



# MULTIFAMILY PROPERTY DISCLOSURE RIDER

(To be used in conjunction with Property Disclosure – Residential)

1 **SELLER:** \_\_\_\_\_

2 **PROPERTY LOCATION:** \_\_\_\_\_

3 **NUMBER OF UNITS:** \_\_\_\_\_

4  
5 **1. RENT SCHEDULE (If more than 6 units, attach additional rent schedule).**  *Check box if additional*  
6 *schedule attached.*

7  
8 Monthly Rent: If vacant please enter most recent rent amount.  
9 Legend: H = Heat, HW = Hot Water, E = Electric, W = Water, S = Sewer, G = Gas

| Unit # | Lease (Y/N) or last occupied | Lease Begin MM/YY | Lease End MM/YY | Monthly Rent | Is rent current? | Amount of Security Deposit (Tenants/Pets) | Tenant Pays (Check)   | Landlord Pays (Check)   |
|--------|------------------------------|-------------------|-----------------|--------------|------------------|---|---|---|
|        |                              |                   |                 |              |                  |   | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S |
|        |                              |                   |                 |              |                  |   | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S |
|        |                              |                   |                 |              |                  |   | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S |
|        |                              |                   |                 |              |                  |   | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S |
|        |                              |                   |                 |              |                  |   | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S |
|        |                              |                   |                 |              |                  |   | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S | <input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G<br><input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S |

10  
11 Have any tenants given notice, been served Notices to Quit, or eviction proceedings begun against any  
12 tenants? \_\_\_\_\_

13  
14 **2. ADDITIONAL PROPERTY INCOME (laundry, storage, garage rental, etc):** \_\_\_\_\_  
15 \_\_\_\_\_

- 16  
17 **3. EXPENSE INFORMATION:**
- 18 a. Annual real estate taxes and year:.....\$ \_\_\_\_\_
  - 19 b. Annual hazard insurance:.....\$ \_\_\_\_\_
  - 20 c. Annual snow removal expense:.....\$ \_\_\_\_\_
  - 21 d. Annual lawn mowing, yard maintenance expense:.....\$ \_\_\_\_\_
  - 22 e. Annual fuel consumption paid by landlord:.....\$ \_\_\_\_\_ #Gallons, cu.ft: \_\_\_\_\_
  - 23 f. Annual electric costs paid by landlord:.....\$ \_\_\_\_\_
  - 24 g. Annual trash removal expense:.....\$ \_\_\_\_\_
  - 25 h. Other expense: \_\_\_\_\_

26  

|        |          |  |          |  |       |
|--------|----------|--|----------|--|-------|
|        | Initials | <b>SELLER and BUYER acknowledge they have read this page</b> | Initials |  |       |
| SELLER |          | SELLER   | BUYER    |  | BUYER |

27 **4. APPLIANCE/HVAC/WATER HEATER SCHEDULE (only list appliances included in sale, if more than**  
 28 **6 units, attach additional appliance schedule).  Check box if additional schedule attached.**

| Unit | Stove | DW | Refrigerator | Microwave | Washer | Dryer | Furnace/<br>Age | Central<br>Ac<br>Age | Water<br>Heater<br>Age | Window<br>Unit(s) |
|------|-------|----|--------------|-----------|--------|-------|-----------------|----------------------|------------------------|-------------------|
|      |       |    |              |           |        |       |                 |                      |                        |                   |
|      |       |    |              |           |        |       |                 |                      |                        |                   |
|      |       |    |              |           |        |       |                 |                      |                        |                   |
|      |       |    |              |           |        |       |                 |                      |                        |                   |
|      |       |    |              |           |        |       |                 |                      |                        |                   |
|      |       |    |              |           |        |       |                 |                      |                        |                   |
|      |       |    |              |           |        |       |                 |                      |                        |                   |

29  
 30 **5. ADDITIONAL INFORMATION:**

- 31 a. Any other leases or contracts for services on the building?  Yes  No If yes, please specify: \_\_\_\_\_  
 32 \_\_\_\_\_  
 33 b. Attached Operating/Income Statement for \_\_\_\_\_ years.  
 34 c. Additional comments: \_\_\_\_\_  
 35 \_\_\_\_\_  
 36 \_\_\_\_\_

37  
 38 **RENTS SHALL BE PRO-RATED AS OF THE DAY OF CLOSING. ALL PRO-RATED RENTS AND DEPOSITS**  
 39 **SHALL TRANSFER TO BUYER AT CLOSING.**

40  
 41 **AFTER ALL BUYER CONTINGENCIES ARE SATISFIED, SELLER AGREES TO PROVIDE BUYER COPIES OF**  
 42 **ALL LEASES.**

43  
 44 **SELLER ACKNOWLEDGES THAT SELLER HAS PROVIDED THE ABOVE INFORMATION AND THAT SUCH**  
 45 **INFORMATION IS ACCURATE, TRUE AND COMPLETE TO THE BEST OF SELLER KNOWLEDGE. SELLER**  
 46 **AUTHORIZES THE LISTING BROKER TO DISCLOSE THE INFORMATION CONTAINED HEREIN TO OTHER**  
 47 **BROKERS AND BUYER'S.**

48  
 49 **CAREFULLY READ THE TERMS HEREOF BEFORE SIGNING. WHEN SIGNED BY ALL PARTIES, THIS**  
 50 **DOCUMENT BECOMES PART OF A LEGALLY BINDING CONTRACT. IF NOT UNDERSTOOD, CONSULT AN**  
 51 **ATTORNEY BEFORE SIGNING.**

52  
 53  
 54 \_\_\_\_\_  
 54 **SELLER** \_\_\_\_\_ **DATE** \_\_\_\_\_ **BUYER** \_\_\_\_\_ **DATE** \_\_\_\_\_  
 55  
 56 \_\_\_\_\_  
 57 **SELLER** \_\_\_\_\_ **DATE** \_\_\_\_\_ **BUYER** \_\_\_\_\_ **DATE** \_\_\_\_\_

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