



Property Inclusions/Exclusions Rider page ____ of ____
PROPERTY INCLUSIONS / EXCLUSIONS RIDER

Connecticut REALTORS®, Inc.



Property Address: 3808 Redding Road, Fairfield, CT 06824 Town Fairfield

THIS IS NOT A WARRANTY BY THE SELLER OF THE CONDITION OF THE PERSONAL PROPERTY ON THIS STATEMENT.

*Inc = Includes; Ex = Excludes; NA = Not Applicable

Inc	Ex	NA	APPLIANCES
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air conditioner <u>4</u> unit(s)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clothes dryer
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clothes washer
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dehumidifier
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dishwasher
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage Compactor
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage Disposal
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hood for oven range
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Microwave
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oven range
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refrigerator
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Add'l refrigerators/freezers

Inc	Ex	NA	EXTERIOR ITEMS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garage door opener(s) & Remotes
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gas grill
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hot tub & equipment
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other outbuildings
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Play equipment
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pool & pool equipment
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage shed(s)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storm door(s)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Storm windows
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fence(s)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Invisible Pet Fence, Equipment & Collars
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Satellite dish

Inc	Ex	NA	INTERIOR ITEMS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alarm/Security System
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Blinds & shades
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Curtains/drapes
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Curtain Rods
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Carbon monoxide detector(s)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Carpeting
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ceiling fans
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Heating Stove(s) _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fireplace items
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lighting fixtures incl. chandeliers
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke detector(s)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bathroom Mirrors
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wall Mounted T.V. Brackets
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Smart Home Devices

Inc	Ex	NA	MISCELLANEOUS ITEMS
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Firewood
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Generator
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wall Mounted Shelving
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other Shelving
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trees & shrubs
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Softener
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Workbenches

Inc	Ex	NA	OTHER ITEMS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

*If you have a solar panels this will be addressed on a separate rider.

If there are any known issues with any of the items above, please explain below (attach additional sheets if necessary):

Additional Seller Comments (include clarification on any items above):

Date _____ *William Quinn*
Seller

dotloop verified
02/18/26 8:48 AM EST
SUN7-LJWE-6W3M-ZPNC

Date _____ *Pamela Quinn*
Seller

dotloop verified
02/18/26 9:43 AM EST
LZ3C-KUJQ-RBEK-QELY

Buyer hereby accepts the above information as presented by the Seller or if there are to be any changes to the above information those changes are to be noted here and would need to be agreed to by Seller(s) initialing below.

Date _____
Buyer

If Changes Made: _____ Date _____ Seller _____ Date _____ Seller _____

