

ITEMS TO CONVEY
(AT NO VALUE)

Seller HEATHER D. HERNANDEZ

Street Address _____ County _____

City _____, West Virginia Zip _____

Yes	No	#	Items	Yes	No	#	Items	Yes	No	#	Items
<input type="checkbox"/>	<input type="checkbox"/>		Alarm System	<input type="checkbox"/>	<input type="checkbox"/>		Freezer	<input type="checkbox"/>	<input type="checkbox"/>		Satellite Dish
<input type="checkbox"/>	<input type="checkbox"/>		Built-in Microwave	<input type="checkbox"/>	<input type="checkbox"/>		Furnace Humidifier	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	Storage Shed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	3	Ceiling Fan	<input type="checkbox"/>	<input type="checkbox"/>		Garage Opener	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	Stove or Range
<input type="checkbox"/>	<input type="checkbox"/>		Central Vacuum	<input type="checkbox"/>	<input type="checkbox"/>		w/remote	<input type="checkbox"/>	<input type="checkbox"/>		Trach Compactor
<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	Clothes Dryer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	Gas Log	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	Wall Mount Brackets
<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	Clothes Washer	<input type="checkbox"/>	<input type="checkbox"/>		Hot Tub, Equip & Cover	<input type="checkbox"/>	<input type="checkbox"/>		Wall Oven
<input type="checkbox"/>	<input type="checkbox"/>		Cooktop	<input type="checkbox"/>	<input type="checkbox"/>		Intercom	<input type="checkbox"/>	<input type="checkbox"/>		Water Treatment System
<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>		Playground Equipment	<input type="checkbox"/>	<input type="checkbox"/>		Window A/C Unit
<input type="checkbox"/>	<input type="checkbox"/>		Disposal	<input type="checkbox"/>	<input type="checkbox"/>		Pool, Equip, & cover	<input type="checkbox"/>	<input type="checkbox"/>		Window Fan
<input type="checkbox"/>	<input type="checkbox"/>		Electronic Air Filter	<input type="checkbox"/>	<input type="checkbox"/>		Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>		Window Treatments
<input type="checkbox"/>	<input type="checkbox"/>		Fireplace Screen/Door	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	Refrigerator w/ice maker	<input type="checkbox"/>	<input type="checkbox"/>		Wood Stove

A. **As-Is Items:** Seller will not warrant the condition or working order of the following items and/or systems:

B. **Items That Do Not Convey:** _____

SELLER:

PURCHASER:

Heather Hernandez 6/25/24
Signature Date

Signature Date

Signature Date

Signature Date

Final Inspection (see Residential Sales Contract #8) of FINAL PROPERTY INSPECTION made on _____.
The items to convey and the following items are acceptable: Roof, Structure, Heating System, Plumbing, Water Heater, Exhaust fans, Lights/Outlets, Central Air, Attic Fans, Smoke Detectors, Door Keys, Blinds/Shades, etc. All items are in acceptable condition (see Regional Sales Contract #7) or are noted below

- Seller to credit the Purchaser \$ _____.
- Repairs to be paid from escrow as per escrow agreement.
- Seller to correct discrepancies within _____ days.

The Agent shall not be liable for any breach of any agreement made by the Seller and Purchaser above.

SELLER:

PURCHASER:

Signature Date

Signature Date

Signature Date

Signature Date