## COMMERCIAL PROPERTY INFORMATION SHEET

This form recommended and approved for, but not restricted to use by, the members of the Pennsylvania Association of Realtors® (PAR).

| 2                  |        |                 |                                       |                  | St., Easton, I     | PA 18042                 |                     |          |               |               |          |              |              |   |
|--------------------|--------|-----------------|---------------------------------------|------------------|--------------------|--------------------------|---------------------|----------|---------------|---------------|----------|--------------|--------------|---|
| 3 <b>O</b> V       | WNE    | R Dip           | ika Rana a                            | and Hir          | alal Rana          |                          |                     |          |               |               |          |              |              |   |
| 5 tha              | at a b | ouyer n         | nay wish to                           | o obtai          |                    | ement is n               | ot a warra          | inty of  | ny kind by    |               |          |              |              | s or warranties<br>n by any listing                   |
| 7 <b>Pr</b>        | oper   | ty Type         |                                       | ice<br>spitality | Retail             |                          | ndustrial<br>other: |          | /Julti-family | y Laı         | nd       | □Insti       | tutional     |   |
| 9 <b>1</b>         | οw     | NER'S           | S EXPER'                              | TISE             | Owner does         | not nosse                | ss exnertis         | se in co | ntracting e   | ngineerin     | o enviro | onmental a   | ssessment    | architecture, or                                      |
| 10                 |        |                 |                                       |                  | struction and      |                          |                     |          | <u> </u>      | _             | <u> </u> |              |              | arcinicotare, o                                       |
| 11                 |        |                 |                                       |                  |                    |                          |                     |          |               |               |          |              |              |   |
|                    |        |                 |                                       |                  | ner, current       |                          | the Proper          | rty?     | Yes           | No            |          |              |              |   |
| 13                 |        |                 |                                       | st occu          | py the Prope       | erty?                    |                     |          |               |               |          |              |              |   |
| 14 <b>3.</b><br>15 |        | SCRIP<br>Land A |                                       |                  |                    |                          |                     |          |               |               |          |              |              |   |
| 16                 | \ /    | Dimens          | · · · · · · · · · · · · · · · · · · · |                  |                    |                          |                     |          |               |               |          |              |              |   |
| 17                 |        | Shape:          |                                       |                  |                    |                          |                     |          |               |               |          |              |              |   |
| 18                 | (D)    | Buildin         | g Square I                            | Footage          | :                  |                          |                     |          |               |               |          |              |              |   |
| 19 4.              |        |                 | L COND                                |                  |                    |                          |                     |          |               |               |          |              |              |   |
| 20                 |        |                 | Property:                             |                  |                    |                          |                     |          | Additions: _  |               |          |              |              |   |
| 21                 | (B)    | Roof            | C C(-)                                |                  |                    |                          |                     |          | <b>□</b> r 11 |               |          |              |              |   |
| 22<br>23           |        |                 | e of roof(s)<br>be of roof(s)         |                  |                    |                          |                     |          | ✓Unknov       | VII           |          |              |              |   |
| 24                 |        |                 |                                       |                  | olaced or rep      | aired duri               | ng vour ov          | wnershi  | p? <b></b> 🔽  | Yes $\square$ | No       |              |              |   |
| 25                 |        |                 |                                       |                  | ked during y       |                          |                     |          | P. ■No        |               | 110      |              |              |   |
| 26                 |        |                 |                                       |                  | problems wi        |                          |                     | or dow   | nspouts?      | □Yes          | ✓No      |              |              |   |
| 27                 |        | Explair         | n any yes a                           | nswers           | you give in        | this section             | n: <u>various</u>   | s area v | vere requir   | red           |          |              |              |   |
| 28                 |        |                 |                                       |                  |                    |                          |                     |          |               |               |          |              |              |   |
| 29                 | (C)    | Ctanata         | mal Itamaa I                          | Dagama           | ents and Crav      | rrl Cmaaaa               |                     |          |               |               |          |              |              |   |
| 30<br>31           | (C)    |                 |                                       |                  | water leaka        |                          |                     | or damn  | ness in the   | huilding      | or other | structures?  | Yes          | s <b>V</b> No   |
| 32                 |        |                 | •                                     |                  | ve a sump p        |                          | Yes                 |          | ness in the   | ounumg        | or ourer | on actares.  |              | ,               |
| 33                 |        |                 |                                       |                  |                    |                          |                     |          | water or da   | ampness       | problem  | in the buil  | ding or oth  | er structures?  |
| 34                 |        |                 | Yes 🔽                                 |                  | -                  | •                        | •                   |          |               | -             | -        |              |              |   |
| 35                 |        |                 |                                       |                  |                    |                          |                     | ting, de | terioration,  | or other      | problem  | s with wal   | ls, foundati | ions, floors, or                                      |
| 36                 |        |                 |                                       |                  | onents?            |                          | <b>Z</b> No 1       |          | .1 1          | 1 :0          | . 1. 1   | 1 .1 .       | . C.1        | 11 14   |
| 37                 |        | Explair         | any yes a                             | nswers           | that you giv       | e in this s              | ection, des         | scribing | the location  | on and, if    | applicat | ole, the ext | ent of the p | problem and the                                       |
| 38<br>39           |        | date an         | a person b                            | y wnor           | n any repairs      | s were don               | ie, ii know         | vn:      |               |               |          |              |              |   |
| 40                 |        |                 |                                       |                  |                    |                          |                     |          |               |               |          |              |              |   |
| 41                 | (D)    | Mechai          | nical Syste                           | ms               |                    |                          |                     |          |               |               |          |              |              |   |
| 42                 | ,      |                 | e of heatir                           |                  | <b>✓</b> Forced Ai | r 🔲 I                    | ot Water            |          | Steam         | Radia         | ant      |              |              |   |
| 43                 |        |                 | Other:                                |                  |                    | _                        |                     |          |               |               |          |              |              |   |
| 44                 |        |                 | e of heating                          | _                |                    |                          | Fuel Oil            |          | Natural Gas   | s 📙           | Propane  | (on-site)    | Centr        | al Plant  |
| 45                 |        |                 |                                       |                  | ating system       |                          |                     | 1        | 0             |               |          |              |              |   |
| 46<br>47           |        | 3. Are          | they work                             | cnimno           | eys? □Y<br>□ves □  | es VIN                   | 0 II y<br>When we   | yes, no  | w many?       | A9            |          |              |              |   |
| 48                 |        | 4 List          | t anv huild                           | ing:             | r areas in an      | <b>–</b> ™<br>v huildino | s) that are         | not he   | iasi cicanc   | ····          |          |              |              |   |
| 49                 |        | 1713            | any bund                              | 65 (0            | areas III all      | , canding                | e, mai arc          | 1101 110 |               |               |          |              |              |   |
| 50                 |        | 5. Tyr          | oe of water                           | heater           | <b>✓</b> Elect     | ric                      | Gas                 | Oil      | Capa          |               |          |              |              |   |
| 51                 |        |                 | Other:                                |                  |                    |                          | <del>_</del>        |          |               |               |          |              |              |   |
|                    |        |                 |                                       |                  |                    |                          |                     |          |               |               |          |              |              |   |
| 52 <b>Bu</b>       | ıyer l | nitials:        |                                       |                  | _                  |                          | CPI Page            | e 1 of 7 |               |               |          | Owner I      | nitials: Z   | 707/25 H/R<br>10/07/25 10/07/25<br>PM EDT 6:05 PM EDT |



|        | 6.   | Type of plumbing:  Copper  Galvanized  Lead  PVC  Unknown  Other:  |
|--------|--|--|
|        | 7.   | Are you aware of any problems with plumbing or heating systems or fixtures on the Property?  Yes  No   |
|        |  | If yes, explain:   |
|        |  | Type of air conditioning: Central Electric Central Gas Wall None Capacity:  List any buildings (or areas of any buildings) that are not air conditioned:   |
|        | 9.   | Type of electric service: AMP220 Volt3-phase1-phaseKVA:  |
|        |  |  |
|        | 10   | Transformers: Type: Are you aware of any problems or repairs needed in the electrical system? Yes No   |
|        |  | If yes, explain:   |
|        |  | Are you aware of any problems with any item in this section that has not already been disclosed? Yes No If yes, explain:   |
| (E)    |  | E Improvements   |
|        |  | Are you aware of any problems with storm-water drainage? ☐ Yes ☑ No  |
|        |  | Are you aware of any past or present problems with driveways, parking areas, sidewalks, curbs, other paved surfaces, or  |
|        |  | retaining walls on the Property?   |
|        | 3.   | Explain any yes answers that you give in this section, describing the location and, if applicable, the extent of the problem   |
|        |  | the date and person by whom any repairs were done, if known:   |
|        |  |  |
| (F)    | Oth  | ner Equipment  |
|        |  | Exterior Signs: Yes No How many? Number Illuminated:   |
|        |  | Elevators: Yes No How many? Cable Hydraulic rail   |
|        |  | Working order?  Yes No Certified through (date)  |
|        |  | Date last serviced   |
|        |  | Skylights: Yes No How many?  |
|        |  | Overhead Doors: Yes No How many? Size:   |
|        |  | Loading Docks: Yes No How many? Levelers: Yes No   |
|        |  | At grade doors: Yes No How many?   |
|        |  | Are you aware of any problems with the equipment listed in this section? Yes No  If yes, explain:  |
| (G)    | Fire   | e Damage   |
|        |  | To your knowledge, was there ever a fire on the Property? Yes No   |
|        | 2.   | Are you aware of any unrepaired fire damage to the Property and any structures on it? Yes  |
| (T.T.) |  | If yes, explain location and extent of damage:   |
|        |  | e you aware of any problems with water and sewer lines servicing the Property?   |
|        | If y   | ves, explain:  |
|        |  |  |
|        | Д 1.   | mm/S a fasty Systems   |
| (I)    |  | urm/Safety Systems   |
| (I)    |  | Fire: Yes No In working order? Yes No  |
| (I)    | 1.   | Fire: Yes No In working order? Yes No If yes, connected to: Fire Department Yes No Monitoring Service: Yes No  |
| (I)    | <ol> <li>2.</li> </ol>                                     | Fire: Yes No In working order? Yes No In working order? Yes No Monitoring Service: Yes No Fire extinguishers: Yes No   |
| (I)    | <ol> <li>2.</li> <li>3.</li> </ol>                         | Fire: Yes No In working order? Yes No In working order? Yes No Monitoring Service: Yes No Fire extinguishers: Yes No In working order? Yes No Smoke: Yes No In working order? Yes No   |
| (I)    | <ol> <li>2.</li> <li>3.</li> </ol>                         | Fire:  Yes  No  In working order?  Yes  No  Monitoring Service:  Yes  No  Fire extinguishers:  Yes  No  Monitoring Service:  Yes  No  Smoke:  Yes  No  In working order?  Yes  No  Sprinkler:  Yes  No  Inspected/certified?  Yes  No  |
| (I)    | <ol> <li>2.</li> <li>3.</li> <li>4.</li> </ol>             | Fire:  Yes  No  In working order?  Yes  No  Monitoring Service:  Yes  No  Fire extinguishers:  Yes  No  Monitoring Service:  Yes  No  Smoke:  Yes  No  In working order?  Yes  No  Sprinkler:  Yes  No  Inspected/certified?  Yes  No  No  Monitoring Service:  Yes  No  Monitoring Service:  Yes  No  No  No  No  No  No  No  No  No  N |
| (I)    | <ol> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol> | Fire:  Yes  No  In working order?  Yes  No  Monitoring Service:  Yes  No  Fire extinguishers:  Yes  No  Monitoring Service:  Yes  No  Smoke:  Yes  No  In working order?  Yes  No  Sprinkler:  Yes  No  Inspected/certified?  Yes  No  No  Inspected/certified?  Yes  No  Security:  Yes  No  In working order?  Yes  No                 |
| (I)    | <ol> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol> | Fire:  Yes  No  In working order?  Yes  No  Monitoring Service:  Yes  No  Fire extinguishers:  Yes  No  Monitoring Service:  Yes  No  Smoke:  Yes  No  In working order?  Yes  No  Sprinkler:  Yes  No  Inspected/certified?  Yes  No  No  Inspected/certified?  Yes  No  Security:  Yes  No  In working order?  Yes  No                 |

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|       | RONMENTAL  |
|-------|--|
| A) So | oil Conditions   |
| 1.    | Are you aware of any fill or expansive soil on the Property? ☐ Yes ☑ No  |
|       | If yes, were soil compaction tests done?   |
| 2.    | Are you aware of any sliding, settling, earth movement, upheaval, subsidence, or earth stability problems that have occurred on or affective and the stability problems of the |
|       | the Property?  Yes No  |
| 3.    | Are you aware of any existing or proposed mining, strip-mining, or any other excavations that might affect the Property?   |
|       | ☐ Yes ☑ No   |
| E:    | xplain any yes answers you give in this section:   |
|       |  |
|       |  |
| B) H  | azardous Substances  |
| 1.    | Are you aware of the presence of any of the following on the Property?   |
|       | Asbestos material: Yes No  |
|       | Formaldehyde gas and/or ureaformaldehyde foam insulation (UFFI):  Yes  No  |
|       | Discoloring of soil or vegetation: Yes No  |
|       | Oil sheen in wet areas: Yes No   |
|       | Contamination of well or other water supply:  Yes No   |
|       | Proximity to current or former waste disposal sites: Yes No  |
|       | Proximity to current or former commercial or industrial facilities: Yes No   |
|       | Proximity to current, proposed, or former mines or gravel pits: Yes No   |
|       | Radon levels at or above 4 picocuries per liter: Yes No  |
|       | Use of lead-based paint: Yes No  |
|       | Note: If Property contains a residence with one to four dwelling units, and the structure was constructed, or construction bega  |
|       | before 1978, you must disclose any knowledge of lead-based paint and any reports and/or records of lead-based paint on t   |
|       | Property.  |
|       | Are you aware of any lead-based paint or lead-based paint hazards on the Property?   |
|       | ,  |
|       | If yes, explain how you know of it, where it is, and the condition of those lead-based paint surfaces:   |
|       |  |
|       | Are you aware of any reports or records regarding lead-based paint or lead-based paint hazards on the Property? Yes N  |
|       |  |
|       | If yes, list all available reports and records:  |
|       |  |
| 2     | To your knowledge, has the Property been tested for any hazardous substances? Yes VNo  |
|       | Are you aware of any storage tanks on the Property? Yes No Aboveground Underground   |
| ٥.    |  |
|       | Total number of storage tanks on the Property:  Aboveground  Underground  Are all storage tanks registered with the Pennsylvania Department of Environmental Protection?   |
|       | Are all storage tanks registered with the Pennsylvania Department of Environmental Protection?   |
|       | If no, identify any unregistered storage tanks:  |
|       | Has any storage tank permit ever been revoked pursuant to a federal or state law regulating storage tanks?   |
|       | Have you ever been ordered to take corrective action by a federal or state agency citing a release, or danger of release, from a stora   |
|       | tank? ☐ Yes ☑ No   |
|       | Do methods and procedures exist for the operation of storage tanks and for the operator's/owner's maintenance of a leak  |
|       | detection system, an inventory control system, and a tank testing system?  |
|       |  |
|       |  |
|       | Has there been any release or any corrective action taken in response to a release from any of the storage tanks on the Propert  |
|       | ☐ Yes   ✓ No   |
|       | If yes, have you reported the release to and corrective action to any governmental agency? Yes   |
|       | Explain:   |
|       |  |
|       |  |
| 4     | Do you know of any other environmental concerns that may have an impact on the Property? Yes Vo  |
| F-    | explain any yes answers you give in this section:  |
| Ľ.    | rhiam any yes answers you give in tins seedon.   |
|       |  |

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| 167                  | (C) Wood Infestation  |
|----------------------|---|
| 168                  | 1. Are you aware of any termites/wood-destroying insects, dryrot, or pests affecting the Property?  Yes  No           |
| 169                  | 2. Are you aware of any damage to the Property caused by termites/wood-destroying insects, dryrot, or pests?          |
| 170                  | 3. Is the Property currently under contract by a licensed pest control company?  Yes No                               |
| 171                  | 4. Are you aware of any termite/pest control reports or treatments for the Property in the last five years?           |
| 172                  | Explain any yes answers you give in this section:   |
| 173                  |   |
| 174<br>175           | (D) Natural Hazards/Wetlands  |
| 176                  | 1. To your knowledge, is this Property, or part of it, located in a flood zone or wetlands area? Yes No               |
| 177                  | 2. Do you know of any past or present drainage or flooding problems affecting the Property?                           |
| 178                  | 3. To your knowledge, is this Property, or part of it, located in an earthquake or other natural hazard zone?  Yes No |
| 179                  | Explain any yes answers you give in this section:   |
| 180                  |   |
| 181<br>182 <b>6.</b> | UTILITIES   |
| 183                  | (A) Water   |
| 184                  | 1. What is the source of your drinking water?  Public  Community System  Well on Property                             |
| 185                  | Other:  |
| 186                  | 2. If the Property's source of water is not public:   |
| 187                  | When was the water last tested?   |
| 188                  | What was the result of the test?  |
| 189                  | Is the pumping system in working order?  Yes No   |
| 190                  | If no, explain:   |
| 191                  |   |
| 192                  | 3. Is there a softener, filter, or other purification system? ☐Yes ☑No  |
| 193                  | If yes, is the system:  |
| 194                  | 4. Are you aware of any problems related to the water service? ☐Yes ☐No   |
| 195                  | If yes, explain:  |
| 196<br>197           | (B) Sewer/Septic  |
| 198                  | 1. What is the type of sewage system?  Public Sewer  Community Sewer  On-site (or Individual) sewage system           |
| 199                  | If on-site, what type?  |
| 200                  | Other (specify):  |
| 201                  | 2. Is there a septic tank on the Property? Yes No Unknown   |
| 202                  | If yes, what is the type of tank?   |
| 203                  | Other (specify):  |
| 204                  | 3. When was the on-site sewage disposal system last serviced?   |
| 205                  | 4. Is there a sewage pump? ☐ Yes ☑ No   |
| 206                  | If yes, is it in working order? Yes No  |
| 207                  | 5. Are you aware of any problems related to the sewage system? ☐ Yes ✓ No   |
| 208                  | If yes, explain:  |
| 209                  | (C) Other Utilities   |
| 210                  | 1. The Property is serviced by the following: ☐ Natural Gas ☐ Electricity ☐ Telephone                                 |
| 211                  | Other:  |
| 212 7.               | TELECOMMUNICATIONS  |
| 213                  | (A) Is a telephone system included with the sale of the Property? ☐ Yes ☑No   |
| 214                  | If yes, type:   |
| 215                  | (B) Are ISDN lines included with the sale of the Property? ☐ Yes ✔ No   |
| 216                  | (C) Is the Property equipped with satellite dishes? Yes No  |
| 217                  | If yes, how many?   |
| 218                  | Location:   |
| 219                  | (D) Is the Property equipped for cable TV?  |
| 220                  | If yes, number of hook-ups:   |
| 221                  | Location:   |
| 222                  | (E) Are there fiber optics available to the Property? Yes No Is the building wired for fiber optics? Yes No           |
| 223                  | Does the Property have T1 or other capability?  |

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| 225 <b>8.</b> 226                 |      | Compliance, Building Codes & OSHA   |
|-----------------------------------|------|---|
| 227                               |      | 1. Do you know of any violations of federal (including ADA), state, or local laws or regulations relating to this Property?   |
| 228                               |      | Yes No  |
| 229                               |      | 2. Do you know of any violations of building codes or municipal ordinances concerning this Property?  |
| 230                               |      | 3. Do you know of any health, fire, or safety violations concerning this Property?  |
| 231                               |      | 4. Do you know of any OSHA violations concerning this Property? ☐Yes ☑No  |
| 232                               |      | 5. Do you know of any improvements to the Property that were done without building or other required permits?  Yes  |
| 233<br>234                        |      | Explain any yes answers you give in this section:   |
| 235                               |      |   |
| 236                               | (B)  | Condemnation or Street Widening   |
| 237<br>238<br>239<br>240<br>241   |      | <ol> <li>To your knowledge, is the Property located in an area where public authorities are contemplating proceedings for highway, thoroughfare, rail, or utility construction, a redevelopment project, street widening or lighting, or other similar public projects?</li></ol> |
| 242                               | (C)  | Zoning  |
| 243                               | ( )  | 1. The Property is currently zoned Residential- MD- medium density by the (county,  |
| 244                               |      | ZIP) Northampton  |
| 245                               |      | 2. Current use is: Conforming Onon-conforming Opermitted by variance Opermitted by special exception  |
| 246                               |      | 3. Do you know of any pending or proposed changes in zoning? ☐ Yes ☑ No   |
| 247                               |      | If yes, explain:  |
| 248                               | (D)  |   |
| 249                               |      | Is there an occupancy permit for the Property? Yes No   |
| 250                               | (E)  | Is there a Labor and Industry Certificate for the Property?  Yes No   |
| 251                               | (TE) | If yes, Certificate Number is:  |
| 252                               | (F)  | Is the Property a designated historic or archeological site? Yes No   |
| <ul><li>253</li><li>254</li></ul> |      | If yes, explain:  |
| 255 9.                            | LE   | GAL/TITLE ISSUES  |
| 256                               | (A)  | Are you aware of any encroachments or boundary line disputes regarding the Property?  Yes No  |
| 257                               |      | Are you aware of any recorded encumbrances, covenants, conditions, restrictions, mineral or natural restrictions, easements,  |
| 258                               | . ,  | licenses, liens, charges, agreements, or other matters which affect the title of the Property?  |
| 259                               | (C)  | Are you aware of any encumbrances, covenants, conditions, restrictions, mineral or natural restrictions, easements, licenses,   |
| 260                               | ( )  | liens, charges, agreements, or other matters which affect the title of the Property that have not been recorded in the official   |
| 261                               |      | records of the county recorder where the Property is located?   |
| 262                               | (D)  | Are you aware of any public improvement, condominium, or owner association assessments against the Property that remain   |
| 263                               | (D)  | unpaid? Yes No  |
| 264                               | (E)  | Are you aware of any existing or threatened action, suit, or government proceeding relating to the Property?   Yes   No   |
|                                   |      | Are you aware of any reason, including a defect in title, that would prevent you from conveying title to the Property? Yes No   |
| 265                               |      | Are you aware of any judgment, encumbrance, lien (for example, co-maker or equity loan) or other debt against the Property that   |
| 266                               | (U)  | cannot be satisfied by the proceeds of this sale?   |
| 267                               | (11) | Are you aware of any insurance claims filed relating to the property? Yes No  |
| 268                               |      |   |
| 269                               | EXP  | plain any yes answers you give in this section:   |
| 270                               | -    |   |
| 271                               | DE   | CIDENTE A LIMITE  |
|                                   |      | SIDENTIAL UNITS   |
| 273                               | (A)  | Is there a residential dwelling unit located on the Property? Yes No  |
| 274                               |      | If yes, number of residential dwelling units:12   |
| 275                               |      | Note: If one to four residential dwelling units are to be sold with, or as part of, the Property, Owner must complete a Seller's  |
| 276                               | -    | Property Disclosure Statement, as required by the Pennsylvania Real Estate Seller's Disclosure Law (68 P.S. §7301 et. seq.).  |
| 277 11.                           |      | NANCY ISSUES  |
| 278                               |      | Are you aware of any existing leases, subleases or other tenancy agreements affecting the Property?   Yes  No   |
| 279                               | (B)  | Are there any verbal agreements or understandings with tenants that are not specifically recorded in the lease (e.g., a promise not   |
| 280                               |      | to increase rent, an implied agreement to let tenant end lease early, a first right of refusal on adjoining space)?   Yes  No   |
| 281                               |      | Are there any tenants for whom you do not currently have a security deposit? Yes No   |
| 282                               | (D)  | Are there any tenants who have been 5 or more days late with their rent payment more than once this year? Yes   |
| 283 <b>Bu</b>                     | ıyer | Initials: CPI Page 5 of 7 Owner Initials: DR #R   |

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| (F) | Are there any tenants who are currently more than 30 days behind in paying rent, cam, or tax charges? Yes No  Are there any tenants who are in default of the lease for other than monetary reasons (e.g., failure to comply with rules, regulations, leas terms, etc.)? Yes No |
|-----|---|
| (G) | Are there any tenants that you have reason to believe are likely to fall into default of their lease within the next six months?  Yes No  |
| (H) | Is there any tenant that you would consider evicting or not offering an opportunity for renewal? Yes No Are you currently involved in any type of dispute with any tenant? Yes No   |
| Exp | lain any yes answers you give in this section, providing names of tenants where applicable. Attach additional sheet if necessary:   |
|     |   |
|     | MESTIC SUPPORT LIEN LEGISLATION  Has any Owner at any time, an analysis January 1, 1008, been abligated to may support under an order that is an assent in a  |
|     | Has any Owner, at any time, on or since January 1, 1998, been obligated to pay support under an order that is on record in a domestic relations office in any Pennsylvania county?   Yes No   |
| num | es, list name and social security numbers of Owner(s) obligated to pay, the county, and the Domestic Relations File or docket   |
|     | ND USE RESTRICTIONS OTHER THAN ZONING   |
|     | Is the Property, or a portion of it, preferentially assessed for tax purposes under the Farmland and Forest Land Assessment Act (72 P.S.§5490.1 et seq.)(Clean and Green Program)?  |
|     | <b>Note:</b> An Owner of Property enrolled in the Clean and Green Program must submit notice of the sale and any proposed changes   |
|     | in the use of Owner's remaining enrolled Property to the County Assessor 30 days before the transfer of title to Buyer. The sale  |
|     | of Property enrolled in the Clean and Green Program may result in the loss of program enrollment and the loss of preferential ta  |
|     | assessment for the Property and/or the land of which it is a part and from which it is being separated. Removal from enrollment   |
|     | in the Cleanand Green program may result in the charge of roll-back taxes and interest. A roll-back tax is the difference in the  |
|     | amount of taxes paid under the program and the taxes that would have been paid in the absence of Clean and Green enrollment.  |
|     | The roll-back taxes are charged for each year that the Property was enrolled in the program, limited to the past 7 years.   |
|     | Is the Property, or a portion of it, preferentially assessed for tax purposes under the Open Space Act (16 P.S. §11941 et seq.) (ar   |
| (2) | Act enabling certain counties of the Commonwealth to covenant with landowners for preservation of land in farm, forest, water   |
|     | supply, or open spaces uses)? Yes No  |
|     | <b>Note:</b> This Act enables counties to enter into covenants with owners of land designated as farm, forest, water supply, or open  |
|     | space land on an adopted municipal, county or regional plan for the purpose of preserving the land as open space. A covenant  |
|     | between the owner and county is binding upon any Buyer of the Property during the period of time that the covenant is in effect   |
|     | (5 or 10 years). Covenants automatically renew at the end of the covenant period unless specific termination notice procedures  |
|     | are followed. When a breach of the covenant occurs, the then-owner is required to pay roll-back taxes and interest. A roll-back   |
|     | tax is the difference in the amount of taxes paid and the taxes that would have been paid in the absence of the covenant. The   |
|     | roll-back taxes are charged for each year that the Property was subject to the covenant, limited to the past 5 years.   |
|     |   |
|     | Is the Property, or a portion of it, preferentially assessed for tax purposes or enrolled in any program, other than Clean & Green and Open Space, that contains any covenants, subdivision restrictions, or other restrictions affecting the Property?  ☐ Yes                  |
|     | lain any yes answers you give in this section:  |
|     |   |
|     | RVICE PROVIDER/CONTRACTOR INFORMATION   |
|     | Provide the names, addresses and phone numbers of the service providers for any Maintenance Contracts on the Property (e.g.,  |
|     | elevators, other equipment, pest control). Attach additional sheet if necessary:  |
|     |   |
|     |   |
| (B) | Provide the names, addresses and phone numbers of the service providers for any Alarm/Safety Contracts on the Property (e.g.,   |
| . / | security alarm system, sprinkler system, fire/smoke). Attach additional sheet if necessary:   |
|     |   |
| (C) | Provide the names, addresses and phone numbers of the service providers for any utilities on the Property (e.g., water, water   |
|     | softener, sewage, on-site sewage service, natural gas, electric, telephone). Attach additional sheet if necessary:  |
|     | softener, sewage, on-site sewage service, natural gas, electric, telephone). Attach additional sheet if necessary:  |
|     |   |
|     |   |

Owner Initials: TR HR 1007/75

343 The undersigned Owner represents that the information set forth in this document is accurate and complete to the best of Owner's 344 knowledge. Owner permits Broker to share information contained in this document with prospective buyers/tenants and other real 345 estate licensees. OWNER ALONE IS RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION CONTAINED IN 346 THIS STATEMENT. Owner will notify Broker in writing of any information supplied on this form which is rendered inaccurate 347 by a change in the condition of the Property following completion of this form.

| 348 OWNER | Dipika Rana dottop verifier di 1997/25 700 PM EDT DSUK-VERBERHE GED                     | DATE <sub>.</sub> |
|-----------|---|-------------------|
| 349 OWNER | Hiralal Rana dottoop verified 1007/25 605 PM EDT 1007/25 605 PM EDT 1CNP-CQG 420N 9.60M | DATE_             |
| 350 OWNER |   | DATE <sub></sub>  |
| _         |   |                   |
| 351 BUYER |   | DATE <sub>.</sub> |
| 352 BUYER |   | DATE.             |
| 353 BUYER |   | DATE <sub></sub>  |