

Yes	No	NR
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13. Commercial or industrial noxious fumes, odors, noises, etc. on or near Property.....
 If yes, please describe: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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B. Legal/Land Use Aspects

1. Current or past title insurance policy or title search.....
 2. Copy of deed(s) for property.....
 3. Government administered programs or allotments.....
 4. Rollback or other tax deferral recaptures upon sale.....
 5. Litigation or estate proceeding affecting ownership or boundaries.....
 6. Notices from governmental or quasi-governmental authorities related to the property..
 7. Private use restrictions or conditions, protective covenants, or HOA.....
 If yes, please describe: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

8. Recent work by persons entitled to file lien claims.....
 If yes, have all such persons been paid in full
 If not paid in full, provide lien agent name and project number: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

9. Jurisdictional government land use authority:
 County: _____ City: _____

10. Current zoning: _____

11. Fees or leases for use of any system or item on property

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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12. Location within a government designated disaster evacuation zone (e.g., hurricane, nuclear facility, hazardous chemical facility, hazardous waste facility).....

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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13. Access (legal and physical) other than by direct frontage on a public road
 Access via easement.....

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Access via private road

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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If yes, is there a private road maintenance agreement? yes no

14. Solar panel(s), windmill(s), cell tower(s).....
 If yes, please describe: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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C. Survey/Boundary Aspects

1. Current or past survey/plat or topographic drawing available.....

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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2. Approximate acreage: _____

3. Wooded Acreage _____; Cleared Acreage _____

4. Encroachments.....

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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5. Public or private use paths or roadways rights of way/easement(s).....
 Financial or maintenance obligations related to same

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6. Communication, power, or other utility rights of way/easements

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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7. Railroad or other transportation rights of way/easements.....

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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8. Conservation easement

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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9. Property Setbacks.....
 If yes, describe: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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10. Riparian Buffers (i.e., stream buffers, conservation districts, etc.).....

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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11. Septic Easements and Repair Fields

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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12. Any Proposed Easements Affecting Property.....

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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13. Beach Access Easement, Boat Access Easement, Docking Permitted.....
 If yes, please describe: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Seller Initials AW Buyer Initials _____

D. Agricultural, Timber, Mineral Aspects

	Yes	No	NR
1. Agricultural Status (e.g., forestry deferral)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Licenses, leases, allotments, or usage permits (crops, hunting, water, timber, etc.).....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			
3. Forfeiture, severance, or transfer of rights (mineral, oil, gas, timber, development, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			
4. Farming on Property: <input type="checkbox"/> owner or <input type="checkbox"/> tenant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Presence of vegetative disease or insect infestation.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Timber cruises or other timber related reports.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Timber harvest within past 25 years	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, monitored by Registered Forester?			
If replanted, what species: _____			
Years planted: _____			
8. Harvest impact (other than timber)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			

E. Environmental Aspects

1. Current or past Phase I, Phase II or Phase III Environmental Site Assessment(s).....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Underground or above ground storage tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			
3. Abandoned or junk motor vehicles or equipment of any kind.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Past illegal uses of property (e.g., methamphetamine manufacture or use).....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Federal or State listed or protected species present.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe plants and/or animals: _____			
6. Government sponsored clean-up of the property	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Groundwater, surface water, or well water contamination <input type="checkbox"/> Current <input type="checkbox"/> Previous ...	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Previous commercial or industrial uses.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Wetlands, streams, or other water features	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Permits or certifications related to Wetlands			
Conservation/stream restoration.....			
10. Coastal concern (tidal waters, unbuildable land, flood zone, CAMA, Army Corp., etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			
11. The use or presence on the property, either stored or buried, above or below ground, of:			
i. Asbestos, Benzene, Methane, Pesticides, Radioactive Material	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			
ii. Other fuel/chemical.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
iii. Paint <input type="checkbox"/> Lead based paint <input type="checkbox"/> Other paint/solvents	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
iv. Agricultural chemical storage	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

F. Utilities

Check all currently available on the Property and indicate the provider.

Water (describe): _____

Sewer (describe): _____

Gas (describe): _____

Electricity (describe): _____

Cable (describe): _____

Seller Initials

AW

Buyer Initials _____

