

Yes	No	NR
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13. Commercial or industrial noxious fumes, odors, noises, etc. on or near Property.....
 If yes, please describe: _____

B. Legal/Land Use Aspects

1. Current or past title insurance policy or title search.....
 2. Copy of deed(s) for property.....
 3. Government administered programs or allotments.....
 4. Rollback or other tax deferral recaptures upon sale.....
 5. Litigation or estate proceeding affecting ownership or boundaries.....
 6. Notices from governmental or quasi-governmental authorities related to the property..
 7. Private use restrictions or conditions, protective covenants, or HOA.....
 If yes, please describe: _____
 8. Recent work by persons entitled to file lien claims.....
 If yes, have all such persons been paid in full
 If not paid in full, provide lien agent name and project number: _____
 9. Jurisdictional government land use authority:
 County: _____ City: _____
 10. Current zoning: _____
 11. Fees or leases for use of any system or item on property
 12. Location within a government designated disaster evacuation zone (e.g.,
 hurricane, nuclear facility, hazardous chemical facility, hazardous waste facility).....
 13. Access (legal and physical) other than by direct frontage on a public road
 Access via easement.....
 Access via private road
 If yes, is there a private road maintenance agreement? yes no
 14. Solar panel(s), windmill(s), cell tower(s).....
 If yes, please describe: _____

C. Survey/Boundary Aspects

1. Current or past survey/plat or topographic drawing available.....
 2. Approximate acreage: _____
 3. Wooded Acreage _____; Cleared Acreage _____
 4. Encroachments.....
 5. Public or private use paths or roadways rights of way/easement(s).....
 Financial or maintenance obligations related to same
 6. Communication, power, or other utility rights of way/easements
 7. Railroad or other transportation rights of way/easements.....
 8. Conservation easement
 9. Property Setbacks.....
 If yes, describe: _____
 10. Riparian Buffers (i.e., stream buffers, conservation districts, etc.).....
 11. Septic Easements and Repair Fields
 12. Any Proposed Easements Affecting Property.....
 13. Beach Access Easement, Boat Access Easement, Docking Permitted.....
 If yes, please describe: _____

D. Agricultural, Timber, Mineral Aspects

	Yes	No	NR
1. Agricultural Status (e.g., forestry deferral)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Licenses, leases, allotments, or usage permits (crops, hunting, water, timber, etc.)..... If yes, describe in detail: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Forfeiture, severance, or transfer of rights (mineral, oil, gas, timber, development, etc.) If yes, describe in detail: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Farming on Property: <input type="checkbox"/> owner or <input type="checkbox"/> tenant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Presence of vegetative disease or insect infestation.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Timber cruises or other timber related reports.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Timber harvest within past 25 years	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, monitored by Registered Forester?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If replanted, what species: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Years planted: _____			
8. Harvest impact (other than timber)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			

E. Environmental Aspects

1. Current or past Phase I, Phase II or Phase III Environmental Site Assessment(s).....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Underground or above ground storage tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			
3. Abandoned or junk motor vehicles or equipment of any kind.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Past illegal uses of property (e.g., methamphetamine manufacture or use).....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Federal or State listed or protected species present.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe plants and/or animals: _____			
6. Government sponsored clean-up of the property	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Groundwater, surface water, or well water contamination <input type="checkbox"/> Current <input type="checkbox"/> Previous ...	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Previous commercial or industrial uses.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Wetlands, streams, or other water features	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Permits or certifications related to Wetlands	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Conservation/stream restoration.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Coastal concern (tidal waters, unbuildable land, flood zone, CAMA, Army Corp., etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			
11. The use or presence on the property, either stored or buried, above or below ground, of:			
i. Asbestos, Benzene, Methane, Pesticides, Radioactive Material	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe in detail: _____			
ii. Other fuel/chemical.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
iii. Paint <input type="checkbox"/> Lead based paint <input type="checkbox"/> Other paint/solvents	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
iv. Agricultural chemical storage	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

F. Utilities

Check all currently available on the Property and indicate the provider.

- Water (describe): _____
- Sewer (describe): _____
- Gas (describe): _____
- Electricity (describe): _____
- Cable (describe): _____

