SELLER’S DISCLOSURE
SWIMMING POOL - SPA RIDER

SELLER: ____________________________________________

PROPERTY: __________________________________________

NOTICE TO BUYER. This is a disclosure of SELLER’S knowledge of as of the date signed by SELLER and is not a substitute for any inspections or warranties that BUYER may wish to obtain. It is not a warranty of any kind by SELLER or a warranty or representation by the Broker(s) or their licensees.

- PROPERTY INCLUDES SWIMMING POOL
  - a. Type: ☐ Gunite ☐ Vinyl Liner ☐ Fiberglass ☐ Other:
  - b. Age of Pool: __________ Date of last resurfacing or liner replacement: ____________________________
  - c. Age of Coping: __________ Date of last repair: ____________________________
  - d. Age of Pump: __________
  - e. Age of Filter: __________ Type of Filter: ☐ Sand ☐ DE ☐ Other:
  - f. Does Pool have heating system? ____________________________ Yes ☐ No ☐
  - ☐ Electric ☐ Natural Gas ☐ Other: Age of Heater: ____________________________
  - g. Type of Sanitizing System: ☐ Chlorine ☐ Salt ☐ Ionizer ☐ Other: ____________________________ Yes ☐ No ☐
  - ☐ Anchored Safety Mesh ☐ Anchored Safety Solid ☐ Non-Anchored ☐ Other: ____________________________
  - Age of Cover: ____________________________
  - i. Depth from: __________ to: __________
  - j. Last date closed and winterized: ____________________________
  - k. Additional equipment included: ☐ Manual Vacuum ☐ Automatic Vacuum/Cleaner ☐ Hose and Net ☐ Other equipment: ____________________________
  - l. Any repairs performed on Pool or equipment in last 5 years? ____________________________ Yes ☐ No ☐
  - If “Yes”, please describe: ____________________________

- PROPERTY INCLUDES SPA-HOT TUB
  - a. Construction type or manufacturer: ____________________________
  - b. Age of Spa: __________
  - c. Age of Pump: __________
  - d. Age of Filter: __________ Type of Filter: ☐ Sand ☐ DE ☐ Other: ____________________________
  - e. Type of heating system: ☐ Electric ☐ Natural Gas ☐ Other: __________________________________ Age of heater: ____________________________
  - f. Type of Sanitizing System: ☐ Chlorine ☐ Salt ☐ Ionizer ☐ Other: ____________________________
  - g. Water volume (gallons): __________ Number of seats/capacity: ____________________________
  - h. Additional equipment included: ____________________________
  - i. Any repairs performed on Spa or equipment in last 5 years? ____________________________ Yes ☐ No ☐
  - If “Yes”, please describe: ____________________________
  - j. Any structural issues, leaks, defects or other problems with Spa or equipment? ____________________________ Yes ☐ No ☐
  - If “Yes”, explain in detail: ____________________________

SELLER: ____________________________ DATE: __________

BUYER: ____________________________ DATE: __________

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