



**SELLER'S DISCLOSURE OF REAL PROPERTY  
CONDITION REPORT**

State of Delaware

Approved by the Delaware Real Estate Commission (effective 1/1/2011)

Seller (s) Name: Bruce H Gordon Jr, Kay B Gordon B. Kay Gordon

Property Address: 106 West 3rd Street  
New Castle, DE 19720

Approximate Age of Building(s): 118 Date Purchased: 1988

Chapter 25, Title 6 of the Delaware Code, requires a Seller of residential property to disclose in writing all material defects of the property that are known at the time the property is offered for sale or that are known prior to the time of final settlement. Residential property means any interest in a property or manufactured housing lot, improved by dwelling units for 1-4 families. The disclosure must be made on this Report, which has been approved by the Delaware Real Estate Commission, and shall be updated as necessary for any material changes occurring in the property before final settlement. This Report shall be given to all prospective Buyers prior to the time the Buyer makes an offer to purchase. This Report, signed by Buyer and Seller, shall become a part of the Agreement of Sale. This Report is a good faith effort by the Seller to make the disclosures required by Delaware law and is not a warranty of any kind by the Seller or any Agents or Sub-Agents representing Seller or Buyer in the transfer and is not a substitute for any inspections or warranties that the Seller or Buyer may wish to obtain. The Buyer has no cause of action against the Seller or Real Estate Agent for material defects in the property disclosed to the Buyer prior to the Buyer making an offer; material defects developed after the offer was made but disclosed in an update of this Report prior to settlement, provided Seller has complied with the Agreement of Sale; or material defects which occur after settlement. State websites containing helpful information include: Office of State Planning Coordination [www.stateplanning.delaware.gov](http://www.stateplanning.delaware.gov), Delaware Department of Natural Resources and Environmental Control [www.dnrec.delaware.gov](http://www.dnrec.delaware.gov), Delaware Division of Public Health [www.dhss.delaware.gov/dhss/dph](http://www.dhss.delaware.gov/dhss/dph), Delaware State Police Sex Offender Registry [www.state.de.us/dsp](http://www.state.de.us/dsp) and other agencies listed on [www.delaware.gov](http://www.delaware.gov).

Yes	No	*	* Write in U if Unknown or NA if Not Applicable, otherwise mark either the Yes or No column. Where selections are requested, place a check mark next to each correct answer or fill in the correct answer. Certain answers require a further explanation in Section XVI.
			<b>I. OCCUPANCY</b>
	<input checked="" type="checkbox"/>		1. Do you currently occupy this property full-time? If No, how long has it been since you occupied the property? <u>10/23/2007</u> . Property is your: ( ) Primary Residence ( ) Second/Vacation Home ( <input checked="" type="checkbox"/> Rental Property) ( ) Other _____.
	<input checked="" type="checkbox"/>		2. Is the property encumbered by a ( ) lease, ( ) option to purchase, or ( ) first right of refusal?
		<u>N/A</u>	3. If the property is leased, have all necessary permits/licenses been obtained?
	<input checked="" type="checkbox"/>		4. Is the property new construction?
			5. If # 4 is Yes, Seller warrants that the property ( ) is or ( ) is not exempt from providing the buyer with a Public Offering Statement as described in §81-401 or §81-403(b) of Chapter 81, Title 25 of the Delaware Code, The Delaware Uniform Common Interest Ownership Act. If not exempt, in compliance with §317A of Chapter 3, Title 25, Seller has attached a copy of all documents in the chain of title that create any financial obligation for the buyer, and a written summary of all financial obligations created by documents in the chain of title. As evidenced by signature below, buyer has received a copy of these documents.
			<b>II. DEED RESTRICTIONS, HOMEOWNERS ASSOCIATIONS/CONDOMINIUMS AND CO-OPS</b>
<input checked="" type="checkbox"/>			6. Is the property subject to any deed restrictions?
	<input checked="" type="checkbox"/>		7. Are you in violation of any deed restrictions at this time? If Yes, describe in XVI.
	<input checked="" type="checkbox"/>		8. Is the property subject to any agreements concerning affordable housing or workforce housing?
<input checked="" type="checkbox"/>			9. Is the property subject to any private or public architectural review control other than building codes?
	<input checked="" type="checkbox"/>		10. Is the property part of a condominium or other common ownership?

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 Seller's Initials BHG Seller's Initials BKG Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

Yes	No	*	* Write in <i>U</i> if Unknown or <i>NA</i> if Not Applicable, otherwise mark either the Yes or No column. Where selections are requested, place a check mark next to each correct answer or fill in the correct answer. Certain answers require a further explanation in Section XVI.
	✓	N/A	11. Is there a (___ Homeowners Association), (___ Condominium Association), (___ Civic Association), or (___ Maintenance Corporation) included in the deed?
		N/A	12. If # 11 is Yes, are there any (___ fees), (___ dues), (___ assessments) or (___ bonds) involved? If Yes, how much? _____ Are they (___ Mandatory) or (___ Voluntary)?
	✓	N/A	13. Are there any unpaid assessments? If Yes, indicate amount _____
	✓	N/A	14. Has there been a special assessment in the past 12 months? If Yes, describe in XVI.
	✓	N/A	15. Have you received notice of any new or proposed increases in fees, dues, assessments or bonds? If Yes, describe in XVI.
		N/A	16. Is there any condition or claim, which may result in an increase in assessments or fees? If Yes, describe in XVI.
		N/A	17. Management Company Name: _____
		N/A	18. Representative Name: _____ Phone # _____
			<b>III. TITLE / ZONING INFORMATION</b>
	✓		19. Does the amount owed on your mortgages and other liens exceed the estimated value of the property? If Yes, are additional funds available from Seller for settlement? _____
			20. Is your property owned (✓ In fee simple) or (___ Leasehold) or (___ Cooperative)?
✓			21. Are there any right-of-ways, easements or similar matters that may affect the property? If Yes, describe in XVI.
✓			22. Are there any shared maintenance agreements affecting the property? If Yes, describe in XVI.
	✓		23. Are there any variance, zoning, non-conforming use, or setback violations? If Yes, describe in XVI.
		N/A	24. Has the variance or non-conforming use expired or would not be transferable? If Yes, describe in XVI.
	✓		25. Has a title policy been issued on the property in the past 5 years?
			<b>IV. MISCELLANEOUS</b>
	✓		26. Have you received notice from any local, state or federal agencies requiring repairs, alterations or corrections of any existing conditions? If Yes, describe in XVI.
	✓		27. Is there any existing or threatened legal action affecting this property? If Yes, describe in XVI.
	✓		28. Are there any violations of local, state or federal laws or regulations relating to this property? If Yes, describe in XVI.
	✓		29. Is there anything else you should disclose to a prospective Buyer because it may materially and adversely affect the property, e.g., zoning changes, road changes, proposed utility changes, threat of condemnation, noise, bright lights, odors, or other nuisances, etc.? If Yes to any, describe in XVI.
✓			30. Are all the exterior door locks in the house in working condition? If No, describe in XVI.
✓			31. Will keys be provided for each lock?
✓			32. Have you had, or do you now have, any animals (pets) in the house?
	✓		33. Is there or has there ever been a (___ swimming pool), (___ hot tub), (___ spa) or (___ whirlpool) on the property? If Yes and there are any defects describe in XVI.
	✓		34. If there is a pool, does it conform to all local ordinances? If No, describe in XVI.
✓			35. What is the type of trash disposal? (___ Private), (✓ Municipal) or (___ Other _____).
			36. The cost of repairing and paving the streets adjacent to the property is paid for by: ___ The property owner(s), estimated fees: \$ _____ ___ Delaware Department of Transportation or the State of Delaware ___ Unknown <i>City of New Castle</i>
✓			Note to Buyer: Repairing and repaving of the streets can be very costly. (6 Delaware Code§ 2578)
			37. Is off street parking available for this property? If Yes, number of spaces available: <u>2</u>
			<b>V. ENVIRONMENTAL HAZARDS</b>
	✓		38. Are there now or have there been any underground storage tanks on the property? For (___ heating fuel), (___ propane), (___ septic) or (___ Other _____). If Yes, describe locations in XVI.
		N/A	39. If the tank was abandoned, was it done with all necessary permits and properly abandoned?
	✓		40. Are asbestos-containing materials present? If Yes, describe in XVI.

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Yes	No	*	
<input checked="" type="checkbox"/>	<input type="checkbox"/>		* Write in <i>U</i> if Unknown or <i>NA</i> if Not Applicable, otherwise mark either the Yes or No column. Where selections are requested, place a check mark next to each correct answer or fill in the correct answer. Certain answers require a further explanation in Section XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		41. Are there any lead hazards? (e.g., lead paint, lead pipes, lead in soil.) If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		42. Has the property been tested for toxic or hazardous substances? Attach each test report, if available.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		43. Has the property ever been tested for mold, if Yes, provide the test results.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		44. Is there currently mold in the property? If Yes, describe in XVI.
			<b>VI. LAND (SOILS, DRAINAGE AND BOUNDARIES)</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>		45. Is there fill soil or other fill material on the property?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		46. Are there any sliding, settling, earth movement, upheaval, earth stability, or methane gas release problems that have occurred on the property or in the immediate neighborhood? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		47. Is any part of the property located in ( <input type="checkbox"/> a flood zone ) and/or ( <input type="checkbox"/> a wetlands area )?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		48. Are there any drainage or flood problems affecting the property? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		49. Do you carry flood insurance? Agent: _____ Policy # _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>		50. If # 49 is Yes, what is the annual cost of this policy? _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>		51. Have you made any insurance claims on the property in the past 5 years? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		52. Does the property have standing water in front, rear or side yards for more than 48 hours after raining?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		53. Are there encroachments or boundary line disputes affecting the property? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		54. Are there any tax ditches crossing or bordering the property?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		55. Has the property ever been surveyed?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		56. Are the boundaries of the property marked in any way?
			<b>VII. STRUCTURAL ITEMS</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>		57. Have you made any additions or structural changes? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		58. If Yes, was all work done with all necessary permits and approvals in compliance with building codes?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		59. Is there any movement, shifting, or other problems with walls or foundations? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		60. Has the property or improvements thereon ever been damaged by ( <input type="checkbox"/> fire ), ( <input type="checkbox"/> smoke ), ( <input type="checkbox"/> wind ), or ( <input type="checkbox"/> flood )? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		61. Was the structure moved to this site? ( <input type="checkbox"/> Double Wide ) ( <input type="checkbox"/> Modular ) ( <input type="checkbox"/> Other: _____ )
<input checked="" type="checkbox"/>	<input type="checkbox"/>		62. Was fire retardant plywood used in the construction?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		63. Is there any ( <input type="checkbox"/> past ) or ( <input checked="" type="checkbox"/> present ) water leakage in the house? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		64. Are there any problems with ( <input type="checkbox"/> driveways ), ( <input type="checkbox"/> walkways ), ( <input type="checkbox"/> patios ), or ( <input type="checkbox"/> retaining walls ) on the property? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		65. Have there been any repairs or other attempts to control the cause or effect of problems described in questions 63 and 64? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		66. Is there insulation in:
<input checked="" type="checkbox"/>	<input type="checkbox"/>		The ceiling / attic?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		The exterior walls?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		Other places? Describe <u>Attic</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>		What type(s) of insulation does your property have? <u>Fiberglass Blanket</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>		67. Are there any drywall issues or drywall smells? If Yes, describe in XVI.
			<b>VIII. TERMITES, DRYROT, PESTS</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>		68. Is there or has there been any infestation by termites or other wood destroying insects? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		69. Is there or has there been any damage to the property caused by ( <input type="checkbox"/> termites ), ( <input type="checkbox"/> other wood destroying insects ), ( <input type="checkbox"/> pests ) or ( <input type="checkbox"/> dryrot )? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		70. Have there been any termite / pest control inspections or treatments made on the property?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		71. Is your property currently under warranty or other coverage by a professional pest control company? If Yes, name of exterminating company: <u>Chlorinated</u>
			<b>IX. BASEMENT AND CRAWL SPACES</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>		72. Does the property have a sump pump? If Yes, where does it drain? <u>TO YARD</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>		73. Is there any water leakage, accumulation, or dampness within the basement or crawlspace?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		74. Have there been any repairs or other attempts to control any water or dampness problem in the basement or

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<input checked="" type="checkbox"/>	<input type="checkbox"/>		crawlspace? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		75. Are there any cracks or bulges in the floor or foundation walls? If Yes, describe in XVI.
			<b>X. ROOF</b>
			76. Date last roof surface installed: <u>side porch 2012 2nd Floor 2010</u>
			77. How many layers of roof material are there (e.g., new shingles over old shingles)? <u>RUBBER GUTTER 1998</u>
	<input checked="" type="checkbox"/>		78. Are there any problems with the roof, flashing, or rain gutters? If Yes or repaired under your ownership, explain in XVI.
			79. If under warranty, is warranty transferable?
			80. Where do your gutters drain? ( <input checked="" type="checkbox"/> Surface) ( <input type="checkbox"/> Drywell) ( <input type="checkbox"/> Storm Sewers) ( <input type="checkbox"/> Other _____)
			<b>XI. PLUMBING-RELATED ITEMS</b>
			81. What is the drinking water source? <u>City of New Castle aquifer</u>
			82. If drinking water supplied by utility, name of utility: _____
			83. What type of plumbing (copper, lead, cast iron, PVC, polybutylene, galvanized, unknown) is in the house? 1. Water supply <u>COPPER</u> 2. Drainage <u>Cast Iron &amp; PVC</u>
<input checked="" type="checkbox"/>			84. Have there been any additions / upgrades to the original service? If Yes, describe in XVI.
<input checked="" type="checkbox"/>			85. If any, was the work done by a licensed contractor?
			86. If your drinking water is from a well, when was your water last tested and what were the results of the test? Tested on: _____, Results: _____
			87. When was well installed? _____ Location of well? _____ Depth of well? _____
			88. Is there a water treatment system? If Yes, ( <input type="checkbox"/> Leased) or ( <input type="checkbox"/> Owned)?
			89. What is the type of sewage system? ( <input checked="" type="checkbox"/> Public Sewer) ( <input type="checkbox"/> Community Sewer) ( <input type="checkbox"/> Septic System) ( <input type="checkbox"/> Cesspool) ( <input type="checkbox"/> Other _____)
			90. If a septic system, type: ( <input type="checkbox"/> Gravity Fed) ( <input type="checkbox"/> Capping Fill) ( <input type="checkbox"/> LPP) ( <input type="checkbox"/> Mound) ( <input type="checkbox"/> Holding Tank) ( <input type="checkbox"/> Other: _____)
			91. When was septic system or cesspool last serviced? _____
			92. Is there a wastewater spray irrigation system installed on or adjacent to the property?
			93. Has a soil / site evaluation ever been done? If Yes, when? _____ Results? _____
			94. Any leaks, backups, or other problems relating to any of the plumbing, water and sewage related items? If Yes, describe in XVI.
<input checked="" type="checkbox"/>			95. Are there any shut off, disconnected, or abandoned wells, underground water or sewer tanks on the property? If Yes, describe locations in XVI.
			96. If # 95 is Yes, were they abandoned with all necessary permits and properly abandoned?
<input checked="" type="checkbox"/>			97. Water heater type: ( <input type="checkbox"/> Electric) ( <input type="checkbox"/> Oil) ( <input checked="" type="checkbox"/> Gas) or ( <input type="checkbox"/> Other: _____)
			<b>XII. HEATING AND AIR CONDITIONING</b>
			98. How many heating and/or air conditioning zones are in the property? <u>2 sys.</u> If more than one, indicate the zone number next to each answer in this section and provide the answer for each zone.
			99. What is the type of heating system and fuel? (e.g., System: forced air, heat pump, hot water, baseboard. Fuel: oil, gas, electric, solar etc.) System: <u>Baseboard Hot Water &amp; air</u> Fuel: <u>GAS</u>
			100. Age of furnace? <u>43/16</u> Date of last service? <u>12/10/12</u>
			101. Are there any contractual obligations affecting the fuel supply, tanks, or systems? If Yes, describe in XVI.
			102. What is the type of air conditioning system? (e.g., central, units) <u>central, split systems</u>
			103. Age of air conditioning system? <u>16</u> Date of last service? _____
			104. Have there been any additions / upgrades to the original heating or air conditioning? If Yes, describe in XVI.
			105. If question 104 is Yes, was work done by a licensed contractor?
			106. Are there any problems with the heating or air conditioning systems? If Yes, describe in XVI.
			<b>XIII. ELECTRICAL SYSTEM</b>
			107. What type of wiring (copper, aluminum, other, etc.) is in the house? <u>Copper</u>
			108. What amp service does it have? ( <input type="checkbox"/> 60) ( <input type="checkbox"/> 100) ( <input checked="" type="checkbox"/> 150) ( <input type="checkbox"/> 200) ( <input type="checkbox"/> Other: _____)
			Do you have ( <input checked="" type="checkbox"/> Circuit Breakers) or ( <input type="checkbox"/> Fuses)?

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Yes	No	*	* Write in U if Unknown or NA if Not Applicable, otherwise mark either the Yes or No column. Where selections are requested, place a check mark next to each correct answer or fill in the correct answer. Certain answers require a further explanation in Section XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		109. Do you have any 220/240-volt circuits?
<input type="checkbox"/>	<input checked="" type="checkbox"/>		110. Do fuses blow or circuit breakers trip when two or more appliances are being used at the same time? If Yes, describe in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		111. Have there been any additions to the original service?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		112. Have any (___ solar) and/or (___ wind power) enhancements been made to supplement service?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	113. If Yes to question 111 or 112, was work done by a licensed electrician?
<input checked="" type="checkbox"/>	<input type="checkbox"/>		114. Are there wall switches, light fixtures or electrical outlets in need of repair? If Yes, explain in XVI.
<input checked="" type="checkbox"/>	<input type="checkbox"/>		115. Are the permits associated with questions 58, 85, 105, and 113 closed?
			<b>XIV. FIREPLACE OR HEATING STOVE</b>
<input type="checkbox"/>	<input type="checkbox"/>	NA	116. Fireplace Type: (___ Wood Burning) (___ Gas) (___ Insert) (___ Other: _____)?
<input type="checkbox"/>	<input type="checkbox"/>		117. Heating Stove type: (___ Wood Burning) (___ Pellet) (___ Other _____)?
<input type="checkbox"/>	<input type="checkbox"/>		118. Was the fireplace or heating stove part of the original house design?
<input type="checkbox"/>	<input type="checkbox"/>		119. Was the fireplace or heating stove installed by a professional contractor or manufacturer's representative?
<input type="checkbox"/>	<input type="checkbox"/>		120. Are there any problems? If Yes, explain in XVI.
<input type="checkbox"/>	<input type="checkbox"/>		121. When were the flues / chimneys last cleaned, serviced or repaired? _____ Explain nature of service or repair in XVI.

**XV. MAJOR APPLIANCES AND OTHER ITEMS**

(A) Are the following items in working order? Indicate NA if the item does not exist or if the item will not convey with the property. Note: The Agreement of Sale will specify and govern what is included or excluded.

Items	Yes	No	NA	Items	Yes	No	NA	Items	Yes	No	NA
Oven or Range	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Window A/C Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Draperies/Curtains	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cooktop	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Smoke Detectors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drapery/Curtain Rods	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wall Oven(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fireplace Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Shades/Blinds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refrigerator(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fireplace Screen/Doors	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cornices/Valances	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Icemaker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electronic Air Filter	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sheds/Outbuildings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Freezer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attic Fan	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Playground Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dishwasher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Whole House Fan	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wood Stove	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Disposal	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Window Fan(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Satellite Dish	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Microwave	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling Fan(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Satellite Dish Controls & Remote(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Washer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Central Vacuum	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fuel Storage Tank(s) owned	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Clothes Dryer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Intercoms	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fuel Storage Tank(s) leased	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Bathroom Vents/Fans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Solar Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Security Systems owned	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Trash Compactor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Attached Antenna/Rotor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Security Systems leased	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Water Conditioner owned	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Range Hood-Exhaust Fan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Detecting Equipment owned	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Water Conditioner leased	<input type="checkbox"/>	<input type="checkbox"/>	NA	Garage Opener(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fire Detecting Equipment leased	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Water Filter	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garage Opener Remotes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other Items:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pool Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sump Pump	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pool cover	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Storm Windows/Doors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot Tub, Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screens	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot Tub Cover	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Furnace Humidifier	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>								
Furnace De-Humidifier	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>								

Page 5 of 7 Property Address: 106 West 3rd Street, New Castle, DE 19720  
 Seller's Initials BWG Seller's Initials BWG Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

(B) Are you aware of any problems affecting these area? If Yes, describe in XVI.

	Yes	No	NA
Ceilings		<input checked="" type="checkbox"/>	
Floors		<input checked="" type="checkbox"/>	
Patios / Decks / Porches		<input checked="" type="checkbox"/>	

	Yes	No	NA
Exterior and Interior Walls		<input checked="" type="checkbox"/>	
Windows		<input checked="" type="checkbox"/>	

**XVI. ADDITIONAL INFORMATION**

If you were directed to this section to clarify an answer or if you indicated there is a problem with any of the items in sections I through XV, provide a detailed explanation below or on additional sheet(s).

Question Number	Additional Information
21	See Attached - Parking easement
43	Mold caused by roof leak - see attached
57	Rear 2 story addition in 1997
63 + 65	Installed french drain and sump
68 + 69	visible in 1969 and treated - no problems since
75	cracks in basement floor occurred during cure time (5 days) due to rich mix
84	New addition w/ separate panel
95	abandoned well at side porch steps (disclosure)
	minor cracks in studs on rear addition
	sag in ridge beam of 3rd floor roof, sloping floor condition has been stable since 1976 when steel beam was installed in living room and supports in basement.

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 Seller's Initials BKG Seller's Initials BKG Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_


Are there additional problem/clarification sheets attached?  No  Yes 3X Number of Sheets Attached?

**ACKNOWLEDGMENT OF SELLER**

Seller has provided the information contained in this Report. This information is to the best of Seller's knowledge and belief, complete, true and accurate. Seller has no knowledge, information or other reason to believe that any defects or problems with the property have been disclosed to or discussed with any Real Estate Agent or Broker involved in the sale of this property other than those set forth in this Report. Seller does hereby indemnify and hold harmless any Real Estate Agents involved in the sale of this property from any liability incurred as a result of any third-party reliance on the disclosures contained herein or on any subsequent amendment hereto. Seller's Broker and / or Cooperating Broker, if any, is / are hereby authorized to furnish this Report to any prospective Buyer. This is a legally binding document. If not understood, consult an Attorney.

SELLER Bruce H Gordon Jr Date 6/19/13 SELLER Kay B Gordon Date 6/19/2013  
Bruce H Gordon Jr Kay B Gordon

Date the contents of this Report were last updated: 11/16/2007

**ACKNOWLEDGMENT OF BUYER**

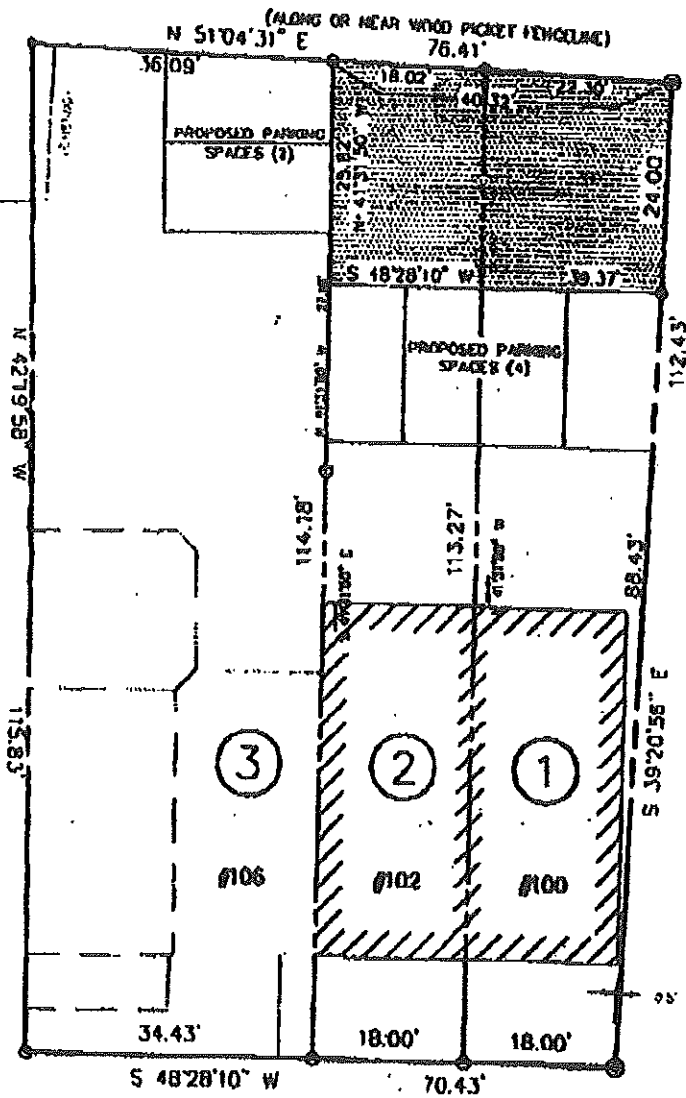
I am relying upon the above Report and statements within the Agreement of Sale as the representation of the condition of property, and not relying upon any other information about the property. I have carefully inspected the property. I acknowledge that Agents are not experts at detecting or repairing physical defects in property. I understand there may be areas of the property of which Seller has no knowledge and this Report does not encompass those areas. Unless stated otherwise in my contract with Seller, the property is real estate being sold in its present condition, without warranties or guarantees of any kind by Seller or any Agent. I have read and received a signed copy of this Report. I may negotiate in my Agreement of Sale for other professional advice and / or inspections of the property. I understand there may be projects either planned or being undertaken by the State, County or Local Municipality which may affect this property of which the Seller has no knowledge. I further understand that it is my responsibility to contact the appropriate agencies to determine whether any such projects are planned or underway. If I do not understand the impact of such project(s) on the property I am purchasing, I should consult my Attorney. I understand that before signing an Agreement of Sale, I may review the applicable Master Plan or Comprehensive Land Use Plan for the County and / or appropriate City or Town Plans showing planned land uses, zoning, roads, highways, locations and nature of current or proposed parks and other public facilities. This is a legally binding document. If not understood, consult an Attorney.

BUYER \_\_\_\_\_ Date \_\_\_\_\_ BUYER \_\_\_\_\_ Date \_\_\_\_\_

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Seller's Initials \_\_\_\_\_ Seller's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_



 = PROPOSED ACCESS EASEMENT



ACCESS EASEMENT PLAN  
LOTS 1, 2 & 3

LANDS OF  
BRUCE GORDON, JR., ET AL  
MICROFILM. #12485

SCALE 1"=20' OCTOBER 10, 2007.

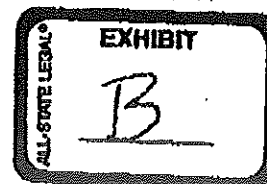
CITY OF NEW CASTLE NEW CASTLE COUNTY  
DELAWARE

HOWARD L. ROBERTSON, INC.  
801 BRANDYWINE BOULEVARD  
WILMINGTON, DE., 19809



CARMINE F. CASPER, E. (C.E.)



**HOWARD L. ROBERTSON, INC.**

Registered Professional Engineers and Land Surveyors  
601 BRANDYWINE BLVD., WILMINGTON, DE. 19804  
TELEPHONE - (302) 764-2458 FAX - (302) 764-7022

Oct. 12, 2007

All that certain piece, parcel or lot of land situate in the City of New Castle, New Castle County, State of Delaware, being a 992.15 sq. ft. access easement over lots 1, and 2 as said lots appear on Micro Film no. 12485, entitled Lands of Bruce Gordon, Jr. Et al, and being more particularly bounded and described in accordance with an Access Easement Plan prepared by Howard L. Robertson, Inc. dated Oct 10, 2007, as follows to wit:-

Beginning at a point in the southwesterly side of South Street (at 57' wide), said point of beginning being distant N 39° 20' 56" W, 88.43' from the point of intersection of the southwesterly side of South Street (at 57' wide) with the northwesterly side of Third Street (at 60' wide).

Thence from said point of beginning through lots 1 and 2, S 48° 28' 10" W, 39.37' to a point in line the division line of lots 2 & 3.

Thence thereby N 41° 31' 50" W, 25.82' to a point, a corner for lots 2 and 3.

Thence by the rear lines of lots 2 and 1 N 51° 04' 31" E, 40.32' to a point in the southwesterly side of South Street (at 57' wide).

Thence thereby S 39° 20' 56" E, 24.00' to the point and place of beginning.



# RADON DISCLOSURE

Required by Chapter 25, Title 6, Section 2572A of the Delaware Code

Property Address: 106 W 3rd Street  
New Castle, DE 19720

## Seller's Disclosure

Delaware law requires that the seller of any interest in residential real property that includes a dwelling must provide the buyer with any information about any known radon hazards. Sellers also must disclose any tests or inspections for radon in the seller's possession.

The seller(s) must answer the following questions and provide the required information:

1. Are you aware of the presence of radon in the property identified above?  Yes  No (check one)
2. Are you aware of any radon tests or inspections that have been performed on the property identified above?  Yes  No (check one)
3. If you responded "yes" to Question 2 above, have you provided the buyer(s) with copies of all radon tests and/or inspection reports in your possession?  Yes  No (check one)
4. Identify each report referred to in Question 3, including the date of each report:

\_\_\_\_\_  
\_\_\_\_\_

By signing this form, the seller(s) acknowledge(s) the following:

I/we have been informed of my/our obligation and am/are aware of my/our responsibility to comply with Delaware law regarding radon disclosure, as provided in Title 6, Chapter 25, Section 2572A of the Delaware Code.

<u>Bruce H Gordon Jr</u>	<u>6/17/13</u>	<u>B. Kay Gordon</u>	<u>6/17/2013</u>
Seller	Date	Seller	Date
Bruce H Gordon Jr		B Kay B Gordon	

## Buyer's Acknowledgement

Delaware law requires that every buyer of any interest in residential real property that includes a dwelling must be notified that the property may present the potential for exposure to radon.

By signing this form, the buyer(s) acknowledge(s) the following:

1. I/we have received the *Radon Rights, Risks and Remedy for Home Buyer* document, which describes the potential hazards of exposure to radon, testing for radon and remediation.
2. I/we have the option to have the property identified above tested for radon.
3. I/we have received copies of all radon tests and/or inspection reports identified in Item 4 of the Seller's Disclosure above.

\_\_\_\_\_  
Buyer Date Buyer Date

Form Approved by Delaware Real Estate Commission September 12, 2007



**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.

Property Address 106 W 3rd Street, New Castle, DE 19720

**Seller's Disclosure (initial)**

(a) Presence of lead-based paint and/or lead-based paint hazards (check one below):

BKG  
D/K

Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

(b) Records and reports available to the seller (check one below):

BKG  
D/K

Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

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

**Purchaser's Acknowledgment (initial)**

(c) Purchaser has received copies of all information listed above.

(d) Purchaser has received the pamphlet *Protect Your Family from Lead in Your Home*.

(e) Purchaser has (check one below):

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

Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

**Agent's Acknowledgment (initial)**

BTR

(f) Agent has informed the seller of the seller's obligations under 42 U.S.C. 4852(d) and is aware of his/her responsibility to ensure compliance.

**Certification of Accuracy**

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.

Seller Bruce H Gordon Jr Date 6/17/13 Seller B. Kay Gordon Date 6/17/2013  
Bruce H Gordon Jr Kay B Gordon

Agent [Signature] Date 6/17/13 Agent \_\_\_\_\_ Date \_\_\_\_\_

Purchaser \_\_\_\_\_ Date \_\_\_\_\_ Purchaser \_\_\_\_\_ Date \_\_\_\_\_