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Form # 2049 01/20

**DISCLOSURE OF INFORMATION AND ACKNOWLEDGEMENT
LEAD-BASED PAINT AND/OR LEAD-BASED PAINT HAZARDS**

1 SALE CONTRACT DATE: _____

2 PROPERTY: 9983 Riverview Drive, St. Louis, MO 63137

3 **Lead Warning Statement**

4 Every Buyer of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may
5 present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children
6 may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired
7 memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide
8 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
9 known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

10 **Seller's Disclosure**

- 11 (a) Presence of lead-based paint and/or lead-based paint hazards (check one below):
12 Seller certifies that this home was built in 1978 or later *Studio Structure*
13 Seller certifies that this home was built before 1978, but Seller has no knowledge of lead-based paint and/or lead-based paint hazards
14 in the housing *MAIN HOME*
15 Known lead-based paint and/or lead-based paint hazards are present in the house (explain):
16 _____

- 17
18 (b) Records and reports available to Seller (check one below):
19 Seller has provided the Buyer with all available records and reports pertaining to lead-based paint and/or lead-based
20 paint hazards in the housing (list all documents below):
21 _____

22 Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

23 **Buyer's Acknowledgment** (initial appropriate blanks)

24 _____ Buyer has received copies of all information listed above. (leave blank if none provided to Buyer.)
25 _____ Buyer has received the pamphlet Protect Your Family From Lead in Your Home.
26 _____ Buyer has (check one below):
27 _____

- 28 Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection of the presence of
29 lead-based paint or lead-based hazards; or
30 Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint
31 hazards.

32 **Agent's Acknowledgment** (initial)
33 _____ Agent has informed Seller of Seller's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

34 (To be completed by listing agent or if not listed, agent assisting Buyer unless Buyers agent receives all compensation from Buyer).

35 **Certification of Accuracy**
36 The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true
37 and accurate.

38 _____ DATE _____
39 BUYER SIGNATURE _____ SELLER SIGNATURE *[Signature]* 8/28/22 DATE

40 _____
41 Buyer Printed Name _____ Seller Printed Name *Melissa Giovanna Cassilly*

42 _____ DATE _____
43 BUYER SIGNATURE _____ SELLER SIGNATURE _____ DATE

44 _____
45 Buyer Printed Name _____ Seller Printed Name _____

46 _____ DATE _____
47 SELLING AGENT SIGNATURE _____ LISTING AGENT SIGNATURE _____ DATE

48 _____
49 Selling Agent Printed Name _____ Listing Agent Printed Name *Adam Jokish*

50 (NOTE: Any reference to Agent also includes a licensee acting as a Transaction Broker)



Pool/Hot Tub Disclosure Rider

This document has legal consequences. If you do not understand it, consult your attorney. It should be attached to and is made part of DSC-8000 ("Seller's Disclosure Statement for Residential Property").

This Disclosure Rider is made by the undersigned Seller concerning the following property (the "Property"):

9983 Riverview Drive Street Address St. Louis City MO 63137 Zip Code St. Louis City County

Note: Seller may not frequently use the pool/hot tub, if at all. If underutilized, it may falsely appear to be problem free. Even if heavily utilized, problems may surface that were previously not known or detectable.

POOL: (Indicate if any information is approximate)

(1) Age 12 YEARS (2) Shape CUSTOM (3) Size (length x width) 14' x 32'

(4) Depth 3' x 8' (5) Volume (gallons) 16,000

(6) Type Above ground (please check type) Vinyl liner Other In ground (please check type) Concrete Stainless Gunite Fiberglass Vinyl liner Other

(7) Pool Builder BOB CASSILLY

(8) Type of chemical sanitizer Chlorine Copper/Silver Ionizer Bacquacil Ozonator Saltwater option Other

(9) Cover Yes No If "Yes", is it Automatic Manual

(10) Pool service provider WILSONS POOLS PLUS INC Last serviced 8/16/2022 (date)

(11) Last opened by WILSONS POOLS PLUS INC Last closed by WILSONS POOLS PLUS INC

(12) Age of heater Heating source

(13) Age of pump ONE YEAR

(14) Age of filter 12 YEARS Type of filter Sand DE Other

(15) Specify if any repairs have been performed during your ownership on the Pool or any related equipment, including but not limited to the above and any visual components, deck equipment or mechanical equipment. (Include any available repair history and attach additional pages if needed) Replaced pump motor Replaced Aug 2022. Replaced Return plumbing for 2 of the 6 original jets. Electric sub panel needs replacement. New saltwater transformer replaced Aug 2022. Need new cell for salt. PENTAIR IC 40 if wanting salt water. recommend

Are you aware of any leak, defect or other problem or repair needed for any item above? Please explain if "Yes" and attach additional pages if needed: NO Shell water feature OFF. Will require hose adjustment.

HOT TUB: (Indicate if any information is approximate)

(1) Age (2) Volume (gallons) (3) Manufacturer

(4) Construction (e.g., fiberglass, plastic, cement)

(5) Type of chemical sanitizer? Chlorine Copper/Silver Ionizer Bacquacil Ozonator Saltwater Other

(6) Spa service provider Last serviced (date)

(7) Age of heater Heat source

(8) Age of pump (9) Age of filter (10) Number of jets

(11) Specify if any repairs have been performed during your ownership on the Hot Tub or any related equipment, including but not limited to the items above (Include any available repair history and attach additional pages if needed)

Are you aware of any leak, defect or other problem or repair needed for any item above? Yes No Please explain if "Yes" and attach additional pages if needed:

BUYER'S INITIALS (date)

SELLER'S INITIALS MBC 8/28/22 (date)

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