

# Don R. Wallick Auctions, Inc.

965 N. Wooster Avenue - Strasburg, Ohio 44680 - www.WallickAuctions.com  
Toll Free: 1-866-348-9446 - Tel: 330-878-0075 - Fax: 330-878-7318



## Tuscarawas County, Ohio

Parcel: 15-02741-000

### SUMMARY

Owner	WALICK BRENDA K 404 MONROE STREET DOVER OH 44622 USA	Taxpayer	WALICK BRENDA K 404 MONROE STREET DOVER OH 44622 USA
Tax District	15-DOVER MUNI TWP - DOVER CORPORATION	Class	510-SINGLE FAMILY OWNER OCCUPIED
School District	DOVER CITY SD	Subdivider	
Locator	927 N CRATER AVE	Legal	3303
CD Year		Map # / Routing #	48 / 18200
Ag Year		Ag District	Sold
Sales Amount		Volume	1440
		Page	916

### CHARGE

	Prior	1st Half	2nd Half	Total		Appraised	Assessed
Tax	0.00	590.06	590.06	1,180.12	Land	22,500	7,260
Special	0.00	6.00	6.00	12.00	Improvement	75,900	20,360
Total	0.00	596.06	596.06	1,192.12	Total	98,400	27,620
Paid	0.00	596.06	596.06	1,192.12	CALV	0	0
Due	0.00	0.00	0.00	0.00	Homebased	Y	
Escheat				0.00	GOG	Y	98,400

### TRANSFER HISTORY

Date	Buyer	Conveyance	Deed Type	Land Only	Sales Amount	Valid
08/11/2014	WALICK BRENDA K	902675	WARRANTY DEED	N	\$0	N
07/09/2007	BURRELL MAX E	90811	AFFIDAVIT	N	\$0	N
01/30/1995	BURRELL MAX E & DORA J	235	UNKNOWN	N	\$0	N
01/27/1985	BURRELL MAX E & DORA J	135	UNKNOWN	N	\$83,900	N

### LAND

Type	Dimensions	Description	Value
FR-FRONT LOT	50.000 X 150.000	FR Front X FR Depth	22,500

### DWELLING

Card #	Style	Stories	Year Built	Year Remodeled	Other Features	Appraised Value
Card 1	01-SINGLE FAMILY	1.00	0	0	0	75,900
					Family Rooms	0
					Dining Rooms	0
					Fireplace Openings	0
					Fireplace Stacks	0
					Living Area	1
					Other Features	0

### OTHER IMPROVEMENT

Card	Description	Yr Bld	Yr Rem	Size	Condition	Value
1	SHED-SHED	1990		50	AVERAGE	0

### UTILITIES

Water	Sewer	Electric	Gas	Well	Septic
N	N	N	N	N	N

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**SKETCH**

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**Card 1**

Name	Description	Size	<input type="checkbox"/>
I	SHED-SHED	80	
A	13FR/B	900	
B	OFF	60	
C	1CPG	312	
D	EFP	208	

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## Larry Lindberg

### Tuscarawas County Auditor

**Parcel #:** 15-02741-000  
**Owner:** WALLICK BRENDA K  
**Location:** 927 N CRATER AVE  
**Legal:** 3363

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#### Property

<b>Tax District:</b>	15-DOVER MUNI TWP - DOVER CORPORATION		
<b>School District:</b>	DOVER CITY SD		
<b>Class:</b>	510-SINGLE FAMILY OWNER OCCUPIED		
<b>Subdivision:</b>			
<b>CD Year:</b>	<b>Map #:</b>	49	<b>Routing #:</b> 16000
<b>Ag Year:</b>	<b>Ag District:</b>		

#### Deed

<b>Acres:</b>	0.000		
<b>Volume:</b>	1448	<b>Page:</b>	938
<b>Sold:</b>	05/01/2014	<b>Sales Amount:</b>	

#### Value

	Appraised	Assessed
<b>Land:</b>	22,500	7,880
<b>Improvement:</b>	76,800	26,880
<b>Total:</b>	99,300	34,760
<b>CAUV:</b>	0	0
<b>Homestead:</b> Y		
<b>Owner-Occupancy:</b> Y		
<b>Credit:</b>	99,300	34,760

#### Owner

**Name:** WALLICK BRENDA K  
**Address:** 404 MONROE STREET  
 DOVER OH 44622 USA

#### Taxpayer

**Name:** WALICK BRENDA K  
**Address:** 404 MONROE STREET  
DOVER OH 44622 USA

**Charge**

	<b>Prior</b>	<b>1st Half</b>	<b>2nd Half</b>	<b>Total</b>
<b>Tax:</b>	0.00	590.06	590.06	1,180.12
<b>Special:</b>	0.00	6.00	6.00	12.00
<b>Total:</b>	0.00	596.06	596.06	1,192.12
<b>Paid:</b>	0.00	596.06	596.06	1,192.12
<b>Due:</b>	0.00	0.00	0.00	0.00
<b>Escrow:</b>				0.00

Last Updated: 6/9/2014 12:37:00 AM



**Larry Lindberg**  
Tuscarawas County Auditor

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**Owner:** WALLICK BRENDA K  
**Location:** 927 N CRATER AVE  
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<b>Land</b>			
<b>Type</b>	<b>Dimensions</b>	<b>Description</b>	<b>Value</b>
FR-FRONT LOT	50.000 X 150.000	Eff Front X Eff Depth	22,500

Last Updated: 6/9/2014 12:37:00 AM



**Larry Lindberg**  
**Tuscarawas County Auditor**

**Parcel #:** 15-02741-000  
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Summary Tax Transfer History Payments Values Utilities Land Building Dwelling Other Improvement Sketch

**Dwelling**

Card 1			
<b>Style:</b>	01-SINGLE FAMILY	<b>Full Baths:</b>	0
<b>Stories:</b>	1	<b>Half Baths:</b>	1
<b>Rec Room Area:</b>	0	<b>Other Fixtures:</b>	0
<b>Finished Basement:</b>	0	<b>Heating:</b>	Y
<b>Rooms:</b>	5	<b>Cooling:</b>	Y
<b>Bed Rooms:</b>	3	<b>Grade:</b>	C-4
<b>Family Rooms:</b>	0	<b>Fireplace Openings:</b>	0
<b>Dining Rooms:</b>	0	<b>Fireplace Stacks:</b>	0
<b>Year Built:</b>	1985	<b>Living Area:</b>	960
<b>Year Remodeled:</b>		<b>Appraised Value:</b>	76,800

Last Updated: 6/9/2014 12:37:00 AM



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### Other Improvement

Card	Type	Year Built	Year Remod	Condition	Size	Value
1	SHED-SHED	1990		AVERAGE	80	0

Last Updated: 6/9/2014 12:37:00 AM



**Larry Lindberg**  
Tuscarawas County Auditor

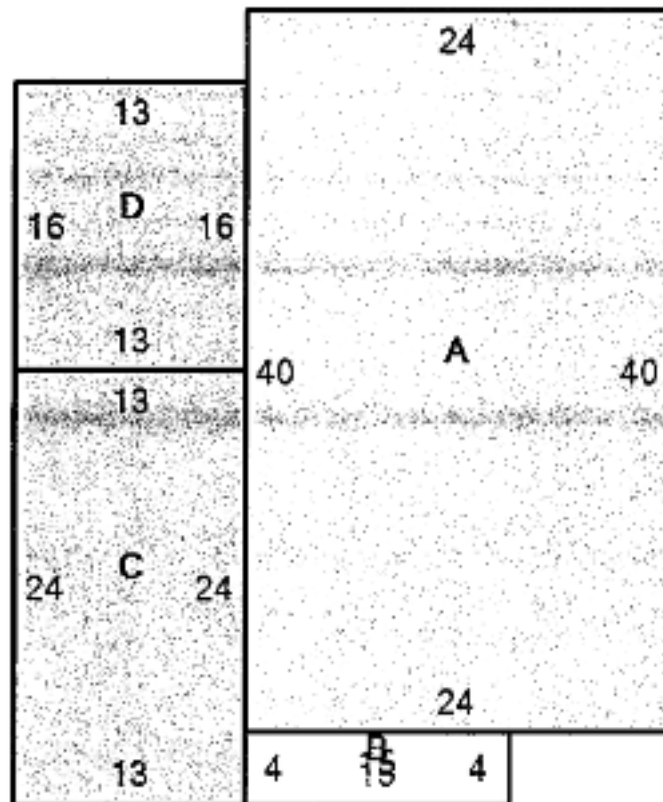
**Parcel #:** 15-02741-000  
**Owner:** WALLICK BRENDA K  
**Location:** 927 N CRATER AVE  
**Legal:** 3363

Summary Tax Transfer History Payments Values Utilities Land Building Dwelling Other Improvement  
Sketch

ID	Description	Size
A	1SFR/B	960
B	OFF	60
C	1CFG	312
D	EFP	208
1	SHED-SHED	80



[1]



Last Updated: 6/9/2014 12:37:00 AM



# 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: 927 N. CATER AVE DOVER

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

Seller(s): Brenda K. Wallick

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

The buyer will be represented by \_\_\_\_\_, and \_\_\_\_\_

The seller will be represented by \_\_\_\_\_, and \_\_\_\_\_

### 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 Wallick/Wallick and real estate brokerage ASSOCIATES 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.

\_\_\_\_\_  
SUPERVISOR DATE

Brenda K Wallick  
AGENT/BROKER

5/12/14  
DATE

\_\_\_\_\_  
BUYER/tenant DATE

\_\_\_\_\_  
SELLER/LANDLORD

\_\_\_\_\_  
DATE



2013

STATE OF OHIO  
DEPARTMENT OF COMMERCE

RESIDENTIAL PROPERTY DISCLOSURE FORM

**Purpose of Disclosure Form:** This is a statement of certain conditions and information concerning the property actually known by the owner. An owner may or may not have lived at the property and unless the potential purchaser is informed in writing, the owner has no more information about the property than could be obtained by a careful inspection of the property by a potential purchaser. Unless the potential purchaser is otherwise informed, the owner has not conducted any inspection of generally inaccessible areas of the property. This form is required by Ohio Revised Code Section 5302.30.

THIS FORM IS NOT A WARRANTY OF ANY KIND BY THE OWNER OR BY ANY AGENT OR SUBAGENT REPRESENTING THE OWNER. THIS FORM IS NOT A SUBSTITUTE FOR ANY INSPECTIONS. POTENTIAL PURCHASERS ARE ENCOURAGED TO OBTAIN THEIR OWN PROFESSIONAL INSPECTION(S).

**Owner's Statement:** The statements contained in this form are made by the owner and are not the statements of the owner's agent or subagent. The statements contained in this form are provided by the owner only to potential purchasers in a transfer made by the owner. The statements are not for 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.

OWNER INSTRUCTIONS

**Instructions to Owner:** (1) Answer ALL questions. (2) Report known conditions affecting the property. (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.

X Owner's Initials BW Date 5/12/14  
Owner's Initials \_\_\_\_\_ Date \_\_\_\_\_

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



STATE OF OHIO DEPARTMENT OF COMMERCE

2013

RESIDENTIAL PROPERTY DISCLOSURE FORM

Pursuant to section 5302.30 of the Revised Code and rule 1301.5-6-10 of the Administrative Code.

TO BE COMPLETED BY OWNER (Please Print)

Property Address: 927 N. CRATER Ave

Owners Name(s): Brenda K. Wallick

Date: 5-12, 2014

Owner is not occupying the property. If owner is occupying the property, since what date: NEVER

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):

- Public Water Service, Private Water Service, Private Well, Shared Well, Holding Tank, Cistern, Spring, Pond, Unknown, Other

Do you know of any current leaks, backups or other material problems with the water supply system or quality of the water? No

Is the quantity of water sufficient for your household use? (NOTE: water usage will vary from household to household) Yes

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: Inspected By:

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

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 previous or current leaks or other material problems with the roof or rain gutters? No

New Roof Spring 2013

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? No

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

Owner's Initials BW Date 5/12/14

Purchaser's Initials Date

Property Address 927 N. CRATER Ave Duran

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/backup; or leaking pipes, plumbing fixtures, or appliances?  Yes  No  
If "Yes", please describe and indicate any repairs completed: \_\_\_\_\_

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: \_\_\_\_\_

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.

**E) STRUCTURAL COMPONENTS (FOUNDATION, BASEMENT/CRAWL SPACE, FLOORS, INTERIOR AND EXTERIOR WALLS):** Do you know of any previous or current 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 and indicate any repairs, alterations or modifications to control the cause or effect of any problem identified (but not longer than the past 5 years): \_\_\_\_\_

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) WOOD DESTROYING INSECTS/TERMITES:** Do you know of any previous/current presence of any wood destroying insects/termites in or on the property or any existing damage to the property caused by wood destroying insects/termites?  Yes  No  
If "Yes", please describe and indicate any inspection or treatment (but not longer than the past 5 years): \_\_\_\_\_

**G) MECHANICAL SYSTEMS:** Do you know of any previous or current problems or defects with the following existing 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 checked="" type="checkbox"/>	<input type="checkbox"/>
2) Plumbing (pipes)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Is water softener leased?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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 (but not longer than the past 5 years): \_\_\_\_\_

**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	Unknowns
1) Lead-Based Paint	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2) Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3) Urea-Formaldehyde Foam Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4) Radon Gas	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. If "Yes", indicate level of gas if known: _____			
5) Other toxic or hazardous substances	<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, remediation or mitigation to the property: \_\_\_\_\_

Owner's Initials BW Date 3/12/14  
Owner's Initials \_\_\_\_\_ Date \_\_\_\_\_

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

Property Address 927 N. Carter Ave Denver

I) 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: \_\_\_\_\_

Do you know of any oil, gas, or other mineral right leases on the property?  Yes  No

Purchaser should exercise whatever due diligence purchaser deems necessary with respect to oil, gas, and other mineral rights. Information may be obtained from records contained within the recorder's office in the county where the property is located.

J) FLOOD PLAIN/LAKE ERIE COASTAL EROSION AREA:  Yes  No  Unknown  
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

K) DRAINAGE/EROSION: Do you know of any previous or current flooding, drainage, settling or grading or erosion problems affecting the property?  Yes  No  
If "Yes", please describe and indicate any repairs, modifications or alterations to the property or other attempts to control any problems (but not longer than the past 5 years): \_\_\_\_\_

L) ZONING/CODE VIOLATIONS/ASSESSMENTS/HOMEOWNERS' 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 a 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, fees or abatement, which could affect the property?  Yes  No  
If "Yes", please describe: \_\_\_\_\_

List any assessments paid in full (date/amount): \_\_\_\_\_  
List any current assessments: \_\_\_\_\_ monthly fee \_\_\_\_\_ Length of payment (years \_\_\_\_\_ months \_\_\_\_\_)

Do you know of any recent or proposed rules or regulations of, or the payment of any fees or charges associated with this property, including but not limited to a Community Association, SID, CID, LID, etc.  Yes  No  
If "Yes", please describe (amount): \_\_\_\_\_

M) 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 checked="" type="checkbox"/>	<input 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: \_\_\_\_\_

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's Initials BW Date 5/12/14  
Owner's Initials \_\_\_\_\_ Date \_\_\_\_\_

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

Property Address 927 N. Crater Ave Deer

**CERTIFICATION OF OWNER**

Owner certifies that the statements contained in this form are made in good faith and 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: Brenda K Wallick DATE: 5/12/14

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.

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.

Purchaser should exercise whatever due diligence purchaser deems necessary with respect to abandoned underground mines. If concerned about this issue, purchaser assumes responsibility to obtain information from the Ohio Department of Natural Resources. The Department maintains an online map of known abandoned underground mines on their website at [www.dnr.state.oh.us](http://www.dnr.state.oh.us).

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.

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

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

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

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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.  
865 N. Wooster Avenue  
Sresburg, Ohio 44880  
Info@WallickAuctions.com  
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