

PROPERTY LOCATED AT: 290 Dixfield Rd P O Map 18 Lot 2, Weld, Me 04285

PROPERTY DISCLOSURE

Under Maine Law, certain information must be made available to buyers prior to or during preparation of an offer. This statement has been prepared to assist prospective buyers in evaluating this property. This disclosure is not a warranty of the condition of the property and is not part of any contract between Seller and any Buyer. Seller authorizes the disclosure of the information in this statement to real estate licensees and to prospective buyers of this property. The Seller agrees to provide prompt notice of any changes in the information and this form will be appropriately changed with an amendment date. Inspections are highly recommended.

DO NOT LEAVE ANY QUESTIONS BLANK. STRIKE, WRITE N/A OR UNKNOWN IF NEEDED.

SECTION I – WATER SUPPLY

TYPE OF SYSTEM: Public Private Seasonal _____ Unknown
 Drilled Dug Other _____

MALFUNCTIONS: Are you aware of or have you experienced any malfunctions with the (public/private/other) water system?

Pump (if any): N/A Yes No Unknown
Quantity: Yes No Unknown
Quality: Yes No Unknown

If Yes to any question, please explain in the comment section below or with attachment.

WATER TEST: Have you had the water tested? Yes No
If Yes, Date of most recent test: _____ Are test results available? .. Yes No
To your knowledge, have any test results ever been reported as unsatisfactory or satisfactory with notation? Yes No
If Yes, are test results available? Yes No
What steps were taken to remedy the problem? N/A

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: Front right of house

Installed by: Unknown

Date of Installation: Unknown

USE: Number of persons currently using system: Sasonal

Does system supply water for more than one household? Yes No Unknown

Comments: The heirs of this property are not familiar with all the components.

Source of Section I information: Sellers

Buyer Initials _____ Page 1 of 7 Seller Initials RS JS JS

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SECTION II — WASTE WATER DISPOSAL

TYPE OF SYSTEM: Public Private Quasi-Public _____ Unknown

~~IF PUBLIC OR QUASI-PUBLIC (Strike Section if Not Applicable):~~

~~Have you had the sewer line inspected? Yes No~~

~~If Yes, what results: _____~~

~~Have you experienced any problems such as line or other malfunctions? Yes No~~

~~What steps were taken to remedy the problem? _____~~

IF PRIVATE (Strike Section if Not Applicable):

Tank: Septic Tank Holding Tank Cesspool Other: _____

Tank Size: 500 Gallon 1000 Gallon Unknown Other: _____

Tank Type: Concrete Metal Unknown Other: _____

Location: **Front left of house** _____ OR Unknown

Date installed: 1983 Date last pumped: Unknown Name of pumping company: Unknown

Have you experienced any malfunctions? Yes No

If Yes, give the date and describe the problem: _____

Date of last servicing of tank: Unknown Name of company servicing tank: _____

Leach Field: Yes No Unknown

If Yes, Location: **Front left of house**

Date of installation of leach field: 08/24/1983 Installed by: Unknown

Date of last servicing of leach field: Unknown Company servicing leach field: Unknown

Have you experienced any malfunctions? Yes No

~~If Yes, give the date and describe the problem and what steps were taken to remedy: _____~~

Do you have records of the design indicating the # of bedrooms the system was designed for? Yes No

If Yes, are they available? Yes No

Is System located in a Shoreland Zone? Yes No Unknown

Comments: _____

Source of Section II information: Sellers

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SECTION III – HEATING SYSTEM(S)/HEATING SOURCES(S)

Heating System(s) or Source(s)	SYSTEM 1	SYSTEM 2	SYSTEM 3	SYSTEM 4
TYPE(S)	Electric base board	Propane stove	Russian fireplace	Monitor heater
Age of system(s) or source(s)	Unknown	Unknown	Installed 1983	Unknown
Name of company that services system(s) or source(s)	Nine	Dixfield fuel	Owners	Unknown
Date of most recent service call	06/30/2021	Unknown	Unknown	Unknown
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)	Seasonal XXXXX	Seasonal XXXXX	Seasonal XXXXX	Seasonal XXXXX
Malfunction per system(s) or source(s) within past 2 years	Unknown	Unknown	Unknown	Unknown
Other pertinent information				

Are there fuel supply lines? Yes No Unknown
 Are any buried? Yes No Unknown
 Are all sleeved? Yes No Unknown
 Chimney(s): Yes No
 If Yes, are they lined: Yes No Unknown
 Is more than one heat source vented through one flue? Yes No Unknown
 Had a chimney fire: Yes No Unknown
 Has chimney(s) been inspected? Yes No Unknown

If Yes, date: Unknown

Date chimney(s) last cleaned: Unknown

Direct/Power Vent(s): Yes No Unknown
 Has vent(s) been inspected? Yes No Unknown

If Yes, date: _____

Comments: **Master bedroom has propane fireplace**

Source of Section III information: Sellers

SECTION IV – HAZARDOUS MATERIAL

The licensee is disclosing that the Seller is making representations contained herein.

A. UNDERGROUND STORAGE TANKS - Are there now, or have there ever been, any underground storage tanks on the property? Yes No Unknown

If Yes, are tanks in current use? Yes No Unknown

If no longer in use, how long have they been out of service? _____

If tanks are no longer in use, have tanks been abandoned according to DEP? Yes No Unknown

Are tanks registered with DEP? Yes No Unknown

Age of tank(s):- _____ Size of tank(s):- _____

Location: _____

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~~What materials are, or were, stored in the tank(s)?~~ _____

~~Have you experienced any problems such as leakage:~~ _____ Yes No Unknown

Comments: **Sellers have no knowledge of any underground tanks on the property.**

Source of information: **Sellers**

B. ASBESTOS — Is there now or has there been asbestos:

As insulation on the heating system pipes or duct work? Yes No Unknown

In the ceilings? Yes No Unknown

In the siding? Yes No Unknown

In the roofing shingles? Yes No Unknown

In flooring tiles? Yes No Unknown

Other: _____ Yes No Unknown

Comments: **Sellers have no knowledge of asbestos on the property.**

Source of information: _____

C. RADON/AIR - Current or previously existing:

Has the property been tested? Yes No Unknown

~~If Yes: Date: _____ By: _____~~

~~Results: _____~~

~~If applicable, what remedial steps were taken? _____~~

~~Has the property been tested since remedial steps? Yes No Unknown~~

~~Are test results available? Yes No~~

Results/Comments: **Sellers have no knowledge of Radon/Air.**

Source of information: **Sellers**

D. RADON/WATER - Current or previously existing:

Has the property been tested? Yes No Unknown

~~If Yes: Date: _____ By: _____~~

~~Results: _____~~

~~If applicable, what remedial steps were taken? _____~~

~~Has the property been tested since remedial steps? Yes No Unknown~~

~~Are test results available? Yes No~~

Results/Comments: **Sellers have no knowledge of Radon/Water**

Source of information: _____

E. METHAMPHETAMINE - Current or previously existing:

Yes No Unknown

Comments: **Sellers have no knowledge of any hazardous materials or methamphetamine on the property.**

Source of information: **Sellers**

Buyer Initials _____

Seller Initials

^{DS}
RS

^{DS}
JS

^{DS}
JS

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F. LEAD-BASED PAINT/PAINT HAZARDS — (Note: Lead-based paint is most commonly found in homes constructed prior to 1978)

Is there now or has there ever been lead-based paint and/or lead-based paint hazards on the property?
..... Yes No Unknown Unknown (but possible due to age)

If Yes, describe location and basis for determination: _____

Do you know of any records/reports pertaining to such lead-based paint/lead-based paint hazards: Yes No

If Yes, describe: _____

Are you aware of any cracking, peeling or flaking paint? Yes No

Comments: _____

Source of information: Small amounts of cracking paint can be found on decks, face boards and some windows

G. OTHER HAZARDOUS MATERIALS - Current or previously existing:

TOXIC MATERIAL: Yes No Unknown

LAND FILL: Yes No Unknown

RADIOACTIVE MATERIAL: Yes No Unknown

Other: Sellers have no knowledge of any hazardous materials on the property.

Source of information: Sellers

Buyers are encouraged to seek information from professionals regarding any specific issue or concern.

SECTION V — GENERAL INFORMATION

Is the property subject to or have the benefit of any encroachments, easements, rights-of-way, leases, rights of first refusal, life estates, private ways, trails, homeowner associations (including condominiums and PUD's) or restrictive covenants? Yes No Unknown

If Yes, explain: Local zoning

Source of information: Sellers

Is access by means of a way owned and maintained by the State, a county, or a municipality over which the public has a right to pass? Yes No Unknown

If No, who is responsible for maintenance? Town/State

Road Association Name (if known): N/A

Buyer Initials _____

Seller Initials DS
RS DS
JS DS
JS

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Are there any tax exemptions or reductions for this property for any reason including but not limited to: Tree Growth, Open Space and Farmland, Veteran's, Homestead Exemption, Blind, Working Waterfront?.....
..... Yes No Unknown

If Yes, explain: _____

Is a Forest Management and Harvest Plan available?..... Yes No Unknown

Is house now covered by flood insurance policy (not a determination of flood zone) Yes No Unknown

Equipment leased or not owned (including but not limited to, propane tank, hot water heater, satellite dish, water filtration system, photovoltaics, wind turbines): Type: _____

Year Principal Structure Built: **1993**

What year did Seller acquire property? **1998**

Roof: Year Shingles/Other Installed: **Unknown**

Water, moisture or leakage: **Some shingles were replaced over small porch roof.**

Comments: **Problem was fixed.**

Foundation/Basement:

Is there a Sump Pump? Yes No Unknown

Water, moisture or leakage since you owned the property: Yes No Unknown

Prior water, moisture or leakage? Yes No Unknown

Comments: **Some water staining maybe seen in basement from draining water tank for seasonal use.**

Mold: Has the property ever been tested for mold? Yes No Unknown

If Yes, are test results available? Yes No

Electrical: Fuses Circuit Breaker Other: _____ Unknown

Comments: _____

Has all or a portion of the property been surveyed? Yes No Unknown

If Yes, is the survey available? Yes No Unknown

Manufactured Housing – Is the residence a:

Mobile Home Yes No Unknown

Modular Yes No Unknown

KNOWN MATERIAL DEFECTS about Physical Condition and/or value of Property, including those that may have an adverse impact on health/safety: **Older property has been well maintained. The barn has been used for multiple task. The work shop is heated...heater has not been used or serviced for several years.**

Comments: _____

Source of Section V information: **Sellers**

Buyer Initials _____

Seller Initials

DS
RS JS JS

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SECTION VI – ADDITIONAL INFORMATION


Fireplace in master bedroom has not been used by the current owners. All heating systems should serviced and inspected by a professional.

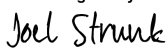
ATTACHMENTS EXPLAINING CURRENT PROBLEMS, PAST REPAIRS OR ADDITIONAL INFORMATION IN ANY SECTION IN DISCLOSURE: Yes No

Seller shall be responsible and liable for any failure to provide known information regarding known material defects to the Buyer.

Neither Seller nor any Broker makes any representations as to the applicability of, or compliance with, any codes of any sort, whether state, municipal, federal or any other, including but not limited to fire, life safety, building, electrical or plumbing.

As Sellers, we have provided the above information and represent that all information is correct. To the best of our knowledge, all systems and equipment, unless otherwise noted on this form, are in operational condition.

DocuSigned by:

3EBAAE788E8C46D...
 SELLER _____ DATE 7/2/2021
Rory Strunk

DocuSigned by:

7DD78F1D248A422...
 SELLER _____ DATE 7/2/2021
Joel Strunk

DocuSigned by:

6DCC9B02057E49D...
 SELLER _____ DATE 7/2/2021
Jeffrey Strunk

I/We have read and received a copy of this disclosure, the arsenic in wood fact sheet, the arsenic in water brochure, and understand that I/we should seek information from qualified professionals if I/we have questions or concerns.

BUYER _____ DATE _____

BUYER _____ DATE _____

BUYER _____ DATE _____

BUYER _____ DATE _____

