



Eastern Connecticut Association of REALTORS® , Inc.
OWNER DISCLOSURE STATEMENT



TO THE TENANT: The following is a disclosure statement, made by the Owner, of information concerning the condition of the real property located at _____. This disclosure is not a warranty of any kind by the Owner or any Broker acting in the Owner’s behalf. The following representations are made by the Owner and are not the representations of the Owner’s Broker.

TO THE OWNER: Please complete the following form, including past history of problems if known. Do not leave any spaces blank. If the question is not applicable to your property, mark “N/A” in the blank. If condition is not known mark “unknown” in the blank. Attach additional pages if additional space is required.

1. Appliances/Systems

Are the following in good working order?

Item/System	Yes	No	Repair/Replace Date	Explanation, if any:
Range/Oven	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Microwave	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Hood/Fan	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Disposal	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Washer/Dryer	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Air Conditioners	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Water Treatment System	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Attic Fan	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Sump Pump	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Ceiling Fans	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
TV Antenna	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Smoke/Fire Detectors	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Garage Openers/Controls	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Pool/Equipment	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Heating System	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Fireplace/Chimneys	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____



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2. Basement: Has there been evidence of, or problems with water leakage? Yes ___ No ___ If yes, please explain, including frequency, location, and extent of the problem _____

3. Water Supply: Type _____ If well, type of well: _____ Depth: _____ Age: _____

Any known problems with the system's quantity or pressure? Yes ___ No ___ if yes, please explain _____
History of repairs _____

4. Sewerage System: Type: _____ If septic, date last pumped: _____

Any known problems or repairs? _____

5. Insects: Are you aware of any infestation(s)? Yes ___ No ___ If yes, describe: _____
Has the property been inspected or treated for infestation(s)? Yes ___ No ___
If yes, date of inspection: _____ Results: _____
Describe treatment if any: _____

6. Asbestos: Is asbestos present in any form in the property? Yes ___ No ___
If yes, where?: _____
Has asbestos been removed or encapsulated? Yes ___ No ___
If yes, explain: _____

7. Radon: Has the property been tested for the presence of radon gas? Yes ___ No ___
If yes, date of inspection: _____ Results: _____

8. Lead Paint: See DISCLOSURE OF INFORMATION ON LEAD-BASED PAINT AND LEAD-BASED PAINT HAZARDS FORM

9. Fur-Bearing Animals: Has the property ever been occupied by fur bearing animals? Yes ___ No ___
If yes, what was the year occupied? _____

10. Please state any other facts or information relative to this property that would be of interest or concern to a tenant:

The OWNER(S) acknowledges having carefully examined this statement and that it is complete and accurate to the best of his knowledge. OWNER(S) agree(s) to immediately notify his listing Broker in writing of any changes to items or conditions disclosed in this statement. OWNER(S) authorize(s) the listing Broker to furnish a copy of this statement to prospective TENANTS.

Owner _____ Date _____ Owner _____ Date _____

Undersigned TENANT hereby acknowledges receipt of a copy of this statement from _____

Tenant _____ Date _____ Tenant _____ Date _____