

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: 25-00793-000

SUMMARY

Owner	LYONS JAMES A 1951 REEDS RUN RD N E NEW PHILADELPHIA OH 44683 USA	Taxpayer	LYONS JAMES A 1217 N WALUT ST DOVER OH 44622 USA
Tax District	25-GOSHEN TWP-NEW PHILADELPHIA SD	Class	311-1-FAMILY UNPLATTED 0.09.99 ACR.
School District	NEW PHIL. SD	Subdivision	
Location	1951 NE REEDS RUN RD	Legal	294 REEDS RUN .3104
CD Year	2015	Map A / Routing A	2 / 26000
Ag Year		Acres	0.310
Sales Amount	\$61,000	Seed	10/04/1993
	Volume	Page	

CHARGE

	Prior	1st Half	2nd Half	Total		Appraised	Assessed
Tax	0.00	330.53	365.58	696.11	Land	12,810	4,480
Special	0.00	0.00	3.30	3.30	Improvement	52,580	18,420
Total	0.00	333.53	368.88	702.41	Total	65,390	22,830
Paid	0.00	333.53	0.00	333.53	CAUV	0	0
Due	0.00	0.00	368.88	368.88	Homestead	Y	
Escrow				0.00	CCC	Y	65,390
							22,830

TRANSFER HISTORY

Date	Buyer	Conveyance	Deed Type	Land Only	Sales Amount	Valid
10/04/1993	LYONS JAMES A	2843	WARRANTY DEED	N	\$61,000	Y
10/14/1988	ABBUL RICKY A & CONNIE S	2482	UNKNOWN	N	\$21,000	N

LAND

Type	Dimensions	Description	Value
HF-HOMESITE FRACTIONAL	0.260	Acres	12,810
RW-RIGHT OF WAY	0.050	Acres	0

DWELLING

Card 1	01-SINGLE FAMILY	Family Rooms	0	Heating	Y
Style	1.00	Dining Rooms	0	Cooling	Y
Stories	0	Year Built	1988	Grade	D-5
Rec Room Area	0	Year Remodeled	1984	Fireplace Openings	0
Finished Basement	0	Full Baths	0	Fireplace Stacks	0
Rooms	5	Hall Baths	0	Living Area	948
Bed Rooms	2	Other Fixtures	0	Appraised Value	52,580

OTHER IMPROVEMENT

Card	Description	Yr Bld	Yr Rem	Size	Condition	Value
1	SHED-SHED	1985		100	AVERAGE	0

UTILITIES

Water	N	Sewer	N	Electric	N	Gas	N	Well	N	Sapdo	N

SKETCH

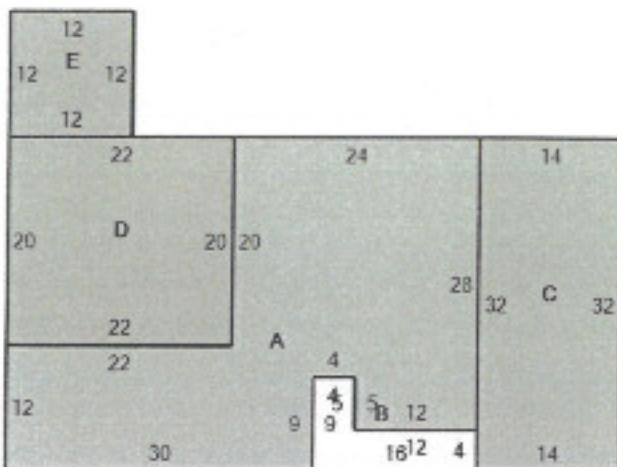
Card 1

Name Description

Size

[1]

1	SHED-SHED	100
A	1SF.R	948
B	OFP	84
C	1CFG	448
D	2SFRNS	440
E	WOOD	144





TUSCARAWAS COUNTY GENERAL HEALTH DISTRICT

Wastewater Disposal and Water Supply Evaluation

Address: 1951 Reeds Run Rd NE New Philadelphia

Name: Amy Wells- Executrix of James Lyons

Mailing Address:

Wastewater Disposal Evaluation

Primary Treatment- Tank Size and Type

<input checked="" type="checkbox"/> Septic Tank	<input type="checkbox"/> Aviation	<input type="checkbox"/> Privy	<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> Narydric
---	-----------------------------------	--------------------------------	---	-----------------------------------

Gutter

Jet

vaulted

Secondary Treatment

<input type="checkbox"/> Leach Lines	<input type="checkbox"/> ETM Mound	<input type="checkbox"/> Filtered Discharge	<input type="checkbox"/> Leach Well
--------------------------------------	------------------------------------	---	-------------------------------------

Tired It

Length ft

Discharge

Unknown

<input type="checkbox"/> Clear	<input type="checkbox"/> Cloudy	<input type="checkbox"/> Sudsy	<input type="checkbox"/> Odorous	<input type="checkbox"/> Black
--------------------------------	---------------------------------	--------------------------------	----------------------------------	--------------------------------

None

Undetermined

Sudsy

Sewer dye needed?

Yes

No

Unknown

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Unknown
------------------------------	-----------------------------	---

Are all plumbing fixtures currently tied into wastewater system?

System Age unknown

Sewer Records found for system Yes No

Comments: No records. Unable to locate septic tank. Unknown system. Discharging system. No vent.

From health department records and observations, it is this department's opinion that the system is:

Not creating a nuisance no nuisance observed, but see comments above

creating a nuisance and requires repairs approved by this office

Water Supply Evaluation

Type of System

Public (No Sample Needed)

Type of Casing and Development of Well

<input checked="" type="checkbox"/> Private	<input checked="" type="checkbox"/> Well	<input type="checkbox"/> Cistern	<input type="checkbox"/> Dug	<input checked="" type="checkbox"/> Iron	<input type="checkbox"/> Buried	<input checked="" type="checkbox"/> Above Ground Casing
<input type="checkbox"/> Drilled	<input type="checkbox"/> Pond	<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> Pit	<input type="checkbox"/> Plastic Adapter and Cap		
<input type="checkbox"/> Driven	<input type="checkbox"/> Spring	<input type="checkbox"/> Tile	<input type="checkbox"/> Sanitary Well Seal			

Bacteriological Test Results

Date Acceptable Unacceptable _____

Date Acceptable Unacceptable _____

Comments: no well records found

From Health Department records and observations, it is the opinion of this department that this private water system is: Satisfactory at time of inspection Unsatisfactory at time of inspection

Jay A. Day / SFT
Sanitarian In Training

8/17/2015

Date

This inspection report was compiled from observation of the visible components of the water supply and sewage disposal system and if applicable, information from the owner/realtor and Health department records. This opinion may be rendered without some knowledge of some individual components of the water supply or sewage disposal system and applies to only the date and time of inspection. Because of these factors this opinion does not guarantee the future performance of either system.



Public Health
Protect, Promote, Prevent

297 East Main Avenue
Dover, Ohio 44622

PHONE	(330) 343-5555
FAX	(330) 343-1601
EMAIL	tucqshd@odh.ohio.gov
WEB SITE	www.tchdnow.org



MICROBIOLOGICAL SAMPLE SUBMISSION REPORT (SSR)

8/10/04

WV

Central District Office
50 W Town St
Columbus, Ohio 43213
(614) 728-3778 FAX (614) 728-0160

Northwest District Office
361 North Dunbridge Road
Bowling Green, Ohio 43402
(419) 352-8461 FAX (419) 352-8468

Southwest District Office
901 East Fifth Street
Dayton, Ohio 45402-2911
(937) 265-6357 FAX (937) 265-6249

Northeast District Office
3110 East Avenue Road
Twinsburg, Ohio 44087
(330) 963-1200 FAX (330) 963-4760

Southeast District Office
2195 Frost Street
Logan, Ohio 43138
(740) 385-8501 FAX (740) 385-6480

PUBLIC WATER SYSTEM INFORMATION:

PWS ID: OH
PWS Name: Tuscarawas County Health Dept.

Address: 897 E Iron Ave
City, State, Zip: Dover, OH 44622

County: Tuscarawas
Phone: (330) 343-5550

SAMPLE INFORMATION:

Sample Type:

- Routine (compliance)
 -- Repeat (confirm positive sample compliance)
 Original Routine Positive Sample # _____

-- Special (not for compliance) 8-13-15

Sample Collection Date: _____

Sample Collection Time: 12:20 PM

Sample Collector Name: Zach Phillips
Sample Collector Phone: (330) 343-5550 ext 142

Street Address and Tap Location: K-sink
1957 Recreational Rd NW Phila

Any Wells (330) 682-0638

Free Chlorine Residual: _____
Total Chlorine Residual: _____

Comments:

Fax (330) 365-3764

pH 7-8

NTU < 1.0 ppm

NTU < 0.15 ppm

Plate Count

Safe
8-17-15

pos

Method Used

Sample Results:	Analyte	Absent/ Negative	Present/ Positive	Analysis start date/time	Analysis end date/time	Analytical Lab ID#	Analyst #	Method Used
Total Coliform (3100)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	8/13/15 16:00	8/14/15 16:00	893	3055	
E. Coli. (3014)		<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Fecal Coliform (3013)		<input type="checkbox"/>	<input type="checkbox"/>					

Data Quality Results:

- Instrument Failure
 --Lab not certified

- Requester cancelled
 --Other (Comments)

- Water System requested
 --Lab Error



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: 1951 REEDS RUN ROAD New Philadelphia, Ohio

Buyer(s): _____

Seller(s): JAMES LYONS ESTATE

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 Wallace Auctions and real estate brokerage MINT MINT Realty 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/TEHANT

DATE

Kenya Wells
RECEIVED
EXEC.

8-3-15
DATE

BUYER/TEHANT

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)

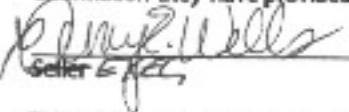
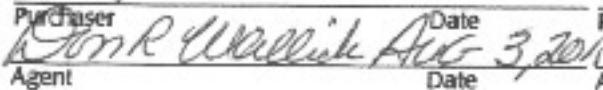
- (c) _____ Purchaser has received copies of all information listed above.
- (d) _____ Purchaser has received the pamphlet *Protect Your Family from Lead in Your Home*.
- (e) Purchaser has (check (i) or (ii) below):
- (i) _____ received a 10-day opportunity (or mutually agreed upon period) to conduct 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. 4852(d) and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy

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

 Seller Agent	8-3-15 Date	Seller Purchaser Agent	Date
 Purchaser Agent	Aug 3, 2015 Date	Purchaser Agent	Date

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

Don R. Wallick Auctions, Inc.
988 N. Wooster Avenue
Streetsburg, Ohio 44880
info@WallickAuctions.com
http://www.WallickAuctions.com



Toll Free: 1-800-240-0440 - Tel: 330-878-0075 - Fax: 330-878-7210