



CITY OF MAPLEWOOD

1830 County Road B East
Maplewood, MN 55109
(651) 249-2300 Fax (651) 249-2319

**TRUTH-IN-SALE OF HOUSING
SELLER'S DISCLOSURE REPORT**

This report is **NOT VALID** unless the following declarations are signed on the original copy submitted to the buyer.

I, the seller or legal representative of the seller, declare, as of this date, the following information for the property at _____ (address):

1. The following is a listing of the nature, extent, causes and damage of any water seepage, flooding or sewer backup due to flooding of any portion of this residential property:

2. There are ____ are not ____ city code violations or pending housing orders from the City for this property. If there are any orders, list the date and nature of these orders or attach a copy of the order(s) to this report.

3. This property does ____ does not ____ have a current homestead classification as of ____ (date). For further information, contact Ramsey County Taxation and Records, Administration Department.

4. The following is a listing of the deed restrictions and covenants that apply to this property (attach a copy if necessary):

5. This property is ____ is not ____ subject to the Maplewood pipeline, shoreland, or flood plain ordinances. If so, the City's Community Development Department should be contacted at 651-249-2300 for special development restriction information.

6. The location of all known wells on the property, the date the well water was last tested, if the well(s) are in use, or abandoned and sealed (State law requires abandoned wells to be sealed under certain conditions by a licensed water-well contractor). Please contact the Minnesota Department of Health for more information. The following is a description of where all known wells on the property are located (attach a map if necessary):
7. This residential property is ____ is not ____ connected to and served by municipal sanitary sewer service. If the property is not served by municipal sanitary sewer service, the following information is about the individual sewage treatment system on or serving this property:
- a. Description of system (type and number of parts in system):
 - b. The system is ____ is not ____ now in use.
 - c. The system meets the applicable sewage treatment laws and rules.
 - d. The septic tank was last pumped on _____ (date).
 - e. The attached map shows the approximate location of the septic tank, drain fields and other parts of the system on the property to the best of the seller's knowledge.
8. This property is ____ is not ____ next to high voltage (69,000 volts or more) transmission lines. If the subject property is located next to a high-voltage electrical transmission line, purchasers should be aware that there is ongoing research on adverse exposure to a magnetic field generated by high-voltage lines. As of May 1990, no risk assessments have been made by scientific or health officials to resolve the health effects of long or short term exposures to magnetic fields. Purchasers with concerns about the exposures should contact competent medical or health inspectors or agencies for current risk assessment information.

Please contact Xcel, Electrical Engineering Department, at 779-3100 for more information.

Signature of the seller or seller's designated representative:

Address _____

Date _____