

BUILDING DATA SHEET "A"
Parcel 13 (14-910-13)

The Building Removal Item A shall include all costs incidental thereto, including but not limited to, labor, equipment, hauling and disposal cost for the removal of all items including but not limited to the following in Building Site A:

Address: 11311 Douglas Drive North
Age 60 years

Foundation: Crawl space, 16' x 24' detached garage

Frame: 1story – wood frame w/vinyl exterior
780 sf

Mechanical Equipment: Gas water heater, electric baseboard

Interior Furnishings: Kitchen, cabinets, 1-bedrooms 1 bath, living room
and dining room

Other Buildings: Deck in front, fireplace in living room, old storage
building behind garage

Other Facilities: Well, water and sanitary sewer service will need to
be removed to street.
Gas, electric

Bidders are hereby further advised that condition surveys for the existence of asbestos and other hazardous materials have been performed on the buildings to be removed. The reports are available on the County's plan room web site (Access setup required).

The Contractor shall remove any items other than trees or shrubs outside of the road construction limits. He shall shape the area of the house foundation to drain to the street plus grades shall allow for future mowing and shall seed with seed mixture #150 all areas outside of construction limits.

The site contains a well as shown on the attached well disclosure record.

The item 2103.501 Remove Building A shall consist of removal from the parcel the existing 1 story house located at 11311 Douglas Drive North along with all other improvements.

COUNTY USE ONLY

MDH USE ONLY

MINNESOTA DEPARTMENT OF HEALTH
Well Management Section, P.O. Box 64975, St. Paul, Minnesota 55164-0975
651/201-4587 or 800/383-9808

WELL DISCLOSURE CERTIFICATE
PLEASE TYPE OR PRINT ALL INFORMATION

Person filing deed must include a \$45 fee payable to the county recorder.

A. PROPERTY LOCATION LEGAL DESCRIPTION

Attach a legal description of the property.

County Hennepin	Section No.	Township No.	Range No.	Quarter (or Government Lot)
Lot No(s) 1	Block No. 4	Addition Name Fairview Gardens		Outlot Tract
Property Street Address 11651 Douglas Dr. N				
City/Township Champlin		ZIP Code 55316	Property ID No./Parcel No. (optional)	

B. PROPERTY BUYER MAILING ADDRESS AFTER CLOSING

First Name	Middle Initial	Last Name	
Company Name (if applicable) Hennepin County Public Works			
Mailing Address 1600 Prairie Dr.			
Mailing Address			
City Medina	State/Province MN	ZIP Code 55340	Telephone No. (including area code) (612) 596-0321

Provide Name of Seller (please print) Hennepin County

C. CERTIFICATION BY SELLER

I certify that the information provided on this certificate is accurate and complete to the best of my knowledge.

Ray J. Saba 20 Nov 09
Signature of Seller or Designated Representative of Seller Date

D. CERTIFICATION BY BUYER

For fulfillment of a contract for deed, the buyer or person authorized to act on behalf of the buyer, must sign a Well Disclosure Certificate if there is a well on the property.

In the absence of a seller's signature, the buyer, or person authorized to act on behalf of the buyer may sign this Well Disclosure Certificate. No signature is required by the buyer if the seller has signed above.

Based on disclosure information provided to me by the seller or other available information, I certify that the information on this certificate is accurate and complete to the best of my knowledge.

Signature of Buyer or Designated Representative of Buyer Date

IMPORTANT NOTE: The Minnesota Department of Health (MDH) will follow-up with the property buyer regarding any wells disclosed as not in use. If a well is not in use, the property owner must either return the well to use, have the well sealed by a licensed well contractor, or obtain an annual maintenance permit from the MDH for \$175. A copy of this Well Disclosure Certificate should be provided to the property buyer at the time of closing.