

Real Estate: 43-03817-001

Year: 2018

			Year: 20	018							
SUMMAR	Υ									_	
Deeded Nan	ne NE	EDLES JANE L									
Owner	NE 24	EDLES JANE L 1 BANK LANE S.E. W PHILADELPHIA OH 44	1663		Тахра	iyer	241 B	DLES JANE L ANK LANE S.E.			
Tax District	43-	·NEW PHILA MUNI TWP - EW PHILA C.S.D.)		Р	Land	Use		PHILADELPHIA INGLE FAMILY			
School Distri		W PHIL. SD			Subdi	uision					
Location		SE BANK LN			Legal	VISIOII	DD 74	72 7148 SQ FT	-		
CD Year			Map Number		106.04	1		Routing Numbe			
Acres	0.0	000	Sold		2/27/2			Sales Amount	0.00		
VALUE						RGES		Sales Amount	Ų.00		-
District	43-	NEW PHILA MUNI TWP -	NEW PHILA CORE	P	0117	Pric	0.6	First	[C1	- 1	
4.50.100		W PHILA C.S.D.)	MENT PHIER CORP	r	Tax	Pik		First	Second	Total	
Land Use		SINGLE FAMILY DWELL	ING		Specia	d d	0.00				1,100.52
		Appraised	Assessed		Total	21	0.00		i		6.00
Land		16,520		5,780	Paid		0.00	·			1,106.52
Improvement		80,670		8,230	Due		0.00				553,26
Total		97,190		4.010	246			0.00	1 553.26		553.26
CAUV	N.	0		0							
Homestead	Y	25,000		8.750							
00C	Y	97,190	34	4.010							
Taxable		97,190	34	4,010							
TRANSFE	R HISTORY	'									
Date		Buyer			Conv	/еуапсе	Deed	Type	Sales A	mount	Valid
2/27/2019	NEEDLES JA	ANE L				0311	AFFID	**		\$0.00	N
4/9/1999	NEEDLES R	ICHARD L & JANE L				528 J	OINT SUR	VIVORSHIP	\$79.9	00.00	Y
6/24/1998		IAN A & RONI L			9	0849 J	OINT SUR	VIVORSHIP		\$0.00	N
2/26/1998	MCINTURF J	IAN A & RONI L			9	0289	CORRECT	IVE DEED		\$0.00	N
1/2/1998	MCINTURF J	IAN A & RONI L				10	FIDUC	IARY	\$25.0	00.00	N
LAND											
Туре				_	Dimensi	ons	Des	scription			Value
FR-FRONT L				57.00	0 X 125.	000		rontage / Depth			16,520
DWELLING	3										
Card 1						-					
Style		01-SINGLE FAMILY	Family Rooms				0 Heat	ina			Υ
Stories		1.00	Dining Rooms				0 Cool	•			Ÿ
Rec Room An		0	Year Built			19	998 Grad	_			C-4
Finished Base	ement	0	Year Remodeled					lace Openings			0
Rooms		4	Full Baths				1 Firep	lace Stacks			0
Bed Rooms		2	Half Baths					g Area			1,008
			Other Fixtures				0 Value	B			80,670
OTHER IM	<u>PROVEMEI</u>	<u>TV</u>									
Card Type		Year Buil	t Year Remodeled	Cond	lition	Dimensi	ions Des	cription	Size		Value
1 SHED-	SHED	2011		A-AVE	RAGE	8 X 1		gth x Width tional)	80		0
1 SHED-	SHED	2011		A-AVE	RAGE	10 X 1	6 Len	gth x Width tional)	160		0

N Gas

N Well

UTILITIES Water

N Sewer

N Electric

N Septic

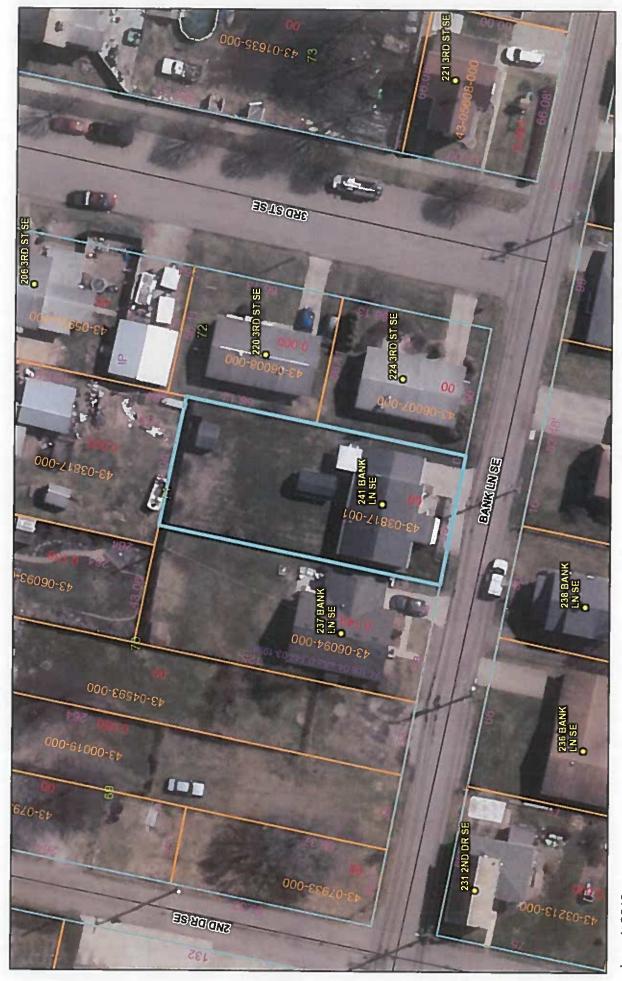
Card 1 ID Description A 1SFR/B B OFP C 1CFG D OFP	Size 1,008 120 288 120				1
A 1SFR/B B OFP C 1CFG	1,008 120 288 120				1
B OFP C 1CFG	1,008 120 288 120				
C 1CFG	120 288 120				
	288 120				
D OFP	120				
1 SHED-SHED	80				
2 SHED-SHED	160			2	10
					12 12
		-			10
		Marries o	36		
		St. Line			12
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		20			28 24 24

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June 4, 2019

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STATE OF OHIO DEPARTMENT OF COMMERCE

RESIDENTIAL PROPERTY DISCLOSURE FORM

241 BANK LANE SE

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.

11	PAA	
Owner's Owner's	Initials VwL Date Date	
	FOA	

Purchaser's Initials Date Date



STATE OF OHIO DEPARTMENT OF COMMERCE

It "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) B) SEWER SYSTEM: The nature of the sanitary sewer system servicing the property is (check appropriate boxes): Public Sewer Private Sewer Septic Tank Leach Field Aeration Tank Filtration Bed Unknown Other 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? 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? No 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 other defects to the property, including but not limited to any area below grade, basement or crawl space? No If "Yes", please describe and indicate any repairs completed:	RESID	ENTIAL PROPERTY DIS	SCLOSURE FORM	
TO BEICO MPLETED BY OWNER (Please Print) Property Address:	Pursuant to section 5302.30 of the Revised	1 Code and rule 1301:5-6-10 of the	Administrative Code.	
Owners Name(s):				
Date:	Property Address:	2		
Owner is in the not occupying the property. If owner is occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property, since what date: If owner is, not occupying the property is (check appropriate boxes): If what is, please describe and indicate any repairs completed (but not longer than the past 5 years): If not a public or private sewer, date of last inspection: If not a public or private sewer, date of last inspection: Information on the operation and maintenance of the type of sewage system servicing the property is available from the department of health or the board of health of the health district in which the property is located. If we will not	Owners Name(s): JANE N	eedles		
THE FOLLOWING STATEMENTS OF THE OWNER ARE BASED ON OWNERS 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 Sistern 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? Yes 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 No No No No No No No	Date: 3 - 30 - 19	, 20		
THE FOLLO WING STATEMENTS OF THE OWNER ARE BASED ON OWNERS 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 Sistern 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? Yes 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 No No No No No No No	Owner is is not occupying the prop	erty. If owner is occupying the pro	operty, since what date:	
A) WATER SUPPLY: The source of water supply to the property is (check appropriate boxes): Public Water Service		TC		574, 2019
Public Water Service	THE FOLLOWING STATEMEN	NTS OF THE OWNER ARE BA	SED ON OWNERS ACTUAL KN	OWLEDGE
Public Water Service	A) WATER SUPPLY: The source of wa	iter supply to the property is (chec)	(annronriate hoxes)	
Private Water Service	Public Water Service			
Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water?	Private Water Service			
Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water? Yes Yes	Private Well	Spring		
It "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) B) SEWER SYSTEM: The nature of the sanitary sewer system servicing the property is (check appropriate boxes): Public Sewer	Shared Well	Pond		
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 No 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 other 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:	Is the quantity of water sufficient for your left. B) SEWER SYSTEM: The nature of the Public Sewer Leach Field Unknown	sanitary sewer system servicing the Private Sewer	ge will vary from household to househole property is (check appropriate boxes Septic Tank Filtration Bed	old) Yes No
C) ROOF: Do you know of any previous or current leaks or other material problems with the roof or rain gutters? Yes No 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 other 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 or current !	leaks, backups or other material pr	oblems with the sewer system servicing	ng the property?
C) ROOF: Do you know of any previous or current leaks or other material problems with the roof or rain gutters? Yes No 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 other 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 operation and mainted department of health or the board of hea	enance of the type of sewage system of the health district in which	em serving the property is available in the property is located.	from the
If "Yes", please describe and indicate any repairs completed:	C) ROOF: Do you know of any previous	SOF CUFFERT leaks or other materia	l problems with the roof or rain gutter	s? Dyes No
2 L 10 '_	defects to the property, including but not lin	nited to any area below grade, base	r leakage, water accumulation, excess ement or crawl space? Yes No	moisture or other
Owner's Initials Volt Date Purchaser's Initials Date Date	1/ 10			
Purchaser's Initials Date	Owner's Initials VVK Date		Purchaser's Initials	Date
Page 2 of 5)		(Page 2 of 5)	Purchaser's Initials	Date

Property Address 24	BANK O	Ane SE		
Do you know of any water or n condensation; ice damming; se If "Yes", please describe and in	noisture related damage to wer overflow/backup; or	o floors, walls or ceiling		sture seepage; moisture Yes No
Have you ever had the property If "Yes", please describe and in	inspected for mold by a dicate whether you have	qualified inspector? an inspection report an	Yes IN N	lo :
Purchaser is advised that ever this issue, purchaser is encour	ry home contains mold. aged to have a mold ins	Some people are mor spection done by a qua	re sensitive to mold than oth	ers. If concerned about
E) STRUCTURAL COMPONEXTERIOR WALLS): Do you than visible minor cracks or ble interior/exterior walls? Yes No If "Yes", pl problem identified (but not long	JENTS (FOUNDATION we know of any previous mishes) or other material ease describe and indicate	N, BASEMENT/CRAV OF CUFFERT movement, problems with the four	WLSPACE, FLOORS, INTI , shifting, deterioration, materi idation, basement/crawl space	ial cracks/settling (other , floors, or
Do you know of any previous of if "Yes", please describe and inc	or current fire or smoke dicate any repairs comple	damage to the property	? Yes No	
F) WOOD DESTROYING IN insects/termites in or on the prop If "Yes", please describe and inc	icity of ally existing flam	age to the property can	sed by wood destroying income	ny wood destroying ts/termites? Yes No
G) MECHANICAL SYSTEM mechanical systems? If your pro	S: Do you know of any operty does not have the	previous or current p	roblems or defects with the fo	llowing existing
1) Electrical 2) Plumbing (pipes) 3) Central heating 4) Central Air conditioning 5) Sump pump 6) Fireplace/chimney 7) Lawn sprinkler If the answer to any of the above than the past 5 years):		8) Water soften a. Is water soft 9) Security Sys a. Is security (10) Central vacu 11) Built in appli 12) Other mecha	tem YES tem System leased? um Siances Inical systems	
than the past 5 years): H) PRESENCE OF HAZARD				
identified hazardous materials on 1) Lead-Based Paint 2) Asbestos 3) Urea-Formaldehyde Foam Ins 4) Radon Gas a. If "Yes", indicate level of a 5) Other toxic or hazardous subs If the answer to any of the above property:	sulation gas if known tances questions is "Yes", pleas	No D	Unknown	
Owner's Initials Vol Date Owner's Initials Vol Date PoA		(Page 3 of 5)	Purchaser's Initials Purchaser's Initials	Date Date

Property Address 24/ 3	ANK	CAne	SE.			
I) UNDERGROUND STORAGE TANKS/\ natural gas wells (plugged or unplugged), or al If "Yes", please describe:	dandoned wate	er wells on the pr	underground storoperty? Yes	rage tanks (existing	or removed), oil	l or
Do you know of any oil, gas, or other mineral i	right leases on	the property?	Yes No			
Purchaser should exercise whatever due dili Information may be obtained from records (igence purcha	ser deems neces	sary with reener	et to oil, gas, and o ounty where the g	ther mineral rig	ghts. ed.
J) FLOOD PLAIN/LAKE ERIE COASTAI Is the property located in a designated flood pla Is the property or any portion of the property in	L EROSION ain?	AREA:		Yes &	Unknown	
K) DRAINAGE/EROSION: Do you know of affecting the property? Yes No If "Yes", please describe and indicate any repair problems (but not longer than the past 5 years):	irs, modificati	ons or alterations	to the property o	r other attempts to	control one	ms
L) ZONING/CODE VIOLATIONS/ASSESS building or housing codes, zoning ordinances a If "Yes", please describe:	mecting the pr	MEOWNERS'	nconforming uses	: Do you know of of the property?	any violations of	f
Is the structure on the property designated by and district? (NOTE: such designation may limit characters, please describe:	hanges or imp	rovements that m	historic building ay be made to the	or as being located property).	in an historic	
Do you know of any recent or proposed assess If "Yes", please describe:	sments, fees o	r abatements, wh	ich could affect t	he property?	es No	
List any assessments paid in full (date/amount) List any current assessments: Do you know of any recent or proposed rules or including but not limited to a Community Associate (amount)	r regulations o	f, or the payment	of any fees or ch	arges associated w	_ monthsith this property,)
M) BOUNDARY LINES/ENCROACHMEN	TS/SHARED	DRIVEWAY/F	PARTY WALLS	: Do you know of	any of the	
following conditions affecting the property?	Yes No					No
1) Boundary Agreement 2) Boundary Dispute 3) Recent Boundary Change f the answer to any of the above questions is "Y	es", please de	4) Shared Driv 5) Party Walls 6) Encroachmescribe:	eway ents From or on A	djacent Property	8 3	AZZA.
N) OTHER KNOWN MATERIAL DEFECT					operty:	
For purposes of this section, material defects wo be dangerous to anyone occupying the property or property.	ould include an or any non-ob	ny non-observabl servable physical	e physical conditi condition that co	on existing on the pould inhibit a person	property that could be a suse of the	ld
N. O. PAA						
Owner's Initials VNR Date Owner's Initials VNP Date			Purch	aser's Initials aser's Initials	Date	
Povi	(Page 4 of 5)	Purch	aser's Initials	Date	

Property Address 241 BAK LANE SE

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.

OWNER: Noth Poro DATE: N 5/30/2019

OWNER: DATE:

RECEIPT AND ACKNOWLEDGEMENT OF POTENTIAL PURCHASERS

Potential purchasers are advised that the owner has no obligation to update this form but may do so according to Revised Code Section 5302.30(G). Pursuant to Ohio Revised Code Section 5302.30(K), if this form is not provided to you prior to the time you enter into a purchase contract for the property, you may rescind the purchase contract by delivering a signed and dated document of rescission to Owner or Owner's agent, provided the document of rescission is delivered <u>prior</u> to all three of the following dates: 1) the date of closing; 2) 30 days after the Owner accepted your offer; and 3) within 3 business days following your receipt or your agent's receipt of this form or an amendment of this form.

Owner makes no representations with respect to any offsite conditions. Purchaser should exercise whatever due diligence purchaser deems necessary with respect to offsite issues that may affect purchaser's decision to purchase the property.

Purchaser should exercise whatever due diligence purchaser deems necessary with respect to Ohio's Sex Offender Registration and Notification Law (commonly referred to as "Megan's Law"). This law requires the local Sheriff to provide written notice to neighbors if a sex offender resides or intends to reside in the area. The notice provided by the Sheriff is a public record and is open to inspection under Ohio's Public Records Law. If concerned about this issue, purchaser assumes responsibility to obtain information from the Sheriff's office regarding the notices they have provided pursuant to Megan's Law.

Purchaser should exercise whatever due diligence purchaser deems necessary with respect to abandoned underground mines. If concerned about this issue, purchaser assumes responsibility to obtain information from the Ohio Department of Natural Resources. The Department maintains an online map of known abandoned underground mines on their website at www.dnr.state.oh.us.

I/WE ACKNOWLEDGE RECEIPT OF A COPY OF THIS DISCLOSURE FORM AND UNDERSTAND THAT THE STATEMENTS ARE MADE BASED ON THE OWNERS ACTUAL KNOWLEDGE AS OF THE DATE SIGNED BY THE OWNER.

My/Our Signature below does not constitute approval of any disclosed condition as represented herein by the owner.

PURCHASER: _____ DATE: _____ DATE: _____

(Page 5 of 5)



AGENCY DISCLOSURE STATEMENT



The real estate agent who is providing you with this form is required to do so by Ohio law. You will not be bound to pay the agent or the agent's brokerage by merely signing this form. Instead, the purpose of this form is to confirm that you have been advised of the role of the agent(s) in the transaction proposed below. (For purposes of this form, the term "seller" includes a landlord and the term "buyer" includes a tenant.)

Property Address:	24/ 7	ANK 4	NE SE		
Buyer(s):					
Seller(s): //-	eedles				
	I. TRANSACTION	INVOLVING TWO	AGENTS IN TWO DIFFE	RENT BROKE	RAGES
The buyer will be	represented by			, and	
		AGENT(S)			ROKERAGE
The seller will be a	represented by	AGENT(S)		and	ROKERAGE
	e real estate brokerag	e	WO AGENTS IN THE SAl	ME BROKERA	AGE
Agent(s)Agent(s)	***			vork(s) for the bu	lyer and ller. Unless personally
involved in the	e transaction, the bro s they will maintain a	ker and managers will neutral position in the	be "dual agents", which is fur transaction and they will pro	ther explained o	on the back of this form.
and on the back of confidential in	this form. As dual a	will be working gents they will mainta dicated below, neither	the brokerage. Therefore, age for both the buyer and seller a in a neutral position in the tract the agent(s) nor the brokerage the buyer or seller. If such a	as "dual agents". nsaction and the ge acting as a dua	y will protect all parties'
Agent(s) Don	C WATTICE	SACTION INVOLVI	NG ONLY ONE REAL ES	TATE AGENT	will
this form. As information. \(\)	dual agents they will Unless indicated belo	maintain a neutral pos w, neither the agent(s)	on in a neutral capacity. Dua ition in the transaction and the nor the brokerage acting as a uyer or seller. If such a relate	ey will protect a dual agent in th	ll parties' confidential is transaction has a
represent only represent his/h	the (check one) of see own best interest.	eller or D buyer in thi Any information prov	s transaction as a client. The rided the agent may be disclose	other party is no sed to the agent's	t represented and agrees to s client.
			CONSENT		
I (we) consent (we) acknowle	to the above relation edge reading the info	ships as we enter into mation regarding dual	this real estate transaction. If agency explained on the back	k of this form.	gency in this transaction, I
BUYER/TENANT		DATE	SELLERLANDLORD	1000	DATE
BUYER/TENANT		DATE	SELLER/LANDLORD		DATE