STATE OF OHIO

DEPARTMENT OF COMMERCE

RESIDENTIAL PROPERTY DISCLOSURE FORM

Purpose of Disclosure Form: This is a statement of certain conditions and information concerning the property actually **known** by the owner. An owner may or may not have lived at the property and unless the potential purchaser is informed in writing, the owner has no more information about the property than could be obtained by a careful inspection of the **property** by a potential purchaser. Unless the potential purchaser is otherwise informed, the owner has not conducted any **inspection** of generally inaccessible areas of the property. This form is required by Ohio Revised Code Section 5302.30.

THIS FORM IS NOT A WARRANTY OF ANY KIND BY THE OWNER OR BY ANY AGENT OR SUBAGENT REPRESENTING THE OWNER. THIS FORM IS NOT A SUBSTITUTE FOR ANY INSPECTIONS. POTENTIAL PURCHASERS ARE ENCOURAGED TO OBTAIN THEIR OWN PROFESSIONAL INSPECTION(S).

Owner's Statement: The statements contained in this form are made by the owner and are not the statements of the owner's agent or subagent. The statements contained in this form are provided by the owner only to potential purchasers in a transfer made by the owner. The statements are not for purchasers in any subsequent transfers. The information contained in this disclosure form does not limit the obligation of the owner to disclose an item of information that is required by any other statute or law to be disclosed in the transfer of residential real estate.

OWNER INSTRUCTIONS

Instructions to Owner: (1) Answer ALL questions. (2) Report known conditions affecting the property. (3) Attach additional pages with your signature if additional space is needed. (4) Complete this form yourself. (5) If some items do not apply to your property, write NA (not applicable). If the item to be disclosed is not within your actual knowledge, indicate Unknown.

SOLD AS 15

| Owner's Initials | CV | Date 3-12-16 | ጎ |
|------------------|----|--------------|---|
| Owner's Initials | | Date | , |



STATE OF OHIO DEPARTMENT OF COMMERCE

| B) SEWER SYSTEM: The nature of the sanitary sewer system servicing the property is (check appropriate boxes): Public Sewer | | RESIDEN | TIAL PROPERTY DI | SCLOSURE FORM | |
|--|--|---|---|--|---|
| TO BE COMPLETED BY OWNER (Please Print) Property Address: 2485 | Pursuant to section 5302.30 | of the Revised Cod | le and rule 1301:5-6-10 of th | e Administrative Code. | |
| Owners Name(s): Date: | | | | | |
| Owners Name(s): Date: | | · OWINDIN (Freuse) | 1 (1111) | | |
| Owner Name(s): Date: | 2- | 485 IND | MANINA A | VE 43707 | |
| Owner is is not occupying the property. If owner is occupying the property, since what date: If owner is not occupying the property, since what date: THE FOLLOWING STATEMENTS OF THE OWNER ARE BASED ON OWNER'S ACTUAL KNOWLEDGE A) WATER SUPPLY: The source of water supply to the property is (check appropriate boxes): Public Water Service Holding Tank Unknown Private Water Service Spring Other Private Well Spring Shared Well Pond Pond Pond Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water? Is the quantity of water sufficient for your household use? (NOTE: water usage will vary from household to household) Yes B) SEWER SYSTEM The nature of the sanitary sewer system servicing the property is (check appropriate boxes): Private Sewer Private Sewer Septic Tank Leach Field Aceration Tank Filtration Bed Unknown If not a public or private sewer, date of last inspection: Inspected By: Do you know of any previous or current leaks, backups or other material problems with the sewer system servicing the property so If "Yes", please describe and indicate any repairs completed (but not longer than the past 5 years): The private Sewer Septic Tank Private Sewer S | Owners Name(s): | | | 020 0 | |
| THE FOLLOWING STATEMENTS OF THE OWNER ARE BASED ON OWNER'S ACTUAL KNOWLEDGE A) WATER SUPPLY: The source of water supply to the property is (check appropriate boxes): Public Water Service | | | | | |
| THE FOLLOWING STATEMENTS OF THE OWNER ARE BASED ON OWNER'S ACTUAL KNOWLEDGE A) WATER SUPPLY: The source of water supply to the property is (check appropriate boxes): Public Water Service | Owner is is not occu | apying the property. | If owner is occupying the pr | roperty, since what date: | |
| A) WATER SUPPLY: The source of water supply to the property is (check appropriate boxes): Public Water Service | | If | owner is not occurving the r | property since what date: | |
| A) WATER SUPPLY: The source of water supply to the property is (check appropriate boxes): Public Water Service | | | F Company | roporty, since what date. | |
| Public Water Service | THE FOLLOWIN | G STATEMENTS | OF THE OWNER ARE BA | ASED ON OWNER'S ACTUAL KNO | OWLEDGE |
| Public Water Service | A) WATER SUPPLY: T | he source of water si | upply to the property is (chec | ck annronriate hoves): | |
| Private Water Service Cistern Other Private Well Spring Shared Well Pond Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water? No If 'Yes'', please describe and indicate any repairs completed (but not longer than the past 5 years): Is the quantity of water sufficient for your household use? (NOTE: water usage will vary from household to household) Yes B) SEWER SYSTEM: The nature of the sanitary sewer system servicing the property is (check appropriate boxes): Public Sewer Private Sewer Septic Tank Filtration Bed Unknown Other Leach Field Acration Tank Filtration Bed Private Sewer If "Yes", please describe and indicate any repairs completed (but not longer than the past 5 years): Do you know of any previous or current leaks, backups or other material problems with the sewer system servicing the property Yes No If "Yes", please describe and indicate any repairs completed (but not longer than the past 5 years): Information on the operation and maintenance of the type of sewage system serving the property is available from the department of health or the board of health of the health district in which the property is located. C) ROOF: Do you know of any previous or current leaks or other material problems with the roof or rain gutters? Yes If "Yes", please describe and indicate any repairs completed (but not longer than the past 5 years): | Public W | ater Service | | | |
| Private Well Spring Pond | MARKET AND THE PARTY OF THE PAR | | | | |
| Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water? Is the quantity of water sufficient for your household use? (NOTE: water usage will vary from household to household) | | | | U Other | *************************************** |
| Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water? Is the quantity of water sufficient for your household use? (NOTE: water usage will vary from household to household) \[Yes \] B) SEWER SYSTEM. The nature of the sanitary sewer system servicing the property is (check appropriate boxes): Private Sewer | | | processory . | | |
| Is the quantity of water sufficient for your household use? (NOTE: water usage will vary from household to household) \[Yes \] B) SEWER SYSTEM: The nature of the sanitary sewer system servicing the property is (check appropriate boxes): \[Public Sewer \text{Private Sewer} \text{Septic Tank} \text{Private Sewer} \ | ☐ Shared W | en | L Pond | | |
| Do you know of any previous or current leaks, backups or other material problems with the sewer system servicing the property Yes No If "Yes", please describe and indicate any repairs completed (but not longer than the past 5 years): | Is the quantity of water suff B) SEWER SYSTEM: T Jublic Se Leach Fie | ficient for your house the nature of the sanit | tary sewer system servicing to Private Sewer | the property is (check appropriate boxes | old) Yes No |
| Do you know of any previous or current leaks, backups or other material problems with the sewer system servicing the property Yes No If "Yes", please describe and indicate any repairs completed (but not longer than the past 5 years): | If not a public or private sex | ver date of last inch | Other | Towns of 1D | |
| Information on the operation and maintenance of the type of sewage system serving the property is available from the department of health or the board of health of the health district in which the property is located. C) ROOF: Do you know of any previous or current leaks or other material problems with the roof or rain gutters? Yes If "Yes", please describe and indicate any repairs completed (but not longer than the past 5 years): D) WATER INTRUSION: Do you know of any previous or current water leakage, water accumulation, excess moisture or defects to the property, including but not limited to any area below grade, basement or crawl space? Yes No If "Yes". please describe and indicate any repairs completed: | Do you know of any previous Yes No If "Yes", | pus or current leaks please describe and | , backups or other material p indicate any repairs complet | problems with the sewer system servicing ed (but not longer than the past 5 years) |): |
| C) ROOF: Do you know of any previous or current leaks or other material problems with the roof or rain gutters? Yes If "Yes", please describe and indicate any repairs completed (but not longer than the past 5 years): D) WATER INTRUSION: Do you know of any previous or current water leakage, water accumulation, excess moisture or defects to the property, including but not limited to any area below grade, basement or crawl space? Yes No If "Yes". please describe and indicate any repairs completed: | Information on the operat | ion and maintenan | ce of the type of sewage sys | tem serving the property is available | |
| defects to the property, including but not limited to any area below grade, basement or crawl space? Yes No If "Yes", please describe and indicate any repairs completed: | C) ROOF: Do you know | of any previous or o | current leaks or other mater | ial problems with the roof or rain gutter | s? Yes No |
| Owner's Initials (Ar. Data 2 -12 -19 | defects to the property, incli | uding but not limited | to any area below grade, ba | ter leakage, water accumulation, excess sement or crawl space? Yes No | moisture or other |
| | Overnor's Initial /A - 5 | 2 - 2 - 19 | 3 | *** | |
| Owner's Initials Date Date Date Date Date Date Date Date | Owner's Initials D | ate 3-12 | | Purchaser's Initials | Date |
| (Page 2 of 5) | O mor o miniaro D | atc | (Page 2 of 5) | rurchaser's initials | Date |

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| Property Address | 2485 W | DIANOLA | - AME | 42707 |
|---|---|---|--|--|
| Do you know of any water or condensation; ice damming; s If "Yes", please describe and | over over now backup. | a leaking nines ninm | ilings as a result of flood bing fixtures, or applianc | ing; moisture scepage; moisture es? Yes No |
| Have you ever had the proper If "Yes", please describe and | ty inspected for mold by indicate whether you have | a qualified inspector? ve an inspection report | and any remediation und | es No dertaken: |
| Purchaser is advised that ev this issue, purchaser is enco | ery home contains mol uraged to have a mold | d. Some people are inspection done by a | more sensitive to mold t qualified inspector. | han others. If concerned about |
| interior/exterior walls? Yes No If "Ves" | lemishes) or other mater | ial problems with the f | ent, shifting, deterioratio foundation, basement/cra | |
| Do you know of any previous If "Yes", please describe and i | s or current fire or smol indicate any repairs comp | se damage to the properties. | erty? Yes No | |
| F) WOOD DESTROYING insects/termites in or on the pr If "Yes", please describe and i | ODCILV OF ANY EXISTING OF | made to the property | contend by mond doctures | |
| 1) Electrical 2) Plumbing (pipes) 3) Central heating 4) Central Air conditioning 5) Sump pump 6) Fireplace/chimney 7) Lawn sprinkler | YES NO N/A | 8) Water so a. Is water 9) Security a. Is secur 10) Central v 11) Built in a 12) Other me | mark N/A (Not Applicab ftener r softener leased? System ity system leased? acuum ppliances chanical systems | th the following existing ole). YES NO N/A Ole |
| H) PRESENCE OF HAZAR identified hazardous materials (1) Lead-Based Paint (2) Asbestos (3) Urea-Formaldehyde Foam I (4) Radon Gas (a. If "Yes", indicate level of (5) Other toxic or hazardous suff the answer to any of the above property: | Insulation If gas if known bstances we questions is "Yes", plo | Yes No | Unknown | |
| Owner's Initials Date Date | 3-12-19 | (Page 3 of 5) | Purchaser's Purchaser's | Initials Date Initials Date |

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| 1) ENDERGROUND STORAGE TANKSWELLS: Do you know of any underground storage tanks (existing or removed), oil or it "Yes", please describe: Do you know of any oil, gas, or other mineral right leases on the property? Yes No | Property Address | 2485 | WOLAN | aA | AUE | 43202 | - |
|---|--|---|--|---------------------------------|---|---|-----------|
| Purchaser should exercise whatever due diligence purchaser deems necessary with respect to oil, gas, and other mineral rights information may be obtained from records contained within the recorder's office in the county where the property is located. J) FLOOD PLAIN/LAKE ERIE COASTAL EROSION AREA: Is the property located in a designated flood plain? Is the property or any portion of the property included in a Lake Erie Coastal Erosion Area? K) DRAINAGE/EROSION: Do you know of any previous or current flooding, drainage, settling or grading or erosion problems affecting the property? Yes No If "Yes", please describe and indicate any repairs, modifications or alterations to the property or other attempts to control any problems (but not longer than the past 5 years): L) ZONING/CODE VIOLATIONS/ASSESSMENTS/HOMEOWNERS' ASSOCIATION: Do you know of any violations of building or housing codes, zoning ordinances affecting the property or any nonconforming uses of the property? Yes No If "Yes", please describe. Is the structure on the property designated by any governmental authority as a historic building or as being located in an historic district? (NOTE: such designation may limit changes or improvements that may be made to the property? Yes No If "Yes", please describe: List any assessments paid in full (date/amount) List any assessments paid in full (date/amount) List any surrent assessments: monthly fee Length of payment (years months Property Yes No If "Yes", please describe (amount) M) BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any recent or proposed rules or regulations of, or the payment of any fees or charges associated with this property. Yes No Yes No Yes No Yes No Property Yes | Sas Herrs (pruggett | ORAGE TANKS/WEL | LS: Do you know o | of any underg | round storage tanks | (existing or removed), | oil or |
| Purchaser should exercise whatever due diligence purchaser deems necessary with respect to oil, gas, and other mineral rights information may be obtained from records contained within the recorder's office in the county where the property is located. J) FLOOD PLAIN/LAKE ERIE COASTAL EROSION AREA: Is the property located in a designated flood plain? Is the property or any portion of the property included in a Lake Erie Coastal Erosion Area? K) DRAINAGE/EROSION: Do you know of any previous or current flooding, drainage, settling or grading or erosion problems affecting the property? Yes No If "Yes", please describe and indicate any repairs, modifications or alterations to the property or other attempts to control any problems (but not longer than the past 5 years): L) ZONING/CODE VIOLATIONS/ASSESSMENTS/HOMEOWNERS' ASSOCIATION: Do you know of any violations of building or housing codes, zoning ordinances affecting the property or any nonconforming uses of the property? Yes No If "Yes", please describe. Is the structure on the property designated by any governmental authority as a historic building or as being located in an historic district? (NOTE: such designation may limit changes or improvements that may be made to the property? Yes No If "Yes", please describe: List any assessments paid in full (date/amount) List any assessments paid in full (date/amount) List any surrent assessments: monthly fee Length of payment (years months Property Yes No If "Yes", please describe (amount) M) BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any recent or proposed rules or regulations of, or the payment of any fees or charges associated with this property. Yes No Yes No Yes No Yes No Property Yes | Do you know of any oil, g | as, or other mineral right | leases on the propert | ty? ☐Yes | | | |
| St. the property located in a designated flood plain? Is the property located in a designated flood plain? Is the property located in a designated flood plain? Is the property or any portion of the property included in a Lake Eric Coastal Erosion Area? Is the property or any portion of the property included in a Lake Eric Coastal Erosion Area? Is the property or only problems flower than the past 5 years; Is the property or other attempts to control any problems (but not longer than the past 5 years); Is the structure on the property designated by any governmental authority as a historic building or as being located in an historic district? (NOTE: such designation may limit changes or improvements that may be made to the property. It's property or any assessments paid in full (date/amount) Is the year of the property or any property or any property. Is the structure on the property designated by any governmental authority as a historic building or as being located in an historic district? (NOTE: such designation may limit changes or improvements that may be made to the property. Is the structure on the property designated by any governments that may be made to the property. Is the structure on the property designated by any governments that may be made to the property. Is any assessment paid in full (date/amount) Is any current assessments: Is any assessments paid in full (date/amount) Is any current assessments: Is any assessments paid in full (date/amount) Is any current assessments: In any current | Purchaser should exercis | e whatever due diligenc | e nurchasar daame | 11000000 mm | ith | as, and other mineral | rights. |
| If "Tes", please describe and indicate any repairs, modifications or alterations to the property or other attempts to control any problems (but not longer than the past 5 years): L) ZONING/CODE VIOLATIONS/ASSESSMENTS/HOMEOWNERS' ASSOCIATION: Do you know of any violations of building or housing codes, zoning ordinances affecting the property or any nonconforming uses of the property? Yes No Yes No If "Yes", please describe: Is the structure on the property designated by any governmental authority as a historic building or as being located in an historic district? (NOTE: such designation may limit changes or improvements that may be made to the property). Yes No If "Yes", please describe: Do you know of any recent or proposed assessments, fees or abatements, which could affect the property? Yes No It is any assessments paid in full (date/amount) List any assessments paid in full (date/amount) List any current assessments: monthly fee Length of payment (years months Do you know of any recent or proposed rules or regulations of, or the payment of any fees or charges associated with this property, including but not limited to a Community Association, SID, CID, LID, etc. Yes No If "Yes", please describe (amount) M) BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any of the following conditions affecting the property? Yes No Yes No 1) Boundary Agreement 4) Shared Driveway 5) Party Walls 6) Party Walls 7) Party Walls | J) FLOOD PLAIN/LAK Is the property located in a | E ERIE COASTAL ER designated flood plain? | OSION AREA: | | Yes | | |
| Is the structure on the property designated by any governmental authority as a historic building or as being located in an historic district? (NOTE: such designation may limit changes or improvements that may be made to the property). Do you know of any recent or proposed assessments, fees or abatements, which could affect the property? Do you know of any recent or proposed assessments, fees or abatements, which could affect the property? List any assessments paid in full (date/amount) List any assessments paid in full (date/amount) List any urrent assessments: monthly fee Length of payment (years months Do you know of any recent or proposed rules or regulations of, or the payment of any fees or charges associated with this property, including but not limited to a Community Association, SID, CID, LID, etc. Yes No BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any of the following conditions affecting the property? Yes No BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any of the following conditions affecting the property? Yes No BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any of the following conditions affecting the property? Yes No BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any of the following conditions affecting the property? Yes No Yes No Yes No Yes No OTHER KNOWN MATERIAL DEFECTS: The following are other known material defects in or on the property that could be dangerous to anyone occupying the property or any non-observable physical condition existing on the property sue of the property. Owner's Initials Date Purchaser's Initials Date Purchaser's Initials Date Owner's Initials Date | If "Yes", please describe a | nd indicate any repairs, n | odifications or altera | ations to the | nronerty or other att | amnte to control and | blems |
| It is any assessments paid in full (date/amount) List any assessments paid in full (date/amount) List any assessments paid in full (date/amount) List any current assessments: monthly fee Length of payment (years months Do you know of any recent or proposed rules or regulations of, or the payment of any fees or charges associated with this property, including but not limited to a Community Association, SID, CID, LID, etc. M) BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any of the following conditions affecting the property? Yes No 1) Boundary Agreement 2) Boundary Dispute 3) Recent Boundary Change If the answer to any of the above questions is "Yes", please describe: N) OTHER KNOWN MATERIAL DEFECTS: The following are other known material defects in or on the property that could be dangerous to anyone occupying the property or any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property. Owner's Initials Date Purchaser's Initials Date Purchaser's Initials Date Purchaser's Initials Date | building of Housing Codes, | zoning ordinances affect | ng the property or at | ny nonconfor | ming ugas of the me | know of any violation operty? Yes N | s of o |
| List any assessments paid in full (date/amount) List any current assessments: | district: (NOTE, Such des | ignation may limit change | es or improvements t | hat may be n | e building or as bein nade to the property | g located in an historic). Yes No | |
| Do you know of any recent or proposed rules or regulations of, or the payment of any fees or charges associated with this property, including but not limited to a Community Association, SID, CID, LID, etc. Yes No If "Yes", please describe (amount) M) BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS: Do you know of any of the following conditions affecting the property? Yes No 1) Boundary Agreement 2) Boundary Dispute 3) Recent Boundary Change If the answer to any of the above questions is "Yes", please describe: N) OTHER KNOWN MATERIAL DEFECTS: The following are other known material defects in or on the property that could be dangerous to anyone occupying the property or any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property. Owner's Initials Date | Do you know of any recent If "Yes", please describe: | t or proposed assessmer | its, fees or abatement | ts, which cou | ald affect the proper | y? Yes No | |
| Do you know of any recent or proposed rules or regulations of, or the payment of any fees or charges associated with this property, including but not limited to a Community Association, SID, CID, LID, etc. Yes No Yes No Yes No Yes No | List any assessments paid i List any current assessment | n full (date/amount) ts:mont | hly fee | Leng | th of payment (year | s months |) |
| 1) Boundary Agreement 2) Boundary Dispute 3) Recent Boundary Change 16) Encroachments From or on Adjacent Property 17) If the answer to any of the above questions is "Yes", please describe: N) OTHER KNOWN MATERIAL DEFECTS: The following are other known material defects in or on the property: For purposes of this section, material defects would include any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property. Owner's Initials Date | Do you know of any recent including but not limited to | or proposed rules or regu a Community Association | lations of, or the pay | vment of any | fees or charges acco | ociated with this proper | rty, |
| 1) Boundary Agreement 2) Boundary Dispute 3) Recent Boundary Change 1) The answer to any of the above questions is "Yes", please describe: N) OTHER KNOWN MATERIAL DEFECTS: The following are other known material defects in or on the property: For purposes of this section, material defects would include any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property. Owner's Initials Date | M) BOUNDARY LINES | ENCROACHMENTS/S | SHARED DRIVEW | AV/DADTS | /WALLS: Do you | I | |
| 2) Boundary Dispute 3) Recent Boundary Change 6) Encroachments From or on Adjacent Property If the answer to any of the above questions is "Yes", please describe: N) OTHER KNOWN MATERIAL DEFECTS: The following are other known material defects in or on the property: For purposes of this section, material defects would include any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property. Owner's Initials Date Date Date Date Date Date Date | following conditions affect | ing the property? Yes | | AITIANI | WALLS. Do you | | No |
| For purposes of this section, material defects would include any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property. Owner's Initials Date Date Date Date Date | 2) Boundary Dispute3) Recent Boundary Chang | | 5) Party (6) Encros | Walls achments Fro | om or on Adjacent P | roperty | I |
| For purposes of this section, material defects would include any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property. Owner's Initials Date | N) OTHER KNOWN MA | TERIAL DEFECTS: | The following are oth | ner known m | aterial defects in or | on the property: | |
| Owner's Initials Date | | | | | | | |
| Date | be dangerous to anyone occ | , material defects would i upying the property or an | nclude any non-obse y non-observable ph | ervable physi sysical condit | cal condition existir | ng on the property that of it a person's use of the | could |
| Date | Owner's Initials Ov | Pate 3-12-19 | | | Purchaser's Init | ials Date | |
| (I ago T OI J) | Owner s mitials D | rate | (Page 4 of 5 |) | Purchaser's Init | rials Date | |

SOLD AS 15.

Property Address 2485 INDANAA AVE 43202

CERTIFICATION OF OWNER

Owner certifies that the statements contained in this form are made in good faith and based on his/her actual knowledge as of the date signed by the Owner. Owner is advised that the information contained in this disclosure form does not limit the obligation of the owner to disclose an item of information that is required by any other statute or law or that may exist to preclude fraud, either by misrepresentation, concealment or nondisclosure in a transaction involving the transfer of residential real estate.

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|--|--|
| OWNER: LV RAN PROPORTY | DATE: 3-12-19 |
| OWNER: | DATE: |
| DECEMPE | |
| RECEIPT AND ACKNOWLEDGEME | NT OF POTENTIAL PURCHASERS |
| Potential purchasers are advised that the owner has no obligation to u 5302.30(G). Pursuant to Ohio Revised Code Section 5302.30(K), if purchase contract for the property, you may rescind the purchase co Owner or Owner's agent, provided the document of rescission is closing; 2) 30 days after the Owner accepted your offer; and 3) with of this form or an amendment of this form. | ontract by delivering a signed and dated document of rescission to |
| Owner makes no representations with respect to any offsite copurchaser deems necessary with respect to offsite issues that may | onditions. Purchaser should exercise whatever due diligence affect purchaser's decision to purchase the property. |
| Purchaser should exercise whatever due diligence purchase Registration and Notification Law (commonly referred to as "N written notice to neighbors if a sex offender resides or intends public record and is open to inspection under Ohio's Public Reresponsibility to obtain information from the Sheriff's office re Law. | deems necessary with respect to Ohio's Sex Offender degan's Law"). This law requires the local Sheriff to provide to reside in the area. The notice provided by the Sheriff is a cords Law. If consequently the sheriff is a |
| Purchaser should exercise whatever due diligence purchaser deel If concerned about this issue, purchaser assumes responsibility Resources. The Department maintains an online map of www.dnr.state.oh.us. | ems necessary with respect to abandoned underground mines. to obtain information from the Ohio Department of Natural known abandoned underground mines on their website at |
| I/WE ACKNOWLEDGE RECEIPT OF A COPY OF THIS I STATEMENTS ARE MADE BASED ON THE OWNERS A THE OWNER. | DISCLOSURE FORM AND UNDERSTAND THAT THE CTUAL KNOWLEDGE AS OF THE DATE SIGNED BY |
| My/Our Signature below does not constitute approval of any disclosed | d condition as represented herein by the owner. |
| PURCHASER: | DATE: |
| PURCHASER: | DATE: |

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

Lead Warning Statement

Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

| | | ча вазей ранк нагагаз із гесопітієпаей | phor to purchase. | |
|------|-------------|--|--|--|
| | ller's Disc | | | |
| (a) | | e of lead-based paint and/or lead-bas | ed paint hazards (check (i) or | (ii) below): |
| | (i) | Known lead-based paint and/or lea (explain). | d-based paint hazards are pr | esent in the housing |
| /I-\ | (ii) | Seller has no knowledge of lead-bas | ed paint and/or lead-based p | aint hazards in the housing |
| (b) | | and reports available to the seller (ch | AND A STATE OF THE PROPERTY OF | |
| | (i) | Seller has provided the purchaser w based paint and/or lead-based pain | ith all available records and the hazards in the housing (list | reports pertaining to lead- documents below). |
| | (ii) | Seller has no reports or records pert hazards in the housing. | aining to lead-based paint a | nd/or lead-based paint |
| Pu | rchaser's | Acknowledgment (initial) | | |
| (c) | | Purchaser has received copies of all | information listed above. | |
| (d) | | Purchaser has received the pamphle | | d in Your Home. |
| (e) | Purchase | r has (check (i) or (ii) below): | | The state of the s |
| | (i) | received a 10-day opportunity (or moment or inspection for the presence | utually agreed upon period) to of lead-based paint and/or le | o conduct a risk assess- ad-based paint hazards: or |
| | (ii) | waived the opportunity to conduct a lead-based paint and/or lead-based | risk assessment or inspection | on for the presence of |
| Age | ent's Ackn | owledgment (initial) | | |
| (f) | JE | Agent has informed the seller of the aware of his/her responsibility to en | seller's obligations under 42 sure compliance. | U.S.C. 4852(d) and is |
| Cer | tification | of Accuracy | | |
| The | following | parties have reviewed the information at ey have provided is true and accurate. | pove and certify, to the best of t | heir knowledge, that the |
| Call | EV TO | 2011 Papper 3-19 | 1-19 | |
| Sell | er | Date | Sellér | Date |
| Pure | chaser | Date | Purchaser | Date |
| Age | nt. | Date of Listing | | |
| Age | iii | Date | Agent | Date |