



MULTIFAMILY PROPERTY DISCLOSURE RIDER

(To be used in conjunction with Property Disclosure – Residential)

1 **SELLER:** JH Holdings LLC

2 **PROPERTY LOCATION:** 9932 E. 36th Street, Independence, MO 64052

3 **NUMBER OF UNITS:** 10

4
5 **1. RENT SCHEDULE (If more than 6 units, attach additional rent schedule).** **Check box if additional**
6 **schedule attached.**

7
8 Monthly Rent: If vacant please enter most recent rent amount.
9 Legend: H = Heat, HW = Hot Water, E = Electric, W = Water, S = Sewer, G = Gas

Unit #	Lease (Y/N) or last occupied	Lease Begin MM/YY	Lease End MM/YY	Monthly Rent	Is rent current?	Amount of Security Deposit (Tenants/Pets)	Tenant Pays (Check)	Landlord Pays (Check)
1	Y	01/2026	12/2027	1150	Y	1000	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
2	N	N/a	N/a	N/a	N/a	N/a	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
3	Y	01/2026	12/2027	1189	Y	450	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
4	Y	09/2025	08/2026	1166	Y	1000	<input type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input checked="" type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
5	N	N/a	N/a	N/a	N/a	N/a	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
6	Y	08/2025	07/2026	1026	Y	1000	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S

10
11 Have any tenants given notice, been served Notices to Quit, or eviction proceedings begun against any
12 tenants? No

13
14 **2. ADDITIONAL PROPERTY INCOME (laundry, storage, garage rental, etc):** No

15
16
17 **3. EXPENSE INFORMATION:**

18 a. Annual real estate taxes and year:.....\$ 8000

19 b. Annual hazard insurance:.....\$ 7500

20 c. Annual snow removal expense:.....\$ 200

21 d. Annual lawn mowing, yard maintenance expense:.....\$ 400

22 e. Annual fuel consumption paid by landlord:.....\$ 3000#Gallons, cu.ft: n/a

23 f. Annual electric costs paid by landlord:.....\$ 3000

24 g. Annual trash removal expense:.....\$ 3000

25 h. Other expense: property management - 6000

26
 Initials **SELLER and BUYER acknowledge they have read this page** Initials BUYER | BUYER

27 **4. APPLIANCE/HVAC/WATER HEATER SCHEDULE (only list appliances included in sale, if more than**
28 **6 units, attach additional appliance schedule). Check box if additional schedule attached.**

Unit	Stove	DW	Refrigerator	Microwave	Washer	Dryer	Furnace/ Age	Central Ac Age	Water Heater Age	Window Unit(s)
1	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N
2	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N
3	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N
4	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N
5	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N
6	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N

29
30 **5. ADDITIONAL INFORMATION:**

31 a. Any other leases or contracts for services on the building? Yes No If yes, please specify: _____

32
33 b. Attached Operating/Income Statement for _____ years.


34 c. Additional comments:
35
36
37

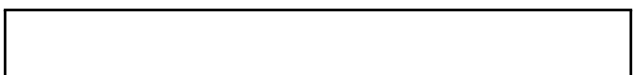
38 **RENTS SHALL BE PRO-RATED AS OF THE DAY OF CLOSING. ALL PRO-RATED RENTS AND DEPOSITS**
39 **SHALL TRANSFER TO BUYER AT CLOSING.**


40
41 **AFTER ALL BUYER CONTINGENCIES ARE SATISFIED, SELLER AGREES TO PROVIDE BUYER COPIES OF**
42 **ALL LEASES.**

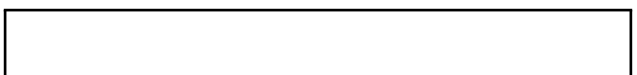
43
44 **SELLER ACKNOWLEDGES THAT SELLER HAS PROVIDED THE ABOVE INFORMATION AND THAT SUCH**
45 **INFORMATION IS ACCURATE, TRUE AND COMPLETE TO THE BEST OF SELLER KNOWLEDGE. SELLER**
46 **AUTHORIZES THE LISTING BROKER TO DISCLOSE THE INFORMATION CONTAINED HEREIN TO OTHER**
47 **BROKERS AND BUYER'S.**

48
49 **CAREFULLY READ THE TERMS HEREOF BEFORE SIGNING. WHEN SIGNED BY ALL PARTIES, THIS**
50 **DOCUMENT BECOMES PART OF A LEGALLY BINDING CONTRACT. IF NOT UNDERSTOOD, CONSULT AN**
51 **ATTORNEY BEFORE SIGNING.**

52
53  dotloop verified
01/12/26 7:44 AM PST
XUFW-GM2Z-VQLB-BPZ6
54 **SELLER** **DATE**


54 **BUYER** **DATE**

55
56  dotloop verified
01/14/26 9:25 AM CST
U2M4-NLHN-FQLR-BEMB
57 **SELLER** **DATE**


57 **BUYER** **DATE**

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(To be used in conjunction with Property Disclosure – Residential)

1 **SELLER:** JH Holdings LLC

2 **PROPERTY LOCATION:** 9932 East 36th Street South, Independence, MO 64052

3 **NUMBER OF UNITS:** 10

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5 **1. RENT SCHEDULE (If more than 6 units, attach additional rent schedule).** Check box if additional
6 **schedule attached.**

7
8 Monthly Rent: If vacant please enter most recent rent amount.
9 Legend: H = Heat, HW = Hot Water, E = Electric, W = Water, S = Sewer, G = Gas

Unit #	Lease (Y/N) or last occupied	Lease Begin MM/YY	Lease End MM/YY	Monthly Rent	Is rent current?	Amount of Security Deposit (Tenants/Pets)	Tenant Pays (Check)	Landlord Pays (Check)
7	Y	02/2026	01/2027	1226	Y	1000	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
8	Y	11/2025	10/2026	1031	Y	1000	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
9	Y	11/2025	10/2026	1050	Y	1000	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
10	Y	10/2025	09/2026	1050	Y	1000	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> S
							<input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S
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11 Have any tenants given notice, been served Notices to Quit, or eviction proceedings begun against any
12 tenants? No

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14 **2. ADDITIONAL PROPERTY INCOME (laundry, storage, garage rental, etc):** No

15
16
17 **3. EXPENSE INFORMATION:**

18 a. Annual real estate taxes and year:.....\$ 8000

19 b. Annual hazard insurance:.....\$ 7500

20 c. Annual snow removal expense:.....\$ 200

21 d. Annual lawn mowing, yard maintenance expense:.....\$ 400

22 e. Annual fuel consumption paid by landlord:.....\$ 3000#Gallons, cu.ft.:

23 f. Annual electric costs paid by landlord:.....\$ 3000

24 g. Annual trash removal expense:.....\$ 3000

25 h. Other expense: property management - 6000

26

Initials **SELLER and BUYER acknowledge they have read this page** Initials BUYER | BUYER

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28 **6 units, attach additional appliance schedule). Check box if additional schedule attached.**

Unit	Stove	DW	Refrigerator	Microwave	Washer	Dryer	Furnace/ Age	Central Ac Age	Water Heater Age	Window Unit(s)
7	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N
8	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N
9	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N
10	Y	N	Y	N	N	N	1 yr	1 yr	1 yr	N

29
30 **5. ADDITIONAL INFORMATION:**

31 a. Any other leases or contracts for services on the building? Yes No If yes, please specify: _____

32
33 b. Attached Operating/Income Statement for _____ years.


34 c. Additional comments:
35
36
37


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52
53  dotloop verified
02/04/26 4:54 PM PST
NMAE-NCXB-F4SY-EJD4
54 **SELLER** **DATE**


54 **BUYER** **DATE**

55
56  dotloop verified
02/07/26 10:08 AM CST
LLSH-J40T-LBWR-E9DF
57 **SELLER** **DATE**


57 **BUYER** **DATE**

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3 **NUMBER OF UNITS:** 10

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5 **1. RENT SCHEDULE (If more than 6 units, attach additional rent schedule).** **Check box if additional**
6 **schedule attached.**

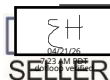


7
8 Monthly Rent: If vacant please enter most recent rent amount.
9 Legend: H = Heat, HW = Hot Water, E = Electric, W = Water, S = Sewer, G = Gas

Unit #	Lease (Y/N) or last occupied	Lease Begin MM/YY	Lease End MM/YY	Monthly Rent	Is rent current?	Amount of Security Deposit (Tenants/Pets)	Tenant Pays (Check)	Landlord Pays (Check)
1	Y	04/2025	03/2026	750	Y	750	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
2	Y	04/2025	03/2026	750	Y	750	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
3	Y	04/2025	03/2026	750	Y	750	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
4	Y	month to month	month to month	1000	Y	500	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
5	Y	month to month	month to month	600	Y	600	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
6	Y	12/2025	11/2026	1028	Y	1000	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S

10
11 Have any tenants given notice, been served Notices to Quit, or eviction proceedings begun against any
12 tenants? unit 5 has been notice to quit due to her erratic behavior

13
14 **2. ADDITIONAL PROPERTY INCOME (laundry, storage, garage rental, etc):** tenants in units 1,2,3,7,8 pay a utility
15 of \$90 per month

16
17 **3. EXPENSE INFORMATION:**
18 a. Annual real estate taxes and year:.....\$ 8000
19 b. Annual hazard insurance:.....\$ 7500
20 c. Annual snow removal expense:.....\$ 200
21 d. Annual lawn mowing, yard maintenance expense:.....\$ 400
22 e. Annual fuel consumption paid by landlord:.....\$ 3000#Gallons, cu.ft.:
23 f. Annual electric costs paid by landlord:.....\$ 3000
24 g. Annual trash removal expense:.....\$ 3000
25 h. Other expense:.....\$ _____
26

 Initials SELLER and BUYER acknowledge they have read this page Initials  

27 **4. APPLIANCE/HVAC/WATER HEATER SCHEDULE (only list appliances included in sale, if more than**
 28 **6 units, attach additional appliance schedule). Check box if additional schedule attached.**

Unit	Stove	DW	Refrigerator	Microwave	Washer	Dryer	Furnace/ Age	Central Ac Age	Water Heater Age	Window Unit(s)
1	Y	N	Y	N	N	N	12	12	12	y
2	Y	N	Y	N	N	N	12	12	12	y
3	Y	N	Y	N	N	N	12	12	12	N
4	Y	N	Y	N	N	N	12	12	12	N
5	Y	N	Y	N	N	N	12	12	12	N
6	Y	N	Y	N	N	N	12	12	12	y

29
 30 **5. ADDITIONAL INFORMATION:**

31 a. Any other leases or contracts for services on the building? Yes No If yes, please specify: _____

32
 33 b. Attached Operating/Income Statement for _____ years.


34 c. Additional comments: _____

35
 36
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 51 **ATTORNEY BEFORE SIGNING.**

52
 53  dotloop verified
 04/21/26 7:23 AM PDT
 9WBE-NIXZ-TDE7-EZEC

54 **SELLER** **DATE**

55
 56 **SELLER** **DATE**

54 **BUYER** **DATE**

55
 56 **BUYER** **DATE**

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7	Y	04/2025	03/2026	650	Y	400	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
8	Y	04/2025	03/2026	650	Y	650	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
9	N	N/a	N/a	N/a	N/a	N/a	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
10	Y	08/2025	07/2026	1182	Y	1182	<input checked="" type="checkbox"/> H <input type="checkbox"/> HW <input checked="" type="checkbox"/> G <input checked="" type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> S	<input type="checkbox"/> H <input checked="" type="checkbox"/> HW <input type="checkbox"/> G <input type="checkbox"/> E <input type="checkbox"/> W <input checked="" type="checkbox"/> S
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25 h. Other expense: _____
26

SELLER Initials JH **SELLER and BUYER acknowledge they have read this page** Initials
BUYER BUYER

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Unit	Stove	DW	Refrigerator	Microwave	Washer	Dryer	Furnace/ Age	Central Ac Age	Water Heater Age	Window Unit(s)
7	Y	N	Y	N	N	N	12 yr	12 yr	12 yr	N
8	Y	N	Y	N	N	N	12 yr	12 yr	12 yr	N
9	Y	N	Y	N	N	N	12 yr	12 yr	12 yr	N
10	Y	N	Y	N	N	N	12 yr	12 yr	12 yr	N

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 30 **5. ADDITIONAL INFORMATION:**

31 a. Any other leases or contracts for services on the building? Yes No If yes, please specify: _____

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52  dotloop verified
 01/12/26 7:44 AM PST
 LQ05-YLBY-DU20-RTDL


53 **SELLER** **DATE**



BUYER **DATE**

55  dotloop verified
 01/14/26 9:25 AM CST
 MCRK-ICX4-FXTA-FVQJ

56 **SELLER** **DATE**



BUYER **DATE**

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