



**NEW MEXICO ASSOCIATION OF REALTORS®  
SELLER'S PROPERTY DISCLOSURE – RESIDENTIAL – 2020**

**THIS DISCLOSURE SHOULD BE COMPLETED BY THE SELLER,  
NOT THE BROKER**

Seller states that the information contained in this Disclosure is correct to Seller's ACTUAL KNOWLEDGE as of the date set forth below. Any changes to the information provided in this Disclosure of which seller becomes aware will be disclosed by Seller to Buyer promptly after discovery. If the Property is part of a Common Interest Community, this Disclosure is limited to the Property or Unit itself, except as stated in Section L. Seller hereby authorizes Broker to deliver a copy of this Disclosure to any and all prospective buyers.

**NOTE: If an item is not present at the Property, or if an item is not to be included in the sale, mark the "N/A" column. The Purchase Agreement, not this Disclosure form, determines whether an item is included in or excluded from the sale.**

February 7, 2021

Date \_\_\_\_\_  
 \_\_\_\_\_ **2 Lees Rd.** \_\_\_\_\_ **Placitas** \_\_\_\_\_ **NM** **87043**  
 Property Address \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_ **Bailey Revocable Trust** \_\_\_\_\_  
 Seller's Name (Print) \_\_\_\_\_ Seller's Name (Print) \_\_\_\_\_

**OCCUPANCY:** Has the Seller ever occupied the Property?  Yes  No If "Yes", provide the beginning and ending dates of occupancy: August 1, 2008 Present  
 Beginning Date \_\_\_\_\_ Ending Date \_\_\_\_\_

A	STRUCTURAL CONDITIONS Do any of the following conditions currently exist or is Seller aware of them ever existing:	YES	NO	DO NOT KNOW	IF "YES", EXPLAIN
1	Structural problems		X		
2	Moisture and/or water problems		X		
3	History of wood infestation, insects, pests, birds or tree root problems affecting the structure		X		
4	Damage due to hail, wind, fire or flood		X		
5	Cracks, heaving or settling problems		X		
6	Exterior wall or window problems		X		
7	Building code, city or county violations		X		

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<b>A</b>	<b>STRUCTURAL CONDITIONS – CON'T</b>
<b>8</b>	Were all necessary permits, approvals and inspections obtained for all construction, repairs, and improvements? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Do Not Know If “no”, explain _____
<b>9</b>	House is built on: <input checked="" type="checkbox"/> Slab <input type="checkbox"/> Crawlspace <input type="checkbox"/> Basement
<b>10</b>	Type of Construction: _____ Frame
<b>11</b>	Type of Exterior: <input type="checkbox"/> Synthetic (EIFS) <input checked="" type="checkbox"/> Synthetic <input type="checkbox"/> Concrete <input type="checkbox"/> Do Not Know <input type="checkbox"/> Other _____ Any current or past problems: <input type="checkbox"/> Yes <input type="checkbox"/> No If “yes”, explain _____
<b>12</b>	Type of floor under carpets, linoleum, etc.: _____ Concrete
<b>13</b>	Any additions or alterations made: _____ No
<b>Additional Comments:</b> _____ _____ _____	

**NOTE: If an item is not present at the Property, mark the “N/A” column.**

<b>B</b>	<b>ROOF</b>	<b>N/A</b>	<b>YES</b>	<b>NO</b>	<b>DO NOT KNOW</b>	<b>IF “YES”, EXPLAIN</b>
	Do any of the following conditions <b>currently exist or is Seller aware of them ever existing:</b>					
<b>1</b>	Roof problems			X		
<b>2</b>	Roof leak: Past		X			Minor Leaks at Carales repaired & complete roof maintenance performed - March 2019
<b>3</b>	Roof leak: Present			X		
<b>4</b>	Damage to roof: Past			X		
<b>5</b>	Damage to roof: Present			X		
<b>6</b>	Skylight problems			X		
<b>7</b>	Gutter or downspout problems	X				
<b>8</b>	Is roof under warranty? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Do Not Know If “yes”, when does warranty expire? _____ If “yes”, is warranty transferable? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do Not Know If “yes”, has roof work been performed while under current roof warranty <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Do Not Know If “yes”, describe work done: _____					
<b>9</b>	Roof Material: _____ Age _____ Roof Material: _____ Age _____					
<b>Additional Comments:</b> _____ _____ _____						



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C	APPLIANCES	N/A	IN WORKING CONDITION?			AGE IF APPLIES AND IS KNOWN	COMMENTS
			YES	NO	DO NOT KNOW		
1	Built-in vacuum system & accessories	X					
2	Clothes dryer: <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Vented Outside	X					
3	Type of clothes dryer hook-up available: <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric <input type="checkbox"/> None <input type="checkbox"/> Do Not Know <input type="checkbox"/> Other _____						
4	Clothes washer	X					
5	Dishwasher		X				
6	Disposal		X				
7	Freezer	X					
8	Gas grill		X				
9	Range Hood		X				
10	Microwave oven		X				Minor Keypad Issue
11	Oven		X				
12	Type of oven hookup available: <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> None <input type="checkbox"/> Do Not Know <input type="checkbox"/> Other _____						
13	Range <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane		X				
14	Refrigerator		X				
15	Refrigerator Water Line		X				
16	Trash Compactor	X					
<b>Additional Comments:</b> _____							
_____							
_____							

Buyer  Seller



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D	ELECTRICAL & TELECOMMUNICATIONS	N/A	IN WORKING CONDITION?			AGE IF APPLIES AND IS KNOWN	COMMENTS
			YES	NO	DO NOT KNOW		
1	Security system: <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased <input type="checkbox"/> Transferable		X				
2	Smoke/fire detectors: <input checked="" type="checkbox"/> Battery <input checked="" type="checkbox"/> Hardwired		X				
3	Carbon Monoxide Alarm: <input checked="" type="checkbox"/> Battery <input checked="" type="checkbox"/> Hardwired		X				
4	Light fixtures		X				
5	Switches & outlets		X				
6	Aluminum wiring: <input type="checkbox"/> Pig-tailing _____	X					
7	Electrical: <input checked="" type="checkbox"/> Amps <u>200</u>		X				
8	Telecommunications (T-1, fiber, cable, satellite, DSL) <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Leased		X				
9	Satellite System or DSS Dish <input type="checkbox"/> Owned <input type="checkbox"/> Leased	X					
10	Inside telephone wiring & blocks/jacks		X				
11	Ceiling fans		X				
12	Garage Door <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Manual If electric, number of garage door remote control(s) <u>3</u>		X				2 Openers
13	Intercom/doorbell		X				2 Ring Doorbells
14	In-wall / Built-in speakers		X				
15	220 volt service		X				
16	Landscape lighting	X					Battery Solar Lights
<b>Additional Comments:</b> _____							
_____							
_____							

Buyer  Seller

