



**SELLER'S REAL PROPERTY DISCLOSURE STATEMENT**  
**Condominium/Co-op/PUD and other Homeowner Organizations**  
**Hawaii Association of Realtors® Standard Form**  
**Revised 6/04 For Release 5/04A**



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**Information Obtained from Public Records**  
**(May Be Completed by Listing Broker)**

Seller(s) Name(s) (All on Title): \_\_\_\_\_  
 Property Reference: \_\_\_\_\_  
 Tax Map Key: Div. \_\_\_\_\_/Zone \_\_\_\_\_/Sec. \_\_\_\_\_/Plat \_\_\_\_\_/Parcel \_\_\_\_\_/CPR \_\_\_\_\_ (if applicable).  
 Public Report # \_\_\_\_\_ Final Report Date \_\_\_\_\_ [ ] FS [ ] LH (Disclosure to be Provided)  
 Current Legal Name of Project: \_\_\_\_\_  
 Land Area: \_\_\_\_\_ # of Units in Complex \_\_\_\_\_  
 # Floors in Your Building \_\_\_\_\_ # of Elevators in Your Building \_\_\_\_\_  
 Construction: Interior Walls \_\_\_\_\_ Exterior Walls \_\_\_\_\_  
 Name & Address of Management Company: \_\_\_\_\_  
 \_\_\_\_\_  
 Managing Agent: \_\_\_\_\_ Telephone # \_\_\_\_\_  
 Broker/Salesperson: \_\_\_\_\_ Company: \_\_\_\_\_

**Purpose of Disclosure Statement:** Under Hawaii law, a Seller is obligated to fully and accurately disclose in writing to a Buyer any fact, defect or condition, past or present, that would be expected to measurably affect the value of the Property to a reasonable person. This statement is intended to assist Seller in organizing the facts to be presented to Buyer and to provide Buyer with notice concerning the condition of Property and to assist Buyer in evaluating Property. Seller's agent, Buyer and Buyer's agent may rely on Seller's answers. It is important that Seller exercise due care in preparing responses and that responses are made in good faith, are truthful and complete to the best of Seller's knowledge. **THIS DISCLOSURE STATEMENT IS NOT A WARRANTY OF ANY KIND BY SELLER OR BY ANY AGENT REPRESENTING SELLER OF PROPERTY. THIS STATEMENT IS NOT A SUBSTITUTE FOR ANY EXPERT INSPECTION, PROFESSIONAL ADVICE, OR WARRANTY THAT BUYER MAY WISH TO OBTAIN.**

BUYERS ARE ADVISED TO OBTAIN BUYER'S OWN PUBLIC RECORDS, PROFESSIONAL ADVICE AND/OR HAVE AN EXPERT INSPECT PROPERTY. SELLER MAY WISH TO OBTAIN PROFESSIONAL ADVICE AND/OR HAVE AN EXPERT INSPECT PROPERTY.

**MUST be Completed by Seller Only**

**Seller's Statement:** This is a statement concerning information relating to the condition of Property that: (i) are within the knowledge or control of Seller; (ii) can be observed from visible, accessible areas; or (iii) which are required by Section 508D-15 of the Hawaii Revised Statutes. Seller may be ignorant of problems affecting Property, and Buyer should take care to protect Buyer's own interests by conducting thorough inspections and obtaining expert help in evaluating Property. Unless Buyer has been otherwise advised, Seller has not conducted any inspection of generally inaccessible areas of Property. There may be material facts of which Seller is not aware which qualified experts may be able to discover or time may reveal. The representations made below are made by Seller and are not the representations of Seller's agent. This form and the disclosures made by Seller are provided exclusively to Buyers involved in this transaction only and do not apply to any subsequent sales **not** involving this Seller. Seller has [ ] has not [ ] seen Property. Period of ownership from \_\_\_\_\_ to \_\_\_\_\_.

**Instruction to Seller:** (1) Answer **ALL** questions. (2) Identify and clearly explain any material facts concerning Property that are known to you. (3) Attach additional pages with your signature if additional space is needed. (4) Complete this form yourself. (5) Complete a separate form for each separate structure. (6) NTMK means NOT TO MY KNOWLEDGE. (7) If the item does not apply to Property, line it out.

Seller has [ ] has not [ ] held a position in the Association of Owners Board of Directors or standing committees.  
 [ ] Attachment – Property Information Form, (RR105c).

\_\_\_\_\_  
 BUYER'S INITIALS & DATE

\_\_\_\_\_  
 SELLER'S INITIALS & DATE

Property Reference: \_\_\_\_\_



**MUST BE COMPLETED BY SELLER ONLY**

**A. GENERAL PROPERTY INFORMATION**

Current Monthly Maintenance Fee: \$ \_\_\_\_\_ (precise amount)

Maintenance Fee includes: \_\_\_\_\_

How many parking stalls are included in the sale of this apartment? \_\_\_\_\_

Stall Designation Numbers: \_\_\_\_\_  
 Tandem                       Covered                       Open                       Unassigned

Stall Designation Numbers: \_\_\_\_\_  
 Tandem                       Covered                       Open                       Unassigned

Stall Designation Numbers: \_\_\_\_\_  
 Tandem                       Covered                       Open                       Unassigned

**\*\*If answer is "yes", using the SAME number below, describe in the space provided.\*\***

- | Yes                      | No                       | NTMK                     |      |  |
|--------------------------|--------------------------|--------------------------|------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (1)  | Does any other party have an unrecorded interest in this apartment and/or say in its disposition?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (2)  | Are there any lawsuits or foreclosure actions affecting your apartment?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (3)  | Do you have assigned and/or deeded storage space outside of your apartment?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (4)  | Were additions, modifications, and/or alterations made to your apartment without obtaining association approval?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (5)  | Were additions, modifications, and/or alterations made to your apartment without building permits?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (6)  | Were additions, modifications, and/or alterations made to your apartment without a licensed contractor?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (7)  | Is your apartment currently rented?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (8)  | Has a homicide, felony, or suicide occurred at the project or in the apartment?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (9)  | Are pets allowed? Note: This does not apply to certified guide, signal, or service dogs or other animals allowed under HUD regulations.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (10) | Has your Association notified you of future maintenance fee increases, special assessments, and/or association loans?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (11) | Are there substances, materials or products which may be an environmental hazard such as, but not limited to, asbestos, formaldehyde, radon gas, or lead based paint within your apartment?            |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (12) | Is your apartment exposed to recurring excessive noise?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (13) | Is the project located in an aircraft path and/or experiences regular aircraft noise?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (14) | Is the project subject to excessive air pollution? (For example, such things as "VOG".)  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (15) | Do you have a functioning smoke alarm?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (16) | Is your apartment sprinklered for fire protection?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (17) | Do you have, or have you had, any live active termite infestation in your apartment?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (18) | Do you have any leaks or water damage in your apartment?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (19) | Has there been any leakage or water penetration from apartments above or adjacent to your apartment?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (20) | Are there, or have there been, any visible signs of mold, mildew and/or fungus in or about this Property?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (21) | Is the project serviced by a private sewer system?   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (22) | Do any of the sinks, tubs or basins have rubber stoppers?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (23) | Have you had any pest problems within the last 12 months (i.e. roaches, fleas/ticks, ants, rats, etc.)?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (24) | Are there any nonconforming uses or restrictions on rebuilding?  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (25) | Is your apartment located within the boundaries of the Air Installation Compatibility Use Zone of any Air Force, Army, Navy, or Marine Corps airport as officially designated by military authorities? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (26) | Is your apartment located in a Flood Hazard Zone and/or in a tsunami inundation area?  |

Number of Question answered "YES" and Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

BUYER'S INITIALS & DATE

SELLER'S INITIALS & DATE

Property Reference: \_\_\_\_\_



