, tv mounts, speakers, etc.)?		<input checked="" type="checkbox"/>			If yes, please list:
9.	Are you aware of any other material facts that have not been disclosed on this form?			<input checked="" type="checkbox"/>		If yes, please explain:

Additional Comments \_\_\_\_\_

**VI. ADDITIONAL COMMENTS (ATTACH ADDITIONAL PAGES IF NECESSARY)**

*BEEN A RENTAL SINCE OWNERSHIP - NO CLUE*

**CLOSING SECTION**

The Seller hereby certifies that the information contained herein is true and correct to the best of the Seller's information, knowledge, and belief as of the date of the Seller's signature below. If any of these conditions change before conveyance of title to this property, the change will be disclosed in a written amendment to this disclosure statement.

*The Chaska Group LLC 3/17/24*

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

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

THE SELLER AND THE BUYER MAY WISH TO OBTAIN PROFESSIONAL ADVICE AND INSPECTIONS OF THE PROPERTY TO OBTAIN A TRUE REPORT AS TO THE CONDITION OF THE PROPERTY AND TO PROVIDE FOR APPROPRIATE PROVISIONS IN ANY CONTRACT OF SALE AS NEGOTIATED BETWEEN THE SELLER AND THE BUYER WITH RESPECT TO SUCH PROFESSIONAL ADVICE AND INSPECTIONS.

I/We acknowledge receipt of a copy of this statement on the date appearing beside my/our signature(s) below. Any agent representing any party to this transaction makes no representations and is not responsible for any conditions existing in the property.

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

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