

CITY OF MUNROE FALLS, OHIO
RESIDENTIAL PROPERTY DISCLOSURE FORM

Pursuant to the City of Munroe Falls Codified Ordinance Section 1176.03:

TO BE COMPLETED BY THE PROPERTY OWNER (Please print)

Property Address: _____

Property Owners Name(s): _____

Notice: Chemical residue from the production of methamphetamine may be toxic and should be considered a health hazard. A professional home inspection may or may not expose the existence of toxic chemical materials or residue.

Purpose of Disclosure Form: This is a statement of the condition of the property and of information concerning the property actually known by the owner as required by Section 1176.03 of the City of Munroe Falls Codified Ordinances. This form is not intended as a substitute for the Residential Property Disclosure Form as required by Ohio Revised Code Section 5302.30 and Rule 1301:5-6-10 of the Ohio Administrative Code and must be completed in addition to and not in place of such form. THIS STATEMENT IS NOT A WARRANTY OF ANY KIND BY THE OWNER OR BY ANY AGENT OR SUBAGENT REPRESENTING THE OWNER OF THE PROPERTY. THIS STATEMENT IS NOT A SUBSTITUTE FOR ANY INSPECTIONS. POTENTIAL PURCHASERS ARE ENCOURAGED TO OBTAIN THEIR OWN PROFESSIONAL INSPECTION.

Owner's Statement: The representations contained on this form are made by the owner and are not the representations of the owner's agent or subagent. This form and the representations contained in it are provided by the owner exclusively to potential purchasers in a transfer made by the owner, and are not made to purchasers in any subsequent transfers. The information contained in this disclosure form does not limit the obligation of the owner to disclose an item of information that is required by any other statute or law to be disclosed in the transfer of residential real estate.

PRESENCE OF CONTAMINATION FROM METHAPHETAMINE OR OTHER TOXIC SUBSTANCE PRODUCTION:

Do you know of the current or previous presence of toxic or hazardous substances on the property resulting from the production of methamphetamine or the operation of a clandestine drug lab?

YES: _____ NO: _____

If "YES," please provide details and describe any repairs, remediation, or mitigation to the property:

FAILURE OF THE PROPERTY OWNER(S) TO PROPERLY DISCLOSE THE INFORMATION REQUESTED BY THIS FORM MAY SUBJECT THE PROPERTY OWNER(S) TO CRIMINAL AND CIVIL LIABILITY.

Owner (Signature)

Purchaser (Signature)

Owner (Print Name)

Purchaser (Print Name)

Owner (Signature)

Purchaser (Signature)

Owner (Print Name)

Purchaser (Print Name)

Date

Date