

118 STIRLING LANE

Jessamine County, Kentucky

6.4 +/- Acres



Offered Exclusively By



www.kyhorsefarms.com

518 East Main Street ♦ Lexington, Kentucky 40508 ♦ (859) 255-3657



Entry Hall:

- Crown moulding
- Tile floor
- Fan door with leaded glass
- Chandelier



Formal Living Room:

- Hardwood floor
- Crown moulding
- French doors to patio
- Recessed lighting
- Window treatments



Dining Room:

- Hardwood floor
- Chair rail
- Wainscoting
- Crown moulding
- Rosette chandelier
- Plantation blinds

Office/Den:

- Hardwood floor
- Barber bookshelves, desk, and cabinets
- Plantation blinds
- Recessed lighting
- Crown moulding
- Ceiling fan



Hall:

- Hardwood floor
- Linen closet
- Crown moulding

Hall Bath:

- Tile floor
- Pedestal sink
- Shower
- Linen closet
- Crown moulding

Kitchen:

- Hardwood floor
- Crown moulding
- Pantry
- Thermador oven
- Cherry cabinets
- Granite counter
- GE Profile surface unit
- GE Profile convection oven
- GE Profile side-by-side refrigerator with water & ice dispensers
- Bosch dishwasher
- Double stainless steel sink
- Disposal
- Built-in desk



Breakfast nook
with hardwood
floor, crown
moulding,
chandelier, door
to sun room



Family Room:

- Hardwood floor with inlay
- Beamed cathedral ceiling
- Window treatments (remotely controlled)
- Built-in bookshelves and cabinets
- Fireplace with gas logs and granite hearth
- Closet
- Stairs to loft
- French doors to sun room



Sun Room:

- Tile floor
- Ceiling fan with light
- French doors to flag stone walk and patio

Master Suite

Foyer:

- Hardwood floor
- Built-in cabinets and shelves
- Crown moulding



Bathroom:

- Tile floor
- 2 walk-in closets with built-ins & hardwood floor
- 2 vanities
- Alderwood cabinets
- Cultured marble counter tops
- Jacuzzi tub
- Shower
- Plantation blinds
- Crown moulding
- Water closet

Bedroom:

- Hardwood floor
- Tray ceiling
- Recessed lighting
- Ceiling fan
- Gas log fireplace
- Window treatments
- Built-in shelves and cabinets



Front Bedroom:

- Hardwood floor
- Crown moulding
- Walk-in closet
- Bay window
- Ceiling fan



Bathroom:

- Tile floor
- Crown moulding
- Linen closet
- Tub
- Shower
- Alderwood vanity
- Cultured marble vanity top



Back Bedroom:

- Hardwood floor
- Crown moulding
- Double closet
- TV nook
- Bay window
- Ceiling fan



Hall:

- Hardwood floor
- Crown moulding
- Hot water closet
- Coat closet



Laundry Room:

- Tile floor
- Granite counter tops
- LG washer and dryer
- Built-in alderwood cabinets
- Door to 3-car garage

Loft:

- Hardwood floor
- Crown moulding
- Recessed lighting
- Ceiling fan



Hall:

- Hardwood floor
- Closet
- Door to attic

Bath:

- Pedestal sink
- Tub/shower combo



Office or Fourth Bedroom:

- Wall-to-wall carpet
- Built-in cabinets and bookshelves



- Covered back porch



- U-shaped Pergola with firepit



Additional House Amenities:

- 4,400 +/- square feet
- Bosch surround sound system
- Security system—owned
- 4' high crawl space
- Geothermal HVAC with heat pump for upstairs
- City water—South Elkhorn
- Septic system
- Versailles mailing address





HORSE IMPROVEMENTS

- Barn (36' x 36') with:
 - ◊ 3 stalls (12' x 12') with rubber mats
 - ◊ Room for 2 more stalls
 - ◊ Heated tack room
 - ◊ Tongue and groove stall fronts and interior walls
 - ◊ 12' center aisle with rubber mats
- 4-board plank fencing
- Automatic waterers—1 is heated
- 3 paddocks
- Medical paddock





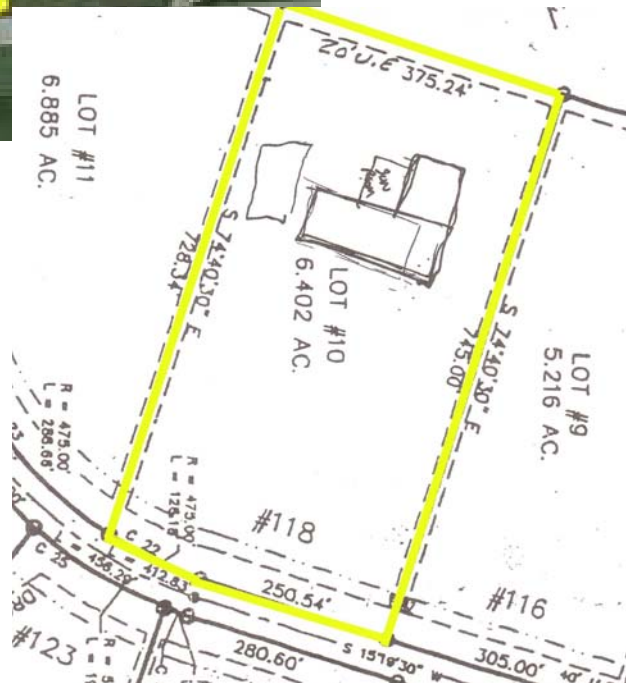
Information contained herein is believed to be accurate but is not warranted

Price: \$749,000.



Agent: Bill G. Bell
(859) 621-0607

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Map unit symbol	Map unit name	Rating	Acres in AOI	Percent of AOI
FcF	Fairmount-Rock outcrop complex, 30 to 60 percent slopes	Not prime farmland	0.0	0.0%
MnB	McAfee silt loam, 2 to 6 percent slopes	All areas are prime farmland	0.3	4.6%
MnC	McAfee silt loam, 6 to 12 percent slopes	Farmland of statewide importance	3.9	64.4%
uBlmB	Bluegrass-Maury silt loams, 2 to 6 percent slopes	All areas are prime farmland	1.9	31.0%
Totals for Area of Interest			6.1	100.0%

SELLER'S DISCLOSURE OF PROPERTY CONDITION

This form applies to residential real estate sales and purchases. This form is **not required** for:

1. Residential purchases of new construction homes if a written warranty is provided;
2. Sales of real estate at auction; or
3. A court supervised foreclosure.

The information in this form is based upon the undersigned's observation and knowledge about the property during the period beginning on the date of his or her purchase of the property on 2/29/2000, and ending on 07/16/2018.

(Date of purchase) (Date of this form)

PROPERTY ADDRESS: 118 Stirling Lane, Nicholasville, KY with Versailles, KY 40383 mailing address

PURPOSE OF DISCLOSURE FORM: Completion of this form shall satisfy the requirements of KRS 324.360 that mandates the seller's disclosure of information about the property he or she is about to sell. This disclosure is based solely on the seller's observation and knowledge of the property's condition and the improvements thereon. This disclosure form shall not be a warranty by the seller or seller's real estate agent and shall not be used as a substitute for an inspection or warranty that the purchaser may wish to obtain. This form is a statement of the conditions and other information about the property known by the seller. Unless otherwise advised, the seller does not possess any expertise in construction, architectural, engineering, or any other specific areas related to the construction or condition of the improvements on the property. Other than having lived at or owned the property, the seller possesses no greater knowledge than that which could be obtained upon a careful inspection of the property by the potential buyer. Unless otherwise advised, the seller has not conducted any inspection of generally inaccessible areas such as the foundation or roof. It is not a warranty of any kind by the seller or by any real estate agent representing any seller in this transaction. It is not a substitute for any inspections. The purchaser is encouraged to obtain his or her own professional inspections.

INSTRUCTIONS TO THE SELLER: (1) Complete all numbered items. (2) Report all known conditions affecting the property. (3) Attach additional pages, if necessary, with your signature and the date and time of signing. (4) Complete this form yourself or sign the authorization at the end of this form to authorize the real estate agent to complete this form on your behalf in accordance with KRS 324.360(9). (5) If some items do not apply to your property, mark "not applicable." (6) If you do not know the answer to a question, mark "unknown."

SELLER'S DISCLOSURE: As seller, I/we disclose the following information regarding the property. This information is true and accurate to the best of my/our knowledge as of the date signed. Seller authorizes the real estate agent to provide a copy of this statement to any person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. The following information is not the representation of the real estate agent.

Please answer all questions. If the answer is yes, please explain. If additional space is needed, use the reverse side or make attachments.

1. HOUSE SYSTEMS	N/A	YES	NO	UNKNOWN
Any past or current problems affecting:				
(a) Plumbing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Electrical system	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Appliances	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Floors and walls	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Doors and windows	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) Ceiling and attic fans	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(g) Security system	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(h) Sump pump	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(i) Chimneys, fireplaces, inserts	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(j) Pool, hot tub, sauna	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(k) Sprinkler system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(l) Heating.....age18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(m) Cooling/air conditioning.....age18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(n) Water heater.....age1,18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain: New compressor fan motor 2018 Commercial water heater 2017 other units original				

2. FOUNDATION/STRUCTURE/BASEMENT	N/A	YES	NO	UNKNOWN
(a) Any defects or problems, current or past, to the foundation or slab?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Any defects or problems, current or past, to the structure or exterior veneer?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain: _____				
(c) Has the basement leaked at any time since you have owned or lived at the property?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) When was the last time the basement leaked?				
(e) Have you ever had any repairs done to the basement?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) If you have had basement leaks repaired, when was the repair performed?				
Explain: _____				

- (g) If the basement presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.) _____
- (h) Have you experienced, or are you aware of, any water or drainage problems with regard to the crawl space?.....

3. ROOF N/A YES NO UNKNOWN

- (a) Age of the roof covering? 3 years
- (b) 1. Has the roof leaked at any time since you have owned or lived at the property?.....
 2. When was the last time the roof leaked? _____
- (c) 1. Have you ever had any repairs done to the roof?
 2. If you have ever had the roof repaired, when was the repair performed? _____
- (d) 1. Have you ever had the roof replaced?.....
 2. If you have had the roof replaced, when was the replacement performed? _____
- (e) If the roof presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.) _____
- (f) 1. Have you ever had roof repairs that involved placing shingles on the roof instead of replacing the entire roof covering?
 2. If yes, when was the repair performed? _____
 Explain: _____

4. LAND/DRAINAGE N/A YES NO UNKNOWN

- (a) Any soil stability problems?.....
- (b) Has the property ever had a drainage, flooding, or grading problem?.....
- (c) Is the residence located within a Special Flood Hazard Area (SFHA) mandating the purchase of flood insurance for federally backed mortgages?.....
 If yes, what is the flood zone? _____
- (d) Is there a retention/detention basin, pond, lake, creek, spring, or water shed on or adjoining this property?
 Explain: _____

5. BOUNDARIES N/A YES NO UNKNOWN

- (a) 1. Have you ever received a staked or pinned survey of the property?.....
 2. Are the boundaries marked in any way?.....
 3. Do you know the boundaries? If yes, provide description below.....
 Explain: _____
- (b) Are there any encroachments or unrecorded easements relating to the property of which you are aware?
 Explain: _____

6. WATER N/A YES NO UNKNOWN

- (a) 1. Source of water supply South Elkhorn water
 2. Are you aware of below normal water supply or water pressure?
- (b) Is there a water purification system or softener remaining with the house?.....
- (c) Has your water ever been tested? If yes, provide results below.....
 Explain: _____

7. SEWER SYSTEM N/A YES NO UNKNOWN


- (a) Property is serviced by:
1. Category I. Public Municipal Treatment Facility.....
2. Category II. Private Treatment Facility.....
3. Category III. Subdivision Package Plant.....
4. Category IV. Single Home Aerobic Treatment System ("Home Package Plant")
5. Category V. Septic Tank with drain field, lagoon, wetland, other onsite dispersal
6. Category VI. Septic Tank with dispersal to an offsite, multi-property cluster treatment system.....
7. Category VII. No Treatment/Unknown.....
 Name of Servicer (if known): _____
- (b) For properties with Category IV, V, or VI systems:
 Date of last inspection (sewer): 2000
 Date of last inspection (septic): _____ Date last cleaned (septic): _____
- (c) Are you aware of any problems with the sewer system?.....
 Explain: _____

- | 8. CONSTRUCTION/REMODELING | N/A | YES | NO | UNKNOWN |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| (a) Have there been any additions, structural modifications, or other alterations made? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) Were all necessary permits and government approvals obtained?..... | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Explain: _____ | | | | |
| 9. HOMEOWNER'S ASSOCIATION | N/A | YES | NO | UNKNOWN |
| (a) 1. Is the property subject to rules or regulations of a homeowner's association?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If yes, what is the yearly assessment? \$ <u>300.00</u> | | | | |
| 3. Homeowner's Association Name: <u>Stirling Lane Home Owners</u> | | | | |
| HOA Primary Contact Name: <u>Amanda Smiley</u> | | | | |
| HOA Primary Contact Phone No. <u>859-433-7319</u> | | | | |
| (b) Are you aware of any condition that may result in an increase in taxes or assessments?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Are any features of the property shared in common with adjoining landowners such as: walls, fences, driveways, etc?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Explain: _____ | | | | |
| 10. MISCELLANEOUS | N/A | YES | NO | UNKNOWN |
| (a) Was this house built before 1978? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Are you aware of any use of urea formaldehyde, asbestos materials, or lead based paint in or on this home?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) 1. Are you aware of any testing for radon gas?..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Results, if tested 2010 _____ | | | | |
| (d) Are you aware of any underground storage tanks, old septic tanks, field lines, cisterns or abandoned wells on the property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (e) Are there any other environmental hazards known to seller? (e.g., carbon monoxide, hazardous waste, water contamination or methamphetamine contamination)..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

METHAMPHETAMINE CONTAMINATION DISCLOSURE REQUIREMENT

A property owner who chooses **NOT** to decontaminate a property used in the production of methamphetamine **MUST** make written disclosure of methamphetamine contamination pursuant to KRS 224.1-410(10) and 902 KAR 47:200. Failure to properly disclose methamphetamine contamination is a Class D Felony under KRS 224.99-010.

- | | | | | |
|--|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| (f) Are you aware of any present or past wood infestation (e.g., termites, borers, carpenter ants, fungi, etc.)?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (g) Are you aware of any damage due to wood infestation?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (h) 1. Has the house or other improvements ever been treated for wood infestation? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. If yes, when, by whom, and any warranties? _____ | | | | |
| (i) Are you aware of any existing or threatened legal action affecting this property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (j) Are there any assessments other than property assessments that apply to this property (e.g., sewer assessments)?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (k) Are you aware of any violations of local, state, or federal laws, codes, or ordinances relating to this property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (l) Are you aware of any other conditions that are defective with regard to this property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (m) Are there any environmental hazards known to seller? E.g., methamphetamine contamination? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (n) Are there any warranties to be passed on?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (o) Has this house ever been damaged by fire or other disaster (e.g., tornado, hail, etc.)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please explain: <u>Hail(new roof, garage doors, gutters)</u> | | | | |
| (p) Are you aware of the existence of mold or other fungi on the property?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (q) Has this house ever had pets living in it? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, Explain <u>dogs</u> | | | | |
| (r) Is the property in a historic district?..... | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

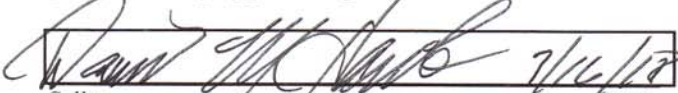
Initials (Seller)  Date/Time 7/15/18
11:00 AM

Initials (Buyer) Date/Time _____

PROPERTY ADDRESS: 118 Stirling Lane, Nicholasville, KY 40356 with a Versailles, KY 40383 mailing address

SPACE FOR ADDITIONAL INFORMATION

Seller states that the information contained in this Disclosure of Property Condition Form is complete and accurate to the best of his/her/their knowledge and belief. **Seller agrees to immediately notify Buyer of any changes that may become known to Seller prior to closing by providing a written addendum hereto.**


Seller _____ Date 7/16/18

Nancy L. Hawk 7/16/2018
Seller _____ Date _____

THE REAL ESTATE AGENT NAMED HERE, _____, HAS BEEN REQUESTED BY THE OWNER TO COMPLETE THIS FORM AND HAS DONE SO. SELLER HEREBY AGREES TO HOLD HARMLESS THE NAMED REAL ESTATE AGENT FOR ANY REPRESENTATIONS THAT APPEAR ON THIS FORM IN ACCORDANCE WITH KRS 324.360(9).

Seller: _____

Date 7/15/18

THE SELLER REFUSES TO COMPLETE THIS FORM AND ACKNOWLEDGES THAT THE REAL ESTATE AGENT SHALL SO INFORM THE BUYER.

Seller: _____
Date: _____

Seller: _____
Date: _____

THE SELLER HAS REFUSED TO COMPLETE THIS FORM AND HAS REFUSED TO ACKNOWLEDGE HIS FAILURE TO COMPLETE THE FORM

Broker/Real estate agent: _____

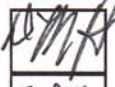
Date: _____

THE BUYER ACKNOWLEDGES RECEIPT OF THIS FORM.

Buyer _____ Date _____

Buyer _____ Date _____

THIS FORM PROVIDES THE MINIMUM DISCLOSURES REQUIRED BY LAW. SELLER MAY DISCLOSE ADDITIONAL INFORMATION NOT REQUESTED ON THIS FORM AND MAY RESPOND TO ADDITIONAL INQUIRIES OF THE BUYER.

Initials (Seller) 
N.L.H. Date/Time 7/15/18
11: AM

Initials (Buyer) _____

Date/Time _____