

# KIRKPATRICK & Co.

*Is Pleased to Announce  
The Exclusive Offering of*

**1801 Royster Road  
12.73 ± Acres  
Fayette County, Kentucky**



*~~Offered at \$674,000~~  
**Reduced to \$654,000***

*Zach Davis  
859.576.8195*

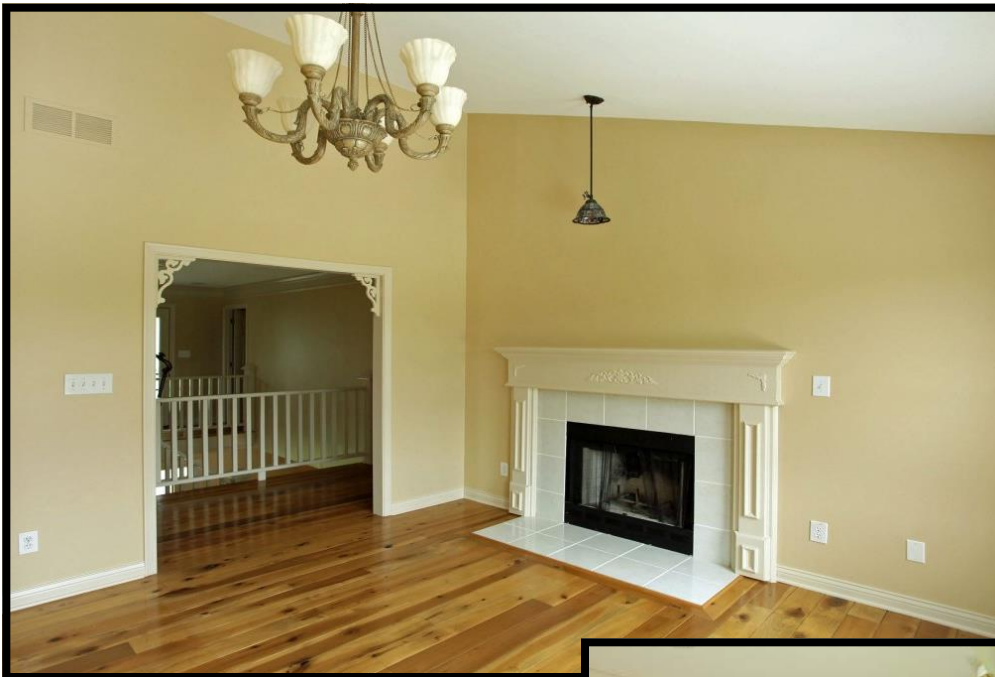


Located amongst some of the world's most renowned Thoroughbred nurseries, 1801 Royster Road offers a remarkably bucolic setting only 10-minutes from Downtown Lexington. Nestled on 12+ acres of Bluegrass land, the main residence maintains five (possibly six) bedrooms, four-and-a-half baths, expansive dining & living areas and a very nice home office, which could double as a first-floor bedroom. The added kitchen-wing boasts sweeping views of the land and neighboring farms, while offering a spectacular bar setting for cooking & entertaining. Upstairs, a grand master suite has access to a second-story porch overlooking the front lawn, while a perfectly-sized den/library room offers additional living space. This is all in addition to the home's finished basement, complete with bathroom and steam room. Other amenities include an in-ground pool and two-car attached garage. NB: The tract could accommodate a small barn & several nice paddocks.









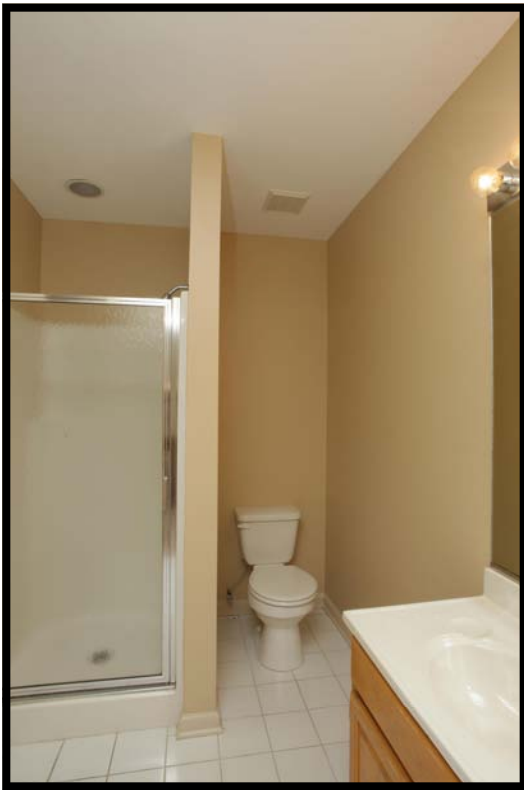
















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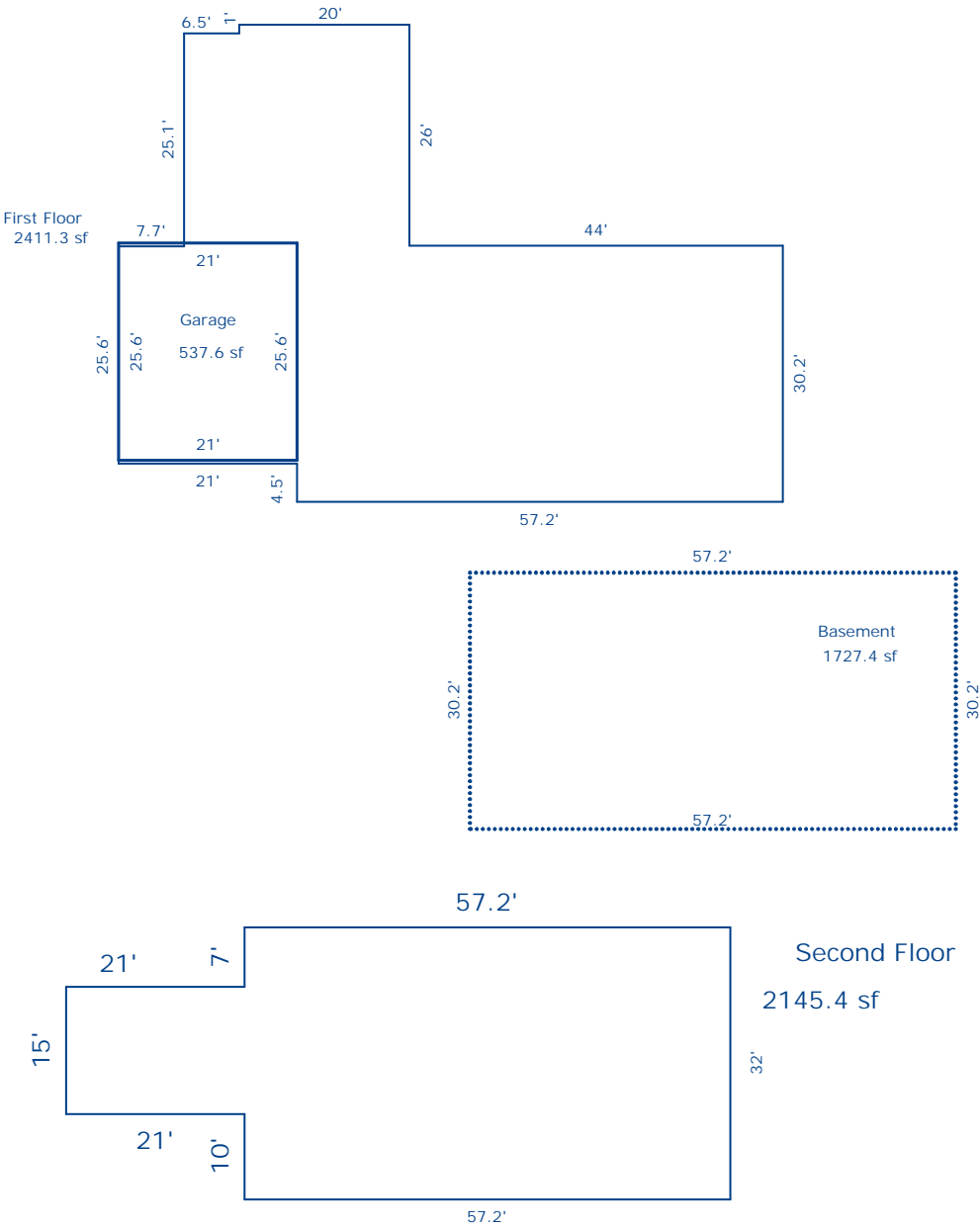
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**Zach Davis**  
**859.576.8195**  
**Zach@kirkfarms.com**

**KIRKPATRICK & CO.**  
Central Kentucky's Most Respected Source of Farm Brokerage





Sketch by Apex Sketch v5 Standard™

Comments:

AREA CALCULATIONS SUMMARY				LIVING AREA BREAKDOWN			
Code	Description	Net Size	Net Totals	Breakdown		Subtotals	
GLA1	First Floor	2411.27	4556.67	First Floor			
	Second Floor	2145.40		57.2	x 4.5	257.40	
BSMT	Basement	1727.44		78.2	x 25.6	2001.92	
GAR	Garage	537.60	537.60	0.1	x 70.5	7.05	
				1.0	x 20.0	20.00	
				25.0	x 26.5	662.50	
				Second Floor			
				0.5 x	57.2 x 0.0	0.00	
					10.0 x 57.2	572.00	
					15.0 x 78.2	1173.00	
					7.0 x 57.2	400.40	
				0.5 x	10.0 x 0.0	0.00	
				Garage		-537.60	
Net LIVABLE Area		(rounded)	4557	10 Items	(rounded)	4557	

**SELLER DISCLOSURE OF PROPERTY CONDITION**

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 it on:

30 June 1999

and ending on June 30 2013

(date of purchase)

(date of this form)

PROPERTY ADDRESS: 1801 Royster Road, Lexington, KY, 40516

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

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

**PURPOSE OF STATEMENT:** Completion of this form shall satisfy the requirements of KRS 324.360 which mandates the seller's disclosure of information about the property he 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 statement shall not be a warranty by the seller or seller's agent and shall not be intended as a substitute for an inspection or warranty the purchaser may wish to obtain. This is a statement of the conditions and information concerning 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 owning 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 agent representing any seller in this transaction. It is not a substitute for any inspections. 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 licensee to complete this form on your behalf in accordance with KRS 324.360(9). (5) If some items do not apply to your property, write "not applicable." (6) If you do not know the answer to a question, write "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 agent to provide a copy of this statement to a person or entity in connection with actual or anticipated sale of the property or as otherwise provided by law. The following are not the representations of the 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**

Any past or current problems affecting:

- |  | YES                      | NO                                  | UNKNOWN                  |
|--|--------------------------|-------------------------------------|--------------------------|
| (a) Plumbing .....   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (b) Electrical system .....  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (c) Appliances .....   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (d) Floors and walls .....   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (e) Doors and windows .....  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (f) Ceiling and attic fans .....   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (g) Security system .....  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (h) Sump pump .....  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (i) Chimneys, fireplaces, inserts .....  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (j) Pool, hot tubs, sauna .....  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (k) Sprinkler system .....   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (l) Heating <u>3 HVAC</u> age <u>10-15 yrs</u> <u>FOR THE HEATING, AN EXPLANATION</u>                    | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (m) Cooling/air conditioning <u>1 AC UNIT</u> age <u>10-15 yrs</u> <u>REPAIRS WHEN DAMAGED BY MOUSE.</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Explain: \_\_\_\_\_

**2. FOUNDATION/STRUCTURE/BASEMENT**

- |  | YES                      | NO                                  | UNKNOWN                  |
|--|--------------------------|-------------------------------------|--------------------------|
| (a) Any defects or problems, current or past, to the foundation or slab? .....           | <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 checked="" type="checkbox"/> | <input type="checkbox"/> |

Explain: \_\_\_\_\_

- |  |                          |                                     |                          |
|--|--------------------------|-------------------------------------|--------------------------|
| (c) Has the basement leaked at anytime since you have owned or lived in the property? .....                | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (d) When was the last time the basement leaked? <u>NO</u>  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (e) Have you ever had any repairs done to the basement? .....  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (f) If you have had repairs done to the basement relative to leaking, when was the repair performed? ..... | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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.) \_\_\_\_\_

Initials (Buyer)

Date/Time

Initials (Seller)

☒

Date/Time

7/25/13

9:00pm



	YES	NO	UNKNOWN
(h) Have you experienced, or are you aware of, any water or drainage problems with regard to the crawl space?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3. ROOF</b>			
(a) Age of the roof? <u>15 years</u>			
(b) 1. Has the roof leaked at any time since you have owned or lived in the property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. When was the last time the roof leaked?.....			
(c) 1. Have you ever had any repairs done to the roof? <u>3-5 times since we moved in</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. If you have ever had the roof repaired, when was the repair performed? <u>at 5 years into 5 year</u>			
(d) 1. Have you ever had the roof replaced?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. If you have had the roof replaced, when was the replacement performed? <u>NO</u>			
(e) If the roof presently leaks, how often does it leak? (e.g., every time it rains, only after an extremely heavy rain, etc.) <u>NO</u>			
(f) 1. Have you ever had roof repairs that involved placing shingles on the roof instead of replacing the entire roof?..... <u>NO</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. If you have ever had roof repairs that involved placing shingles on the roof instead of replacing the entire roof, when was the repair performed? <u>?</u>			
<b>4. LAND/DRAINAGE</b>			
(a) Any soil stability problems?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Has the property ever had a drainage, flooding, or grading problem?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Is the property in a flood plain zone?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Is there a retention/detention basin, pond, lake, creek, spring, or water shed on or adjoining this property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain:.....			
<b>5. BOUNDARIES</b>			
(a) Have you ever had a staked or pinned survey of the property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Do you know the boundaries?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Are the boundaries marked in any way?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(d) Are there any encroachments or unrecorded easements relating to the property of which you are aware?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain:.....			
<b>6. WATER</b>			
(a) 1. Source of water supply <u>Kanawha American Water Co.</u>			
2. Are you aware of below normal water supply or water pressure?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Is there a water purification system or softener remaining with the house?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Has your water ever been tested? If yes, give results	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain:.....			
<b>7. SEWER SYSTEM</b>			
(a) Property is serviced by:			
1. Category I. Public Municipal Treatment Facility;.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Category II. Private Treatment Facility;.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Category III. Subdivision Package Plant;.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Category IV. Single Home Aerobic Treatment System (AKA: "Home Package Plant")	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Category V. Septic Tank with drain field, lagoon, wetland, or other onsite dispersal;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Category VI. Septic Tank with dispersal to an offsite, multi-property cluster treatment system;.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Category VII. No Treatment/Unknown.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) For properties with Category IV, V, or VI systems:			
Date of last inspection (sewer):.....			
Date of last inspection (septic): <u>?</u> Date last cleaned (septic): <u>Nov 3-4 yrs</u>			
(c) Are you aware of any problems with the sewer system?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Explain:.....			
<b>8. CONSTRUCTION/REMODELING</b>			
(a) Have there been any additions, structural modifications, or other alterations made?.....	<input checked="" 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"/>
Explain:.....			
<b>9. HOMEOWNER'S ASSOCIATION</b>			
(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"/>
2. If yes, what is the yearly assessment? \$.....			

Initials (Buyer)



Date/Time

Initials (Seller)



Date/Time

7/28/13 9:00 PM

	YES	NO	UNKNOWN
(b) Are you aware of any condition which may result in an increase in taxes or assessments?.....	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain: <u>Buyer owns full shares on 3 sides w/ adjoining</u> <u>landowners</u>			
<b>10. MISCELLANEOUS</b>			
(a) Was this house built before 1978? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Are you aware of any use of ureaformaldehyde, asbestos materials, or lead based paint in or on this home?.....	<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"/>
2. Results, if tested .....			
(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 checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Are you aware of any present or past wood infestation (i.e. termites, bores, carpenter ants, fungi, etc.)?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) Are you aware of any damage due to wood infestation?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(g) 1. Have the house or other improvements ever been treated for wood infestation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. If yes, when, by whom, and any warranties? .....			
(h) Are you aware of any existing or threatened legal action affecting this property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(i) Are there any assessments other than property assessments that apply to this property (i.e. sewer assessments)?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(j) Are you aware of any violations of local, state, or federal laws, codes, or ordinances relating to this property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(k) Are you aware of any other conditions which are defective with regard to this property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(l) Are there any environmental hazards known to seller?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(m) Are there any warranties to be passed on?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(n) Has this house ever been damaged by fire or other disaster (i.e., tornado, hail, etc.)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, please explain: .....			
(o) Are you aware of the existence of mold or other fungi in the property?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(p) Has this house ever had pets living in it? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, Explain .....			
(q) Is the property in a historic district?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**SPACE FOR ADDITIONAL INFORMATION**

The seller has owned this property since 30 June 1999 (date) and makes these representations only since that date. Seller agrees to immediately notify Buyer of any changes which may become known to seller prior to closing.

[Signature] 7/28/13

The licensee named here ( ) has been requested by the owner to complete this form and has done so. I hereby agree to hold harmless the named licensee for any representation that appear on this form in accordance with KRS 324.360(9).

Seller: [Signature]

The Seller Refuses to complete this form and acknowledges that the agent shall so inform the buyer.

Seller: [Signature]

Date: [Signature]

Seller: [Signature]

Date: [Signature]

The Seller has refused to complete this form and has refused to acknowledge his failure to complete the form.

Broker/Agent: [Signature]

The Buyer Acknowledges receipt of this form..

[Signature] [Signature]

The Seller may disclose additional information not requested of this form and may respond to additional inquiries of the buyer.

Initials (Buyer) [Signature]

Date/Time [Signature]

Initials (Seller) [Signature]

Date/Time 7/28/13

9:00 PM