

R-39 Rev. 03/2012  
(Title page)

**IMPORTANT:** Read instructions on back of last page (Certification Page) before completing this form. Failure to comply with instructions may cause disapproval of proposed Regulations

State of Connecticut  
**REGULATION**  
of

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NAME OF AGENCY

**The Department of Consumer Protection**

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Concerning

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SUBJECT MATTER OF REGULATION

**The Real Estate Property Condition Disclosure Form**

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**Section 1.** Section 20-327b-1 of the Regulations of Connecticut State Agencies is hereby amended as follows:

**Residential Property Condition Disclosure Report**

**Sec. 20-327b-1. Residential property condition disclosure report**

The following form shall be used by sellers who are required by Section 20-327b of the Connecticut General Statutes to provide a written residential property condition disclosure report to prospective purchasers.

STATE OF CONNECTICUT  
DEPARTMENT OF CONSUMER PROTECTION  
165 Capitol Avenue ♦ Hartford, CT 06106



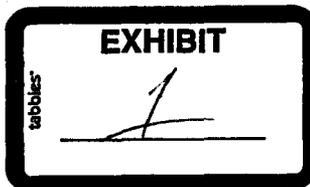
**RESIDENTIAL PROPERTY CONDITION DISCLOSURE REPORT**

Name of Seller(s):  
Property Street Address:  
Property Municipality: Zip Code:

The Uniform Property Condition Disclosure Act (Connecticut General Statutes Section 20-327b) requires the seller of residential property to provide this disclosure to the prospective purchaser prior to the prospective purchaser's execution of any binder, contract to purchase, option or lease containing a purchase option. These provisions apply to the transfer of residential real property of four dwelling units or less made with or without the assistance of a licensed broker or salesperson. The seller will be required to credit the purchaser with [the sum of \$300.00] \$500 or the amount defined in Connecticut General Statute 20-327c. at closing if the seller fails to furnish this report as required by said act.

**Connecticut law requires the owner of any dwelling in which children under the age of 6 reside to abate or manage materials containing toxic levels of lead.**

**Pursuant to the Uniform Property Condition Disclosure Act, the seller is obligated to answer the following questions and to disclose herein any knowledge of any problem regarding the following:**



YES	NO	UNKN		I. GENERAL INFORMATION	
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- |                          |                          |                          |  |                                                                           |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 1. How long have you occupied the property? _____ Age of Structure: _____ |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                                                                                                                                                 |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 2. Does anyone other than yourself have any right to use any part of your property, or does anyone else claim to own any part of your property? If yes, explain: _____<br>_____ |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                                                                       |  |
|--------------------------|--------------------------|--------------------------|--|-------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 3. Is the property in a flood hazard area or an inland wetlands area? If yes, explain: _____<br>_____ |  |
|--------------------------|--------------------------|--------------------------|--|-------------------------------------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                                                                                                                                                                                                                                                                               |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 4. Do you have any reason to believe that the municipality in which the subject property is located may impose any assessment for purposes such as sewer installation, sewer improvements, water main installation, water main improvements, sidewalks or other improvements? If yes, explain: _____<br>_____ |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                                                                                                                                                                                                    |  |
|--------------------------|--------------------------|--------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 5. Is the property located in a municipally designated village district, municipally designated historic district, or special tax district, or listed on the National Register of Historic Places? If yes, explain: _____<br>_____ |  |
|--------------------------|--------------------------|--------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

Special statement: Information concerning village districts and historic districts may be obtained from the municipality's village or historic district commission, if applicable.

YES	NO	UNKN		II. SYSTEM/UTILITIES	
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- |                          |                          |                          |  |                                                                                 |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 6. Heating system problems? If yes, explain and list fuel types. _____<br>_____ |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                                                             |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | a. Is there an underground fuel tank? If yes, give age of tank and location. _____<br>_____ |  |
|--------------------------|--------------------------|--------------------------|--|---------------------------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                                            |  |
|--------------------------|--------------------------|--------------------------|--|----------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | b. Are you aware of any problems with the fuel tank? If yes explain: _____ |  |
|--------------------------|--------------------------|--------------------------|--|----------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                                                                                                                                                                                                                                                                                                                                 |  |
|--------------------------|--------------------------|--------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | c. Was an underground storage tank on the property removed during the time you owned the property? If yes, what was the date of such removal and what was the name and address of the person or business who removed such underground storage tank? Provide any and all written documentation of such removal within your control or possession. _____<br>_____ |  |
|--------------------------|--------------------------|--------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                                                           |  |
|--------------------------|--------------------------|--------------------------|--|-------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 7. Hot water problems? If yes, explain: _____<br>Type of hot water heater _____ Age _____ |  |
|--------------------------|--------------------------|--------------------------|--|-------------------------------------------------------------------------------------------|--|
- |                          |                          |                          |  |                                                     |  |
|--------------------------|--------------------------|--------------------------|--|-----------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 8. Plumbing system problems? If yes, explain: _____ |  |
|--------------------------|--------------------------|--------------------------|--|-----------------------------------------------------|--|
- |                          |                          |                          |  |                                                                                                                                   |  |
|--------------------------|--------------------------|--------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  | 9. Sewage system problems? If yes, explain: _____<br>Type of sewage disposal system (central sewer, septic, cesspool, etc.) _____ |  |
|--------------------------|--------------------------|--------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------|--|
- |    |  |  |  |                                                                                             |  |
|----|--|--|--|---------------------------------------------------------------------------------------------|--|
| a. |  |  |  | If private: (a) Name of service company _____<br>(b) Date last pumped _____ Frequency _____ |  |
|----|--|--|--|---------------------------------------------------------------------------------------------|--|
- |    |  |  |  |                                                                                                                                                                                                                                                                                                                       |  |
|----|--|--|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| b. |  |  |  | If public:<br>(1) Is there a separate charge made for sewer use? Yes _____ No _____<br>(2) If separate charge, is it a flat amount or metered? _____<br>(3) If flat amount, please state amount and due dates: _____<br>(4) Are there any unpaid sewer charges? Yes _____ No _____<br>If yes, state the amount: _____ |  |
|----|--|--|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

- 10. Air conditioning problems? If yes, explain: \_\_\_\_\_  
 Air Conditioning type: Central \_\_\_\_\_ Window \_\_\_\_\_ Other \_\_\_\_\_
- 11. Electrical System problems? If yes, explain: \_\_\_\_\_
- 12. Are you aware of any problem with the well or domestic water quality, quantity, recovery, and/or pressure? If yes, explain: \_\_\_\_\_
- a. Was well water tested for contaminants/volatile organic compounds? If yes, attach a copy of the report.
- b. Are there any unpaid water charges? If yes, state the amount: \_\_\_\_\_
- c. Is there a separate expense for water usage? If yes, state if flat or metered, give the amount and explain: \_\_\_\_\_
- 13. Electronic security problems? If yes, explain: \_\_\_\_\_
- 14. Are there carbon [Carbon] monoxide or smoke detectors anywhere on the property? [problems?] If yes, [explain.] state whether you have experienced any problems with such detectors. Explain any such problems.
- 15. Fire sprinkler system problems? If yes, explain: \_\_\_\_\_

YES	NO	UNKN		III. BUILDING/STRUCTURE/IMPROVEMENTS	
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- 16. Foundation/slab problems/settling? If yes, explain: \_\_\_\_\_
- 17. Basement Water/Seepage/Dampness? If yes, explain amount, frequency and location. \_\_\_\_\_
- 18. Sump pump problems? If yes, explain: \_\_\_\_\_
- 19. Roof leaks[, problems]? If yes, explain: \_\_\_\_\_  
 Roof type: \_\_\_\_\_ Age: \_\_\_\_\_
- 20. Interior walls/ceiling problems? If yes, explain: \_\_\_\_\_
- 21. Exterior siding problems? If yes, explain: \_\_\_\_\_
- 22. Floor problems? If yes, explain: \_\_\_\_\_

- 23. Chimney/fireplace/wood or coal stove problems? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
- 24. Fire/smoke damage? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
- 25. Patio/deck problems? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
If made of wood, is wood treated or untreated? \_\_\_\_\_
- 26. Driveway problems? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
- 27. Termite/insect/rodent/pest infestation problems? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
- 28. Is house insulated? If yes, type \_\_\_\_\_ Location \_\_\_\_\_
- 29. Rot and water damage problems? If yes, explain: \_\_\_\_\_  
\_\_\_\_\_
- 30. Water drainage problems? If yes, explain: \_\_\_\_\_
- 31. Are asbestos containing insulation or building materials present? If yes, location \_\_\_\_\_  
\_\_\_\_\_
- 32. Is lead paint present? If yes, location \_\_\_\_\_  
\_\_\_\_\_
- 33. Is lead plumbing present? If yes, location \_\_\_\_\_  
\_\_\_\_\_
- 34. Has test for radon been done? If yes, attach copy of report.  
State whether a radon control system is in place, or whether a radon control system has been in place  
in the previous twelve months. If yes, explain. \_\_\_\_\_  
\_\_\_\_\_
- 35. Does the property include any leased items? If yes, explain.  
(Items to be listed include, but are not limited to: propane fuel tanks, water heaters, major appliances,  
alarm systems and solar devices.) \_\_\_\_\_
- 36. Is the property subject to any types of land use restrictions, other than those contained within the  
property's chain of title or that are necessary to comply with state laws or municipal zoning? \_\_\_\_\_  
If yes, explain. \_\_\_\_\_  
\_\_\_\_\_
- 37. Is the property located in a common interest community?  
\_\_\_\_\_
- 38. Do you have any knowledge of prior or pending litigation, government agency or  
administrative actions, orders or liens on the property related to the release of any hazardous  
substance? If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

The Seller should use this area to further explain any item above. Attach additional pages if necessary and indicate here \_\_\_\_\_ the number of additional pages attached.



## **Statement of Purpose**

*Pursuant to CGS Section 4-170(b)(3), "Each proposed regulation shall have a statement of its purpose following the final section of the regulation."*

(A) Purpose: Connecticut General Statutes Section 20-327b requires the Commissioner of Consumer Protection to adopt regulations establishing the contents of the Real Estate Property Condition Disclosure Form. The purpose of these proposed regulations is to add additional disclosures and make other changes to the existing Real Estate Property Condition Disclosure Form, as set forth in Public Act 2012-122.

(B) Summary: These regulations modify the Real Estate Property Condition Disclosure Form.

(C) Legal Effects: Regulation Section 20-327b-1 contains the actual Real Estate Property Condition Disclosure Form, so this section must be formally amended each time a statutory, technical, aesthetic, or other change is made to this Form. These proposed regulations modify the Form by adding the following disclosures and by making the following changes:

1. Whether a property located in a common interest community is subject to any community or association dues or fees;
2. That the prospective purchaser should consult with the building official in the municipality where the property is located to confirm that applicable building permits and certificates of occupancy have been issued for work on the property;
3. That the prospective purchaser should have the property inspected by a licensed home inspector;
4. Whether the seller is aware of any prior or pending litigation or government agency or administrative action, order, or lien on the premises related to the release of any hazardous substance;
5. Whether there are smoke and carbon monoxide detectors located in a dwelling on the premises, and (b) if there have been any problems with the detectors, and explain the problems; and
6. Whether during the seller's ownership an underground storage tank on the property was removed. If so, documentation of such removal within the seller's possession and control shall be provided.

The proposed regulation also updates the credit, from \$300.00 to \$500.00, which the seller must give the purchaser at closing if he or she does not furnish the written Residential Property Condition Disclosure Report.