



**EXEMPT SELLER DISCLOSURE**  
**Use by Sellers Who Are Exempt From Completing a TDS,**  
**Or For Any Seller Who Does Not Provide a SPQ.**  
 (C.A.R. Form ESD, Revised 6/23)



Seller makes the following disclosures with regard to the real property or manufactured home described as 9255 N Magnolia Ave, situated in Santee (City), San Diego (County), California, 92071 (Zip Code), Assessor's Parcel No. 773-811-67-27 ("Property").

☐ This property is a duplex, triplex or fourplex. An ESD is required for all units. This ESD is for all units (or ☐ only unit(s) 310).

1. **A.** Under California law (Civil Code §1102, et seq.) most Sellers of real property containing 1-4 residential units are required to provide prospective Buyers with a completed Real Estate Transfer Disclosure Statement ("TDS"). Certain Sellers are exempt from completing the TDS but not exempt from making other disclosures. Sellers who are not legally required to complete a TDS can use this form to make other required disclosures, including the disclosure of material facts of which they are aware.
- B.** Under Civil Code §§ 1101.4 and 1101.5, non-compliant plumbing fixtures in any single family or multi-family residential real property built before January 1, 1994 shall be replaced by the Property owner with water- conserving plumbing fixtures.

**2. THE FOLLOWING ARE REPRESENTATIONS MADE BY THE SELLER AND ARE NOT THE REPRESENTATIONS OF THE AGENT(S), IF ANY. THIS DISCLOSURE STATEMENT IS NOT A WARRANTY OF ANY KIND BY THE SELLER OR ANY AGENT(S) AND IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE PRINCIPAL(S) MAY WISH TO OBTAIN. A REAL ESTATE BROKER IS QUALIFIED TO ADVISE ON REAL ESTATE TRANSACTIONS. IF SELLER OR BUYER DESIRE LEGAL ADVICE, CONSULT AN ATTORNEY.**

**3. Are you (Seller) aware of any of the following? (Explain any "yes" answers below.)**

- |                                                                                                                                                                                   |                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>A.</b> Within the last 3 years, the death of an occupant of the Property upon the Property .....                                                                               | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>B.</b> An Order from a government health official identifying the Property as being contaminated by methamphetamine. (If yes, attach a copy of the Order.) .....               | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>C.</b> The release of an illegal controlled substance on or beneath the Property .....                                                                                         | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>D.</b> Whether the Property is located in or adjacent to an "industrial use" zone .....                                                                                        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| (In general, a zone or district allowing manufacturing, commercial or airport uses.)                                                                                              |                                                                     |
| <b>E.</b> Whether the Property is affected by a nuisance created by an "industrial use" zone .....                                                                                | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>F.</b> Whether the Property is located within 1 mile of a former federal or state ordnance location .....                                                                      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| (In general, an area once used for military training purposes that may contain potentially explosive munitions.)                                                                  |                                                                     |
| <b>G.</b> Whether the Property is a condominium or located in a planned unit development or other common interest subdivision .....                                               | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>H.</b> Insurance claims affecting the Property within the past 5 years.....                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>I.</b> Matters affecting title of the Property .....                                                                                                                           | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>J.</b> Plumbing fixtures on the Property that are non-compliant plumbing fixtures as defined by Civil Code § 1101.3 .....                                                      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>K.</b> Any other material facts or defects affecting the Property, or material documents in Seller's possession affecting the Property, not otherwise disclosed to Buyer ..... | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

Explanation, or ☐ (if checked) see attached; \_\_\_\_\_

**Seller represents that the information herein is true and correct to the best of Seller's knowledge as of the date signed by Seller. Seller hereby authorizes any agent(s) representing any principal(s) in this transaction to provide a Copy of this statement to any person or entity in connection with any actual or anticipated sale of the Property.**

Seller 1994 Edwin C Olsen, Sr. Revocable Trust Date 4/26/2025 | 1:26:20 PM PDT  
 Seller 2DA7EF7DB1394DA... Date \_\_\_\_\_

**By signing below, Buyer acknowledges Buyer has received, read, and understands this Exempt Seller Disclosure form.**

Buyer \_\_\_\_\_ Date \_\_\_\_\_  
 Buyer \_\_\_\_\_ Date \_\_\_\_\_

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