

**SELLER'S PROPERTY
DISCLOSURE STATEMENT**

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1. Date May 12, 2011
2. Page 1 of _____ pages

3. THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.

4. **NOTICE:** This Disclosure Statement satisfies the disclosure requirements of MN Statutes 513.52 through 513.60.
5. Under Minnesota law, Sellers of residential property, with limited exceptions listed on page nine (9), are obligated to
6. disclose to prospective Buyers all material facts of which Seller is aware that could adversely and significantly affect
7. an ordinary Buyer's use or enjoyment of the property or any intended use of the property of which Seller is aware.
8. MN Statute 513.58 requires Seller to notify Buyer in writing as soon as reasonably possible, but in any event
9. before closing, if Seller learns that Seller's disclosure was inaccurate. Seller has disclosure alternatives allowed
10. by MN Statutes. See *Seller's Disclosure Alternatives* form for further information regarding disclosure alternatives. This
11. disclosure is not a warranty or a guarantee of any kind by Seller or licensee representing or assisting any party in the
12. transaction.

13. **INSTRUCTIONS TO BUYER:** Buyers are encouraged to thoroughly inspect the property personally or have it inspected
14. by a third party, and to inquire about any specific areas of concern. **NOTE:** If Seller answers NO to any of the questions
15. listed below, it does not necessarily mean that it does not exist on the property. NO may mean that Seller is unaware
16. that it exists on the property.

17. **INSTRUCTIONS TO SELLER:** (1) Complete this form yourself. (2) Consult prior disclosure statement(s) and/or
18. inspection report(s) when completing this form. (3) Describe conditions affecting the property to the best of your
19. knowledge. (4) Attach additional pages, with your signature, if additional space is required. (5) Answer all questions.
20. (6) If any items do not apply, write "NA" (not applicable).

21. Property located at 4784 Crane Island,
22. City of Minnetrista, County of Hennepin, State of Minnesota.

23. A. GENERAL INFORMATION:

24. (1) What date January-May, 1999 did you ☐ Acquire ☒ Build the home?
----- (Check one.) -----
25. (2) Type of title evidence: ☒ Abstract ☐ Registered (Torrens)
26. Location of Abstract: safe deposit box
27. To your knowledge, is there an existing Owner's Title Insurance Policy? ☐ Yes ☒ No
28. (3) Have you occupied this home continuously for the past 12 months? ☒ Yes ☐ No
29. If "No," explain: _____
30. (4) Is the home suitable for year-round use? ☐ Yes ☒ No
31. (5) To your knowledge, is the property located in a designated flood plain? ☐ Yes ☒ No
32. (6) Are you in possession of prior seller's disclosure statement(s)? (If "Yes," please attach.) ☐ Yes ☒ No
33. (7) Is the property located on a public or a private road? n/a ☐ Public ☐ Private
34. (8) For property abutting a lake, stream or river, does the property meet the minimum local government lot size
35. requirements? ☒ Yes ☐ No ☐ Unknown
36. If "No," or "Unknown," Buyer should consult the local zoning authority.
37. Are you aware of any
38. (9) encroachments? ☐ Yes ☒ No
39. (10) association, covenants, historical registry, reservations or restrictions that affect or
40. may affect the use or future resale of the property? ☒ Yes ☐ No
41. (11) easements, other than utility or drainage easements? ☒ Yes ☐ No
42. (12) Comments: _____

43. ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.

45. THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.

46. Property located at 4784 Crane Island47. **B. GENERAL CONDITION:** To your knowledge, have any of the following conditions previously existed or do they
48. currently exist?49. (1) Has there been any damage by wind, fire, flood, hail or other cause(s)? ☒ Yes ☐ No50. If "Yes," give details of what happened and when: There was a small mudslide in
51. 2005. We spent \$50,000 to have the hill rebuilt and
52. new stairs put in.53. (2) Have you ever had an insurance claim(s) against your Homeowner's
54. Insurance Policy? ☐ Yes ☒ No

55. If "Yes," what was the claim(s) for (e.g., hail damage to roof)? _____

56. _____

57. _____

58. Did you receive compensation for the claim(s)? ☐ Yes ☐ No59. If you received compensation, did you have the items repaired? ☐ Yes ☐ No

60. What dates did the claim(s) occur? _____

61. _____

62. (3) (a) Has/Have the structure(s) been altered?
63. (e.g., additions, altered roof lines, changes to load-bearing walls) ☐ Yes ☒ No

64. If "Yes," please specify what was done, when and by whom (owner or contractor):

65. _____

66. _____

67. (b) Has any work been performed on the property? (e.g., additions to the property, wiring, plumbing,
68. retaining wall, general finishing.) ☐ Yes ☒ No

69. If "Yes," please explain: _____

70. _____

71. (c) Are you aware of any work performed on the property for which
72. appropriate permits were not obtained? ☐ Yes ☒ No

73. If "Yes," please explain: _____

74. _____

75. ² (4) Has there been any damage to flooring or floor covering? ☐ Yes ☐ No

76. If "Yes," give details of what happened and when: _____

77. _____

78. (5) Are you aware of any insect/animal/pest infestation? ☐ Yes ☒ No

79. If "Yes," please explain: _____

80. _____

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83. THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.

84. Property located at 4784 Crane Island

85. (6) Do you have or have you previously had any pets? ☐ Yes ☒ No

86. If "Yes," indicate type _____ and number _____.

87. (7) Comments: _____

88. _____

89. _____

90. **C. STRUCTURAL SYSTEMS:** To your knowledge, have any of the following conditions previously existed or do they
91. currently exist?

92. (ANSWERS APPLY TO ALL STRUCTURES, SUCH AS GARAGE AND OUTBUILDINGS.)

93. **(1) THE BASEMENT, CRAWLSPACE, SLAB:**

94. (a) cracked floor/walls ☐ Yes ☒ No (e) leakage/seepage ☐ Yes ☒ No

95. (b) drain tile problem ☐ Yes ☒ No (f) sewer backup ☐ Yes ☒ No

96. (c) flooding ☐ Yes ☒ No (g) wet floors/walls ☐ Yes ☒ No

97. (d) foundation problem ☐ Yes ☒ No (h) other ☐ Yes ☒ No

98. Give details to any questions answered "Yes": _____

99. _____

100. _____

101. _____

102. _____

103. _____

104. _____

105. **(2) THE ROOF:** To your knowledge,

106. (a) what is the age of the roofing material? 12 years

107. (b) has there been any interior or exterior damage? ☐ Yes ☒ No

108. (c) has there been interior damage from ice buildup? ☐ Yes ☒ No

109. (d) has there been any leakage? ☐ Yes ☒ No

110. (e) have there been any repairs or replacements made to the roof? ☐ Yes ☒ No

111. Give details to any questions answered "Yes": _____

112. _____

113. _____

114. _____

115. _____

116. _____

117. _____

118. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

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122. D. APPLIANCES, HEATING, PLUMBING, ELECTRICAL AND OTHER MECHANICAL SYSTEMS:

123. NOTE: This section refers only to the working condition of the following items. Answers apply to all such
 124. items unless otherwise noted in comments below. Personal property is included in the sale **ONLY IF**
 125. specifically referenced in the *Purchase Agreement*.

126. Cross out only those items not physically located on the property.

In Working Order		In Working Order		In Working Order	
Yes	No	Yes	No	Yes	No
129. Air conditioning <input checked="" type="checkbox"/> <input type="checkbox"/>		Garbage disposal <input checked="" type="checkbox"/> <input type="checkbox"/>		Trash Compactor <input type="checkbox"/> <input type="checkbox"/>	
130. <input type="checkbox"/> Central <input type="checkbox"/> Wall <input type="checkbox"/> Window		Heating system (central) <input checked="" type="checkbox"/> <input type="checkbox"/>		TV antenna system <input type="checkbox"/> <input type="checkbox"/>	
131. Air exchange system <input type="checkbox"/> <input type="checkbox"/>		Heating system (supplemental) <input type="checkbox"/> <input type="checkbox"/>		TV cable system <input type="checkbox"/> <input type="checkbox"/>	
132. Carbon Monoxide Detector <input type="checkbox"/> <input type="checkbox"/>		Incinerator <input type="checkbox"/> <input type="checkbox"/>		TV satellite dish <input type="checkbox"/> <input type="checkbox"/>	
133. Ceiling fan <input checked="" type="checkbox"/> <input type="checkbox"/>		Intercom <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> Rented <input type="checkbox"/> Owned	
134. Dishwasher <input checked="" type="checkbox"/> <input type="checkbox"/>		Lawn sprinkler system <input type="checkbox"/> <input type="checkbox"/>		TV satellite receiver <input type="checkbox"/> <input type="checkbox"/>	
135. Doorbell <input checked="" type="checkbox"/> <input type="checkbox"/>		Microwave <input checked="" type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> Rented <input type="checkbox"/> Owned	
136. Drain tile system <input type="checkbox"/> <input type="checkbox"/>		Plumbing <input checked="" type="checkbox"/> <input type="checkbox"/>		Washer <input checked="" type="checkbox"/> <input type="checkbox"/>	
137. Dryer <input checked="" type="checkbox"/> <input type="checkbox"/>		Pool and equipment <input type="checkbox"/> <input type="checkbox"/>		Water heater <input checked="" type="checkbox"/> <input type="checkbox"/>	
138. Electrical system <input checked="" type="checkbox"/> <input type="checkbox"/>		Range/oven <input checked="" type="checkbox"/> <input type="checkbox"/>		Water treatment system <input type="checkbox"/> <input type="checkbox"/>	
139. Exhaust system <input type="checkbox"/> <input type="checkbox"/>		Range hood <input checked="" type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> Rented <input type="checkbox"/> Owned	
140. Fire sprinkler system <input type="checkbox"/> <input type="checkbox"/>		Refrigerator <input checked="" type="checkbox"/> <input type="checkbox"/>		Windows <input checked="" type="checkbox"/> <input type="checkbox"/>	
141. Fireplace <input checked="" type="checkbox"/> <input type="checkbox"/>		Security system <input type="checkbox"/> <input type="checkbox"/>		Window treatments <input checked="" type="checkbox"/> <input type="checkbox"/>	
142. Fireplace mechanisms <input checked="" type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> Rented <input type="checkbox"/> Owned		Wood-burning stove <input type="checkbox"/> <input type="checkbox"/>	
143. Furnace humidifier <input type="checkbox"/> <input type="checkbox"/>		Smoke detectors (battery) <input type="checkbox"/> <input type="checkbox"/>		Other <input type="checkbox"/> <input type="checkbox"/>	
144. Freezer <input checked="" type="checkbox"/> <input type="checkbox"/>		Smoke detectors (hardwired) <input checked="" type="checkbox"/> <input type="checkbox"/>		Other <input type="checkbox"/> <input type="checkbox"/>	
145. Garage door opener (GDO) <input type="checkbox"/> <input type="checkbox"/>		Solar collectors <input type="checkbox"/> <input type="checkbox"/>		Other <input type="checkbox"/> <input type="checkbox"/>	
146. Garage auto reverse <input type="checkbox"/> <input type="checkbox"/>		Sump pump <input type="checkbox"/> <input type="checkbox"/>		Other <input type="checkbox"/> <input type="checkbox"/>	
147. GDO remote <input type="checkbox"/> <input type="checkbox"/>		Toilet mechanisms <input checked="" type="checkbox"/> <input type="checkbox"/>		Other <input type="checkbox"/> <input type="checkbox"/>	

148. Comments: _____

149. _____

150. E. SUBSURFACE SEWAGE TREATMENT SYSTEM DISCLOSURE:

151. (A subsurface sewage treatment system disclosure is required by MN Statute 115.55.) (Check appropriate box.)

152. Seller certifies that Seller ☒ DOES ☐ DOES NOT know of a subsurface sewage treatment system on or serving
 (Check one.)153. the above-described real property. (If answer is **DOES**, and the system does not require a state permit, see
 154. *Subsurface Sewage Treatment System Disclosure Statement*.)155. ☒ There is a subsurface sewage treatment system on or serving the above-described real property.156. (See *Subsurface Sewage Treatment System Disclosure Statement*.)157. ☐ There is an abandoned subsurface sewage treatment system on the above-described real property.158. (See *Subsurface Sewage Treatment System Disclosure Statement*.)

159. ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.

161. THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.

162. Property located at 4784 Crane Island

163. **F. PRIVATE WELL DISCLOSURE:** (A well disclosure and Certificate are required by MN Statute 103I.235.)

164. (Check appropriate box.)

165. ☐ Seller certifies that Seller does not know of any wells on the above-described real property.

166. ☒ Seller certifies there are one or more wells located on the above-described real property.

167. (See Well Disclosure Statement.)

168. Are there any wells serving the above-described property that are not located on the
169. property?

☒ Yes

☐ No

170. To your knowledge, is this property in a Special Well Construction Area?

☐ Yes

☒ No

171. **G. PROPERTY TAX TREATMENT:**

172. **Valuation Exclusion Disclosure** (Required by MN Statute 273.11, Subd. 16.)

173. (Check appropriate box.)

174. There ☐ IS ☒ IS NOT an exclusion from market value for home improvements on this property. Any
----- (Check one.) -----

175. valuation exclusion shall terminate upon sale of the property, and the property's estimated market value for
176. property tax purposes shall increase. If a valuation exclusion exists, Buyers are encouraged to look into the
177. resulting tax consequences.

178. Additional comments: _____

179. _____

180. _____

181. **Preferential Property Tax Treatment**

182. Is the property subject to any preferential property tax status or any other credits affecting the property?

183. (e.g., Disability, Green Acres, CRP, RIM, Rural Preserve)

☐ Yes

☒ No

184. If "Yes," would these terminate upon the sale of the property?

☐ Yes

☐ No

185. Explain: _____

186. _____

187. _____

188. **H. METHAMPHETAMINE PRODUCTION DISCLOSURE:**

189. (A Methamphetamine Production Disclosure is required by MN Statute 152.0275, Subd. 2 (m).)

190. ☒ Seller is not aware of any methamphetamine production that has occurred on the property.

191. ☐ Seller is aware that methamphetamine production has occurred on the property.

192. (See Methamphetamine Production Disclosure Statement.)

193. **I. NOTICE REGARDING AIRPORT ZONING REGULATIONS:** The property may be in or near an airport safety
194. zone with zoning regulations adopted by the governing body that may affect the property. Such zoning regulations
195. are filed with the county recorder in each county where the zoned area is located. If you would like to determine
196. if such zoning regulations affect the property, you should contact the county recorder where the zoned area is
197. located.

198. **J. NOTICE REGARDING CARBON MONOXIDE DETECTORS:** MN Statute 299F.51 requires Carbon Monoxide
199. Detectors to be located within ten (10) feet from all sleeping rooms. Carbon Monoxide Detectors may or may not
200. be personal property and may or may not be included in the sale of the home.

201. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

203. THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.

204. Property located at 4784 Crane Island
205. K. CEMETERY ACT:

206. MN Statute 307.08 prohibits any damage or illegal molestation of human remains, burials or cemeteries. A person
207. who intentionally, willfully and knowingly destroys, mutilates, injures, disturbs or removes human skeletal remains
208. or human burial grounds is guilty of a felony.

209. To your knowledge, are you aware of any human remains, burials or cemeteries located

210. on the property?

☐ Yes

☒ No

211. If "Yes," please explain: _____

212. _____

213. All unidentified human remains or burials found outside of platted, recorded or identified cemeteries and in
214. contexts which indicate antiquity greater than 50 years shall be dealt with according to the provisions of MN
215. Statute 307.08, Subd. 7.

216. L. ENVIRONMENTAL CONCERNS:

217. To your knowledge, have any of the following environmental concerns previously existed or do they currently exist
218. on the property?

219. Asbestos? ☐ Yes ☒ No Mold? ☐ Yes ☒ No

220. Diseased trees? ☐ Yes ☒ No Radon? ☐ Yes ☒ No

221. Formaldehyde? ☐ Yes ☒ No Soil problems? ☐ Yes ☒ No

222. Hazardous wastes/substances? ☐ Yes ☒ No Underground storage tanks? ☐ Yes ☒ No

223. Lead? (e.g., paint, plumbing) ☐ Yes ☒ No Other? ☐ Yes ☒ No

224. Are you aware if there are currently, or have previously been, any orders issued on the property by any governmental
225. authority ordering the remediation of a public health nuisance on the property? ☐ Yes ☒ No

226. If answer above is "Yes," seller certifies that all orders ☐ HAVE ☐ HAVE NOT been vacated.
----- (Check one.) -----

227. Give details to any question answered "Yes": _____

228. _____

229. _____

230. M. OTHER DEFECTS/MATERIAL FACTS:

231. Are you aware of any other material facts that could adversely and significantly affect an ordinary buyer's use or
232. enjoyment of the property or any intended use of the property? ☐ Yes ☒ No

233. If "Yes," explain below: _____

234. _____

235. _____

236. _____

237. N. ADDITIONAL COMMENTS:

238. _____

239. _____

240. _____

241. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

243. THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.

244. **O. WATER INTRUSION AND MOLD GROWTH:** Recent studies have shown that various forms of water intrusion
245. affect many homes. Water intrusion may occur from exterior moisture entering the home and/or interior moisture
246. leaving the home.

247. Examples of exterior moisture sources may be

- 248. • improper flashing around windows and doors,
- 249. • improper grading,
- 250. • flooding,
- 251. • roof leaks.

252. Examples of interior moisture sources may be

- 253. • plumbing leaks,
- 254. • condensation (caused by indoor humidity that is too high or surfaces that are too cold),
- 255. • overflow from tubs, sinks or toilets,
- 256. • firewood stored indoors,
- 257. • humidifier use,
- 258. • inadequate venting of kitchen and bath humidity,
- 259. • improper venting of clothes dryer exhaust outdoors (including electrical dryers),
- 260. • line-drying laundry indoors,
- 261. • houseplants—watering them can generate large amounts of moisture.

262. In addition to the possible structural damage water intrusion may do to the property, water intrusion may also result
263. in the growth of mold, mildew and other fungi. Mold growth may also cause structural damage to the property.
264. Therefore, it is very important to detect and remediate water intrusion problems.

265. Fungi are present everywhere in our environment, both indoors and outdoors. Many molds are beneficial to
266. humans. However, molds have the ability to produce mycotoxins that may have a potential to cause serious health
267. problems, particularly in some immunocompromised individuals and people who have asthma or allergies to
268. mold.

269. To complicate matters, mold growth is often difficult to detect, as it frequently grows within the wall structure. If you
270. have a concern about water intrusion or the resulting mold/mildew/fungi growth, you may want to consider having the
271. property inspected for moisture problems before entering into a purchase agreement or as a condition of your
272. purchase agreement. Such an analysis is particularly advisable if you observe staining or musty odors on the
273. property.

274. For additional information about water intrusion, indoor air quality, moisture or mold issues, go to the Minnesota
275. Association of REALTORS® web site at www.mnrealtor.com.

276. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

278. THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.

279. Property located at 4784 Crane Island

280. P. NOTICE REGARDING PREDATORY OFFENDER INFORMATION: Information regarding the predatory
281. offender registry and persons registered with the predatory offender registry under MN Statue 243.166
282. may be obtained by contacting the local law enforcement offices in the community where the property
283. is located or the Minnesota Department of Corrections at (651) 361-7200, or from the Department of
284. Corrections web site at www.corr.state.mn.us.

285. LISTING BROKER AND LICENSEES MAKE NO REPRESENTATIONS AND ARE
286. NOT RESPONSIBLE FOR ANY CONDITIONS EXISTING ON THE PROPERTY.

287. Q. SELLER'S STATEMENT:

288. (To be signed at time of listing.)

289. Seller(s) hereby states the material facts as stated above are true and accurate and authorizes any licensee(s)
290. representing or assisting any party(ies) in this transaction to provide a copy of this Disclosure to any person or
291. entity in connection with any actual or anticipated sale of the property.

292. Nolly H. Laitinen 5/13/11
(Seller) (Date) (Seller) (Date)

293. R. BUYER'S ACKNOWLEDGEMENT:

294. (To be signed at time of purchase agreement.)

295. I/We, the Buyer(s) of the property, acknowledge receipt of this Seller's Property Disclosure Statement and agree
296. that no representations regarding material facts have been made other than those made above.

297. _____
(Buyer) (Date) (Buyer) (Date)

298. S. SELLER'S ACKNOWLEDGMENT:

299. (To be signed at time of purchase agreement.)

300. AS OF THE DATE BELOW, I/we, the Seller(s) of the property, state that the material facts stated above are the
301. same, except for changes as indicated below, which have been signed and dated.

302. _____
303. _____
304. _____
305. _____
306. _____

307. _____
(Seller) (Date) (Seller) (Date)

308. For purposes of the seller disclosure requirements of MN Statutes 513.52 through 513.60:

309. "Residential real property" or "residential real estate" means property occupied as, or intended to be occupied as, a
310. single-family residence, including a unit in a common interest community as defined in MN Statute 515B.1-103, clause
311. (10), regardless of whether the unit is in a common interest community not subject to chapter 515B.

312. The seller disclosure requirements of MN Statutes 513.52 through 513.60 apply to the transfer of any interest in
313. residential real estate, whether by sale, exchange, deed, contract for deed, lease with an option to purchase or any
314. other option.

315. ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.

317.	THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.
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318. **Exceptions**

319. The seller disclosure requirements of MN Statutes 513.52 through 513.60 **DO NOT** apply to

- 320. (1) real property that is not residential real property;
- 321. (2) a gratuitous transfer;
- 322. (3) a transfer pursuant to a court order;
- 323. (4) a transfer to a government or governmental agency;
- 324. (5) a transfer by foreclosure or deed in lieu of foreclosure;
- 325. (6) a transfer to heirs or devisees of a decedent;
- 326. (7) a transfer from a cotenant to one or more other cotenants;
- 327. (8) a transfer made to a spouse, parent, grandparent, child or grandchild of Seller;
- 328. (9) a transfer between spouses resulting from a decree of marriage dissolution or from a property agreement incidental to that decree;
- 329. (10) a transfer of newly constructed residential property that has not been inhabited;
- 330. (11) an option to purchase a unit in a common interest community, until exercised;
- 331. (12) a transfer to a person who controls or is controlled by the grantor as those terms are defined with respect to a declarant under section 515B.1-103, clause (2);
- 332. (13) a transfer to a tenant who is in possession of the residential real property; or
- 333. (14) a transfer of special declarant rights under section 515B.3-104.

336. **Waiver**

337. The written disclosure required under sections 513.52 to 513.60 may be waived if Seller and the prospective Buyer
338. agree in writing. Waiver of the disclosure required under sections 513.52 to 513.60 does not waive, limit or abridge
339. any obligation for seller disclosure created by any other law.

340. **No Duty to Disclose**

341. A. There is no duty to disclose the fact that the property

- 342. (1) is or was occupied by an owner or occupant who is or was suspected to be infected with Human
- 343. Immunodeficiency Virus or diagnosed with Acquired Immunodeficiency Syndrome;
- 344. (2) was the site of a suicide, accidental death, natural death or perceived paranormal activity; or
- 345. (3) is located in a neighborhood containing any adult family home, community-based residential facility or nursing
- 346. home.

347. B. **Predatory Offenders.** There is no duty to disclose information regarding an offender who is required to register
348. under MN Statute 243.166 or about whom notification is made under that section, if Seller, in a timely manner,
349. provides a written notice that information about the predatory offender registry and persons registered with the
350. registry may be obtained by contacting the local law enforcement agency where the property is located or the
351. Department of Corrections.

352. C. The provisions in paragraphs A and B do not create a duty to disclose any facts described in paragraphs A and B
353. for property that is not residential property.

354. **D. Inspections.**

- 355. (i) Except as provided in paragraph (ii), Seller is not required to disclose information relating to the real property
356. if a written report that discloses the information has been prepared by a qualified third party and provided to
357. the prospective buyer. For purposes of this paragraph, "qualified third party" means a federal, state or local
358. governmental agency, or any person whom Seller or prospective buyer reasonably believes has the expertise
359. necessary to meet the industry standards of practice for the type of inspection or investigation that has been
360. conducted by the third party in order to prepare the written report.
- 361. (ii) Seller shall disclose to the prospective buyer material facts known by Seller that contradict any information
362. included in a written report under paragraph (i) if a copy of the report is provided to Seller.

363. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

SEPTIC SYSTEM DESIGN

DESIGN CRITERIA;

2 bedroom type 1 single family home. No garbage disposal.

WATER USAGE;

300 gallons per day maximum.

PERCOLATION RATE;

20 minutes per inch.

SEPTIC TANK;

Install a 1,250 gallon tank.

PUMP CHAMBER;

Install a 1,000 gallon tank. Set pump as specified for a two bedroom house.

DRAINFIELD;

Treatment Mound, pressure distribution required. Located on a 2% slope. Total mound area is 40 feet by 51 feet. Rock bed measures 10 feet by 25 feet. Downslope dike width is 17 feet, upslope dike width is 13 feet. End dikes are 13 feet each. 120 Tons of sand is required. Please see detail.

GENERAL CONSTRUCTION PRACTICES;

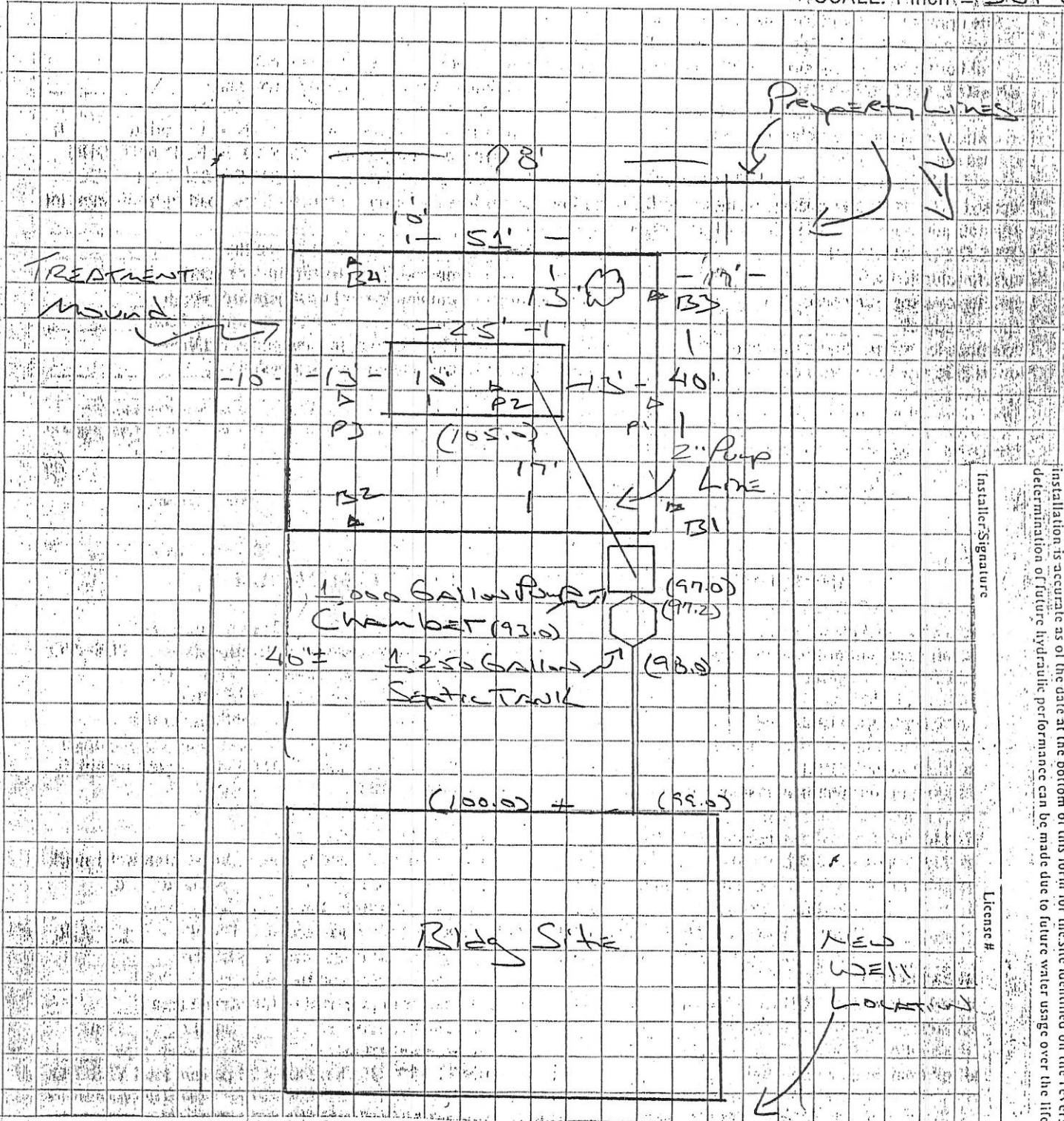
Divert all surface water away from the drainfield area. Do not disturb the drainfield area during construction. Fence off the drainfield area if necessary.
If there are any questions regarding this design please contact Gary Staber at 461-2356.

SOIL TREATMENT SYSTEM SITE PLAN DRAWING

REQUIRED INFORMATION Check box if completed:

- | | | |
|--|---|---|
| <input type="checkbox"/> North arrow | <input type="checkbox"/> Lakes, rivers, streams, wetlands | <input type="checkbox"/> Road right-of-way(s) |
| <input type="checkbox"/> Designated soil treatment area | <input type="checkbox"/> Ordinary high water level of public waters | <input type="checkbox"/> Lot lines |
| <input type="checkbox"/> Alternate soil treatment area | <input type="checkbox"/> Ten-year flood elevation | <input type="checkbox"/> Lot dimensions |
| <input type="checkbox"/> Soil borings & perc test locations with horizontal & vertical reference point | <input type="checkbox"/> Flooding potential areas | <input type="checkbox"/> Lot easements |
| <input type="checkbox"/> Wells within 100 feet | <input type="checkbox"/> Location of disturbed or compacted areas | <input type="checkbox"/> Setbacks from buildings |
| <input type="checkbox"/> Sewer lines within 50 feet of wells | <input type="checkbox"/> Location of run-on potential areas | <input type="checkbox"/> Proposed & existing buildings with foundations |
| <input type="checkbox"/> Direction of slope(s) | <input type="checkbox"/> Elevation of bottom of soil treatment area | |
| | <input type="checkbox"/> Access route for tank maintenance | |

SCALE: 1" inch = 30' ft



I hereby certify as a State of Minnesota Licensed Installer that the individual sewage treatment system diagrammed above was installed in accordance with all applicable requirements of Minnesota Rules Chapter 7080. The diagram of the installation is accurate as of the date at the bottom of this form for the site identified on the reverse side of this form. No determination of future hydraulic performance can be made due to future water usage over the life of the system.

Installer Signature

License #

Date

I hereby certify as a State of Minnesota Licensed Site Evaluator that the individual sewage treatment system diagrammed above is designed in accordance with all applicable requirements of Minnesota Rules Chapter 7080. The diagram of the on-site sewage treatment system is accurate as of the date at the bottom of this form for the site identified in this report. No determination of future hydraulic performance can be made due to future water usage over the life of the system.

License #

Date

Designer Signature

MOUND DESIGN WORKSHEET

(For Flows up to 1200 gpd)

A. FLOW

Estimated 300 gpd
or measured _____ x 1.5 = _____ gpd.

B. SEPTIC TANK LIQUID VOLUMES

1,250 gallons

C. SOILS (refer to site evaluation)

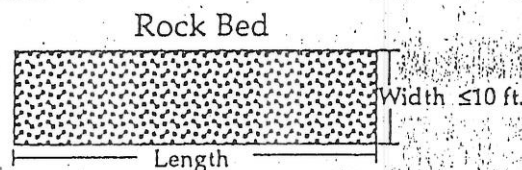
1. Depth to restricting layer = 24 inches
2. Depth of percolation tests = 12 inches
3. Percolation rate 20 mpi
4. Land slope 2 %

Estimated Sewage Flow in Gallons per Day (gpd)				
Number of Bedrooms	Type I	Type II	Type III	Type IV
2	300	225	180	60% of the values in the other columns
3	450	300	218	
4	600	375	256	
5	750	450	294	
6	900	525	332	
7	1050	600	370	
8	1200	675	408	

Number of Bedrooms	Minimum Septic Tank Liquid Capacity (gallons)	Minimum Capacity with Garbage Disposal (gallons)
2 or less	750	1,125
3 or 4	1,000	1,500
5 or 6	1,500	2,250
7 or 8	2,000	3,000
over 9	See fig. C-6	(x 1.5)

D. ROCK LAYER DIMENSIONS

1. Multiply flow rate by 0.83 to obtain required area of rock layer: $A \times 0.83 =$
300 gpd x 0.83 sq. ft./gpd = 250 sq. ft.
2. Select width of rock layer (10 feet or less) = 10 ft.
3. Length of rock layer = area ÷ width =
250 sq. ft. ÷ 10 ft. = 25 ft.



E. ROCK VOLUME

1. Multiply rock area by rock depth to get cubic feet of rock;
250 sq. ft. x 1 ft. = 250 cu. ft.
2. Divide cu. ft. by 27 cu. ft./cu. yd. to get cubic yards;
250 cu. ft. ÷ 27 = 9.2 cu. yd.
3. Multiply cubic yards by 1.4 to get weight of rock in tons;
9.2 cu. yd. x 1.4 ton/cu. yd. = 13 tons.

F. ADSORPTION WIDTH

1. Percolation rate in top 12 inches of soil is 20 mpi
2. Select allowable soil loading rate from table;
160 gpd/ft²
3. Calculate adsorption width ratio by dividing rock layer loading rate of 1.20 gpd/ft² by allowable soil loading rate;
 $1.20 \text{ gpd/ft}^2 \div 160 \text{ gpd/ft}^2 = \underline{2.0}$
4. Multiply adsorption width ratio by rock layer width to get required adsorption width;
10 x 2 ft = 20 ft

Adsorption Width Sizing Table			
Percolation Rate Minutes per inch (mpi)	Soil Texture	Gallons per day per square foot	Ratio of rock bed width to adsorption width
Faster than 0.1	Coarse Sand	1.20	1.00
0.1 to 5	Sand	1.20	1.00
0.1 to 5	Fine Sand**	0.60	2.00
6 to 15	Sandy Loam	0.79	1.52
16 to 30	Loam	0.60	2.00
31 to 45	Silt Loam	0.50	2.40
46 to 60	Clay Loam	0.45	2.67
61 to 120	Clay	0.24	5.00
Slower than 120	Clay	—	—

** Soil having 50% or more of fine or very fine sand.

**SUBSURFACE SEWAGE TREATMENT
SYSTEM DISCLOSURE STATEMENT**

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1. Date _____
2. Page 1 _____ of pages: THE REQUIRED MAP IS
3. ATTACHED HERETO AND MADE A PART HEREOF

4. Property located at 4784 Crane Island in the City of Minnetrista
5. County of Hennepin State of Minnesota, legally described as follows or on
6. attached sheet (the "Property") CRANE ISLAND LOT D14 AND LOT D15

7. _____
8. This disclosure is not a warranty of any kind by Seller(s) or any licensee(s) representing or assisting any party(ies) in
9. this transaction, and is not a substitute for any inspections or warranties the party(ies) may wish to obtain.

10. **BUYER(S) AND SELLER(S) MAY WISH TO OBTAIN PROFESSIONAL ADVICE AND/OR INSPECTIONS OF THE**
11. **SUBSURFACE SEWAGE TREATMENT SYSTEM AND TO PROVIDE FOR APPROPRIATE PROVISIONS IN A**
12. **CONTRACT BETWEEN BUYER(S) AND SELLER(S) WITH RESPECT TO ANY ADVICE/INSPECTION/DEFECTS.**

13. **SELLER'S INFORMATION:** The following Seller disclosure satisfies MN Statutes Chapter 115.55. Seller discloses
14. the following information with the knowledge that even though this is not a warranty, prospective Buyers may rely on
15. this information in deciding whether and on what terms to purchase the Property. The Seller(s) authorizes any
16. licensee(s) representing or assisting any party(ies) in this transaction to provide a copy of this statement to any person
17. or entity in connection with any actual or anticipated sale of the Property.

18. Unless Buyer and Seller agree to the contrary in writing before the closing of the sale, a Seller who fails to disclose
19. the existence or known status of a subsurface sewage treatment system at the time of sale, and who knew or had
20. reason to know of the existence or known status of the system, is liable to Buyer for costs relating to bringing the
21. system into compliance with subsurface sewage treatment system rules and for reasonable attorney fees for collection
22. of costs from Seller. An action under this subdivision must be commenced within two years after the date on which
23. Buyer closed the purchase of the real property where the system is located.

24. Legal requirements exist relating to various aspects of location and status of subsurface sewage treatment systems.
25. Buyer is advised to contact the local unit(s) of government, state agency or qualified professional which regulates
26. subsurface sewage treatment systems for further information about these issues.

27. The following are representations made by Seller(s) to the extent of Seller(s) actual knowledge. This information is a
28. disclosure and is not intended to be part of any contract between Buyer and Seller.

29. SUBSURFACE SEWAGE TREATMENT SYSTEM DISCLOSURE:

30. *(Check the appropriate box.)*

31. ☐ Seller certifies that Seller does not know of any subsurface sewage treatment system on or serving the above-
32. described real property. *(If this option is checked, then skip to the last line and sign and date this Statement.)*

33. ☐ Seller certifies that the following subsurface sewage treatment system is on or serving the above-described
34. Property.

35. Is the subsurface sewage treatment system(s) currently in use? ☐ Yes ☐ No

36. TYPE: *(Check appropriate box(es) and indicate location on attached MAP.)*

37. ☐ Septic Tank: ☐ with drain field ☐ with mound system ☐ seepage tank ☐ with open end

38. Is this system a straight-pipe system? ☐ Yes ☐ No ☐ Unknown

39. ☐ Sealed System (holding tank)

40. ☐ Other (Describe): _____

41. **NOTE:** **If any water use appliance, bedroom or bathroom has been added to the Property, the system may**
42. **no longer comply with applicable sewage treatment system laws and rules.**

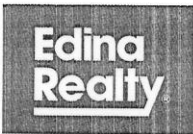
43. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

**SUBSURFACE SEWAGE TREATMENT
SYSTEM DISCLOSURE STATEMENT**

44. Page 2

45. Property located at 4784 Crane Island Minnetrista
46. Seller or transferor shall disclose to Buyer or transferee what Seller or transferor has knowledge of relative to the
47. compliance status of the subsurface sewage treatment system. _____
48. _____
49. _____
50. Any previous inspection report in Seller's possession must be attached to this Disclosure Statement.
51. When was the subsurface sewage treatment system installed? _____
52. Installer Name/Phone _____
53. Where is tank located? _____
54. What is tank size? _____
55. When was tank last pumped? _____
56. How often is tank pumped? _____
57. Where is the drain field located? _____
58. What is the drain field size? _____
59. Describe work performed to the subsurface sewage treatment system since you have owned the Property.
60. _____
61. _____
62. Date work performed/by whom: _____
63. _____
64. Is subsurface sewage treatment system entirely within Property boundary lines, including set back
65. requirements? _____ Is the system shared? _____ How many units on system? _____ Annual Fee? _____
66. Comments: _____
67. _____
68. On this Property: _____
69. _____
70. Approximate number of:
71. people using the subsurface sewage treatment system _____
72. showers/baths taken per week _____
73. wash loads per week _____
74. Distance between well and subsurface sewage treatment system? _____
75. Have you received any notices from any government agencies relating to the subsurface sewage treatment system?
76. (If "Yes", see attached notice.) ☐ Yes ☐ No
77. Are there any known defects in the subsurface sewage treatment system? ☐ Yes ☐ No
78. If "Yes", please explain: _____
79. _____
80. _____

81. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**



**SUBSURFACE SEWAGE TREATMENT
SYSTEM DISCLOSURE STATEMENT**

82. Page 3

83. Property located at 4784 Crane Island Minnetrista

84. **SELLER'S STATEMENT:**

85. *(To be signed at time of listing.)*

86. I/We, Seller(s) of the Property acknowledge the above subsurface sewage treatment system disclosure and *MAP*
87. and authorize listing broker to disclose this information to prospective buyers.

88. _____
(Seller) (Date) (Seller) (Date)

89. **BUYER'S ACKNOWLEDGMENT:**

90. *(To be signed at time of purchase agreement.)*

91. I/We, the Buyer(s) of the Property acknowledge receipt of this Subsurface Sewage Treatment System Disclosure
92. Statement and *MAP* and agree that no representation regarding the condition of the subsurface sewage treatment
93. system have been made, other than those made above.

94. **LISTING BROKER AND LICENSEES MAKE NO REPRESENTATIONS AND ARE NOT RESPONSIBLE FOR ANY**
95. **CONDITIONS EXISTING IN THE SUBSURFACE SEWAGE TREATMENT SYSTEM.**

96. _____
(Buyer) (Date) (Buyer) (Date)

97. **SELLER'S ACKNOWLEDGMENT:**

98. *(To be signed at time of purchase agreement.)*

99. AS OF THE DATE OF THE ACCEPTANCE OF THE PURCHASE AGREEMENT, I/We, the Seller(s) of the above
100. Property, agree that the condition of the subsurface sewage treatment system is the same as noted above, except for
101. changes as indicated below which have been signed and dated.

102. _____
103. _____
104. _____
105. _____
106. _____
107. _____
108. _____
109. _____
110. _____
111. _____
112. _____
113. _____

114. _____
(Seller) (Date) (Seller) (Date)

115. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

WELL LOCATION					MINNESOTA DEPARTMENT OF HEALTH WELL AND BORING RECORD <i>Minnesota Statutes Chapter 103I</i>		MINNESOTA UNIQUE WELL NO. <div style="border: 1px solid black; padding: 5px; display: inline-block;">680238</div>																																																					
County Name Hennepin					Township Name Minnetrista		Township No. 117N	Range No. 24W	Section No. 36	Fraction NE 1/4 SW 1/4 NW 1/4	WELL DEPTH (completed) 243 ft.	Date Work Completed September 25, 2002																																																
House Number, Street Name, City, and Zip Code of Well Location 4784 Crane Island, Minnetrista 55331					or Fire Number		DRILLING METHOD <input type="checkbox"/> Cable Tool <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Auger <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Jetted <input type="checkbox"/> _____																																																					
Show exact location of well in section grid with "X".					Sketch map of well location. Showing property lines, roads and buildings.		DRILLING FLUID water & bentonite			WELL HYDROFRACTURED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO FROM _____ ft. to _____ ft.																																																		
										USE <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Monitoring <input type="checkbox"/> Heating/Cooling <input type="checkbox"/> Irrigation <input type="checkbox"/> Community PWS <input type="checkbox"/> Industry/Commercial <input type="checkbox"/> Environ. Bore Hole <input type="checkbox"/> Noncommunity PWS <input type="checkbox"/> Remedial <input type="checkbox"/> Dewatering <input type="checkbox"/> _____																																																		
PROPERTY OWNER'S NAME Keith Eastman					CASING <input type="checkbox"/> Steel Drive Shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Plastic <input type="checkbox"/> Threaded <input type="checkbox"/> Welded			HOLE DIAM. 6 1/2 in. to 243 ft.																																																				
Property owner's mailing address if different than well location address indicated above. South Ridge Const. 11800 Singletree Lane Eden Prairie, MN 55344					CASING DIAMETER 4 in. to 227 ft. WEIGHT SDR21 lbs./ft.			6 1/2 in. to 243 ft. _____ in. to _____ ft. _____ in. to _____ ft.																																																				
WELL OWNER'S NAME Keith Eastman					SCREEN Make Big Foot Type slotted PVC Slot/Gauge .008 Set between 227 ft. and 243 ft.			OPEN HOLE from _____ ft. to _____ ft. Diam. 4" Length 16' FITTINGS: _____																																																				
Well owner's mailing address if different than property owner's address indicated above.					STATIC WATER LEVEL 63 ft. <input checked="" type="checkbox"/> below <input type="checkbox"/> above land surface Date measured 9/25/02			PUMPING LEVEL (below land surface) 120 ft. after 2 hrs. pumping 14 g.p.m.																																																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>GEOLOGICAL MATERIALS</th> <th>COLOR</th> <th>HARDNESS OF MATERIAL</th> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td>clay</td> <td>gray</td> <td>firm</td> <td>0</td> <td>205</td> </tr> <tr> <td>rocky sand gravel</td> <td>brown</td> <td>soft</td> <td>205</td> <td>212</td> </tr> <tr> <td>clay</td> <td>orange</td> <td>firm</td> <td>212</td> <td>226</td> </tr> <tr> <td>fine sand</td> <td>tan</td> <td>soft</td> <td>226</td> <td>243</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>					GEOLOGICAL MATERIALS	COLOR	HARDNESS OF MATERIAL	FROM	TO	clay	gray	firm	0	205	rocky sand gravel	brown	soft	205	212	clay	orange	firm	212	226	fine sand	tan	soft	226	243																										WELL HEAD COMPLETION <input type="checkbox"/> Pitless adapter manufacturer _____ Model _____ <input type="checkbox"/> Casing Protection _____ <input checked="" type="checkbox"/> 12 in. above grade <input type="checkbox"/> At-grade (Environmental Wells and Borings ONLY)			GROUTING INFORMATION Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Grout Material <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete <input checked="" type="checkbox"/> High Solids Bentonite Quik Grout mud cuttings from 0 to 30 ft. 2 yds. <input checked="" type="checkbox"/> bags from 30 to 227 ft. _____ yds. <input type="checkbox"/> bags from _____ to _____ ft. _____ yds. <input type="checkbox"/> bags		
GEOLOGICAL MATERIALS	COLOR	HARDNESS OF MATERIAL	FROM	TO																																																								
clay	gray	firm	0	205																																																								
rocky sand gravel	brown	soft	205	212																																																								
clay	orange	firm	212	226																																																								
fine sand	tan	soft	226	243																																																								
REMARKS, ELEVATION, SOURCE OF DATA, etc. <div style="text-align: right;">Use a second sheet, if needed</div>					NEAREST KNOWN SOURCE OF CONTAMINATION 60 feet West direction Mound type Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			PUMP <input type="checkbox"/> Not installed Date installed _____ Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. Capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> L.S. Turbine <input type="checkbox"/> Reciprocating <input type="checkbox"/> Jet <input type="checkbox"/> _____																																																				
IMPORTANT - FILE WITH PROPERTY PAPERS WELL OWNER COPY					ABANDONED WELLS Does property have any not in use and not sealed well(s)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			VARIANCE Was a variance granted from the MDH for this well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No TN# _____																																																				
This well was drilled under my supervision and in accordance with Minnesota Rules, Chapter 4725. The information contained in this report is true to the best of my knowledge.					WELL CONTRACTOR CERTIFICATION M. Praught Drilling, Inc. 86576 <small>Licensee Business Name</small> <small>Lic. or Reg. No.</small> <small>Authorized Representative Signature</small> Date 9/27/02 Michael Praught Date <small>Name of Driller</small>																																																							

WELL DISCLOSURE STATEMENT

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1. Date _____
2. Page 1 of _____ pages: THE REQUIRED MAP IS
3. ATTACHED HERETO AND MADE A PART HEREOF.

4. Minnesota Statute 103I.235 requires that, before signing an agreement to sell or transfer real property, Seller must
5. disclose information in writing to Buyer about the status and location of all known wells on the property. This requirement
6. is satisfied by delivering to Buyer either a statement by Seller that Seller does not know of any wells on the property,
7. or a disclosure statement indicating the legal description and county, and a map showing the location of each well. In
8. the disclosure statement Seller must indicate, for each well, whether the well is in use, not in use or sealed.
9. Unless Buyer and Seller agree to the contrary in writing, before the closing of the sale, a Seller who fails to disclose
10. the existence or known status of a well at the time of sale, and knew or had reason to know of the existence or known
11. status of the well, is liable to Buyer for costs relating to sealing of the well and reasonable attorneys' fees for collection
12. of costs from Seller, if the action is commenced within six years after the date Buyer closed the purchase of the real
13. property where the well is located.
14. Legal requirements exist relating to various aspects of location and status of wells. Buyer is advised to contact the
15. local unit(s) of government, state agency or qualified professional which regulates wells for further information about
16. these issues.

17. **Instructions for completion of this form are on the reverse side.**

18. **PROPERTY DESCRIPTION:** Street Address: 4784 Crane Island

19. Minnetrista 55364 Hennepin
(City) (Zip) (County)

20. **LEGAL DESCRIPTION:** CRANE ISLAND Lot 014 & 015

26. **WELL DISCLOSURE STATEMENT:**

27. (Check appropriate box.)

28. ☐ Seller certifies that Seller does not know of any wells on the above described real property.
29. (If this option is checked, then skip to the last line and sign and date this Statement.)

30. ☐ Seller certifies that the following wells are located on the above described real property.

	MN Unique Well No.	Well Depth	Year of Const.	Well Type	IN USE	NOT IN USE	SEALED
33. Well 1	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Well 2	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Well 3	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

36. **NOTE:** See definition of terms "IN USE," "NOT IN USE," and "SEALED" on lines 89-100. If a well is not in use,
37. it must be sealed by a licensed well contractor or a well owner must obtain a maintenance permit
38. from the Minnesota Department of Health and pay an annual maintenance fee. Maintenance
39. permits are not transferable. If a well is operable and properly maintained, a maintenance permit
40. is not required.

41. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

WELL DISCLOSURE STATEMENT

42. Page 2

43. Property located at 4784 Crane Island Minnetrista 55364

44. **OTHER WELL INFORMATION:**

45. Date well water last tested for contaminants: _____ Test results attached? ☐ Yes ☐ No

46. Comments:

47.
48.
49.
50.
51.
52.

53. Contaminated Well: Is there a well on the property containing contaminated water? ☐ Yes ☐ No

54. **SEALED WELL INFORMATION:** For each well designated as sealed above, complete this section.

55. When was the well sealed? _____

56. Who sealed the well? _____

57. Was a Sealed Well Report filed with the Minnesota Department of Health? ☐ Yes ☐ No

58. **MAP: Complete the attached MAP showing the location of each well on the real property.**

59. This disclosure is not a warranty of any kind by Seller(s) or any licensee(s) representing or assisting any part(/ies) in
60. this transaction and is not a substitute for any inspections or warranties the party(ies) may wish to obtain.

61. **CERTIFICATION BY SELLER: I certify that the information provided above is accurate and complete to the**
62. **best of my knowledge.**

63. *Robert H. Eastman* 5/13/11
(Seller or Designated Representative) (Date)

(Seller or Designated Representative) (Date)

64. **BUYER'S ACKNOWLEDGEMENT:**

65. _____
(Buyer) (Date) (Buyer) (Date)

66. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

MN-WDS-1 (8/07)

WELL DISCLOSURE STATEMENT

67. Page 3

INSTRUCTIONS FOR COMPLETING THE WELL DISCLOSURE STATEMENT

68.

69. **DEFINITION:** A "well" means an excavation that is drilled, cored, bored, washed, driven, dug, jetted or otherwise
70. constructed if the excavation is intended for the location, diversion, artificial recharge or acquisition of groundwater.

71. **MINNESOTA UNIQUE WELL NUMBER:** All new wells constructed AFTER January 1, 1975, should have been
72. assigned a Minnesota unique well number by the person constructing the well. If the well was constructed after this
73. date, you should have the unique well number in your property records. If you are unable to locate your unique well
74. number and the well was constructed AFTER January 1, 1975, contact your well contractor. If no unique well number
75. is available, please indicate the depth and year of construction for each well.

76. **WELL TYPE:** Use one of the following terms to describe the well type.

77. **WATER WELL:** A water well is any type of well used to extract groundwater for private or public use. Examples
78. of water wells are: domestic wells, drive-point wells, dug wells, remedial wells and municipal wells.

79. **IRRIGATION WELL:** An irrigation well is a well used to irrigate agricultural lands. These are typically
80. large-diameter wells connected to a large pressure distribution system.

81. **MONITORING WELL:** A monitoring well is a well used to monitor groundwater contamination. The well is
82. typically used to access groundwater for the extraction of samples.

83. **DEWATERING WELL:** A dewatering well is a well used to lower groundwater levels to allow for construction
84. or use of underground spaces.

85. **INDUSTRIAL/COMMERCIAL WELL:** An industrial/commercial well is a nonpotable well used to extract
86. groundwater for any nonpotable use, including groundwater thermal exchange wells (heat pumps and heat
87. loops).

88. **WELL USE STATUS:** Indicate the use status of each well. CHECK ONLY ONE (1) BOX PER WELL.

89. **IN USE:** A well is "in use" if the well is operated on a daily, regular or seasonal basis. A well in use includes
90. a well that operates for the purpose of irrigation, fire protection or emergency pumping.

91. **NOT IN USE:** A well is "not in use" if the well does not meet the definition of "in use" above and has not been
92. sealed by a licensed well contractor.

93. **SEALED:** A well is "sealed" if a licensed contractor has completely filled a well by pumping grout material
94. throughout the entire bore hole after removal of any obstructions from the well. A well is "capped" if it has
95. a metal or plastic cap or cover which is threaded, bolted or welded into the top of the well to prevent entry
96. into the well. A "capped" well is not a "sealed" well.

97. If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing
98. contractor, check the well status as "not in use."

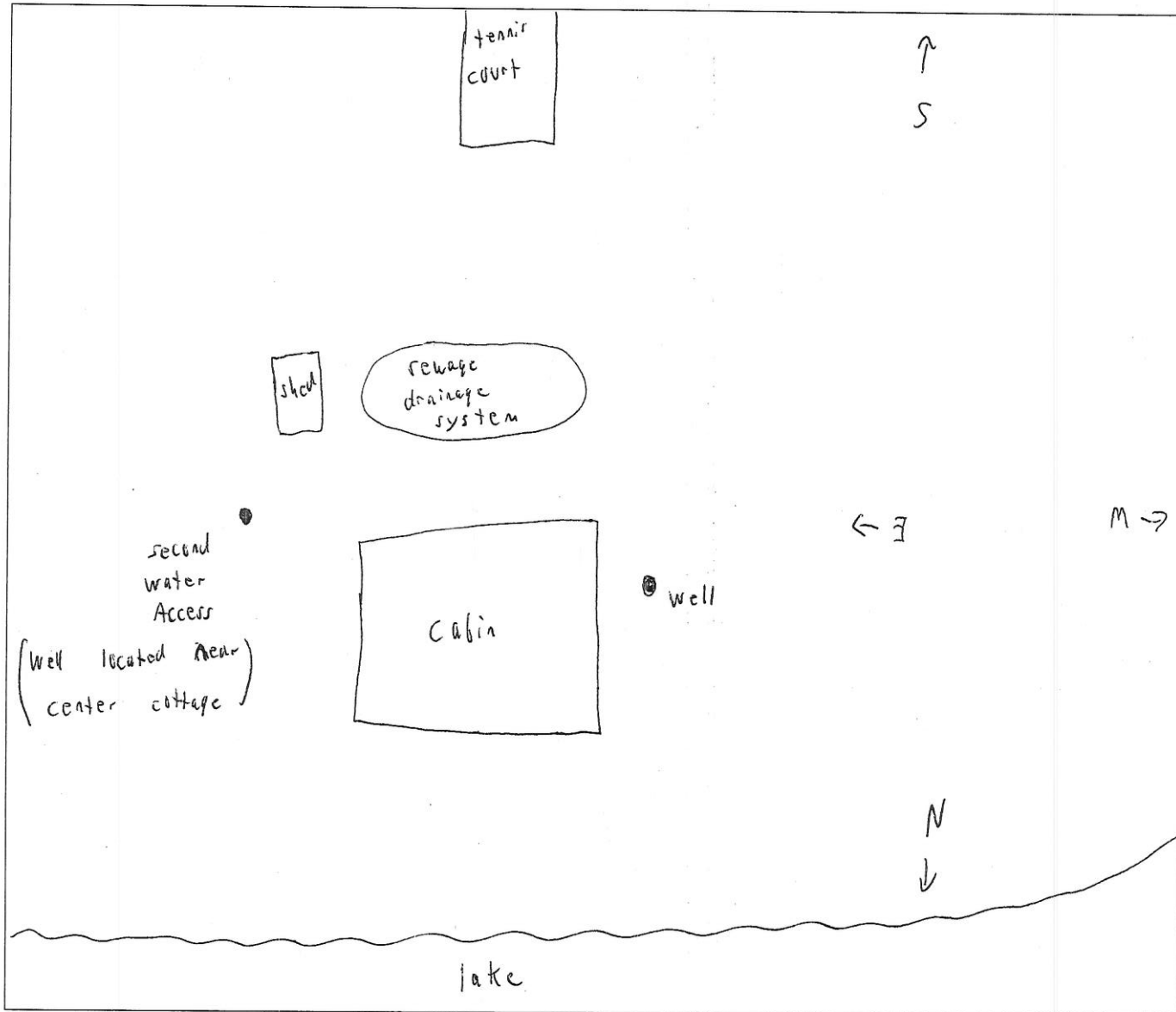
99. If you have any questions, please contact the Minnesota Department of Health, Well Management Section,
100. at (651) 201-4587 (metropolitan Minneapolis-St. Paul) or 1-800-383-9808 (greater Minnesota).

101. **ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER.**

LOCATION MAP

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1. Page _____ of _____ pages
2. Please use the space below to sketch the real property being sold and, to Seller's knowledge, the approximate location of any of the following on the property.
- 3.
4. ☐ **SUBSURFACE SEWAGE TREATMENT SYSTEM** ☐ **WELL** ☐ **METHAMPHETAMINE PRODUCTION AREA**
(Check all that apply.)
5. Include approximate distances from fixed reference points such as streets, buildings and landmarks.
6. Property located at 4784 Crane Island
7. Minnetrista MN 55364



8. ATTACH ADDITIONAL SHEETS AS NEEDED.
9. Seller and Buyer initial: * [Signature] (Seller) _____ (Date) _____ (Buyer) _____ (Date)
10. _____ (Seller) _____ (Date) _____ (Buyer) _____ (Date)