

**SELLER'S DISCLOSURE AND
CONDITION OF PROPERTY ADDENDUM
(Residential)**

1 SELLER: Frank & Desiree Nietfeld

2 PROPERTY: 900 May St, Marysville

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4 **1. SELLER'S INSTRUCTIONS**

5 SELLER agrees to disclose to BUYER all material defects, conditions and facts **KNOWN TO SELLER**
6 which may materially affect the value of the Property. This disclosure statement is designed to assist
7 SELLER in making these disclosures. Licensee(s), prospective buyers and buyers will rely on this
8 information.

9

10 **2. NOTICE TO BUYER**

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

14

15 **3. OCCUPANCY**

16 Approximate age of Property? 9 yrs. How long have you owned? 9 yrs.

17 Does SELLER currently occupy the Property? Yes No

18 If not, how long has it been since SELLER occupied the Property? _____ years/months.

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20 **4. LAND (SOILS, DRAINAGE AND BOUNDARIES). (IF RURAL OR VACANT LAND, ATTACH
21 SELLER'S LAND DISCLOSURE ALSO.)**

22 (a) Fill or expansive soil on the Property? Yes No

23 (b) Sliding, settling, earth movement, upheaval or earth stability problems on
24 the Property? Yes No

25 (c) Is the Property or any portion thereof located in a flood zone, wetlands area
26 or **proposed** to be located in such as designated by FEMA which requires
27 flood insurance? Yes No

28 (d) Drainage or flood problems on the Property or adjacent properties? Yes No

29 (e) Do you pay flood insurance premiums? Yes No

30 (f) If so, is it required? Yes No

31 (g) Are the boundaries of the Property marked in any way? Yes No

32 (h) Has Property had a stake survey? If yes, attach copy Yes No

33 (i) Encroachments, boundary line disputes, or non-utility easements affecting
34 the Property. Yes No

35 (j) Any fencing on the Property? Yes No

36 (k) If yes, does fencing belong to the Property? Yes No

37 (l) Diseased, dead, or damaged trees or shrubs on the Property? Yes No

38 (m) Gas/oil wells, lines or storage facilities on Property or adjacent property? Yes No

39 If any of the answers in this section are "Yes", explain in detail: Utility pole on east

40 side alley.

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43 **5. ROOF:**

- 44 (a) Approximate Age: 9 years Unknown Type: Asphalt shingle
- 45 (b) Have there been any problems with the roof, flashing or rain gutters? Yes No
- 46 If so, what was the date of the occurrence _____
- 47 (c) Have there been any repairs to the roof, flashing or rain gutters? Yes No
- 48 Date of and company performing such repairs _____ / _____
- 49 (d) Has there been any roof replacement? Yes No
- 50 If yes, was it: Complete or Partial
- 51 (e) What is the number of layers currently in place: 1 layers, or Unknown.

52 **If any of the answers in this section are "Yes", explain in detail below: (All available warranties and**

53 **other documentation are attached)** _____

58 **6. INFESTATION – ARE YOU AWARE OF:**

- 59 (a) Any termites, wood destroying insects, or **other** pests on the Property? Yes No
- 60 (b) Any damage to the property by termites, wood destroying insects or **other**
- 61 pests? Yes No
- 62 (c) Any termite, wood destroying insects or other pest control treatments on the
- 63 Property in the last five years? Yes No
- 64 If yes, list company, *when and where* treated _____
- 65 (d) Any warranty, bait stations or other treatment coverage by a licensed pest
- 66 control company on the Property? Yes No
- 67 If yes, the annual cost of service renewal is \$ _____ and the time remaining on the
- 68 service contract is _____. **(Check One)**
- 69 The treatment system stays with the Property, or the treatment system is subject to
- 70 removal by the treatment company if annual service fee is not paid.

71 **If any of the answers in this section are "Yes", explain in detail (attach any receipts):** _____

72 The property was treated before we built by United Pest

73 Control (see attachment)

76 **7. STRUCTURAL, BASEMENT AND CRAWL SPACE ITEMS – ARE YOU AWARE OF:**

- 77 (a) Movement, shifting, deterioration, or other problems with walls, foundations,
- 78 crawl space or slab? Yes No
- 79 (b) Any cracks or flaws in the walls, ceilings, foundations, concrete slab,
- 80 crawl space, basement floor or garage? Yes No
- 81 (c) Any corrective action taken including, but not limited to plering or bracing? Yes No
- 82 (d) Any water leakage or dampness in the house, crawl space or basement? Yes No
- 83 (e) Any dry rot, wood rot or similar conditions on the wood of the Property? Yes No
- 84 (f) Any problems with driveways, patios, decks, fences or retaining walls on
- 85 the Property? Yes No
- 86 (g) Any problems with fireplace and/or chimney? Yes No
- 87 Date of last cleaning? _____
- 88 (h) Does the Property have a sump pump? Yes No
- 89 (i) Any repairs or other attempts to control the cause or effect of any problem
- 90 described above? Yes No

91 **If any of the answers in this section are "Yes", explain in detail. When describing repairs or control**

92 **efforts, describe the location, extent, date, and name of the person who did the repair or control effort**

93 **and attach, if available, any inspection reports, estimates or receipts:** replaced a couple of

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steps on the deck.

Siding on east side of detached garage - damage caused before dirt was leveled.

8. ADDITIONS AND/OR REMODELING:

(a) Are you aware of any additions, structural changes, or other material alterations to the Property? Yes No

If "Yes", explain: _____

(b) If "Yes", were all necessary permits and approvals obtained, and was all work in compliance with building codes? N/A Yes No

If "No", explain: _____

9. PLUMBING RELATED ITEMS:

(a) What is the drinking water source? Public Private Well Cistern
If well water, state type _____ depth _____
diameter _____ age _____

(b) If the drinking water source is a well, when was the water last checked for safety and what was the result of the test? _____

(c) Is there a water softener on the Property? Yes No
(If so, is it: Leased Owned?)

(d) Is there a water purifier system? Yes No
(If so, is it: Leased Owned?)

(e) What type of sewage system serves the Property? Public Sewer, or Private Sewer, or Septic System, or Cesspool, or Lagoon, or Other _____

(f) If there is a septic system, is there a sewage pump on the septic system? Yes No

(g) Is there a grinder pump system? Yes No

(h) If there is a privately owned system, when was the septic tank, cesspool, or sewage system last serviced? _____ By whom? _____

(i) Is there a sprinkler system? Yes No
Does sprinkler system cover full yard? N/A Yes No

If "No", explain: _____

(j) Is there a back flow prevention device on the lawn sprinkling system, sewer or pool? Yes No

(k) Are you aware of any leaks, backups, or other problems relating to any of the plumbing, water, and sewage related systems? Yes No

(l) Type of plumbing material currently used in the Property:
 Copper Galvanized Other PVC

The location of the main water shut-off is meter west of house

(m) The location of the sewer line clean out trap is: under the deck

If your answer to any of the questions in this section is "Yes", explain in detail and provide available documentation: Water softner replaced by Mitchell Plumbing - April 2020 (see attached)

140 **10. HEATING AND AIR CONDITIONING:**

- 141 (a) Does the Property have air conditioning? Yes No
- 142 Central Electric Central Gas Heat Pump Window Unit(s)
- 143 Unit Age of Unit Leased Owned Location Last Date Serviced/By Whom?
- 144 1. 9 yrs. east side of house
- 145 2. _____
- 146 (b) Does the Property have heating systems? Yes No
- 147 Electric Fuel Oil Natural Gas Heat Pump Propane Fuel Tank Other _____
- 148 Unit Age of Unit Leased Owned Location Last Date Serviced/By Whom?
- 149 1. 9 yrs. basement
- 150 2. _____
- 151 (c) Are there rooms without heat or air conditioning? Yes No
- 152 If yes, which room(s)? _____
- 153 (d) Does the Property have a water heater? Yes No
- 154 Electric Gas Solar
- 155 Unit Age of Unit Leased Owned Location Last Date Serviced/By Whom?
- 156 1. 9 yrs. basement
- 157 2. _____
- 158 (e) Are you aware of any problems regarding these items? Yes No

159 If your answer to question 10(c) and/or 10(e) in this section is "Yes", explain in detail: _____

160 _____

161 _____

162 _____

163 _____

164 **11. ELECTRICAL SYSTEM:**

- 165 (a) Type of material used: Copper Aluminum Unknown
- 166 (b) Type of electrical panel(s): Breaker Fuse
- 167 Location of electrical panel(s): garage
- 168 Size of electrical panel (total amps), if known: 200
- 169 (c) Are you aware of any problem with the electrical system? Yes No

170 If "Yes", explain in detail: _____

171 _____

172 _____

173 _____

174 _____

175 **12. HAZARDOUS CONDITIONS:**

- 176 (a) Underground tanks on the Property? Yes No
- 177 (b) Landfill on the Property? Yes No
- 178 (c) Toxic substances on the Property, (e.g. tires, batteries, etc.)? Yes No
- 179 (d) Has the Property been tested for any of the above listed items? Yes No
- 180 (e) Radon in the property? Yes No
- 181 (f) Have you had the property tested for radon? Yes No
- 182 (g) Have you had the property tested for mold? Yes No
- 183 (h) Are you aware of any other environmental issues? Yes No
- 184 (i) Are you aware of any methamphetamine or controlled substances ever being
- 185 used or manufactured on the Property? Yes No
- 186 **(In Missouri, a separate disclosure is required if methamphetamine or**
- 187 **other controlled substances have been present on or in the Property)**

188 If your answer to any of the questions in this section is "Yes", explain in detail and attach test
189 results: _____
190 _____
191 _____
192 _____

193 **13. NEIGHBORHOOD INFORMATION AND HOMEOWNERS ASSOCIATIONS:**

- 194 (a) Are you aware of any current/pending bonds, assessments, or special taxes
195 that apply to Property? Yes No
196 Amount: \$ _____
- 197 (b) Are you aware or have you received any notice of any condition or proposed
198 change in your neighborhood or surrounding area? Yes No
- 199 (c) Is the Property subject to covenants, conditions, and restrictions of a
200 Homeowner's Association or subdivision restrictions? Yes No
- 201 (d) Are you aware of any violations of such covenants and restrictions? Yes No
- 202 (e) Does the Homeowner's Association impose its own transfer fee when this
203 Property is sold? Yes No
204 If "yes", what is the amount? \$ _____
- 205 (f) Are you aware of any defect, damage, proposed change or problem with any
206 common elements or common areas? Yes No
- 207 (g) Are you aware of any condition or claim which may result in any change to
208 assessments or fees? Yes No
- 209 (h) Are streets privately owned? Yes No
- 210 (i) Is Property in a historic, conservation or special review district that
211 requires any alterations or improvements to Property be approved by a
212 board or commission? Yes No
- 213 (j) Is Property subject to tax abatement? Yes No
- 214 (k) Is Property subject to a right of first refusal? Yes No

215 If the answer to any of the above questions is "Yes" except (c), explain in detail, including
216 amounts, if applicable: _____
217 _____
218 _____
219 _____
220 _____

221 Homes Association dues which are paid in full until _____ in the amount of \$ _____
222 payable yearly monthly quarterly, sent to _____ and
223 such includes: _____
224 Homeowner's Association contact name, phone number, website, or email address: _____
225 _____
226 _____

227 **14. OTHER MATTERS:**

- 228 (a) Are you aware of any of the following?
229 Party walls Common areas Easement Driveways Yes No
- 230 (b) Are you aware of any fire damage to the Property? Yes No
- 231 (c) Are there any liens, other than mortgage(s)/deeds of trust currently on the
232 Property? Yes No
- 233 (d) Are there any violations of laws or regulations affecting the Property? Yes No
- 234 (e) Are you aware of any other conditions that may materially and adversely
235 affect the value or desirability of the Property? Yes No
- 236 (f) Are you aware of any other condition that may prevent you from completing
237 the sale of the Property? Yes No
- 238 (g) Are you aware of any general stains or pet stains to the carpet, the flooring

- 239 or sub-flooring? Yes No
- 240 (h) Do you have keys for all exterior doors, including garage doors in the
- 241 home? Yes No
- 242 List locks without keys _____
- 243 (i) Are you aware of any violation of zoning, setbacks or restrictions, or
- 244 non-conforming uses? Yes No
- 245 (j) Are you aware of any unrecorded interests affecting the Property? Yes No
- 246 (k) Are you aware of anything that would interfere with giving clear title to
- 247 the BUYER? Yes No
- 248 (l) Are you aware of any existing or threatened legal action pertaining to
- 249 the Property? Yes No
- 250 (m) Are you aware of any litigation or settlement pertaining to this Property? Yes No
- 251 (n) Have you added any insulation since you have owned the Property? Yes No
- 252 (o) Have you replaced any appliances that remain with the Property in the
- 253 past five years? Yes No
- 254 (p) Are there any transferable warranties on the Property or any of its
- 255 components? Yes No
- 256 (q) Have you made any insurance or other claims pertaining to this Property
- 257 in the past 5 years? Yes No
- 258 If yes, were repairs from claim(s) completed? Yes No
- 259 (r) Are you aware of any use of synthetic stucco in the property? Yes No

260 If any of the answers in this section are "Yes", (except g), explain in detail: Small bleach

261 (g) stain in bedroom doorway

262 (o) replaced microwave - March 2017 (see attached)

263 (g) claim for hail - April 2016 (see attached) deemed unnecessary to repair

264

265 **15. UTILITIES:** Identify the name and phone number for utilities listed below.

266 Electric Company Name - Evergy Phone 800-383-1183

267 Gas Company Name - Kansas Gas Service Phone 800-794-4780

268 Water Company Name - City of Marysville Phone 785-562-5331

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270 **16. FIXTURES, EQUIPMENT AND APPLIANCES (FILL IN ALL BLANKS)**

271 The Residential Real Estate Sale Contract, not the Seller's Disclosure Statement, the MLS, or other

272 promotional material, provides for what is included in the sale of the property. All existing

273 improvements on Property (if any) and appurtenances, fixtures and equipment, whether buried,

274 nailed, bolted, screwed, glued or otherwise permanently attached to Property are expected to remain

275 with Property unless excluded from the sale in the Residential Real Estate Sale Contract.

276 **OS = Operating and Staying with the Property (Means the item is performing its intended**

277 **function)**

278 **EX = Staying with the Property but Excluded from Mechanical Repairs and cannot be an**

279 **Unacceptable Condition**

280 **NA = Not applicable**

281 **NS = Not staying with the Property**

282	NA Air Conditioning Window Units, # _____	DS Garage door opener(s)	NA Sprinkler System _____
283	DS Air Conditioning Central System	DS Garage Door Transmitter(s), # <u>2</u>	NA Sprinkler System Back Flow Valve
284	NA Attic Fan	NA Gas Grill	NA Sprinkler System Auto Timer
285	DS Ceiling Fans, # <u>4</u>	NA Gas Yard Light	NA Statuary/Yard Art
286	NA Central vac & attachments	DS Humidifier	NA Stove, ___ Elec. ___ Gas
287	DS Dishwasher	NA Intercom	NA Stove Downdraft Cooktop
288	DS Disposal	DS Laundry – Washer	DS Stove Oven <input checked="" type="checkbox"/> Elec. ___ Gas
289	DS Doorbell	DS Laundry – Dryer	DS Stove Oven – Convection
290	NA Electric air cleaner or purifier	DS Microwave Oven	DS Stove/Oven Clock Timer
291	DS Electric Garage Door Opener(s)	NA Propane Tank	DS Stove Vent Hood
292	DS Exhaust fan(s) – baths	DS Refrigerator	NA Sump Pump
293	NA Fireplace heat re-circulator	Location of Refrigerator <u>kitchen</u>	NA Swimming Pool
294	DS Fireplace insert	NA Security System	NA Swimming Pool Heater
295	DS Fireplace Gas Logs	___ Owned ___ Leased	NA Swimming Pool Equipment
296	NA Fireplace Gas Starter	DS Smoke Detector(s), # <u>3</u>	NA Trash Compactor
297	NA Fireplace – wood burning stove	NA Spa/Hot Tub	NA TV Antenna/Receiver/Satellite Dish
298	NA Fountain(s)	NA Spa/Sauna	___ Own ___ Lease
299	DS Furnace/heat pump/other htg system	NA Spa Equipment	DS Water Softener and/or purifier
300	Other _____	Other _____	<input checked="" type="checkbox"/> Own ___ Lease
301	Other _____	Other _____	Other _____

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303 Disclose any material information and describe any significant repairs, improvements or alterations to

304 the Property not fully revealed above. If applicable, state who did the work. Attach to this disclosure any

305 repair estimates, reports, invoices, notices or other documents describing or referring to the matters

306 revealed herein: _____

307 _____

308 _____

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310 The undersigned SELLER represents that the information set forth in the foregoing Disclosure Statement

311 is accurate and complete. SELLER does not intend this Disclosure Statement to be a warranty or

312 guarantee of any kind. SELLER hereby authorizes their agent to provide this information to prospective

313 BUYER of the property and to real estate brokers and salespeople. **SELLER will promptly notify**

314 **Licensee assisting the SELLER, in writing, if any information in this disclosure changes prior to**

315 **Closing, and Licensee assisting the SELLER will promptly notify Licensee assisting the BUYER,**

316 **in writing, of such changes. (Initial and date any changes and/or attach a list of additional**

317 **changes. If attached, # _____ of pages).**

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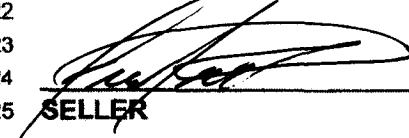
319 **CAREFULLY READ THE TERMS HEREOF BEFORE SIGNING. WHEN SIGNED BY ALL PARTIES,**

320 **THIS DOCUMENT BECOMES PART OF A LEGALLY BINDING CONTRACT.**

321 **IF NOT UNDERSTOOD, CONSULT AN ATTORNEY BEFORE SIGNING.**

322

323

324  _____ 6/9/20 Desiree Nietfeld _____ 6/9/20

325 SELLER DATE SELLER DATE

Support documents attached (6 pgs.)

326 **BUYER ACKNOWLEDGEMENT AND AGREEMENT**

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1. I understand and agree that the information in this form is limited to information of which SELLER has actual knowledge and that SELLER need only make an honest effort at fully revealing the information requested.
2. This property is being sold to me without warranties or guaranties of any kind by SELLER or Broker(s) or agents concerning the condition or value of the Property.
3. I agree to verify any of the above information, and any other important information provided by SELLER or Broker (including any information obtained through the Multiple Listing Service) by an independent investigation of my own. I have been specifically advised to have Property examined by professional inspectors.
4. I acknowledge that neither SELLER nor Broker is an expert at detecting or repairing physical defects in Property.
5. I specifically represent that there are no important representations concerning the condition or value of Property made by SELLER or Broker on which I am relying except as may be fully set forth in writing and signed by them.

BUYER **DATE** **BUYER** **DATE**

No warranty is made or implied as to the legal validity or adequacy of this Contract, or that it complies in every respect with the law or that its use is appropriate for all situations. Local law, customs and practices, and differing circumstances in each transaction may dictate that amendments to this Contract be made. Copyright January 2008. Last revised 10/07. All previous versions of this document may no longer be valid.

TERMITE CONTROL CONTRACT AND GUARANTEE

United Pest Control Inc.

276 Frontier Rd.

BREMEN, KS 66412

Phone 785-337-2827 or Toll Free 888-762-2622

PEST CONTROL • TERMITE CONTROL • RODENT CONTROL

CUSTOMER

Frank & Deserie Nietfeld

908 May St.

Marysville, KS

CONTRACT
DATE:

10-22-10

JOB START
DATE:

10-22-10 WEATHER
PERMITTING

OWNER'S PHONE

785-562-9816

AGREEMENT

This agreement is made between the two parties indicated above and hereinafter referred to as "CONTRACTOR" (the seller) and "CUSTOMER" (the buyer).

The CONTRACTOR agrees to furnish subterranean termite control service to the structure(s) specified and to guarantee this treatment for a period of 10 year from date, under the following terms and conditions and ACCORDING TO THE SPECIFICATIONS ITEMIZED ON THE REVERSE SIDE OF THE CONTRACT.

The customer agrees to pay the CONTRACTOR upon completion of initial work, as compensation for labor, material and service a sum of One thousand eight hundred ten + tax \$132.13 Dollars (\$ 1,942.13) to be paid as follows: Upon Completion

The CUSTOMER warrants full cooperation with the CONTRACTOR during the life of this agreement and agrees to maintain the treated area free from any condition contributing to infestation by subterranean termites such as moisture from drains or faulty plumbing, firewood, trash, lumber, or wood in direct contact with the ground.

The CUSTOMER agrees that any additions or alterations to the building covered by this contract during the guarantee period shall not be covered by this guarantee, nor will any re-infestation in the old building originating from any addition thereto come within the scope of the guarantee, otherwise specified in writing, this contract covers only the main building at the above indicated address. The benefits of this contract shall be transferred to any subsequent OWNER of the property within the guarantee period, provided, that such subsequent owner, within thirty (30) days after being informed of this contract, assumes all future obligations of the CUSTOMER hereunder.

CONDITIONS OF SALE

The contractor agrees to furnish the services indicated herein for cash paid upon completion of initial work unless otherwise specified herein. If time payment is agreed, default in any payment due constitutes a breach of agreement by customer and makes the total balance under this contract due immediately as liquidated damages. Interest on delinquent accounts to be added at the maximum legal rate until paid in full. This agreement is accepted by the CONTRACTOR by performing services, or offering to perform services specified herein. It is further agreed and understood that in the event of default by the CUSTOMER in the payment of the contract price, or any part thereof under this agreement, the CONTRACTOR shall be released from guarantees, further inspections and servicing, as herein provided. In the event this contract is voided or cancelled by the CUSTOMER before work has been started, it is agreed that the CONTRACTOR may make a reasonable liquidating charge as compensation for consultation, office paperwork, mileage and any other expense attributable to this contract. Note: Contractor is not responsible for the cost or replacement of any damage done by wood destroying insects, before or after the treatment is done.

ANNUAL SERVICE WARRANTY

ANNUAL CONTRACT EXTENSION - It is further agreed that the CONTRACTOR will extend for an additional period of 2 years, the protective features of this agreement (including inspections, chemical retreatments if needed and warranties) for the amount of \$ 0 per year. Said payment to be made within thirty (30) days of the anniversary date of this contract. Failure by the CUSTOMER to pay this fee voids the extension of this contract.

Only such agreements as are clearly specified in this contract shall be binding upon the parties hereto. (SEE REVERSE SIDE OF THIS CONTRACT FOR TERMITE DISCLOSURE STATEMENT.)

CONTRACTOR:

By: Scott Diefelgen, Pres.

CUSTOMER SIGN HERE:

x [Signature]
By: _____ Title: _____

MITCHELL PLUMBING HEATING & A.C., Inc.

Invoice

211 SOUTH KANSAS AVE
FRANKFORT KS 66427
785-292-4203

Date 4/21/2020 Invoice # 19123

Bill To

Frank Nietfeld
900 North May
Marysville KS 66508

P.O. No. Terms Project

Quantity	Description	Rate	Amount
1	North Star water softener	955.00	955.00T
2	water softener adapter	27.96	55.92T
1	humidifier pad	21.32	21.32T
1	fluidmaster	12.95	12.95T
	labor & mileage	235.00	235.00T
	Sales Tax KS Marysville	8.10%	103.70

Thank you

*pd 4/28/20
ck 3216*

Finance charge of 1 1/2% per month after 20 days. Minimum of \$3.00

Total

\$1,383.89

Ott Electric

"... at your service since 1928"

810 Broadway • P.O. Box 167
Marysville, KS 66508

Voice (785) 562-2641 • Fax (785) 562-5119
Toll Free 1-800-559-OTTS

INVOICE

INVOICE NUMBER: 9926365
INVOICE DATE: 3/3/17
PAGE: 1

SOLD TO: FRANK NIETFELD
900 MAY
MARYSVILLE, KS 66508

CUSTOMER ID	CUSTOMER PO	PAYMENT TERMS
NIETFELDFRANK	Ticket 54705	Net Due
SALES REP ID	SHIPPING METHOD	SHIP DATE
		3/3/17

QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION
1.00	11000	GE Microwave M# JVM6172DF1BB S# TF234128B	259.00	259.00

	Subtotal	259.00
	Sales Tax	20.98
	Total Invoice Amount	\$279.98
	Payment Received	0.00
Check No:	TOTAL DUE	\$279.98



A Liberty Mutual Company

Safeco Insurance Company of America
National Catastrophe Team
P.O.Box 515097
Los Angeles, CA 90051-5097

Mailing Address:

Phone: (800) 332-3226
(972) 808-4034
Fax: (888) 268-8840

May 26, 2016

Frank Nietfeld & Desiree Nietfeld
900 May St
Marysville, KS 66508-1218

Insured Name: Frank Nietfeld & Desiree Nietfeld
Policy Number: OZ4404190
Loss Date: April 26, 2016
Claim Number: 803920526002

Dear Mr. and Mrs. Frank Nietfeld:

I wanted to take a moment to touch base with you since the field adjuster completed the inspection at your home. I have attached a copy of the repair estimate for you to present to your contractor of choice. Please provide a copy of this estimate to your contractor and have them contact us before repairs are initiated if there are any discrepancies with the scope or cost.

Should your contractor find additional damage or if your contractor cannot perform the repairs for the amount of our estimate, please be sure to have them forward a copy of their itemized estimate along with photos of the claimed damages so that we may review for approval of any supplemental payments before repair work begins.

Payment has been issued to you in the amount of \$906.42 which you should receive in 5-7 business days in the mail. Please note that this amount reflects an amount of depreciation that is held back, in the amount of \$502.85.

Upon completion of the repairs, please send or have your contractor send us the final invoice or certificate of completion with the invoiced amount and for processing of your recoverable depreciation withheld from your attached estimate. Additionally, please note that your deductible has been withheld from the enclosed estimate and corresponding payment and you will pay this amount out of pocket to your contractor.

Please let me know if you have any questions.

Page 2
Frank Nietfeld Desiree Nietfeld
May 26, 2016

Sincerely,

Damon Baker
National Catastrophe Team
Safeco Insurance Company of America
(800) 332-3226
(972) 808-4111 Fax: (888) 268-8840
Damon.Baker@Safeco.com

Enclosure:
Property Estimate



Insurance
A Liberty Mutual Company

Safeco Insurance Company

PO Box 515097
Los Angeles, CA 90051-5097
(888) 268-8840 Fax

Insured: FRANK NIETFELD, DESIREE NIETFELD
Property: 900 MAY ST
MARYSVILLE, KS 66508-1218
Home: 900 MAY ST
MARYSVILLE, KS 66508-1218

Home: (785) 562-6826

Estimator: Rodney G. Miles

Business: (913) 208-6430

Cellular: (913) 208-6430

Claim Number: 803920526002

Policy Number: OZ04404190

Type of Loss: Hail

Coverage	Deductible	Estimate Summary (before deductions)
DWELLING	\$1,500.00	\$2,638.11
Other Structures	\$0.00	\$271.16
TOTALS		\$2,909.27

Date Contacted: 5/12/2016 4:25 PM

Date of Loss: 4/26/2016

Date Inspected: 5/20/2016 5:16 PM

Date Est. Completed: 5/20/2016 8:41 PM

Price List: KSKS8X_MAY16