

SELLER'S PROPERTY DISCLOSURE

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1 NOTICE FOR NORTH DAKOTA PROPERTY:

2 This form is designed to guide Seller(s) in making the legally required disclosures and to assist Seller(s) to avoid
 3 inadvertent nondisclosures of material facts as required by statute. Seller(s) must disclose all material facts Seller(s) is
 4 aware could adversely and significantly affect an ordinary buyer's use and enjoyment of the Property or any intended use
 5 of the Property of which Seller(s) is aware, even if not specifically asked in this form. Additional space for disclosure is
 6 provided on the last page of this form. Seller(s) may attach any additional information as necessary.
 7 Refer to North Dakota Century Code 47-10-02.1 for more detail on requirements of the statute.

8 **DATE:** 10-27-25

9 **PROPERTY ADDRESS:**

10 **SELLER(s):** Bruce Lindgren + Susan Lindgren

11 Street Address: 3 2nd St SW

12 City: Kulm State: ND Zip Code: 58456 County: Lamoure

13 **THIS IS NOT A WARRANTY:**

14 This disclosure is not a warranty or guarantee of any kind by Seller(s), Broker(s) or Agent(s) representing or
 15 assisting any party in the transaction; and, it is not a substitute for inspections or warranties which the parties
 16 may wish to obtain. Seller(s) is only providing information of which Seller(s) is aware. Broker(s)/Agent(s) is
 17 not a property inspector and has little or no information regarding the condition of this Property.

18 Seller(s) authorizes Broker(s) and Agent(s) to provide the following information to prospective Buyer(s).
 19 Information presented in this form is not intended to be part of any PURCHASE AGREEMENT between
 20 Buyer(s) and Seller(s).

21 **SELLER(s):**

- 22 • Seller(s) is to personally complete this form. Please include the Property address on every page.
- 23 • Answer all line items, even if the answer is "Unknown."
- 24 • If more space is needed, place additional disclosures on Page 9 and include the line number(s) being
 25 referenced.
- 26 • Seller(s) is obligated to continue to notify Buyer(s) in writing of any facts that differ from the facts
 27 disclosed here (new or changed) of which Seller(s) is aware that occur up to the time of closing.
 28 Seller(s) must disclose new or changed facts on the SELLER'S PROPERTY DISCLOSURE
 29 ADDENDUM/AMENDMENT or in writing.

30 **BUYER(s):**

- 31 • Buyer(s) is encouraged to thoroughly inspect the Property personally or have it inspected by a third
 32 party and to inquire about any specific areas of concern.
- 33 • **NOTE:** If Seller(s) answers "Unknown" to any of the questions listed below, it does not necessarily
 34 mean that it does not exist on the Property. "Unknown" may mean Seller(s) is unaware that it exists
 35 on the Property.
- 36 • Buyer(s) is responsible for reviewing any zoning or regulatory use restrictions affecting the
 37 Property, including but not limited to mineral rights, airport zoning regulations, and municipal
 38 ordinances.

39 **SELLER(s) & BUYER(s):**

- 40 • THE INFORMATION DISCLOSED IS GIVEN TO THE BEST OF SELLER'S KNOWLEDGE.
- 41 • The following information applies to all structures, such as garage(s), outbuilding(s), shed(s), etc.
- 42 • Initial by any changed answers or mistakes made on this form.

Buyer(s) Initials _____

Seller(s) Initials BL SA



Address: 3 2nd St SW Kulm, ND

43 GENERAL INFORMATION

	YES	NO
1 When did you purchase or build the home? _____		
2 Has the home been occupied continuously for the past 12 months? If No, Explain:	<input type="checkbox"/>	<input type="checkbox"/>
3 Type of title evidence. <input checked="" type="checkbox"/> Abstract <input type="checkbox"/> Owner's Title Insurance <input type="checkbox"/> Unknown		
4 Is the Property on a public or private road? <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Public - not maintained If Private or Public not maintained, Explain:		

44 STRUCTURAL ELEMENTS (UNK = Unknown, NA = Not Applicable)

	YES	NO	UNK	NA
1 Has the structure been altered? (Additions, altered roof lines, changes to load bearing walls, etc.) If Yes, Explain: <i>See Attachment</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Was a permit obtained to alter the structure? If No, Explain: <i>Building permit</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Have you or anyone else performed work on the Property which required a building, plumbing, electrical, or other permits? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Was a permit obtained? If No, Explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Was the work approved by an inspector? If No, Explain: <i>Not Required</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Is there, or has there been, water seepage, sewer back up, and/or dampness? If Yes, Explain: <i>Spring of 2025 had sewer line was plugged Near the Main</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Have waterproofing repairs been made? If Yes, Explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Type of basement/foundation. (Check one) <input type="checkbox"/> Brick <input type="checkbox"/> Concrete block <input checked="" type="checkbox"/> Concrete poured <input type="checkbox"/> Stone <input type="checkbox"/> Insulated concrete forms <input type="checkbox"/> Wood <input type="checkbox"/> Other If Other, Explain:				

Buyer(s) Initials _____

Seller(s) Initials BL SA



Address: 3 2nd St SW, Kulm, ND

	YES	NO	UNK	NA
9 Are there cracked or bulged floors or walls in the basement? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Is drain and/or sump pump installed and working properly? If Yes, where does it drain to:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>The sump pump can be switch to street/ During Summer /sewer during Winter</i>				
11 Are all structures located within the boundaries of the Property? If No, Explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Was any structure moved to this site? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Are there cracks in the driveway, garage floor, sidewalks, patio, retaining walls, or other outside hard surface areas? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 What is the age of the roofing material on the home?		<u>2014</u> Year(s)	<input type="checkbox"/>	
15 What is the age of the roofing material on the garage/out buildings?		<u>2018</u> Year(s)	<input type="checkbox"/>	
16 Does the roof leak, or has the roof ever leaked? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Has there been interior damage from a roof leak, condensation, or ice buildup? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Has there been damage to any roof or shingles? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19 Was insulation added to the structure? If Yes, Explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Are you aware of dry rot in the building? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Buyer(s) Initials _____

Seller(s) Initials BD

Address: 3 2nd St SW, Kulm, ND

	YES	NO	UNK	NA
21 Has the Property or its improvements been damaged? (Check all applicable) <input type="checkbox"/> Fire <input type="checkbox"/> Smoke <input type="checkbox"/> Wind <input type="checkbox"/> Floods <input type="checkbox"/> Hail <input type="checkbox"/> Snow <input type="checkbox"/> Frozen pipes <input type="checkbox"/> Broken water line If Yes, was the damage repaired? Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22 Have damage claims been paid to you by insurance coverage? If Yes, Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23 Do rain gutters and downspouts work? If No, Explain:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24 Are exterior and interior locks operable? Will keys be provided for each?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 Are all the window screens available?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26 Are there damaged screens? If Yes, Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27 Are all the storm windows available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
28 Are there broken windows or broken seals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
29 Are skylights in working condition? (i.e., no leaking, condensation, or mechanical)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
30 Is the fireplace/wood burner in working order? If No, Skip to Number 33.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
31 Is the fan, chimney, or flue in working order?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
32 Has the fireplace/wood burner/chimney/flue been cleaned? If Yes, When:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
33 Has the vents/ductwork ever been cleaned? If Yes, When:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
34 Are you aware of any rough-in for future amenities that were added during construction or remodel of the home? (i.e., Plumbing rough-in for future wet-bar, bathroom, sprinkler. Electrical rough-in for hot tub, pool, sound system, generator. Heat rough-in for future gas, electric baseboard, garage heater. Gas for future fireplace, grill, firepits, etc.) If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35 Are there additional Property conditions that have not been described above? (i.e., slanted floors, sticking windows, settling, distorted door frames, sagging ceilings, siding irregularities, stained or damaged floor coverings, etc.) If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Buyer(s) Initials _____

Seller(s) Initials BLSA

Address: 3 2nd St SW Kulm, ND

47 **ENVIRONMENTAL CONCERNS** (UNK = Unknown, NA = Not Applicable)

48 To your knowledge, have any of the following existed or do they currently exist on the Property:

	YES	NO	UNK	NA
1 Fill dirt? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Asbestos? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Insect, animal, or pest infestations? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Hazardous waste/substances? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Underground storage tanks? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Drainage/standing water issues? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Smoking inside any structures? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Illicit drug production/sales/usage? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Methamphetamine production/sales/usage? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Signs of soil expansion, contraction, or movement other than situations related to normal conditions? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Any suspected microbial/fungal growth? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Has there been confirmed black mold on the Property? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Is urea-formaldehyde foam insulation present? If Yes, Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Are there or have there been pets on the Property? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Are there any dead, dying or diseased trees/shrubs on the Property? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Buyer(s) Initials _____

Seller(s) Initials BJ SK

Address: 3 2nd St SW, Kulm, ND

49 RADON DISCLOSURE

50 Radon gas is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities,
51 may present health risks to persons who are exposed to it over time. Levels of radon that exceed federal guidelines have been
52 found in buildings on residential real property in North Dakota. Additional information regarding radon and radon testing
53 may be obtained from your local public health unit or the state department of environmental quality.

See RADON DISCLOSURE as required by North Dakota Century Code.

54 FLOOD DISCLOSURE - INCLUDING OVERLAND AND RIVER FLOODING

55 This is intended to provide information to prospective Buyer(s) concerning high water elevation flood events,
56 including overland and river flooding that may impact the Property.

57 **Note:** Whether or not Seller(s) currently carries flood insurance, it may be required in the future. Flood
58 insurance premiums are increasing, and in some cases will rise by a substantial amount over the premiums
59 previously charged for flood insurance for the Property. As a result, Buyer(s) should not rely on the premiums
60 paid for flood insurance on this Property previously as an indication of the premiums that will apply after
61 Buyer(s) completes their purchase.

	YES	NO	UNK	NA
1 Is the Property in a designated 100-year floodplain? If Yes, see FLOOD DISCLOSURE.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Has the Property been impacted by high water elevation flood events including overland and river flooding? If Yes, see FLOOD DISCLOSURE.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Do you carry flood insurance? If Yes, Explain:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Is the flood insurance transferable? If Yes, Explain:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

62 PROPERTY TAX/SPECIALS DISCLOSURE

63 Check appropriate box:

64 Yes No Is there an exclusion from market value for home improvements on this Property. Any valuation
65 exclusion shall terminate upon sale of the Property, and the Property's estimated market value for property
66 tax purposes shall increase. If a valuation exclusion exists, Buyer(s) is encouraged to look into the resulting
67 tax consequences.

68 Yes No Is the Property subject to any preferential property tax status or any other credits affecting
69 the Property (e.g. Disability, Green Acres, CRP, RIM, Rural Preserve, Primary Residence Credit, etc.)?
70 If Yes, Explain:

71 _____
72 _____
73 _____

74 If Yes, would these terminate upon the sale of the Property? Yes No If Yes, Explain:

75 _____
76 _____
77 _____

Buyer(s) Initials _____

Seller(s) Initials BJ JD



78 SYSTEMS & APPLIANCES

79 Answers below do not guarantee item is included or not included in sale. See PURCHASE AGREEMENT for
80 inclusions/exclusions.

81 **NI = Not Included, WK = Working, NW = Not Working, UNK = Unknown, N/A = Not applicable.**

1		NI	WK	NW	UNK	N/A		NI	WK	NW	UNK	N/A
2	Air Exchanger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Oven	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Antenna & Cable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plumbing Fixtures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Attic Fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plumbing Systems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Bathroom Vent Fan(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pool & Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6	Carbon Monoxide Detectors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Range	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Ceiling Fan(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Range Hood	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Central Air Cooling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Refrigerator	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Central Heating System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Satellite Dish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10	Central Vacuum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sauna	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11	Dehumidifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Septic Tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12	Dishwasher	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke Detector (Battery)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Doorbells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Smoke Detector (Hardwire)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Drain Tile System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Solar Collector(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15	Dryer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sump Pump(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Electrical Systems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supplemental Heater(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Electronic Air Purifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18	Exhaust Fan(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wall Air Conditioner(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	Fire Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	Freezer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washer/Dryer Hookups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	Furnace Humidifier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Heater(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	Garage Door Auto Reverse	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Softener	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23	Garage Door Controls	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Treatment System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
24	Garage Door Openers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Window Air Conditioner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
25	Garbage Disposal	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Window Treatments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
26	Hot Tub	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wood Burning Stove	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
27	Incinerator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28	Intercom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	Lawn Sprinkler System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	Microwave Oven	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31	Security System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Audio Visual System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Buyer(s) Initials _____

Seller(s) Initials BJ SE

Address: 3 2nd St SW, Kulm, ND

82 **SECURITY SYSTEM:**

83 Security System Equipment (Check one) Owned Leased N/A

84 Security System Service Contract is transferable (Check one) Yes No N/A

85 Terms of Security System Contract (Explain): _____

86 _____

87 **ADDITIONAL DISCLOSURES:**

See Attached

88 **FOREIGN INVESTMENT IN REAL PROPERTY TAX ACT ("FIRPTA"):**

89 As a general rule, 26 U.S. Code 1445 (hereinafter "FIRPTA") requires a transferee (Buyer(s)) of a United States
90 real property interest to withhold a tax from the proceeds of any disposition of the real property interest if the
91 transferor (Seller(s)) is a foreign person (any person other than a United States person), unless an exception
92 to the FIRPTA withholding requirements applies. Exemptions from the general rule are set forth in the
93 FIRPTA. Due to the complexity of the FIRPTA, both the Buyer(s) and the Seller(s) are advised to seek
94 appropriate legal and tax advice regarding FIRPTA compliance, since failure to adhere to the FIRPTA
95 withholding rules could result in legal liability to both the Buyer(s) and Seller(s) and their Broker(s)/Agent(s)
96 or qualified substitutes.

97 Seller(s) hereby represents and warrants that Seller(s) IS IS NOT a foreign person, as defined by the
98 FIRPTA. This representation of the Seller(s) shall survive closing. Seller's Broker(s)/Agent(s) and Buyer's
99 Broker(s)/Agent(s), and any qualified substitute, as those terms are defined by the FIRPTA, may rely upon
100 this representation.

101 If the Seller(s) represents that it is a foreign person, the Buyer(s) may be subject to income tax withholding
102 requirements, and the Buyer(s) could be personally liable for failing to withhold a tax from the proceeds of the
103 real estate disposition, if none of the enumerated exemptions to the FIRPTA apply to the transaction. If the
104 Seller(s) represents that it is a foreign person, but that one of the exemptions to the FIRPTA apply, Buyer(s)
105 may require Seller(s) to provide specific documentation as prescribed by the FIRPTA to verify, under penalty
106 of perjury, that one of the exemptions to the FIRPTA withholding requirements applies to the transaction. If
107 the Seller(s) represents that it is not a foreign person, the Buyer(s), or its Broker(s)/Agent(s) or qualified

Buyer(s) Initials _____

Seller(s) Initials *BS*

3 2nd St SW Kulm, ND

I was serving on the Kulm Economic Committee, one of the churches in town had closed a couple years before, and they started tearing the church down.

In May of 2012 when the Methodist Church was thinking about closing, I asked if they had any idea what they were going to do with the church building. They offered it to my brother Emery and I if we would pay the closing cost.

We gutted out the inside down to the studs. We put drain tile in the basement, which can switch from pumping water into the sewer to pumping water to the street drains, which the city allows.

Then we took the roof off, put new shingles on and added 4 + feet to the walls to give us a full 8 foot high ceiling in the main floor apartments and the upstairs apartments, (the basement apartments ceilings are a little lower) We put ceiling joists in to take any possible bounce out of the floor, and not having to put a support wall on the main floor and upstairs.

We sprayed foam on all the exterior walls for insulation, and between the floor and ceiling for sound effects.

Emery was 10 years younger than I and lived in town so he was going to manage it, he then developed cancer. And has since passed away.

My wife and I would like to retire, so we are putting it up for sale.



Address: 3 2nd St SW, KULM, ND

108 substitutes, may require the Seller(s) to provide specific documentation as prescribed by the FIRPTA to verify,
109 under penalty of perjury, that the Seller(s) is not a foreign person. On or before closing, the Buyer(s) and
110 Seller(s) agree to complete, execute, and deliver any affidavit, instrument, or statement which may reasonably
111 be required to comply with FIRPTA requirements.

112 **SELLER'S STATEMENT: (TO BE SIGNED AT TIME OF LISTING)**

113 Seller(s) hereby states the condition of the Property to be as stated above and authorizes any Broker(s) or
114 Agent(s) representing any party in this transaction to provide a copy of this Statement to any person or entity
115 in connection with any actual or anticipated sale of the Property. Seller(s) hereby acknowledges that the
116 information provided in this document is true and accurate to the best of Seller's knowledge as of the date
117 listed below. Seller(s) is obligated to continue to notify Buyer(s) in writing of any facts that differ from the
118 facts disclosed here (new or changed) of which Seller(s) is aware that occur up to the time of closing. See
119 SELLER'S PROPERTY DISCLOSURE AMENDMENT/ADDENDUM.

120 Bruce Lindgren 10/27/25 Susan Lindgren 10/27/25
121 Seller Signature **Bruce Lindgren** Date Seller Signature Date

122 **BUYER'S ACKNOWLEDGEMENT: (TO BE SIGNED AT THE TIME OF PURCHASE AGREEMENT)**

123 Buyer(s) acknowledges receipt of this Seller's Disclosure. Buyer(s) acknowledges that Broker(s) and Agent(s)
124 representing the sale of this Property have not made statements concerning the condition of the Property other
125 than those listed in this Seller's Disclosure. Buyer(s) acknowledges that Buyer(s) has been advised to verify
126 the information listed in this Statement independently.

127 **Buyer(s) acknowledges and understands that this document is not intended to be a warranty of**
128 **any kind or a substitute for any inspection of the Property Buyer(s) may wish to obtain.**

129 _____
130 Buyer Signature Date Buyer Signature Date