



WHEN IN DOUBT - DISCLOSE!



Residential lease owners have certain obligations pursuant to the Landlord and Tenant Act and other laws. There are also some very specific Owner disclosures that you are required by statute to make. For example, Owners are required to disclose information on lead based paint in homes built prior to 1978 and Owners must provide a state approved Pool Safety Notice if the property includes a pool or spa.

If the tenant asks you about an aspect of the property, you should disclose the information, regardless of whether or not you consider the information material. However, an Owner does not generally have a legal obligation to correct defects in the property, as long as the defect: (1) does not render the property uninhabitable; (2) does not pose a real or potential threat to the tenant's health or safety; and (3) as long as the existing defects are disclosed. Any correction of the defects is a matter of contract negotiation between you and the tenant.

The Arizona Association of REALTORS® Residential Lease Owner's Property Disclosure Statement is designed to assist you in making these disclosures and to avoid inadvertent nondisclosures of material facts.

You should complete this form by answering all questions as truthfully and as thoroughly as possible. You may use the blank lines to explain any answers. If you do not have the personal knowledge to answer a question, it is important not to guess—use the blank lines to explain the situation.

The form is divided into five general sections:

- (1) Ownership and Property:** This section asks for general information about the property, such as location, ownership and occupancy. Any Owner, whether or not that Owner has actually lived in the property, should be able to answer most, if not all, of the questions in this section.
- (2) Building and Safety Information:** This section asks for information regarding the physical aspects of the property. You should disclose any present problems with the property. You are also asked specifically to disclose any knowledge of scorpions or other possible "pests" have ever been present on the property. Although many Owners will answer affirmatively to these questions, full disclosure is the best way to avoid complaints.
- (3) Utilities:** You are asked whether the property currently receives the listed utilities, and if so, to identify the provider. The water source and any known information about drinking water problems should also be disclosed.
- (4) Environmental Information:** A variety of environmental information is requested. In addition to questions regarding environmental hazards, you are asked to disclose any issues relating to soil settlement/expansion, drainage/grade, or erosion; noise from the surrounding area including airport and traffic noise; and any odors or other nuisances. As a result of recent lawsuits and potential health concerns, you are asked specifically if you are aware of any past or present mold growth on the property. Mold spores are everywhere and when mold spores drop in places where there is water damage or excessive moisture, or where there has been flooding, mold will grow. Thus, you are asked to disclose any conditions conducive to mold growth, such as past or present dampness/moisture, flooding, and water damage or water leaks of any kind.
- (5) Additional Information:** These blank lines provide space for you to provide any other important information concerning the property.

Please note: By law, Owners are not obligated to disclose that the property is or has been: (1) the site of a natural death, suicide, homicide, or any other crime classified as a felony; (2) owned or occupied by a person exposed to HIV, or diagnosed as having AIDS or any other disease not known to be transmitted through common occupancy of real estate; or (3) located in the vicinity of a sex offender. However, the law does not protect an Owner who makes an intentional misrepresentation. For example, if you are asked whether there has been a death on the property and you know that there was such a death, you should not answer "no" or "I don't know"; instead you should either answer truthfully or respond that you are not legally required to answer the question.



RESIDENTIAL LEASE OWNER'S PROPERTY DISCLOSURE STATEMENT *(To be completed by Owner)*



The pre-printed portion of this form has been drafted by the Arizona Association of REALTORS®. Any change in the pre-printed language of this form must be made in a prominent manner. No representations are made as to the legal validity, adequacy and/or effects of any provision, including tax consequences thereof. If you desire legal, tax or other professional advice, please consult your attorney, tax advisor or professional consultant.



MESSAGE TO THE OWNER:

The form is designed to assist you in making disclosures to the Tenant. If you know something important about the Property that is not addressed on the form, add that information to the form. Prospective Tenants may rely on the information you provide.

INSTRUCTIONS: (1) Complete this form yourself. (2) Answer all questions truthfully and as fully as possible. (3) Attach all available supporting documentation. (4) Use explanation lines as necessary. (5) If you do not have the personal knowledge to answer a question, use the explanation lines to explain. By signing below you acknowledge that the failure to disclose known material information about the Property may result in liability.

MESSAGE TO THE TENANT:

There are likely facts about the Property that the Owners do not know. Therefore, it is important that you take an active role in obtaining information about the Property. For more information on obtaining this information see the Buyer Advisory at <https://www.aaronline.com/manage-risk/buyer-advisory-3/>

INSTRUCTIONS: (1) Review this form and any attachments carefully. (2) Verify all important information. (3) Ask about any incomplete or inadequate responses. (4) Inquire about any concerns not addressed on the form. (5) Review all other applicable documents, such as CC&R's, and association rules and regulations. (6) Conduct inspections of the Property. (7) Investigate the surrounding area.

THE FOLLOWING ARE REPRESENTATIONS OF THE OWNER(S) AND ARE NOT VERIFIED BY THE BROKER(S) OR AGENT(S).

OWNERSHIP AND PROPERTY

- 1. As used herein, "Property" shall mean the real property and all fixtures and improvements thereon and appurtenances incidental thereto, plus fixtures and personal property described in the Lease.

3. **LEGAL OWNER(S) OF PROPERTY:** _____

4. **PROPERTY ADDRESS:** _____
(STREET ADDRESS) (CITY) (STATE) (ZIP)

5. Is the property located in a community defined by the fair housing laws as housing for older persons? Yes No

6. Explain: _____

7. Approximate year built: _____ . **If Property was built prior to 1978, Owner must furnish the Tenant with a lead-based**

paint disclosure form.

9. Are you current on: Mortgage Yes No Property tax Yes No HOA fees Yes No

YES NO

- 10. Are you aware if there are any association(s) governing this Property?
- 11. If yes, provide contact(s) information: Name: _____
- 12. Phone #: _____ Address: _____
- 13. If yes, are there any fees related to leasing the home? Explain _____
- 14. Are you aware of any public or private use paths or roadways on or across this Property?
- 15. Explain: _____
- 16. Are you aware of any violation(s) of any of the following? (If yes, check all that apply):
- 17. Zoning Building Codes Utility Service Sanitary health regulations
- 18. Covenants, Conditions, Restrictions (CC&R's) Other _____
- 19. Are you aware of any parking restrictions? If yes, please explain: _____
- 20. _____
- 21. How many parking spots are available for tenants? _____

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BUILDING AND SAFETY INFORMATION

STRUCTURAL:

22. ARE YOU AWARE OF ANY PRESENT:
- | | | |
|------------------------------|--------------------------|---|
| YES | NO | |
| 23. <input type="checkbox"/> | <input type="checkbox"/> | Roof leaks/problems? Explain: _____ |
| 24. <input type="checkbox"/> | <input type="checkbox"/> | Interior wall/ceiling/door/window/floor problems? Explain: _____ |
| 25. <input type="checkbox"/> | <input type="checkbox"/> | Cracks or settling involving the foundation, exterior walls or slab? Explain: _____ |
| 26. <input type="checkbox"/> | <input type="checkbox"/> | Chimney or fireplace problems, if applicable? Explain: _____ |
| 27. <input type="checkbox"/> | <input type="checkbox"/> | Damage to any structure on the Property by any of the following? (Check all that apply): |
| 28. | <input type="checkbox"/> | Flood <input type="checkbox"/> Fire <input type="checkbox"/> Wind <input type="checkbox"/> Water <input type="checkbox"/> Hail <input type="checkbox"/> Other _____ |
| 29. | | Explain: _____ |

HEATING, COOLING AND PLUMBING/SYSTEMS:

30. Heating: Type(s) _____ Cooling: Type(s) _____
- | | | |
|------------------------------|--------------------------|---|
| YES | NO | |
| 31. <input type="checkbox"/> | <input type="checkbox"/> | Are you aware of any present problems with the heating or cooling system(s)? |
| 32. | | Explain: _____ |
| 33. <input type="checkbox"/> | <input type="checkbox"/> | Are there any special instructions/filters/service requirements? |
| 34. | | Explain: _____ |
| 35. <input type="checkbox"/> | <input type="checkbox"/> | Are you aware of any present plumbing problems? |
| 36. | | Explain: _____ |
| 37. <input type="checkbox"/> | <input type="checkbox"/> | Are you aware of any present water pressure problems? |
| 38. | | Explain: _____ |
| 39. | | Type of water heater(s): <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Solar Approx. age(s) _____ |
| 40. <input type="checkbox"/> | <input type="checkbox"/> | Are you aware of any present water heater problems? |
| 41. | | Explain: _____ |
| 42. <input type="checkbox"/> | <input type="checkbox"/> | Is the entire Property connected to a sewer? (If yes, skip to line 47) |
| 43. <input type="checkbox"/> | <input type="checkbox"/> | Is the Property served by an On-Site Wastewater Treatment Facility ? (If no, skip to line 47) |
| 44. | | If yes, the Facility is: <input type="checkbox"/> Conventional septic system <input type="checkbox"/> Alternative system Type: _____ |
| 45. <input type="checkbox"/> | <input type="checkbox"/> | If the Facility is an alternative system, is it currently being serviced under a maintenance contract? |
| 46. | | If yes, name of contractor: _____ Phone #: _____ |
| 47. <input type="checkbox"/> | <input type="checkbox"/> | Does the Property contain any of the following systems? |
| 48. | | <input type="checkbox"/> landscape watering: If yes, type: <input type="checkbox"/> auto timer <input type="checkbox"/> manual <input type="checkbox"/> both |
| 49. | | <input type="checkbox"/> water treatment: If yes, check all that apply: <input type="checkbox"/> water filtration <input type="checkbox"/> reverse osmosis <input type="checkbox"/> water softener <input type="checkbox"/> Other |
| 50. | | <input type="checkbox"/> sump pump |
| 51. <input type="checkbox"/> | <input type="checkbox"/> | Are you aware of any present problems or special instructions with any of the systems mentioned above? |
| 52. | | Explain: _____ |
| 53. | | _____ |

SWIMMING POOL/SPA/HOT TUB/SAUNA/WATER FEATURE:

- | | | |
|------------------------------|--------------------------|--|
| YES | NO | |
| 54. <input type="checkbox"/> | <input type="checkbox"/> | Does the Property contain any of the following? (Check all that apply): |
| 55. | | <input type="checkbox"/> Swimming pool <input type="checkbox"/> Spa <input type="checkbox"/> Hot tub <input type="checkbox"/> Sauna <input type="checkbox"/> Water feature |
| 56. <input type="checkbox"/> | <input type="checkbox"/> | If yes, are either of the following heated? <input type="checkbox"/> Swimming pool <input type="checkbox"/> Spa |
| 57. | | If yes, type of heat: _____ |
| 58. <input type="checkbox"/> | <input type="checkbox"/> | Would the swimming pool comply with the applicable swimming pool enclosure/barrier requirements if children reside in or regularly visit the Property? |
| 59. | | Note: Owner must furnish Tenant with a Residential Pool Safety Notice prepared by the Arizona Department of Health Services. |
| 60. | | |
| 61. | | |
| 62. <input type="checkbox"/> | <input type="checkbox"/> | Are you aware of any present problems or special instructions relating to the swimming pool, spa, hot tub, sauna or water feature? Explain: _____ |
| 63. | | _____ |

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ELECTRICAL SYSTEMS:

- 64. YES NO Are you aware of any present problems with the electrical system?
65. YES NO Does the Property contain any of the following systems? (Check all that apply):
66. Security system: Monitored YES NO Other
67. Smoke/fire detection Fire suppression (sprinklers) Carbon monoxide detector
68. Alternate power systems: If yes, indicate type (Check all that apply):
69. Solar Wind Generator Other
70. YES NO Are you aware of any present problems or special instructions with any of the systems mentioned above?
71. Explain:

MISCELLANEOUS:

- 72. YES NO Are you aware of or have you observed any of the following on the Property? (Check all that apply):
73. Scorpions Rabid animals Bees Rodents Reptiles Termites/Other wood destroying organisms
74. Bed Bugs Other:
75. How often is the Property serviced or treated for pests, reptiles, insects or animals?
76. Name of service provider: Date of last service:
77. YES NO Are there any security bars or other obstructions to door or window openings?
78. YES NO Are you aware of any present problems with any built-in appliances?
79. YES NO Are there any leased propane tanks, equipment or other systems on the Property?
80. YES NO Are you aware of any problems or special instructions with any of the items listed above?
81. Explain:
82. YES NO Has the Premises ever been used as a "drop house" (i.e. used to facilitate the transport of persons that are not United States citizens, permanent resident aliens or otherwise lawfully in this state, for profit or commercial purpose)?
83.

UTILITIES

- 84. DOES THE PROPERTY CURRENTLY RECEIVE THE FOLLOWING SERVICES? PROVIDER NAME
85. YES NO Electricity:
86. YES NO Fuel: Natural gas Propane Oil
87. YES NO Cable:
88. YES NO Telephone:
89. YES NO Garbage Collection:
90. YES NO Fire:
91. YES NO Irrigation:
92. YES NO Water Source: Public Private water co. Private well Shared well Hauled water
93. If source is public, private water company, or hauled water:
94. YES NO Are you aware of any present drinking water problems?
95. Explain:

96. NOTICE TO TENANT: IF THE PROPERTY IS SERVED BY A WELL, PRIVATE WATER COMPANY OR A MUNICIPAL
97. WATER PROVIDER, THE ARIZONA DEPARTMENT OF WATER RESOURCES MAY NOT HAVE MADE A WATER SUPPLY
98. DETERMINATION. FOR MORE INFORMATION ABOUT WATER SUPPLY, CONTACT THE WATER PROVIDER.

ENVIRONMENTAL INFORMATION

- 99. YES NO Are you aware of any past or present issues or problems with any of the following on the Property? (Check all that apply):
100. Soil settlement/expansion Drainage/grade Erosion Fissures Dampness/moisture Other
101. YES NO Are you aware of any past or present issues or problems in close proximity to the Property related to any of the following?
102. (Check all that apply): Soil settlement/expansion Drainage/grade Erosion Fissures Other
103. NOTICE TO TENANT: THE ARIZONA DEPARTMENT OF REAL ESTATE PROVIDES EARTH FISSURE MAPS TO ANY MEMBER
104. OF THE PUBLIC IN PRINTED OR ELECTRONIC FORMAT UPON REQUEST AND ON ITS WEBSITE AT www.azre.gov.

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- YES** **NO**
105. Are you aware if the Property is located within any of the following? (Check all that apply):
106. Superfund/ WQARF/ CERCLA Wetlands area
107. Are you aware if the Property is subject to any present or proposed effects of any of the following? (Check all that apply):
108. Airport noise Traffic noise Rail line noise Neighborhood noise Landfill Odors Nuisances
109. Toxic waste disposal Sand/gravel operations Other: _____
110. Are you aware if any portion of the Property has ever been used as a "Clandestine drug laboratory" (manufacture of, or storage of, chemicals or equipment used in manufacturing methamphetamine, ecstasy or LSD)?
111. _____
112. Are you aware if the Property is located in the vicinity of an airport (military, public, or private)?
113. Are you aware of the presence of any of the following on the Property, past or present? (Check all that apply):
114. Asbestos Radon gas Lead-based paint Pesticides Underground storage tanks Fuel/chemical storage
115. Are you aware of any open mine shafts/tunnels or abandoned wells on the Property?
116. If yes, describe location: _____
117. Are you aware if any portion of the Property is in a flood plain/way.
118. Are you aware of any portion of the Property ever having been flooded?
119. Are you aware of any water damage or water leaks of any kind on the Property?
120. Are you aware of any past or present mold growth on the Property?
121. Explain: _____
122. _____

ADDITIONAL INFORMATION

123. Any other components of property not in working order or any additional information:
124. _____
125. _____
126. _____
127. _____

128. **OWNER CERTIFICATION:** Owner certifies that the information contained herein is true and complete to the best of Owner's

129. knowledge as of the date signed. Owner agrees that any material changes in the information contained herein will be disclosed in

130. writing by Owner to Tenant prior to occupancy, including any information that may be revealed by subsequent inspections.

131. _____ MO/DA/YR ^ OWNER'S SIGNATURE _____ MO/DA/YR

132. **Reviewed and updated:**

133. **Initials:** _____ / _____ MO/DA/YR

OWNER OWNER

134. **TENANT'S ACKNOWLEDGMENT:** Tenant acknowledges that the information contained herein is based only on the Owner's actual

135. knowledge and is not a warranty of any kind. Tenant acknowledges Tenant's obligation to investigate any material (important) facts in

136. regard to the Property.

137. **NOTICE:** Tenant acknowledges that by law, Owners, Lessors and Brokers are not obligated to disclose that the Property is or has

138. been: **(1)** the site of a natural death, suicide, homicide, or any other crime classified as a felony; **(2)** owned or occupied by a person

139. exposed to HIV, diagnosed as having AIDS or any other disease not known to be transmitted through common occupancy of real

140. estate; or **(3)** located in the vicinity of a sex offender.

141. By signing below, Tenant acknowledges receipt only of this form.

142. _____ MO/DA/YR ^ TENANT'S SIGNATURE _____ MO/DA/YR

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