

# HOPKINS TRUTH IN SALE OF HOUSING DISCLOSURE REPORT

A

Notice – Read Entire Report Carefully

This is not a Buyers Inspection!

Page 1 of 4

Address Of Evaluated Dwelling:

Owner Name:

Home

Owner Address:

Work

(City, State, ZIP)

Realtor/Contact:

Ph

Fax

I declare to the best of my knowledge the following information for this property regarding any sewer backup or any evidence of chronic water seepage; any abandoned unused or uncapped well; or any discharge of storm water, ground water, roof runoff, yard drainage, foundation drains or sump pumps into the sanitary sewer: None YES, COMMENTS:

Signature of Owner (Disclosure Report Not Valid Without Signature)

Date:

\*\*\*\*\* SEE ATTACHED PAGES FOR IMPORTANT CONSUMER INFORMATION \*\*\*\*\*

Number of Dwelling Units: 1 Check if: Townhouse  or Condo

Present Zoning District:

Present Occupancy: Conforming  Nonconforming

Reason for Nonconforming Status: not applicable

Note: If the occupancy is indicated as Nonconforming, the owner shall provide the buyer, prior to closing, settlement, or transfer of ownership, a written and signed verification as to the zoning status by the City Zoning Administrator.

Housing Orders:  NO orders  YES housing orders pending from Hopkins Inspections Division.

This property:  IS NOT condemned  IS condemned (reason):

1. This report offers a limited overview of building components and fixtures by the evaluator and is not technically extensive. Prospective buyers may want to seek additional opinions from various experts in the inspections field prior to purchase. This report is not a warranty or guarantee, expressed or implied, by the City of Hopkins or by the evaluator or of any building component or fixture.
2. This report is not a code compliance inspection. The owner, owner's agent and/or buyer must repair all items marked Repair/Replace. All required Repair/Replace items are enforceable by Hopkins Ordinance Section 406. The Inspections Division will not use all other items as a basis for enforcing Hopkins ordinances.
3. The ordinance requires and places the responsibility on the seller or agent to make sure that this report is publicly displayed on the premises when the house is shown to prospective buyers. Also, the seller or agent must give a copy of this report to the buyer prior to the signing of a Purchase Agreement.
4. This report covers only those items listed on the form. The evaluator is not required to ignite the heating plant, use a ladder to observe the condition of the roofing, evaluate inaccessible or concealed areas or disassemble items. This report does not address formaldehyde, lead paint, any airborne gasses (including radon), asbestos, wood stoves or fireplaces (except for visible venting and clearances), or air conditioners. Gas inserts in fireplaces WILL be evaluated.
5. This report is not an FHA, VA or Section 8 inspection. It is not an appraisal.
6. This report is valid for one year from the date of issue and only for the owner named on the report. It is required for all single family homes, duplexes, triplexes, fourplexes, townhouses, or condominium offered for sale.
7. Any **questions** regarding this report should be directed to the **evaluator** whose name and phone number appear below. Any **complaints** regarding this report should be directed to the **Program Administrator**, Truth in Housing at (952) 548-6323, Hopkins Inspection Division, 1010 1<sup>st</sup> Street South, Hopkins, MN 55343.
8. If the buyer intends to rent out any portion of this property a rental housing license is required by City of Hopkins Ordinance Section 407 prior to rental. Please contact the Secretary of the Inspections Division at (952) 548-6320.

I hereby certify that this report is made in compliance with the Hopkins Code of Ordinances, Section 406, and that I utilized care and diligence reasonable and ordinary for one meeting the Certification Standards. The report covers only those problems listed and reasonably visible at the time of my evaluation and does not warrant future useful life of any house component or fixture. I have included all required information pages with this report

Print Name: Doug Hastings of Cities' Inspection Service, Inc

Evaluation Date:

Signed: Doug Hastings Telephone Number: (952) 892-0490

THERE ARE REQUIRED REPAIR/REPLACE ITEMS NOTED IN THIS REPORT: YES  NO

If "RR" items noted, permits may be required, see attached "Most Common Repair Items. Hopkins TIHpageA.0605

**EVALUATION CODES:** **M:** Meets Minimum Requirements **B:** Below Minimum Requirements **C:** Comments  
**N/A:** Not Applicable/ Does Not Apply **SC:** Suggested Correction **RR:** Repair/Replace **Y:** =Yes **N:** =No

Items marked "**RR**" indicate that the item must be repaired or replaced and a re-inspection must be made by the City of Hopkins Inspector within one year of the evaluation report.

Any item marked "**B**", "**C**", "**SC**" or "**RR**" must have a written comment about the item. "**Y**" or "**N**" must have comments when starred (\*). Read "COMMENTS" COLUMN CAREFULLY. Each Item May Have More Than One Code.

Any item with the words "**SEE HANDOUT**" in the comment column refers to the "**MOST COMMON REPAIRS**" handout (rev2003) that should be attached to this report. Contact the evaluator if it is not attached.

<u>Item List</u>	<u>Required</u>	<u>RR</u>	<u>Item Number / Code / Comments</u>
1. Basement stairs	<u>M</u>	<u>1</u>	<u>1</u>
2. Basement floor	<u>M</u>	<u>2</u>	<u>2</u>
3. Foundation walls	<u>M</u>	<u>3</u>	<u>3</u>
4. Evidence of Dampness or staining			
a) on basement walls (Y* or N)	<u>Y</u>	<u>4a</u>	
b) on basement floor (Y* or N)	<u>Y</u>	<u>4b</u>	
c) See owner's statement on Page A			
5. Basement sleeping rooms (Y* or N) (If Yes, see page "C")	<u>N</u>	<u>5</u>	
6. First floor, floor system	<u>M</u>	<u>6</u>	<u>6</u>
7. Columns & beams	<u>M</u>	<u>7</u>	<u>7</u>
8. Floor drains	<u>M</u>	<u>8</u>	<u>8</u>
9. Waste & vent piping	<u>M</u>	<u>9</u>	<u>9</u>
10. Water piping	<u>M</u>	<u>10</u>	<u>10</u>
11. Gas piping	<u>M</u>	<u>11</u>	<u>11</u>
12. Water heater	<u>M</u>	<u>12</u>	<u>12</u>
13. Water heater venting	<u>M</u>	<u>13</u>	<u>13</u>
14. Basement plumbing fixtures	<u>M</u>	<u>14</u>	<u>14</u>
15. Copper water line visible on the street side of water meter (Y or N*) <i>Evaluator assumes no responsibility for copper water line being continuous to street.</i>	<u>Y</u>	<u>15</u>	
16. Electrical service installation / size at panel Amps: <u>100</u> Volts: <u>120/240</u> 60 amp suitable for one major 220 volt appliance. <i>Evaluator is not required to disassemble items or evaluate inaccessible areas.</i>	<u>M</u>	<u>16</u>	<u>16</u>
17. Smoke detectors properly located	<u>M</u>	<u>17</u>	<u>17</u>
a) Operable	<u>M</u>	<u>17a</u>	<u>17a</u>
18. Separate 20 amp kitchen circuit indexed at service panel: (Y or N*)	<u>N</u>	<u>18</u>	
19. Basement electrical outlets/fixtures	<u>M</u>	<u>19</u>	<u>19</u>
20. Electrical outlet for laundry indexed at service panel: (Y or N*)	<u>N</u>	<u>20</u>	
21. Heating plant installation Type: <u>Gas</u> Fuel: <u>Air</u> <i>Heat exchanger evaluated only if readily visible. Evaluator is not required to light the pilot.</i>	<u>M</u>	<u>21</u>	<u>21</u>
22. Heating plant viewed in operation (Y or N*)	<u>N</u>	<u>22</u>	<u>22</u>
23. Heating plant combustion venting	<u>M</u>	<u>23</u>	<u>23</u>
24. Auxiliary/additional heating units (Y or N)	<u>N</u>	<u>24</u>	
a) Installation	<u>N/A</u>	<u>24a</u>	<u>24a</u>
b) Viewed in operation (Y or N*)	<u>NA</u>	<u>24b</u>	<u>24b</u>
c) Combustion venting	<u>N/A</u>	<u>24c</u>	<u>24c</u>
d) Location(s) (include attic or garage heater)	<u>N/A</u>	<u>24d</u>	<u>24d</u>

Evaluator: Doug Hastings

Date:

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	<u>Required</u>	
	<u>RR</u>	<u>Item Number / Code / Comments</u>
<b>KITCHEN</b>		
25. Walls & ceiling components	<u>M</u> 25	_____25
26. Evidence of dampness/staining (Y* or N)	<u>Y</u> 26	
27. Floor condition	<u>M</u> 27	_____27
28. Window size & open able area	<u>M</u> 28	
29. Window & door condition / Mech. Vent.	<u>M</u> 29	_____29
30. Electrical outlets & fixtures	<u>M</u> 30	_____30
31. Plumbing fixtures	<u>M</u> 31	_____31
32. Water flow	<u>M</u> 32	_____32
33. Gas piping	<u>M</u> 33	_____33
<b>DINING/LIVING ROOM</b>		
34. Walls & ceiling components	<u>M</u> 34	_____34
35. Evidence of dampness/staining (Y* or N)	<u>Y</u> 35	
36. Floor area & ceiling height	<u>M</u> 36	
37. Floor condition	<u>M</u> 37	_____37
38. Window size & open able area	<u>M</u> 38	
39. Window & door condition	<u>M</u> 39	_____39
40. Electrical outlets & fixtures	<u>M</u> 40	_____40
<b>BATHROOM</b>		
41. Walls & ceiling components	<u>M</u> 41	_____41
42. Evidence of dampness/staining (Y* or N)	<u>Y</u> 42	
43. Floor condition	<u>M</u> 43	_____43
44. Window size & open able area/Mech. Vent.	<u>M</u> 44	
45. Window & door condition	<u>M</u> 45	_____45
46. Electrical outlets & fixtures	<u>M</u> 46	_____46
47. Plumbing fixtures	<u>M</u> 47	_____47
48. Water flow	<u>M</u> 48	_____48
<b>HALLWAYS/STAIRWELLS</b>		
49. Walls & ceiling components	<u>M</u> 49	_____49
50. Evidence of dampness/staining (Y* or N)	<u>Y</u> 50	
51. Floor condition	<u>M</u> 51	_____51
52. Window & door condition	<u>M</u> 52	_____52
53. Electrical outlets & fixtures	<u>M</u> 53	_____53
54. Stairs (upper floors)	<u>M</u> 54	_____54
55. Smoke detectors properly located	<u>M</u> 55	_____55
a) Operable	<u>M</u> 55a	_____55a
<b>SLEEPING ROOMS</b>		
56. Number of sleeping rooms (include basement)	<u>3</u> 56	
57. Walls & ceiling components	<u>M</u> 57	_____57
58. Evidence of dampness/staining (Y* or N)	<u>Y</u> 58	
59. Floor area & ceiling height	<u>M</u> 59	
60. Floor condition	<u>M</u> 60	_____60
61. Window size & open able area	<u>M</u> 61	
62. Window & door condition	<u>M</u> 62	_____62
63. Electrical outlets & fixtures	<u>M</u> 63	_____63

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<b>PORCH/SUNROOM/OTHER ROOM</b>	<u>Required</u> <u>RR</u>	<u>Item Number / Code / Comments</u>
64. Walls & ceiling components	M 64	64
65. Evidence of dampness/staining (Y* or N)	Y 65	
66. Floor condition	M 66	66
67. Window & door condition	M 67	67
68. Electrical outlets & fixtures	M 68	68

**ATTIC SPACE** (if visible)

69. Roof boards & rafters / Mech. Vent.	M 69	69
a) Attic insulation		
TYPE(s): _____ DEPTH: _____ inches		
70. Evidence of dampness/staining (Y* or N)	Y 70	
71. Electrical outlets & fixtures	M 71	71

**EXTERIOR** (Items visible at time of evaluation only)

72. Foundation	M 72	72
73. Basement windows	M 73	73
74. Drainage (grade)	M 74	
75. Exterior walls	M 75	75
76. Doors (frames/storms/screens/deadbolt locks)	M 76	76
77. Windows (frames/storms/screens)	M 77	77
78. Stoops	M 78	78
79. Cornice & trim	M 79	
80. Roof covering & flashing	M 80	
81. Chimney	M 81	81
82. Electrical outlets/fixtures	M 82	82
83. Two-family dwelling egress	M 83	

**OPEN/UNHEATED TYPE PORCHES**

84. Floor	M 84	84
85. Wall	M 85	85
86. Roof	M 86	86
87. Doors/screens/windows	M 87	87
88. Electrical outlets/fixtures	M 88	88

**GARAGE / Accessory building** (Automatic garage doors that don't reverse upon striking an object pose a serious deficiency and should be corrected immediately.)

89. Roof structure & covering	M 89	89
90. Wall structure & covering	M 90	90
91. Garage door	M 91	
a) Automatic garage door opener	M 91a	
92. Electrical outlets & fixtures	M 92	92

**MISCELLANEOUS**

93. Clutter	M 93	93
94. Sanitation	M 94	94
95. Vermin	M 95	95

**LICENSED CONTRACTOR REQUIRED TO REPAIR OR EVALUATE (safety check or certify)**

Heating System: Yes  No  Water Heater: Yes  No  Plumbing System: Yes  No   
 Electrical System: Yes  No  Structural System: Yes  No  Other: Yes

**EVALUATOR TO RETURN TO COMPLETE THE EVALUATION DUE TO: utility shut-off, heating plant not on, locked areas, etc.** Yes  No  (The evaluator will charge.)

Evaluator: Doug Hastings

Date:

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