

DISCLOSURE STATEMENT: LOCATION MAP

This form is approved by the Minnesota Association of REALTORS®, which disclaims any liability arising out of use or misuse of this form. © 2021-2023 Minnesota Association of REALTORS®

1. Page _____ of _____ pages

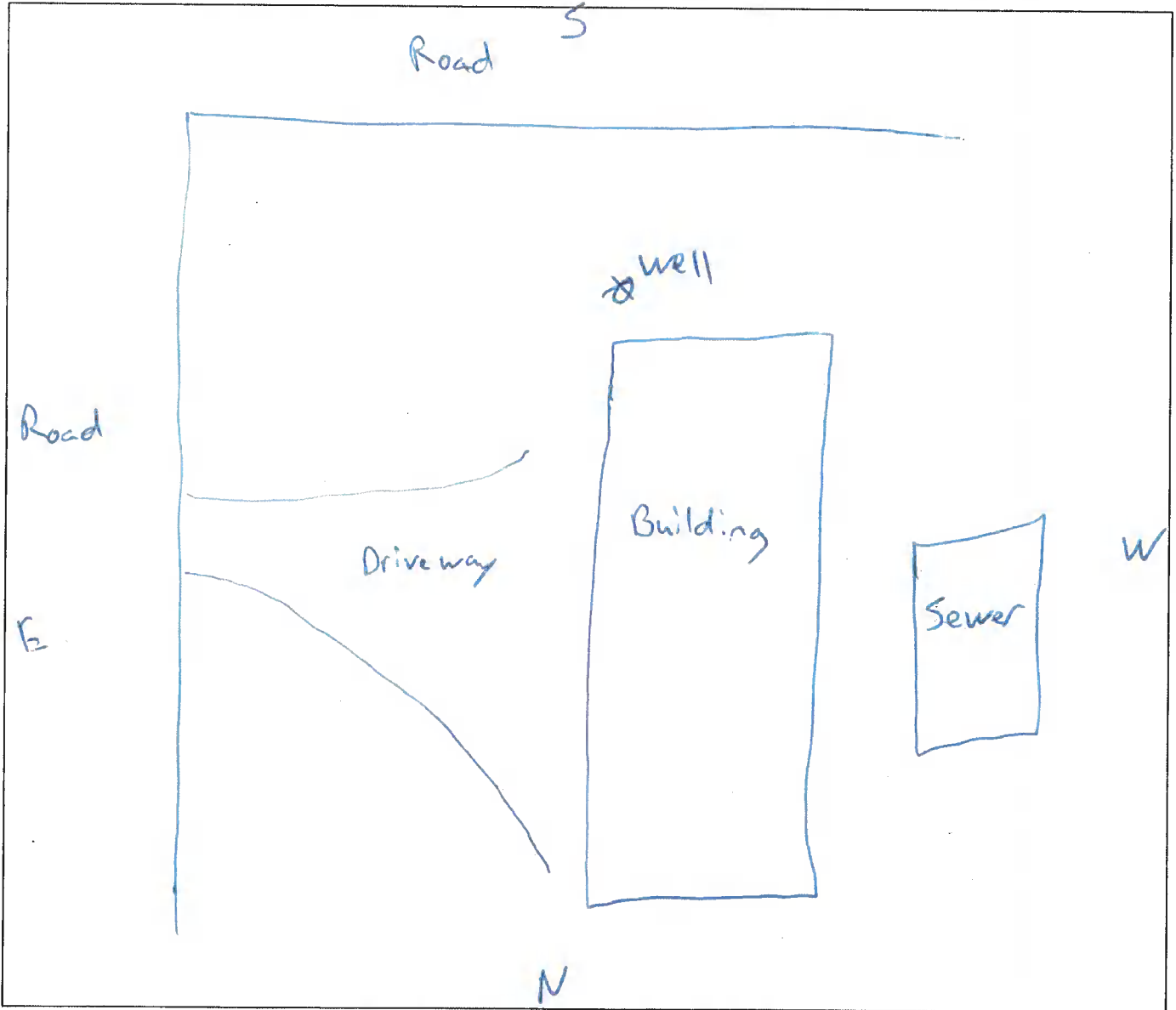
2. Please use the space below to sketch the real property being sold and, to Seller's knowledge, the approximate location of any of the following on the property.

4. SUBSURFACE SEWAGE TREATMENT SYSTEM WELL METHAMPHETAMINE PRODUCTION AREA
-----(Check all that apply.)-----

5. Include approximate distances from fixed reference points such as streets, buildings and landmarks.

6. Property located at 5114 Marson Dr Sauk Rapids MN 56379

7. SECT-27 TWP-036 RANGE-030 SHORT STOP ACRES LOT-002 BLOCK-001 1.22 AC



8. ATTACH ADDITIONAL SHEETS AS NEEDED.

9. Seller and Buyer initial:

[Handwritten Signature]
(Seller) (Date)

(Buyer) (Date)

10. _____
(Seller) (Date) (Buyer) (Date)

11. ORIGINAL COPY TO LISTING BROKER; COPIES TO SELLER, BUYER, SELLING BROKER

**DISCLOSURE STATEMENT: SUBSURFACE
SEWAGE TREATMENT SYSTEM**

This form is approved by the Minnesota Association of REALTORS®, which disclaims any liability arising out of use or misuse of this form.
© 2021-2023 Minnesota Association of REALTORS®

1. Date _____
2. Page 1 of _____ pages:
3. THE REQUIRED MAP IS ATTACHED AND MADE A
4. PART OF THIS DISCLOSURE.

5. Property located at 5114 Marson Dr _____,

6. City of Sauk Rapids _____, County of Benton _____,

7. State of Minnesota, Zip Code 56379 _____, legally described as follows or on attached sheet:

8. SECT-27 TWP-036 RANGE-030 SHORT STOP ACRES LOT-002 BLOCK-001 1.22 AC _____ ("Property").

9. This disclosure is not a warranty of any kind by Seller(s) or any licensee(s) representing or assisting any party(ies) in this transaction, and is not a substitute for any inspections or warranties the party(ies) may wish to obtain.

11. **BUYER(S) AND SELLER(S) MAY WISH TO OBTAIN PROFESSIONAL ADVICE AND/OR INSPECTIONS OF THE SUBSURFACE SEWAGE TREATMENT SYSTEM AND TO PROVIDE FOR APPROPRIATE PROVISIONS IN A CONTRACT BETWEEN BUYER(S) AND SELLER(S) WITH RESPECT TO ANY ADVICE/INSPECTION/ DEFECTS.**

15. **SELLER'S INFORMATION:** The following Seller disclosure satisfies MN Statutes Chapter 115.55. Seller discloses the following information with the knowledge that even though this is not a warranty, prospective Buyers may rely on this information in deciding whether and on what terms to purchase the Property. The Seller(s) authorizes any licensee(s) representing or assisting any party(ies) in this transaction to provide a copy of this statement to any person or entity in connection with any actual or anticipated sale of the Property.

20. Unless Buyer and Seller agree to the contrary in writing before the closing of the sale, a Seller who fails to disclose the existence or known status of a subsurface sewage treatment system at the time of sale, and who knew or had reason to know of the existence or known status of the system, is liable to Buyer for costs relating to bringing the system into compliance with subsurface sewage treatment system rules and for reasonable attorney fees for collection of costs from Seller. An action under this subdivision must be commenced within two years after the date on which Buyer closed the purchase of the real property where the system is located.

26. Legal requirements exist relating to various aspects of location and status of subsurface sewage treatment systems. Buyer is advised to contact the local unit(s) of government, state agency, or qualified professional which regulates subsurface sewage treatment systems for further information about these issues.

29. The following are representations made by Seller(s) to the extent of Seller(s) actual knowledge. This information is a disclosure and is not intended to be part of any contract between Buyer and Seller.

31. **SUBSURFACE SEWAGE TREATMENT SYSTEM DISCLOSURE:** *(Check the appropriate boxes.)*

32. Seller certifies that the following subsurface sewage treatment system is on or serving the above-described Property.

33. TYPE: *(Check appropriate box(es) and indicate location on attached Disclosure Statement: Location Map.)*

34. Septic Tank: with drain field with mound system seepage tank with open end

35. Is this system a straight-pipe system? Yes No Unknown

36. Sealed System (holding tank)

37. Other (Describe.): _____

38. Is the subsurface sewage treatment system(s) currently in use? Yes No

39. Is the above-described Property served by a subsurface sewage treatment system located entirely within the Property boundary lines, including setback requirements? Yes No

41. If "No," please explain: _____

42. _____

43. Comments: _____

44. _____

DISCLOSURE STATEMENT: SUBSURFACE SEWAGE TREATMENT SYSTEM

45. Page 2

46. Property located at 5114 Marson Dr Sauk Rapids MN 56379

47. Is the subsurface sewage treatment system(s) a shared system? [] Yes [X] No

48. If "Yes,"

49. (1) How many properties or residences does the subsurface sewage treatment system serve?

50. _____

51. (2) Is there a maintenance agreement for the shared subsurface sewage treatment system? [] Yes [] No

52. If "Yes," what is the annual maintenance fee? \$ _____

53. NOTE: If any water use appliance, bedroom, or bathroom has been added to the Property, the system may no longer comply with applicable sewage treatment system laws and rules.

55. Seller or transferor shall disclose to Buyer or transferee what Seller or transferor has knowledge of relative to the compliance status of the subsurface sewage treatment system.

56. _____

57. _____

59. Any previous inspection report in Seller's possession must be attached to this Disclosure Statement.

60. When was the subsurface sewage treatment system installed? 2004

61. Installer Name/Phone Lyle's Excavating

62. Where is tank located? West side of building

63. What is tank size? N/A

64. When was tank last pumped? _____

65. How often is tank pumped? _____

66. Where is the drain field located? West side of building

67. What is the drain field size? N/A

68. Describe work performed to the subsurface sewage treatment system since you have owned the Property.

69. N/A

70. _____

71. Date work performed/by whom: _____

72. _____

73. Approximate number of: people using the subsurface sewage treatment system 5-10

75. showers/baths taken per week 0

76. wash loads per week 0

77. NOTE: Changes in the number of people using the subsurface sewage treatment system or volume of water used may affect the subsurface sewage treatment system performance.

79. Distance between well and subsurface sewage treatment system? 100 ft

80. Have you received any notices from any government agencies relating to the subsurface sewage treatment system?

81. (If "Yes," see attached notice.) [] Yes [X] No

82. Are there any known defects in the subsurface sewage treatment system? [] Yes [X] No

83. If "Yes," please explain: _____

84. _____

85. _____

**DISCLOSURE STATEMENT: SUBSURFACE
SEWAGE TREATMENT SYSTEM**

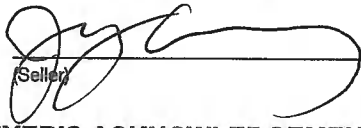
86. Page 3

87. Property located at 5114 Marson Dr Sauk Rapids MN 56379

88. **SELLER'S STATEMENT:** *(To be signed at time of listing.)*

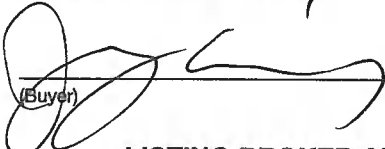
89. Seller(s) hereby states the facts as stated above are true and accurate and authorizes any licensee(s) representing or
90. assisting any party(ies) in this transaction to provide a copy of this Disclosure Statement to any person or entity in
91. connection with any actual or anticipated sale of the Property. A seller may provide this Disclosure Statement to a
92. real estate licensee representing or assisting a prospective buyer. The Disclosure Statement provided to the real
93. estate licensee representing or assisting a prospective buyer is considered to have been provided to the prospective
94. buyer. If this Disclosure Statement is provided to the real estate licensee representing or assisting the prospective
95. buyer, the real estate licensee must provide a copy to the prospective buyer.

96. **Seller is obligated to continue to notify Buyer in writing of any facts that differ from the facts disclosed here**
97. **(new or changed) of which Seller is aware that could adversely and significantly affect the Buyer's use or**
98. **enjoyment of the Property or any intended use of the Property that occur up to the time of closing. To disclose**
99. **new or changed facts, please use the *Amendment to Disclosure Statement* form.**

100.  _____ (Date) _____ (Seller) _____ (Date)

101. **BUYER'S ACKNOWLEDGEMENT:** *(To be signed at time of purchase agreement.)*

102. I/We, the Buyer(s) of the Property, acknowledge receipt of this *Disclosure Statement: Subsurface Sewage Treatment*
103. *System and Disclosure Statement: Location Map* and agree that no representations regarding facts have been made
104. other than those made above.

105.  _____ (Date) _____ (Buyer) _____ (Date)

106. **LISTING BROKER AND LICENSEES MAKE NO REPRESENTATIONS HERE AND ARE**
107. **NOT RESPONSIBLE FOR ANY CONDITIONS EXISTING ON THE PROPERTY.**

DISCLOSURE STATEMENT: WELL

This form is approved by the Minnesota Association of REALTORS®, which disclaims any liability arising out of use or misuse of this form. © 2022-2023 Minnesota Association of REALTORS®

1. Date _____
2. Page 1 of _____ pages: THE REQUIRED MAP
3. IS ATTACHED HERE AND MADE A PART OF THIS
4. DISCLOSURE.

5. Minnesota Statute 1031.235 requires that, before signing an agreement to sell or transfer real property, Seller must disclose information in writing to Buyer about the status and location of all known wells on the property. This requirement is satisfied by delivering to Buyer either a statement by Seller that Seller does not know of any wells on the property, or a disclosure statement indicating the legal description and county, and a map showing the location of each well. In the disclosure statement Seller must indicate, for each well, whether the well is in use, not in use or sealed.

10. Unless Buyer and Seller agree to the contrary in writing, before the closing of the sale, a Seller who fails to disclose the existence or known status of a well at the time of sale, and knew or had reason to know of the existence or known status of the well, is liable to Buyer for costs relating to sealing of the well and reasonable attorneys' fees for collection of costs from Seller, if the action is commenced within six years after the date Buyer closed the purchase of the real property where the well is located.

15. Legal requirements exist relating to various aspects of location and status of wells. Buyer is advised to contact the local unit(s) of government, state agency, or qualified professional which regulates wells for further information about these issues. For additional information on wells, please visit the Minnesota Department of Health's website at www.health.state.mn.us.

19. **Instructions for completion of this form are on page two (2).**

20. **PROPERTY DESCRIPTION:** Street Address: 5114 Marson Dr,

21. City of Sauk Rapids, County of Benton,

22. State of Minnesota, Zip Code 56379.

23. **LEGAL DESCRIPTION:** SECT-27 TWP-036 RANGE-030 SHORT STOP ACRES LOT-002 BLOCK-001 1.22 AC

24. _____

25. _____ ("Property").

26. **WELL DISCLOSURE STATEMENT: (Check appropriate boxes.)**

27. Seller certifies that the following wells are located on the above-described real Property.

	MN Unique Well No.	Well Depth	Year of Const.	Well Type	IN USE	NOT IN USE	SHARED	SEALED
30. Well 1	<u>721854</u>	<u>78</u>	<u>2004</u>	<u>Stainless Steel</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Well 2	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Well 3	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

33. Is this property served by a well not located on the Property? Yes No

34. If "Yes," please explain: _____

35. _____

36. **NOTE: See definition of terms "IN USE," "NOT IN USE," and "SEALED" on lines 87-97. If a well is not in use, it must be sealed by a licensed well contractor or a well owner must obtain a maintenance permit from the Minnesota Department of Health and pay an annual maintenance fee. Maintenance permits are not transferable. If a well is operable and properly maintained, a maintenance permit is not required.**

40. If the well is, "Shared":

41. (1) How many properties or residences does the shared well serve? _____

42. (2) Who manages the shared well? _____

43. (3) Is there a maintenance agreement for the shared well? Yes No

44. If "Yes," what is the annual maintenance fee? \$ _____

DISCLOSURE STATEMENT: WELL

46. Property located at 5114 Marson Dr Sauk Rapids MN 56379

47. OTHER WELL INFORMATION:

48. Date well water last tested for contaminants: _____ Test results attached? [] Yes [] No

49. Contaminated Well: Is there a well on the Property containing contaminated water? [] Yes [] No

50. Comments: _____

51. _____

52. _____

53. _____

54. _____

55. _____

56. _____

57. SEALED WELL INFORMATION: For each well designated as sealed above, complete this section.

58. When was the well sealed? _____

59. Who sealed the well? _____

60. Was a Sealed Well Report filed with the Minnesota Department of Health? [] Yes [] No

61. MAP: Complete the attached Disclosure Statement: Location Map showing the location of each well on the real Property.

63. This disclosure is not a warranty of any kind by Seller(s) or any licensee(s) representing or assisting any part(ies) in this transaction and is not a substitute for any inspections or warranties the party(ies) may wish to obtain.

65. INSTRUCTIONS FOR COMPLETING THE WELL DISCLOSURE STATEMENT

66. DEFINITION: A "well" means an excavation that is drilled, cored, bored, washed, driven, dug, jetted, or otherwise constructed if the excavation is intended for the location, diversion, artificial recharge, or acquisition of groundwater.

68. MINNESOTA UNIQUE WELL NUMBER: All new wells constructed AFTER January 1, 1975, should have been assigned a Minnesota unique well number by the person constructing the well. If the well was constructed after this date, you should have the unique well number in your property records. If you are unable to locate your unique well number and the well was constructed AFTER January 1, 1975, contact your well contractor. If no unique well number is available, please indicate the depth and year of construction for each well.

73. WELL TYPE: Use one of the following terms to describe the well type.

74. WATER WELL: A water well is any type of well used to extract groundwater for private or public use.

75. Examples of water wells are: domestic wells, drive-point wells, dug wells, remedial wells, and municipal wells.

77. IRRIGATION WELL: An irrigation well is a well used to irrigate agricultural lands. These are typically large-diameter wells connected to a large pressure distribution system.

79. MONITORING WELL: A monitoring well is a well used to monitor groundwater contamination. The well is typically used to access groundwater for the extraction of samples.

81. DEWATERING WELL: A dewatering well is a well used to lower groundwater levels to allow for construction or use of underground spaces.

83. INDUSTRIAL/COMMERCIAL WELL: An industrial/commercial well is a nonpotable well used to extract groundwater for any nonpotable use, including groundwater thermal exchange wells (heat pumps and heat loops).

DISCLOSURE STATEMENT: WELL

- 87. **WELL USE STATUS:** Indicate the use status of each well. CHECK ONLY ONE (1) BOX PER WELL.
- 88. **IN USE:** A well is "in use" if the well is operated on a daily, regular, or seasonal basis. A well in use includes
- 89. a well that operates for the purpose of irrigation, fire protection, or emergency pumping.
- 90. **NOT IN USE:** A well is "not in use" if the well does not meet the definition of "in use" above and has not
- 91. been sealed by a licensed well contractor.
- 92. **SEALED:** A well is "sealed" if a licensed contractor has completely filled a well by pumping grout material
- 93. throughout the entire bore hole after removal of any obstructions from the well. A well is "capped" if it has
- 94. a metal or plastic cap or cover which is threaded, bolted or welded into the top of the well to prevent entry
- 95. into the well. A "capped" well is not a "sealed" well.
- 96. If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing
- 97. contractor, check the well status as "not in use."
- 98. If you have any questions, please contact the Minnesota Department of Health, Well Management Section,
- 99. at (651) 201-4587 (metropolitan Minneapolis–St. Paul) or 1-800-383-9808 (greater Minnesota).

100. **SELLER'S STATEMENT:** *(To be signed at time of listing.)*

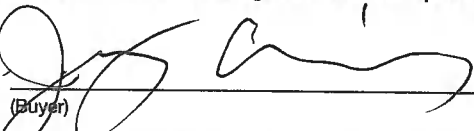
- 101. Seller(s) hereby states that the facts as stated above are true and accurate and authorizes any licensee(s) representing
- 102. or assisting any party(ies) in this transaction to provide a copy of this Disclosure Statement to any person or entity
- 103. in connection with any actual or anticipated sale of the Property. A seller may provide this Disclosure Statement to
- 104. a real estate licensee representing or assisting a prospective buyer. The Disclosure Statement provided to the real
- 105. estate licensee representing or assisting a prospective buyer is considered to have been provided to the prospective
- 106. buyer. If this Disclosure Statement is provided to the real estate licensee representing or assisting the prospective
- 107. buyer, the real estate licensee must provide a copy to the prospective buyer.
- 108. **Seller is obligated to continue to notify Buyer in writing of any facts that differ from the facts disclosed here**
- 109. **(new or changed) of which Seller is aware that could adversely and significantly affect the Buyer's use or**
- 110. **enjoyment of the Property or any intended use of the Property that occur up to the time of closing. To disclose**
- 111. **new or changed facts, please use the Amendment to Disclosure Statement form.**

112.  _____ (Date) _____ (Date)

(Seller) (Date) (Seller) (Date)

113. **BUYER'S ACKNOWLEDGEMENT:** *(To be signed at time of purchase agreement.)*

- 114. I/We, the Buyer(s) of the Property, acknowledge receipt of this *Disclosure Statement: Well and Disclosure Statement:*
- 115. *Location Map* and agree that no representations regarding facts have been made other than those made above.

116.  _____ (Date) _____ (Date)

(Buyer) (Date) (Buyer) (Date)

- 117. **LISTING BROKER AND LICENSEES MAKE NO REPRESENTATIONS HERE AND ARE**
- 118. **NOT RESPONSIBLE FOR ANY CONDITIONS EXISTING ON THE PROPERTY.**