



Effective 1/1/07

STATE OF OHIO  
DEPARTMENT OF COMMERCE

## RESIDENTIAL PROPERTY DISCLOSURE FORM

Pursuant to section 5302.30 of the Revised Code and rule 1301:1-4-10 of the Administrative Code.  
**TO BE COMPLETED BY OWNER (Please Print)**

Property Address: 942 LAKEVIEW DRIVE, DOVER, OHIO 44622

Owners Name(s): PATSY L MCCAMMON, CARROLL L. MCCAMMON

Date: MARCH 30, 2010

Owner  is  is not occupying the property. If owner is occupying the property, since what date: \_\_\_\_\_

**Purpose of Disclosure Form:** This is a statement of the condition of the property and of information concerning the property actually known by the owner as required by Ohio Revised Code Section 5302.30. Unless otherwise advised in writing by the owner, the owner, other than having lived at or owning the property, possesses no greater knowledge than that which could be obtained by a careful inspection of the property by a potential purchaser. Unless otherwise advised, owner has not conducted any inspection of generally inaccessible areas of the property. THIS STATEMENT IS NOT A WARRANTY OF ANY KIND BY THE OWNER OR BY ANY AGENT OR SUBAGENT REPRESENTING THE OWNER OF THE PROPERTY. THIS STATEMENT IS NOT A SUBSTITUTE FOR ANY INSPECTIONS. POTENTIAL PURCHASERS ARE ENCOURAGED TO OBTAIN THEIR OWN PROFESSIONAL INSPECTION.

**Owner's Statement:** The representations contained on this form are made by the owner and are not the representations of the owner's agent or subagent. This form and the representations contained in it are provided by the owner exclusively to potential purchasers in a transfer made by the owner, and are not made to purchasers in any subsequent transfers. The information contained in this disclosure form does not limit the obligation of the owner to disclose an item of information that is required by any other statute or law to be disclosed in the transfer of residential real estate. **For example, although some questions are limited to the past five years material problems or defects that occurred over five years ago that have not been fully corrected are required to be disclosed.**

**Instructions to Owner:** (1) Answer ALL questions. (2) Identify any material matters in the property that are actually known. (3) Attach additional pages with your signature if additional space is needed. (4) Complete this form yourself. (5) If some items do not apply to your property, write NA (not applicable). If the item to be disclosed is not within your actual knowledge, indicate Unknown.

### THE FOLLOWING STATEMENTS OF THE OWNER ARE BASED ON OWNER'S ACTUAL KNOWLEDGE

**A) WATER SUPPLY:** The source of water supply to the property is (check appropriate boxes):

- |  |                                       |                                      |
|--|---------------------------------------|--------------------------------------|
| <input checked="" type="checkbox"/> Public Water Service | <input type="checkbox"/> Holding Tank | <input type="checkbox"/> Unknown     |
| <input type="checkbox"/> Private Water Service           | <input type="checkbox"/> Cistern      | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Private Well                    | <input type="checkbox"/> Spring       | _____                                |
| <input type="checkbox"/> Shared Well                     | <input type="checkbox"/> Pond         | _____                                |

Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water?

Yes  No If "Yes", please describe: \_\_\_\_\_

Is the quantity of water sufficient for your household use? (NOTE: water usage will vary from household to household)  Yes  No

If owner knows of any leaks, backups or other material problems with the water supply system or quality or quantity of the water since owning the property (but not longer than the past 5 years), please describe and indicate any repairs completed: \_\_\_\_\_

Owner's Initials CLM Date 3/30/2010

Purchaser's Initials \_\_\_\_\_ Date \_\_\_\_\_

Property Address 942 LAKEVIEW DRIVE, DOVER, OHIO 44622

**B) SEWER SYSTEM:** The nature of the sanitary sewer system servicing the property is (check appropriate boxes):

- Public Sewer                       Private Sewer                       Septic Tank  
 Leach Field                       Aeration Tank                       Filtration Bed  
 Unknown                       Other

If not a public or private sewer, date of last inspection: \_\_\_\_\_

Do you know of any current leaks, backups or other material problems with the sewer system servicing the property?  Yes  No

If "Yes", please describe: \_\_\_\_\_

If owner knows of any leaks, backups or other material problems with the sewer system since owning the property (but not longer than the past 5 years), please describe and indicate any repairs completed: \_\_\_\_\_

Information on the operation and maintenance of the type of sewage system serving the property is available from the department of health or the board of health of the health district in which the property is located.

**C) ROOF:** Do you know of any current leaks or other material problems with the roof or rain gutters?  Yes  No

If "Yes", please describe: \_\_\_\_\_

If owner knows of any leaks or other material problems with the roof or rain gutters since owning the property (but not longer than the past 5 years), please describe and indicate any repairs completed: \_\_\_\_\_

**D) WATER INTRUSION:** Do you know of any previous or current water leakage, water accumulation, excess moisture or other defects to the property, including but not limited to any area below grade, basement or crawl space?  Yes  No

If "Yes", please describe and indicate any repairs completed: \_\_\_\_\_

Do you know of any water or moisture related damage to floors, walls or ceilings as a result of flooding; moisture seepage; moisture condensation; ice damming; sewer overflow/backlog; or leaking pipes, plumbing fixtures, or appliances?  Yes  No

If "Yes", please describe and indicate any repairs completed: \_\_\_\_\_

Purchaser is advised that every home contains mold. Some people are more sensitive to mold than others. If concerned about this issue, purchaser is encouraged to have a mold inspection done by a qualified inspector. Have you ever had the property inspected for mold by a qualified inspector?

Yes  No If "Yes", please describe and indicate whether you have an inspection report and any remediation undertaken: \_\_\_\_\_

**E) STRUCTURAL COMPONENTS (FOUNDATION, BASEMENT/CRAWL SPACE, FLOORS, INTERIOR AND EXTERIOR WALLS):**

Do you know of any movement, shifting, deterioration, material cracks/settling (other than visible minor cracks or blemishes) or other material problems with the foundation, basement/crawl space, floors, or interior/exterior walls?

Yes  No If "Yes", please describe: \_\_\_\_\_

If owner knows of any repairs, alterations or modifications to control the cause or effect of any problem identified above, since owning the property (but not longer than the past 5 years), please describe: \_\_\_\_\_

Do you know of any previous or current fire or smoke damage to the property?  Yes  No

If "Yes", please describe and indicate any repairs completed: \_\_\_\_\_

**F) MECHANICAL SYSTEMS:** Do you know of any current problems or defects with the following mechanical systems? If your property does not have the mechanical system, mark N/A (Not Applicable).

	YES	NO	N/A		YES	NO	N/A
1) Electrical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8) Water softener	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2) Plumbing (pipes)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Is water softener leased?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3) Central heating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9) Security System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4) Central Air conditioning	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Is security system leased?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5) Sump pump	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	10) Central vacuum	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6) Fireplace/chimney	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	11) Built in appliances	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7) Lawn sprinkler	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	12) Other mechanical systems	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If the answer to any of the above questions is "Yes", please describe and indicate any repairs to the mechanical system since owning the property (but not longer than the past 5 years). \_\_\_\_\_

Owner's Initials GM 3/30/10 Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Purchaser's Initials \_\_\_\_\_ / \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_

Property Address 942 LAKEVIEW DRIVE, DOVER, OHIO 44622

**G) WOOD BORING INSECTS/TERMITES:** Do you know of the presence of any wood boring insects/termites in or on the property or any existing damage to the property caused by wood boring insects/termites?  Yes  No  
If "Yes", please describe: \_\_\_\_\_

If owner knows of any inspection or treatment for wood boring insects/termites, since owning the property (but not longer than the past 5 years), please describe: \_\_\_\_\_

**H) PRESENCE OF HAZARDOUS MATERIALS:** Do you know of the previous or current presence of any of the below identified hazardous materials on the property?

- |   | Yes                      | No                                  | Unknown                  |
|---|--------------------------|-------------------------------------|--------------------------|
| 1) Lead-Based Paint                         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2) Asbestos                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3) Urea-Formaldehyde Foam Insulation        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4) Radon Gas                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. If "Yes", indicate level of gas if known | _____                    |                                     |                          |
| 5) Other toxic or hazardous substances      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

If the answer to any of the above questions is "Yes", please describe and indicate any repairs, remediation or mitigation to the property: \_\_\_\_\_

**D) FLOOD PLAIN/LAKE ERIE COASTAL EROSION AREA:**

Is the property located in a designated flood plain?  Yes  No  Unknown

Is the property or any portion of the property included in a Lake Erie Coastal Erosion Area?  Yes  No  Unknown

**J) DRAINAGE/EROSION:** Do you know of any current flooding, drainage, settling or grading or erosion problems affecting the property?  Yes  No

If "Yes", please describe: \_\_\_\_\_

If owner knows of any repairs, modifications or alterations to the property or other attempts to control any flooding, drainage, settling, grading or erosion problems since owning the property (but not longer than the past 5 years), please describe: \_\_\_\_\_

**K) ZONING/CODE VIOLATIONS/ASSESSMENTS/HOME OWNERS ASSOCIATION:** Do you know of any violations of building or housing codes, zoning ordinances affecting the property or any nonconforming uses of the property?  Yes  No

If "Yes", please describe: \_\_\_\_\_

Is the structure on the property designated by any governmental authority as a historic building or as being located in an historic district? (NOTE: such designation may limit changes or improvements that may be made to the property).  Yes  No

If "Yes", please describe: \_\_\_\_\_

Do you know of any recent or proposed assessments, which could affect the property?  Yes  No

If "Yes", please describe: \_\_\_\_\_

Is the property subject to any rules or regulations of, or the payment of any fees or charges to, a Homeowners Association, Condominium Association or any other Community Association?  Yes  No

If "Yes", please describe: \_\_\_\_\_

Owner's Initials CM / Date 3/30/10 Purchaser's Initials \_\_\_\_\_ / Date \_\_\_\_\_

Property Address 942 LAKEVIEW DRIVE, DOVER, OH 44622

- L) BOUNDARY LINES/ENCROACHMENTS/SHARED DRIVEWAY/PARTY WALLS:** Do you know of any of the following conditions affecting the property?
- |                           | Yes                      | No                                  |   | Yes                      | No                                  |
|---------------------------|--------------------------|-------------------------------------|---|--------------------------|-------------------------------------|
| 1) Boundary Agreement     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 4) Shared Driveway                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2) Boundary Dispute       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 5) Party Walls                                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3) Recent Boundary Change | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6) Encroachments From or on Adjacent Property | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- If the answer to any of the above questions is "Yes", please describe: \_\_\_\_\_

**M) UNDERGROUND STORAGE TANKS/WELLS:** Do you know of any underground storage tanks (existing or removed), oil or natural gas wells (plugged or unplugged), or abandoned water wells on the property?  Yes  No  
If "Yes", please describe: \_\_\_\_\_

**N) OTHER KNOWN MATERIAL DEFECTS:** The following are other known material defects in or on the property: \_\_\_\_\_  
\_\_\_\_\_

For purposes of this section, material defects would include any non-observable physical condition existing on the property that could be dangerous to anyone occupying the property or any non-observable physical condition that could inhibit a person's use of the property.

Owner represents that the statements contained in this form are made in good faith based on his/her actual knowledge as of the date signed by the Owner. Owner is advised that the information contained in this disclosure form does not limit the obligation of the owner to disclose an item of information that is required by any other statute or law or that may exist to preclude fraud, either by misrepresentation, concealment or nondisclosure in a transaction involving the transfer of residential real estate.

OWNER: Carroll L. McLammon DATE: March 30, 2010  
OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_

**RECEIPT AND ACKNOWLEDGEMENT OF POTENTIAL PURCHASERS**

Potential purchasers are advised that the owner has no obligation to update this form but may do so according to Revised Code Section 5302.30(G). Pursuant to Ohio Revised Code Section 5302.30(K), if this form is not provided to you prior to the time you enter into a purchase contract for the property, you may rescind the purchase contract by delivering a signed and dated document of rescission to Owner or Owner's agent, provided the document of rescission is delivered prior to all three of the following dates: 1) the date of closing; 2) 30 days after the Owner accepted your offer; and 3) within 3 business days following your receipt or your agent's receipt of this form or an amendment of this form.

I/WE ACKNOWLEDGE RECEIPT OF A COPY OF THIS DISCLOSURE FORM AND UNDERSTAND THAT THE STATEMENTS ARE MADE BASED ON THE OWNERS ACTUAL KNOWLEDGE AS OF THE DATE SIGNED BY THE OWNER.

Owner makes no representations with respect to any offsite conditions. Purchaser should exercise whatever due diligence purchaser deems necessary with respect to offsite issues that may affect purchaser's decision to purchase the property. Purchaser should exercise whatever due diligence purchaser deems necessary with respect to Ohio's Sex Offender Registration and Notification Law (commonly referred to as "Megan's Law"). This law requires the local Sheriff to provide written notice to neighbors if a sex offender resides or intends to reside in the area. The notice provided by the Sheriff is a public record and is open to inspection under Ohio's Public Records Law. If concerned about this issue, purchaser assumes responsibility to obtain information from the Sheriff's office regarding the notices they have provided pursuant to Megan's Law.

My/Our Signature below does not constitute approval of any disclosed condition as represented herein by the owner.

PURCHASER: \_\_\_\_\_ DATE: \_\_\_\_\_  
PURCHASER: \_\_\_\_\_ DATE: \_\_\_\_\_



# AGENCY DISCLOSURE STATEMENT



The real estate agent who is providing you with this form is required to do so by Ohio law. You will not be bound to pay the agent or the agent's brokerage by merely signing this form. Instead, the purpose of this form is to confirm that you have been advised of the role of the agent(s) in the transaction proposed below. (For purposes of this form, the term "seller" includes a landlord and the term "buyer" includes a tenant.)

Property Address: 942 LAKEVIEW DR DOVER

Buyer(s): \_\_\_\_\_

Seller(s): CARROLL and PATSY McCAMMON

## I. TRANSACTION INVOLVING TWO AGENTS IN TWO DIFFERENT BROKERAGES

The buyer will be represented by \_\_\_\_\_, and \_\_\_\_\_  
AGENT(S) BROKERAGE

The seller will be represented by \_\_\_\_\_, and \_\_\_\_\_  
AGENT(S) BROKERAGE

## II. TRANSACTION INVOLVING TWO AGENTS IN THE SAME BROKERAGE

If two agents in the real estate brokerage \_\_\_\_\_ represent both the buyer and the seller, check the following relationship that will apply:

- Agent(s) \_\_\_\_\_ work(s) for the buyer and Agent(s) \_\_\_\_\_ work(s) for the seller. Unless personally involved in the transaction, the broker and managers will be "dual agents", which is further explained on the back of this form. As dual agents they will maintain a neutral position in the transaction and they will protect all parties' confidential information.
- Every agent in the brokerage represents every "client" of the brokerage. Therefore, agents \_\_\_\_\_ and \_\_\_\_\_ will be working for both the buyer and seller as "dual agents". Dual agency is explained on the back of this form. As dual agents they will maintain a neutral position in the transaction and they will protect all parties' confidential information. Unless indicated below, neither the agent(s) nor the brokerage acting as a dual agent in this transaction has a personal, family or business relationship with either the buyer or seller. *If such a relationship does exist, explain:* \_\_\_\_\_

## III. TRANSACTION INVOLVING ONLY ONE REAL ESTATE AGENT

Agent(s) Don R. Wallack and real estate brokerage Piscocora Mathis will

- be "dual agents" representing both parties in this transaction in a neutral capacity. Dual agency is further explained on the back of this form. As dual agents they will maintain a neutral position in the transaction and they will protect all parties' confidential information. Unless indicated below, neither the agent(s) nor the brokerage acting as a dual agent in this transaction has a personal, family or business relationship with either the buyer or seller. *If such a relationship does exist, explain:* \_\_\_\_\_

represent only the (check one)  seller or  buyer in this transaction as a client. The other party is not represented and agrees to represent his/her own best interest. Any information provided the agent may be disclosed to the agent's client.

## CONSENT

I (we) consent to the above relationships as we enter into this real estate transaction. If there is a dual agency in this transaction, I (we) acknowledge reading the information regarding dual agency explained on the back of this form.

BUYER/TENANT

DATE

Carroll McCammon 4/1/2010  
SELLER/LANDLORD DATE

BUYER/TENANT

DATE

SELLER/LANDLORD

DATE

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

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.

Seller's Disclosure

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

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

(ii)  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 (i) or (ii) below):

(i)  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).

(ii)  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 (i) or (ii) below):

(i)  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

(ii)  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)

(f)  Agent has informed the seller of the seller's obligations under 42 U.S.C.4852d 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 they have provided is true and accurate.

<u>Harold L. McLammon</u>	<u>4/1/2010</u>	_____	_____
Seller	Date	Seller	Date
<u>_____</u>	<u>_____</u>	_____	_____
Purchaser	Date	Purchaser	Date
<u>_____</u>	<u>4/1/10</u>	_____	_____
Agent	Date	Agent	Date

**THE TUSCARAWAS COUNTY TITLE COMPANY**

203 Fair Avenue N.E. - P. O. Box 548  
New Philadelphia OH 44663  
Phone: (330) 364-4450 Fax: (330) 343-2976  
Email: tusctitle@tusctitle.net

**TAX AND LEGAL REPORT**

**DATE:** April 7, 2010

**REQUESTED BY:** Don Wallick Wallick Auctions

**PROPERTY ADDRESS:** 942 Lakeview Dr. Dover Ohio

**PRESENT OWNER:** Patsy L. McCammon and Carroll L. McCammon

**VOLUME:** 619                      **PAGE:** 362                      **TRANSFER:** March 21, 1988

**PARCEL NO:** 15-01749.000

=====

REAL ESTATE TAXES ARE CURRENTLY LISTED ON THE 2008 TAX DUPLICATE IN THE NAME OF

**Patsy L. McCammon and Carroll L. McCammon**

**PARCEL NO.:** 15-01749.000

**DESC.** Whole 3907

**VALUATIONS:**

LAND: 6740  
BUILDING: 22500  
TOTAL: 29240  
AUV:

**TAXES:**

GENERAL TAXES: \$ 1302.34  
TAX REDUCTION: \$ - 485.91  
10% ROLLBACK: \$ - 81.64  
2 1/2% REDUCTION \$ - 20.41  
HOMESTEAD CREDIT \$ - 186.04  
TOTAL PER 1/2 YEAR \$ 528.34  
UNPAID REAL \$  
CURRENT SA: \$ 6.00  
PENALTY: \$  
PRIOR DEL: \$  
TOTAL DUE: \$ 0

Special Assessments: MWCD

Taxes for the first half year 2009 are paid.  
Taxes for the second half year 2009 are determined but not yet due.

Approved by Tuscarawas County Map Office: X (Whole Lot)

**NOT APPROVED BY TUSCARAWAS COUNTY MAP OFFICE : \_\_\_\_\_ (RED STAMPED) WILL NOT TRANSFER WITHOUT NEW SURVEY PERFORMED.**

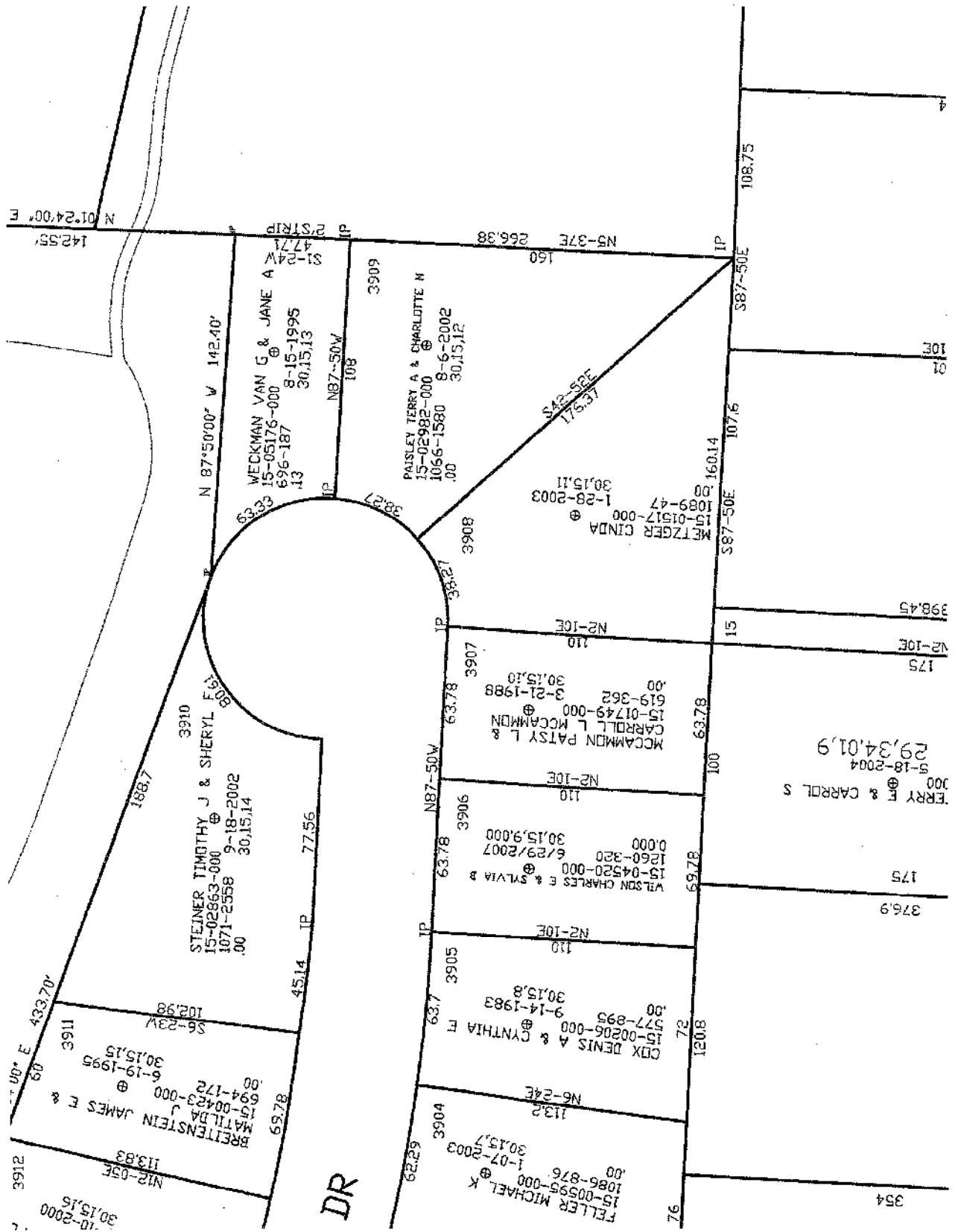
**BY:** Jessica Murphy

**PRIOR FILE NO.**

This information, including any lot dimensions shown, is derived solely from public records and the internet. While the information is usually reliable, it cannot be guaranteed without a full title examination and a current survey to verify its accuracy.







N 01°24'00" E  
142.55'

N 87°50'00" W 142.40'

WECKMAN VAN G & JANE A  
15-05176-000  
8-15-1995  
696-187  
30.15,13

PAISLEY TERRY A & CHARLOTTE M  
15-02982-000  
1066-1580  
8-6-2002  
30.15,12

METZGER CINDA  
15-01517-000  
1-28-2003  
1089-47  
30.15,11

STEINER TIMOTHY J & SHERYL F  
15-02863-000  
9-18-2002  
1071-2558  
30.15,14

MCCAMMON PATSY L & CARROLL L  
15-01749-000  
3-21-1988  
619-362  
30.15,10

WILSON CHARLES E & SYLVIA B  
15-04520-000  
6/29/2007  
1260-320  
30.15,9.000

COX DENIS A & CYNTHIA F  
15-00206-000  
9-14-1983  
577-895  
30.15,8

FELLER MICHAEL K  
15-00555-000  
1-07-2003  
1086-876  
30.15,7

FERRY F & CARROLL S  
5-18-2004  
29,34,01,9

BREITENSTEIN JAMES E & MATILDA J  
15-00423-000  
6-19-1995  
694-172  
30.15,15

DR

N 12°05' E  
113.83'

S 6°23' W  
102.98'

188.7

45.14

77.56

38.27

62.29

63.7

63.78

63.78

38.21

108

3909

150

79

72

110

110

110

150

107.6

108.75

354

120.8

376.9

175

175

15

101

101

4

**COMMITMENT FOR TITLE INSURANCE**

**SCHEDULE A**

Date Issued: April 07, 2010

Commitment No: **1444064**

Other Reference No:

Property Address: **942 Lakeview Drive, Dover, OH 44622**

Name and Address of Title Insurance Company: **First American Title Insurance Company  
1 First American Way  
Santa Ana, CA 92707**

1. Effective Date: **March 31, 2010 7:59 AM**

2.	The policy or policies to be issued are:	<b>POLICY AMOUNT</b>
(a)	Owner's Policy (ALTA Owners 06/17/06) Proposed Insured: to be determined	<b>\$0.00</b>
(b)	Loan Policy (ALTA Loan 06/17/06) Proposed Insured:	<b>\$0.00</b>

3. The estate or interest in the land described or referred to in this Commitment is Fee Simple.

4. Title to the Fee Simple estate or interest in the land is at the Effective Date vested in:

Carroll L. McCammon and Patsy L. McCammon

**SOURCE OF TITLE:**

Deed Book 619, Page 362  
Recorder's Office Tuscarawas County, Ohio.

(Continued on second page)

**First American Title Insurance  
Company**

**This Commitment is invalid unless  
the Insuring provisions and  
Schedules A and B are attached.**

**Issuing agency:  
Title First Agency, Inc.  
250 E. Town Street  
Columbus, OH 43215**

**ALTA CF (06/17/06)**

**Continuation of Schedule A**

Name and Address of Title Insurance Company:  
**First American Title Insurance Company**  
**1 First American Way**  
**Santa Ana, CA 92707**

5. The land referred to in this Commitment is described as follows:

Situated in the State of Ohio, County of Tuscarawas and in the City of Dover.

Being Lot Number Three Thousand Nine Hundred Seven (3907) of WALDENMYER LAKEVIEW ADDITION, as the same is numbered and delineated upon the recorded plat thereof, of record in Plat Book 12, Page 31, Recorder's Office, Tuscarawas County, Ohio.

**COMMITMENT FOR TITLE INSURANCE**

**SCHEDULE B - SECTION I**

Commitment No: **1444064**

Requirements:

1. NOTE: "Your attention is directed to the provisions of the Tax Reform Act of 1986 which require the reporting of real estate transactions to the Internal Revenue Service. All real estate transactions (except for refinances) closed after January 1, 1987 must be reported on a Form 1099-B which must be completed in full at the time of closing."
2. Subject to Authorization from Probate Court to sell said premises.
3. Administrator's Deed from Carroll L. McCammon, Administrator of the Estate of Patsy L. McCammon, under Case Number 2010ES-55746, Probate Court, Tuscarawas County, Ohio to to be determined.
4. Affidavit from the Executor/Administrator of the Estate of Patsy L. McCammon stating there are sufficient assets in said estate to pay all liens and taxes.
5. Return from the State of Ohio showing that no claim is being made for reimbursement of Medicaid disbursements.
6. Warranty Deed from Carroll L. McCammon, with proper marital status and release of dower, if necessary, to to be determined.
7. Cancellation of the mortgage(s) shown on Schedule B, Section 2.

**COMMITMENT FOR TITLE INSURANCE**

**SCHEDULE B - SECTION II**

Commitment No: 1444064

Schedule B of the policy or policies to be issued will contain exceptions to the following matters unless the same are disposed of to the satisfaction of the Company:

**STANDARD EXCEPTIONS**

1. Defects, liens, encumbrances, adverse claims or other matters, if any, created, first appearing in the public records or attaching subsequent to the effective date hereof but prior to the date the proposed insured acquires for value of record the estate or interest or mortgage thereon covered by this commitment.
2. Any facts, rights, interests, or claims that are not shown in the public records but that could be ascertained by an inspection of the land or by making inquiry of persons in possession of the land.
3. Any encroachment, encumbrance, violation, variation, or adverse circumstance affecting the title including discrepancies, conflicts in boundary lines, shortage in area, or any other facts that would be disclosed by an accurate and complete land survey of the land, and that are not shown in the public records. The term "encroachment" includes encroachments of existing improvements located on the Land onto adjoining land, and encroachments onto the Land of existing improvements located on adjoining land.
4. Any lien, or right to a lien, for services, labor or material heretofore or hereafter furnished, imposed by law and not shown in the public records.
5. Rights of parties in possession of all or any part of the premises, including, but not limited to, easements, claims of easements or encumbrances that are not shown in the public records.
6. The lien of real estate taxes or assessments imposed on the title by a governmental authority that are not shown as existing liens in the records of any taxing authority that levies taxes or assessments on real property or in the public records.

**SPECIAL EXCEPTIONS**

7. All assessments and taxes for 2010 and all subsequent years.
8. Taxes for the year 2009 are as follows: AS TO PARCEL NUMBER 15-01749: First half Paid in the amount of \$528.34; Second half Unpaid And Lien Not Yet Due And Payable in the amount of \$528.34. (VALUATIONS: Land \$6,740.00 - Building \$22,500.00 - Total \$29,240.00)
9. Muskingum Watershed assessment: First Half 2009 Paid in the amount of \$6.00; Second half 2009 Unpaid And Lien Not Yet Due And Payable in the amount of \$6.00.
10. Mortgage from Patsy L. McCammon, unmarried and Carroll L. McCammon and Carolyn J. McCammon, Married To Each Other, to Belmont National Bank, dated June 18, 1997, filed for record June 18, 1997 at 1:47 pm, and recorded in Official Record 796, Page 372, Recorder's Office, Tuscarawas County, Ohio, to secure \$10,000.00.

11. Patsy L. McCammon, deceased on February 28, 2010, and was admitted to probate on March 11, 2010, in Case # 2010ES-55746. Administrator is Carroll L. McCammon. Subject to Authorization from Probate Court to sell said premises.
12. Any Claim by the State of Ohio for reimbursement of Medicaid funds.
13. Reservation, conditions and restrictions of record in Deed Book 396, Page 152.
14. No search of Federal Bankruptcy Records has been made and an exception in this regard will appear on any Policy to be issued by the Company.
15. NOTE: The Policy(s) of insurance may contain a clause permitting arbitration of claims at the request of either the Insured or the Company. Upon request, the Company will provide a copy of this clause and the accompanying arbitration rules prior to the closing of the transaction.

**NOTE: Pertaining to the covenants and restrictions, if any, described in Schedule B of this Commitment/Policy, the following is expressly omitted therefrom: any covenant or restriction based on race, color, religion, sex, handicap, familial status or national origin unless and only to the extent that such covenant (a) is exempt under Chapter 42, Section 3607 of the United States Code or (b) related to handicap but does not discriminate against handicapped persons. Any covenant and restriction, or any part thereof, omitted as described above shall in no event be construed as forming a part of this Commitment/Policy, Schedule B of this Commitment/Policy or as an existing covenant and restriction disclosed by the public records.**

**NOTE: No liability is assumed by Company for uncertified encumbrances and the purchase contract shall be binding unless the contract is silent or ambiguous. If the contract is silent or ambiguous, the buyer assumes the risk.**

# Know all Men by these Presents

That I, **Robert J. Johnson and William J. Johnson**, have sold and conveyed unto the said **Robert J. Johnson** all that certain lot or parcel of land, situate in the City of New York, and containing the following described premises, to-wit:

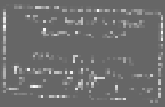
One lot or parcel of land, situate in the City of New York, and containing the following described premises, to-wit:

One lot or parcel of land, situate in the City of New York, and containing the following described premises, to-wit:

One lot or parcel of land, situate in the City of New York, and containing the following described premises, to-wit:

One lot or parcel of land, situate in the City of New York, and containing the following described premises, to-wit:

One lot or parcel of land, situate in the City of New York, and containing the following described premises, to-wit:



**TRANSFERRED**  
RECORDED  
INDEXED

RECORDED  
INDEXED











IT&S TITLE EXAMINATION

Robert L. McLammon University of Idaho Boise, Idaho  
Robert L. McLammon 1930-1932 1877-1917  
Robert L. McLammon 746 773  
 TO  
Robert L. McLammon University of Idaho  
 Date of: \_\_\_\_\_ Price: \_\_\_\_\_  
 Description: 1877-1917

Author: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Volume: \_\_\_\_\_ Page: \_\_\_\_\_  
 Edition: \_\_\_\_\_  
 Date of Original Issue: \_\_\_\_\_  
 Condition: \_\_\_\_\_ Price: \_\_\_\_\_

Description: \_\_\_\_\_  
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 Author: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Volume: \_\_\_\_\_ Page: \_\_\_\_\_  
 Edition: \_\_\_\_\_  
 Date of Original Issue: \_\_\_\_\_  
 Condition: \_\_\_\_\_ Price: \_\_\_\_\_

Description: \_\_\_\_\_  
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THE FEE FOR WINNERS IS LIMITED TO THE COST OF THIS TEAM.

PLAY TICKET

NAME *Walter James Littlejohn Hillborn*

RESIDENCE *231 1st St. S.W. Phone 2,3240*

AGE *21* *Walter James Hillborn*

DATE OF BIRTH *11/11/1917*

SEX *M*

HAIR *B*

EYES *B*

COMPLEXION *Fair*

HEIGHT *5'10"*

WEIGHT *150*

EDUCATION *High School*

EMPLOYMENT *None*

IT'S TITLE EXAMINING

*Delia Henney, Inc.*

*Walter W. Henney, Attorney*  
Book *3-22-80* Page No. *3-25-80* *Book 1-22*

TO \_\_\_\_\_

Amount *396* Fee *1.28*

TO \_\_\_\_\_

Legal Fee \_\_\_\_\_

TO \_\_\_\_\_

Net Proceed Amount \_\_\_\_\_

TO \_\_\_\_\_

Capital \_\_\_\_\_ Profit \_\_\_\_\_

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THIS ENTRY FOR EMB SEARCH IS LIMITED TO THE POST OF THIS ENTRY

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**Auction Conducted By:**  
**Don R. Wallick Auctions, Inc.**  
**Auctioneers: Don R. Wallick**  
**Brennan R. Wallick**  
**Ryan W. Wallick**

Don R. Wallick Auctions, Inc.  
965 N. Wooster Avenue  
Strasburg, Ohio 44680  
info@WallickAuctions.com  
<http://www.WallickAuctions.com>



Toll Free: 1-866-348-9446 - Tel: 330-878-0075 - Fax: 330-878-7318