

COMMERCIAL PROPERTY INFORMATION SHEET

CPI

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

1 PROPERTY _____ 1037 W Turner St, Allentown, PA 18102
2 _____ 2 _____
3 OWNER _____ 3 1037 W Turner St LLC
4

5 Owner is providing information to help Broker market the Property. This Statement is not a substitute for any inspections or warranties that a
6 buyer may wish to obtain. This Statement is not a warranty of any kind by Owner or a warranty or representation by any listing real estate broker
7 (Agent for Owner), any real estate broker, or their agents.
8

9 Property Type: Office Retail Industrial Multi-family Land Institutional
10 Hospitality Other: _____
11 _____
12

13 1. OWNER'S EXPERTISE Owner does not possess expertise in contracting, engineering, environmental assessment, architecture, or other areas
14 related to the construction and conditions of the Property and its improvements, except as follows: _____
15 _____
16

17 2. OCCUPANCY Do you, Owner, currently occupy the Property? Yes No
18 If no, when did you last occupy the Property? _____
19

20 3. DESCRIPTION
21 A. Land Area: _____
22 B. Dimensions: _____
23 C. Shape: _____
24 D. Building Square Footage: _____
25

26 4. PHYSICAL CONDITION
27 A. Age of Property: _____ Additions: _____
28 B. Roof
29 1. Age of roof(s): _____ Unknown
30 2. Type of roof(s): _____
31 3. Has the roof been replaced or repaired during your ownership? Yes No
32 4. Has the roof ever leaked during your ownership? Yes No
33 5. Do you know of any problems with the roof, gutters, or downspouts? Yes No
34 Explain any yes answers you give in this section: _____
35 _____
36 C. Structural Items, Basements and Crawl Spaces
37 1. Are you aware of any water leakage, accumulation, or dampness in the building or other structures? Yes No
38 2. Does the Property have a sump pump? Yes No
39 3. Do you know of any repairs or other attempts to control any water or dampness problem in the building or other structures?
40 Yes No
41 4. Are you aware of any past or present movement, shifting, deterioration, or other problems with walls, foundations, floors, or other
42 structural components? Yes No
43 Explain any yes answers that you give in this section, describing the location and, if applicable, the extent of the problem and the date and
44 person by whom any repairs were done, if known: _____
45 _____
46 D. Mechanical Systems
47 1. Type of heating: Forced Air Hot Water Steam Radiant
48 Other: _____
49 2. Type of heating fuel: Electric Fuel Oil Natural Gas Propane (on-site) Central Plant
50 Other types of heating systems or combinations: _____
51 3. Are there any chimneys? Yes No If yes, how many? _____
52 Are they working? Yes No When were they last cleaned? _____
53 4. List any buildings (or areas in any buildings) that are not heated: _____
54 5. Type of water heater: Electric Gas Oil Capacity: _____
55 Other: _____
56 _____

55 Buyer Initials: _____

CPI Page 1 of 6

Owner Initials: _____



Pennsylvania Association of REALTORS®
Used under license to Steel City Realty; Jennifer DeJesus, Realtor®

COPYRIGHT PENNSYLVANIA ASSOCIATION OF REALTORS® 2004
10/04

56	6. Type of plumbing: <input type="checkbox"/> Copper <input type="checkbox"/> Galvanized <input type="checkbox"/> Lead <input type="checkbox"/> PVC <input type="checkbox"/> Unknown	56
57	<input type="checkbox"/> Other: _____	57
58	7. Are you aware of any problems with plumbing or heating systems or fixtures on the Property? <input type="checkbox"/> Yes <input type="checkbox"/> No	58
59	If yes, explain: _____	59
60	8. Type of air conditioning: <input type="checkbox"/> Central Electric <input type="checkbox"/> Central Gas <input type="checkbox"/> Wall <input type="checkbox"/> None Capacity: _____	60
61	List any buildings (or areas of any buildings) that are not air conditioned: _____	61
62	9. Type of electric service: _____ AMP <input type="checkbox"/> 220 Volt <input type="checkbox"/> 3-phase <input type="checkbox"/> 1-phase <input type="checkbox"/> KVA: _____	62
63	<input type="checkbox"/> Other: _____	63
64	Transformers: _____ Type: _____	64
65	Are you aware of any problems or repairs needed in the electrical system? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain: _____	65
66	10. Are you aware of any problems with any item in this section that has not already been disclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No	66
67	If yes, explain: _____	67
68	_____	68
69	E. Site Improvements	69
70	1. Are you aware of any problems with storm-water drainage? <input type="checkbox"/> Yes <input type="checkbox"/> No	70
71	2. Are you aware of any past or present problems with driveways, parking areas, sidewalks, curbs, other paved surfaces, or retaining walls on the Property? <input type="checkbox"/> Yes <input type="checkbox"/> No	71
72	Explain any yes answers that you give in this section, describing the location and, if applicable, the extent of the problem and the date and person by whom any repairs were done, if known: _____	72
73	_____	73
74	F. Other Equipment	74
75	1. Exterior Signs: <input type="checkbox"/> Yes <input type="checkbox"/> No How many? _____ Number Illuminated: _____	75
76	2. Elevators: <input type="checkbox"/> Yes <input type="checkbox"/> No How many? _____ <input type="checkbox"/> Cable <input type="checkbox"/> Hydraulic rail	76
77	Working order? <input type="checkbox"/> Yes <input type="checkbox"/> No Certified through (date) _____ Date last serviced _____	77
78	3. Skylights: <input type="checkbox"/> Yes <input type="checkbox"/> No How many? _____	78
79	4. Overhead Doors: <input type="checkbox"/> Yes <input type="checkbox"/> No How many? _____ Size: _____	79
80	5. Loading Docks: <input type="checkbox"/> Yes <input type="checkbox"/> No How many? _____ Levelers: <input type="checkbox"/> Yes <input type="checkbox"/> No	80
81	6. At grade doors: <input type="checkbox"/> Yes <input type="checkbox"/> No How many? _____	81
82	7. Are you aware of any problems with the equipment listed in this section? <input type="checkbox"/> Yes <input type="checkbox"/> No	82
83	If yes, explain: _____	83
84	_____	84
85	G. Fire Damage	85
86	1. To your knowledge, was there ever a fire on the Property? <input type="checkbox"/> Yes <input type="checkbox"/> No	86
87	2. Are you aware of any unrepaired fire damage to the Property and any structures on it? <input type="checkbox"/> Yes <input type="checkbox"/> No	87
88	If yes, explain location and extent of damage: _____	88
89	_____	89
90	H. Are you aware of any problems with water and sewer lines servicing the Property? <input type="checkbox"/> Yes <input type="checkbox"/> No	90
91	If yes, explain: _____	91
92	_____	92
93	I. Alarm/Safety Systems	93
94	1. Fire: <input type="checkbox"/> Yes <input type="checkbox"/> No In working order? <input type="checkbox"/> Yes <input type="checkbox"/> No	94
95	If yes, connected to: Fire Department <input type="checkbox"/> Yes <input type="checkbox"/> No Monitoring Service: <input type="checkbox"/> Yes <input type="checkbox"/> No	95
96	2. Fire extinguishers: <input type="checkbox"/> Yes <input type="checkbox"/> No	96
97	3. Smoke: <input type="checkbox"/> Yes <input type="checkbox"/> No In working order? <input type="checkbox"/> Yes <input type="checkbox"/> No	97
98	4. Sprinkler: <input type="checkbox"/> Yes <input type="checkbox"/> No Inspected/certified? <input type="checkbox"/> Yes <input type="checkbox"/> No	98
99	_____	99
100	5. Security: <input type="checkbox"/> Yes <input type="checkbox"/> No In working order? <input type="checkbox"/> Yes <input type="checkbox"/> No	100
101	If yes, connected to: Police Department: <input type="checkbox"/> Yes <input type="checkbox"/> No Monitoring Service: <input type="checkbox"/> Yes <input type="checkbox"/> No	101
102	6. Are there any areas of the Property that are not serviced by the systems in this section? <input type="checkbox"/> Yes <input type="checkbox"/> No	102
103	If yes, explain: _____	103
104	_____	104
105	_____	105
106	_____	106
107	_____	107
108	_____	108
109	_____	109
110	_____	110
111	5. ENVIRONMENTAL	111
112	A. Soil Conditions	112
113	1. Are you aware of any fill or expansive soil on the Property? <input type="checkbox"/> Yes <input type="checkbox"/> No	113
114	If yes, were soil compaction tests done? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, by whom? _____	114
115	_____	115

117 2. Are you aware of any sliding, settling, earth movement, upheaval, subsidence, or earth stability problems that have occurred on or affect
118 the Property? Yes No 117
118

119 3. Are you aware of any existing or proposed mining, strip-mining, or any other excavations that might affect the Property? 119
120 Yes No 120

121 Explain any yes answers you give in this section: _____ 121
122
123

124 **B. Hazardous Substances** 124

125 1. Are you aware of the presence of any of the following on the Property? 125

126 Asbestos material: Yes No 126

127 Formaldehyde gas and/or ureaformaldehyde foam insulation (UFFI): Yes No 127

128 Discoloring of soil or vegetation: Yes No 128

129 Oil sheen in wet areas: Yes No 129

130 Contamination of well or other water supply: Yes No 130

131 Proximity to current or former waste disposal sites: Yes No 131

132 Proximity to current or former commercial or industrial facilities: Yes No 132

133 Proximity to current, proposed, or former mines or gravel pits: Yes No 133

134 Radon levels at or above 4 picocuries per liter: Yes No 134

135 Use of lead-based paint: Yes No 135

136 Note: If Property contains a residence with one to four dwelling units, and the structure was constructed, or construction began, before
137 1978, you must disclose any knowledge of lead-based paint and any reports and/or records of lead-based paint on the Property. 136
137

138 Are you aware of any lead-based paint or lead-based paint hazards on the Property? Yes No 138

139 If yes, explain how you know of it, where it is, and the condition of those lead-based paint surfaces: _____ 139
140

141 Are you aware of any reports or records regarding lead-based paint or lead-based paint hazards on the Property? Yes No 141
142

143 If yes, list all available reports and records: _____ 143
144

145 2. To your knowledge, has the Property been tested for any hazardous substances? Yes No 145

146 3. Are you aware of any storage tanks on the Property? Yes No Aboveground Underground 146

147 Total number of storage tanks on the Property: _____ Aboveground _____ Underground 147

148 Are all storage tanks registered with the Pennsylvania Department of Environmental Protection? Yes No 148

149 If no, identify any unregistered storage tanks: _____ 149

150 Has any storage tank permit ever been revoked pursuant to a federal or state law regulating storage tanks? Yes No 150

151 Have you ever been ordered to take corrective action by a federal or state agency citing a release, or danger of release, from a storage
152 tank? Yes No 152

153 Do methods and procedures exist for the operation of storage tanks and for the operator's/owner's maintenance of a leak detection system,
154 an inventory control system, and a tank testing system? Yes No Explain: _____ 154
155

156 Has there been any release or any corrective action taken in response to a release from any of the storage tanks on the Property? 156

157 Yes No If yes, have you reported the release to and corrective action to any governmental agency? Yes No 157

158 Explain: _____ 158

159 4. Do you know of any other environmental concerns that may have an impact on the Property? Yes No 159

160 Explain any yes answers you give in this section: _____ 160
161

162 _____

167 **C. Wood Infestation** 167

168 1. Are you aware of any termites/wood-destroying insects, dryrot, or pests affecting the Property? Yes No 168

169 2. Are you aware of any damage to the Property caused by termites/wood-destroying insects, dryrot, or pests? Yes No 169

170 3. Is the Property currently under contract by a licensed pest control company? Yes No 170

171 4. Are you aware of any termite/pest control reports or treatments for the Property in the last five years? Yes No 171

172 Explain any yes answers you give in this section: _____ 172
173

174 _____

175 **D. Natural Hazards/Wetlands** 175

176 1. To your knowledge, is this Property, or part of it, located in a flood zone or wetlands area? Yes No 176

177 2. Do you know of any past or present drainage or flooding problems affecting the Property? Yes No 177

179 3. To your knowledge, is this Property, or part of it, located in an earthquake or other natural hazard zone? Yes No 179
180 Explain any yes answers you give in this section: _____ 180
181 _____ 181
182 _____ 182

183 **6. UTILITIES** 183

184 A. Water 184

185 1. What is the source of your drinking water? Public Community System Well on Property 185
186 Other: _____ 186

187 2. If the Property's source of water is not public:
When was the water last tested? _____ 187
188 _____ 188

189 What was the result of the test? _____ 189

190 Is the pumping system in working order? Yes No 190
191 If no, explain: _____ 191

193 3. Is there a softener, filter, or other purification system? Yes No 193
194 If yes, is the system: Leased Owned 194

195 4. Are you aware of any problems related to the water service? Yes No 195
196 If yes, explain: _____ 196

197 B. Sewer/Septic 197

199 1. What is the type of sewage system? Public Sewer Community Sewer On-site (or Individual) sewage system 199
200 If on-site, what type? Cesspool Drainfield Unknown 200

201 Other (specify): _____ 201

202 2. Is there a septic tank on the Property? Yes No Unknown 202
203 If yes, what is the type of tank? Metal/steel Cement/concrete Fiberglass Unknown 203

204 Other (specify): _____ 204

205 3. When was the on-site sewage disposal system last serviced? _____ 205

206 4. Is there a sewage pump? Yes No 206
207 If yes, is it in working order? Yes No 207

208 5. Are you aware of any problems related to the sewage system? Yes No 208
209 If yes, explain: _____ 209

210 C. Other Utilities 210

212 1. The Property is serviced by the following: Natural Gas Electricity Telephone 212
213 Other: _____ 213

214 **7. TELECOMMUNICATIONS** 214

215 A. Is a telephone system included with the sale of the Property? Yes No 215
216 If yes, type: _____ 216

217 B. Are ISDN lines included with the sale of the Property? Yes No 217
218 C. Is the Property equipped with satellite dishes? Yes No 218
219 If yes, how many? _____ Location: _____ 219

220 D. Is the Property equipped for cable TV? Yes No 220
221 If yes, number of hook-ups: _____ Location: _____ 221

222 E. Are there fiber optics available to the Property? Yes No Is the building wired for fiber optics? Yes No 222
223 Does the Property have T1 or other capability? Yes No 223

224 **8. GOVERNMENTAL ISSUES/ZONING/USE/CODES** 224

225 A. Compliance, Building Codes & OSHA 225
226 1. Do you know of any violations of federal (including ADA), state, or local laws or regulations relating to this Property? 226
227 Yes No 227

228 2. Do you know of any violations of building codes or municipal ordinances concerning this Property? Yes No 228

229 3. Do you know of any health, fire, or safety violations concerning this Property? Yes No 229

230 4. Do you know of any OSHA violations concerning this Property? Yes No 230

231 5. Do you know of any improvements to the Property that were done without building or other required permits? Yes No 231

232 Explain any yes answers you give in this section: _____ 232

233 _____ 233

234 B. Condemnation or Street Widening 234

235 1. 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? Yes No 235
236

237 If yes, explain: _____ 237

238 _____ 238

239 _____ 239

241 C. Zoning
242 1. The Property is currently zoned _____ by the
243 (county, ZIP) _____
244 2. Current use is: conforming non-conforming permitted by variance permitted by special exception
245 3. Do you know of any pending or proposed changes in zoning? Yes No
246 If yes, explain: _____
247

248 D. Is there an occupancy permit for the Property? Yes No
249 E. Is there a Labor and Industry Certificate for the Property? Yes No
250 If yes, Certificate Number is: _____
251 F. Is the Property a designated historic or archeological site? Yes No
252 If yes, explain: _____
253

254 9. **LEGAL/TITLE ISSUES**
255 A. Are you aware of any encroachments or boundary line disputes regarding the Property? Yes No
256 B. Are you aware of any recorded encumbrances, covenants, conditions, restrictions, mineral or natural restrictions, easements, licenses, liens, charges, agreements, or other matters which affect the title of the Property? Yes No
257 C. Are you aware of any encumbrances, covenants, conditions, restrictions, mineral or natural restrictions, easements, licenses, liens, charges, agreements, or other matters which affect the title of the Property that have not been recorded in the official records of the county recorder where the Property is located? Yes No
258 D. Are you aware of any public improvement, condominium, or owner association assessments against the Property that remain unpaid? Yes No
259 E. Are you aware of any existing or threatened action, suit, or government proceeding relating to the Property? Yes No
260 F. Are you aware of any reason, including a defect in title, that would prevent you from conveying title to the Property? Yes No
261 G. Are you aware of any judgment, encumbrance, lien (for example, co-maker or equity loan) or other debt against the Property that cannot be satisfied by the proceeds of this sale? Yes No
262 H. Are you aware of any insurance claims filed relating to the property? Yes No
263 Explain any yes answers you give in this section: _____
264 _____
265 _____
266 _____
267 _____
268 _____
269 _____
270

271 10. **RESIDENTIAL UNITS**
272 A. Is there a residential dwelling unit located on the Property? Yes No If yes, number of residential dwelling units: _____
273 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 Property
274 Disclosure Statement, as required by the Pennsylvania Real Estate Seller's Disclosure Law (68 P.S. §7301 et. seq.).
275

276 11. **TENANCY ISSUES**
277 A. Are you aware of any existing leases, subleases or other tenancy agreements affecting the Property? Yes No
278 B. Are there any verbal agreements or understandings with tenants that are not specifically recorded in the lease (e.g., a promise not to increase
279 rent, an implied agreement to let tenant end lease early, a first right of refusal on adjoining space)? Yes No
280 C. Are there any tenants for whom you do not currently have a security deposit? Yes No
281 D. Are there any tenants who have been 5 or more days late with their rent payment more than once this year? Yes No
282 E. Are there any tenants who are currently more than 30 days behind in paying rent, cam, or tax charges? Yes No
283 F. Are there any tenants who are in default of the lease for other than monetary reasons (e.g., failure to comply with rules, regulations, lease
284 terms, etc.)? Yes No
285 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?
286 Yes No
287 H. Is there any tenant that you would consider evicting or not offering an opportunity for renewal? Yes No
288 I. Are you currently involved in any type of dispute with any tenant? Yes No
289 Explain any yes answers you give in this section, providing names of tenants where applicable. Attach additional sheet if necessary:
290 _____
291 _____
292

293 12. **DOMESTIC SUPPORT LIEN LEGISLATION**
294 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
295 relations office in any Pennsylvania county? Yes No
296 If yes, list name and social security numbers of Owner(s) obligated to pay, the county, and the Domestic Relations File or docket number:
297 _____
298 _____

300 **13. LAND USE RESTRICTIONS OTHER THAN ZONING**

- 301 A. Is the Property, or a portion of it, preferentially assessed for tax purposes under the Farmland and Forest Land Assessment
302 Act (72 P.S. §5490.1 et seq.)(Clean and Green Program)? Yes No

303 Note: An Owner of Property enrolled in the Clean and Green Program must submit notice of the sale and any proposed changes in the use
304 of Owner's remaining enrolled Property to the County Assessor 30 days before the transfer of title to Buyer. The sale of Property
305 enrolled in the Clean and Green Program may result in the loss of program enrollment and the loss of preferential tax assessment for
306 the Property and/or the land of which it is a part and from which it is being separated. Removal from enrollment in the Clean and
307 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
308 under the program and the taxes that would have been paid in the absence of Clean and Green enrollment. The roll-back taxes are
309 charged for each year that the Property was enrolled in the program, limited to the past 7 years.

- 310 B. Is the Property, or a portion of it, preferentially assessed for tax purposes under the Open Space Act (16 P.S. §11941 et seq.)

311 (an Act enabling certain counties of the Commonwealth to covenant with landowners for preservation of land in farm, forest, water supply,
312 or open spaces uses)? Yes No

313 Note: This Act enables counties to enter into covenants with owners of land designated as farm, forest, water supply, or open space land on
314 an adopted municipal, county or regional plan for the purpose of preserving the land as open space. A covenant between the owner
315 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
316 automatically renew at the end of the covenant period unless specific termination notice procedures are followed. When a breach of
317 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
318 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
319 the Property was subject to the covenant, limited to the past 5 years.

- 320 C. Is the Property, or a portion of it, preferentially assessed for tax purposes or enrolled in any program, other than Clean & Green and Open
321 Space, that contains any covenants, subdivision restrictions, or other restrictions affecting the Property? Yes No

322 Explain any yes answers you give in this section: _____

323 **14. SERVICE PROVIDER/CONTRACTOR INFORMATION**

- 324 A. Provide the names, addresses and phone numbers of the service providers for any Maintenance Contracts on the Property (e.g., elevators,
325 other equipment, pest control). Attach additional sheet if necessary: _____

326 _____
327 _____
328 _____
329 _____

- 330 B. Provide the names, addresses and phone numbers of the service providers for any Alarm/Safety Contracts on the Property (e.g., security
331 alarm system, sprinkler system, fire/smoke). Attach additional sheet if necessary: _____

332 _____
333 _____
334 _____
335 _____

- 336 C. Provide the names, addresses and phone numbers of the service providers for any utilities on the Property (e.g., water, water softener, sewage,
337 on-site sewage service, natural gas, electric, telephone). Attach additional sheet if necessary: _____

338 _____
339 _____
340 _____

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

346 **OWNER** _____ **DATE** _____

347 **OWNER** _____ **DATE** _____

348 **OWNER** _____ **DATE** _____

349 **BUYER** _____ **DATE** _____

350 **BUYER** _____ **DATE** _____

351 **BUYER** _____ **DATE** _____