

RESIDENTIAL INCOME PROPERTY ADDENDUM (1-4 UNITS) TO RESIDENTIAL SELLER'S PROPERTY DISCLOSURE STATEMENT ("SPDS")



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- 1. This is an Addendum to the SPDS dated: 03/30/2024
- 2. Seller: Delphic Homes LLC
- 3. Property address: 337 N Colorado st Chandler AZ 85226
- 4. Number of County Assessor Parcel Numbers for the Premises: 1
- 5. Tax Parcel Numbers: 302-62-113

YES NO
 6. Are you aware of whether the Premises has been the subject of any condominium/time share/interval ownership agreements, applications, approvals or historical sales?
 7.

YES NO
 8. Are you aware of whether an application for a Public Report has ever been filed affecting the Premises?
 9. If so, when? _____

10. **Are you aware of any of the following affecting access or use of the Property?**

- | YES | NO | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Access Easements |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Utility Easements |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Reciprocal Easement Agreement |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Restrictions on Legal or Physical Access |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Shared Use Agreements |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Shared Fences/Walls |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Shared Driveways |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Shared Signage |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Leased Parking |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Grandfathered Uses |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Association Agreements n/a |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Other (describe) _____ |

23. If the answer to any of the preceding is yes, please explain. (Attach additional sheets if necessary).
 None
 24. _____
 25. _____

26. COMPLIANCE WITH LAW/LEGAL MATTERS

27. **Are you aware of:**

YES NO
 28. Any tenant bankruptcy proceedings?

29. **Any violations of laws or regulations of the following:**

- | | | |
|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Zoning |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Building Code |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Occupational Safety and Health Administration (OSHA) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Utility Service |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Sanitary Health Regulations |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Swimming Pools |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Covenants, Conditions and Restrictions (CC&R's) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Americans With Disabilities Act (ADA) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Have you ever received any notice of non-compliance of any type relating to the Premises? |

39. If the answer to any of the preceding is yes, please explain and provide copies of any documentation you have pertaining to such matters. (Attach additional sheets if necessary).
 None
 41. _____
 42. _____

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43. CONTRACTUAL OBLIGATIONS

44. Are you aware of any of the following contractual obligations affecting the property?

- | YES | NO | |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Tenant Leases or Subleases |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Alarm/Security System Agreements |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Property Management Agreements |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Leased Equipment |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Service Agreements such as landscaping, garbage/waste disposal |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water Treatment Agreements |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Communications Systems or Cable System Agreements |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Other Equipment or Service Contracts or Agreements (describe) <u>n/a</u> |
53. If the answer to any of the preceding is yes, please explain. (Attach additional sheets if necessary).
54. Fire monitoring system in place until May, 2024. Can be extended or moved to a new
55. _____

56. ENVIRONMENTAL FACTORS

57. Are you aware of any of the following environmental factors affecting the property?

- | YES | NO | |
|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Hazards or hazardous materials on the Property, such as asbestos; chemicals used in the manufacture of methamphetamine, LSD or Ecstasy; PCB transformers; dumps; pesticides; radon; oil or chemicals, now or in the past? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | High voltage distribution towers or lines? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Drywell (drainage)? If yes, Registration # _____ |
63. If the answer to any of the preceding is yes, please explain and provide copies of any documentation you have pertaining to such matters. (Attach additional sheets if necessary).
64. None
65. _____
66. _____

67. REPORTS/STUDIES

68. Do you have any of the following items concerning the Property?

- | YES | NO | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Soils Test Report |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Land Survey |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Flood Plain Report |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Septic/Waste Disposal Reports/Certifications |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Registrations of Wells |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Environmental Site Assessments or Studies |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Title Reports <u>None</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | Other _____ |
77. If the answer to any of the preceding is yes, please explain. (Attach additional sheets if necessary).
78. N/a
79. _____

80. OTHER ISSUES

81. Are you aware of:

- | YES | NO | |
|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Security lighting in parking and/or common areas? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any recorded and/or unrecorded liens against the Property? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | The Property being located in a designated historical district? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any proposed land use changes relating to the adjacent or nearby Property, such as: new developments, zoning changes, or land trades? |

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87. SELLER CERTIFICATION:

88. Seller certifies that the information contained herein is true and complete to Seller's knowledge as of the date signed.

89. Jacob Landis 3/31/2024
^ SELLER'S SIGNATURE MO/DA/YR ^ SELLER'S SIGNATURE MO/DA/YR

90. Jacob Landis
SELLER'S NAME PRINTED SELLER'S NAME PRINTED

91. REVIEWED AND UPDATED (INITIALS): _____ DATE: _____
SELLER SELLER MO/DA/YR

92. BUYER'S ACKNOWLEDGMENT OF RECEIPT:

93. _____
^ BUYER'S SIGNATURE MO/DA/YR ^ BUYER'S SIGNATURE MO/DA/YR

94. _____
BUYER'S NAME PRINTED BUYER'S NAME PRINTED

For Broker Use Only:
Brokerage File/Log No. _____ Manager's Initials _____ Broker's Initials _____ Date _____
(Added February 2012) MO/DA/YR

