



# PROPERTY INCLUSIONS / EXCLUSIONS RIDER

Connecticut REALTORS®, Inc.



Property Inclusions/Exclusions Rider page \_\_\_\_ of \_\_\_\_

Property Address: 349 Beach Rd, 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 _____ 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other outbuildings
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Play equipment
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pool & pool equipment
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Storage shed(s)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Storm door(s)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storm windows
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fence(s)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds & shades
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Curtains/drapes
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smart Home Devices

Inc	Ex	NA	MISCELLANEOUS ITEMS
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Firewood
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Generator
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wall Mounted Shelving
<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pellets for pellet stove _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2 pendant lights front living room _____
<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 an 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 \_\_\_\_\_ *Sophie Coleman* Seller dotloop verified 05/09/26 5:59 PM EDT EBXM-01B-1C3U-KTVV

Date \_\_\_\_\_ *Sophie Coleman* Seller dotloop verified 05/09/26 5:59 PM EDT DOW-NDBL-NXP3-TYRB

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 \_\_\_\_\_

