New Hampshire Association of REALTORS® Standard Form



TO BE COMPLETED BY SELLER

The following answers and explanations are true and complete to the best of SELLER'S knowledge. This statement has been prepared to assist prospective BUYERS in evaluating SELLER'S property. This disclosure is not a warranty of any kind by the SELLER, or any real estate FIRM representing the SELLER, and is not a substitute for any inspection by the BUYER. SELLERS authorize FIRM in this transaction to disclose the information in this statement to other real estate agents and to prospective buyers of this property.

IF A	ANY	TO SELLER(S): COMPLETE ALL INFORMATION AND STATE NOT APPLICABLE OR UNKNOWN AS APPROPRIATE. OF THE INFORMATION IN THIS PROPERTY DISCLOSURE FORM CHANGES FROM THE DATE OF COMPLETION, RE TO NOTICY THE LISTING FIRM PROMPTLY IN WRITING.						
1.	SEI	LER:						
2.	PROPERTY LOCATION: 2 WILLO CT							
3.								
4.	SELLER:							
5.								
J.	WATER SUPPLY Please answer all questions regardless of type of water supply. a. TYPE OF SYSTEM: Public Private Seasonal Unknown Drilled Dug Other							
	b.	Installed By:						
	C.	USE: Number of persons currently using the system:						
		Does system supply water for more than one household?						
	d.	MALFUNCTIONS: Are you aware of or have you experienced any malfunctions with the (public/private/other) water systems? Pump: Yes No N/A Quantity: Yes No Unknown						
		If YES to any question, please explain in Comments below or with attachment.						
	e.	WATER TEST: Have you had the water tested?						
		COMMENTS:						
		COMMENTS.						
		The Mark Mark Transport of the American Companies of the						
6.	SE a.	WAGE DISPOSAL SYSTEM TYPE OF SYSTEM: Public: Yes No Community/Shared: Yes No Private: Yes No Unknown Septic Design Available: Yes No						
	b.	IF PUBLIC OR COMMUNITY/SHARED Have you experienced any problems such as line or other malfunctions? Yes No What steps were taken to remedy the problem?						
	C.	IF PRIVATE:						
		TANK: Septic Tank Holding Tank Cesspool Unknown Other Tank Size Gal. Unknown Other: Tank Type Concrete Metal Unknown Dother: Location: Location Unknown Date of Installation: Date of Last Servicing: Name of Company Servicing Tank: Have you experienced any malfunctions? Yes No Comments:						
S	ELLE	ER(S) INITIALS / BUYER(S) INITIALS /						

New Hampshire Association of REALTORS® Standard Form



TO BE COMPLETED BY SELLER

		PROPERTY LOCATION:							
	d.	RADON/WATER - Current or previously existing: Has the property been tested?							
		If YES: Date: By: Results: If applicable, what remedial steps were taken? Has the property been tested since remedial steps? Yes No Are test results available? Yes No Comments:							
	e.	LEAD-BASED PAINT - Current or previously existing: Are you aware of lead-based paint on this property? If YES: Source of information:							
		Are you aware of any cracking, peeling, or flaking lead-based paint? ———————————————————————————————————							
	f.	Are you aware of any other hazardous materials?							
9.	GF	NERAL INFORMATION							
		Is this property subject to liens, encroachments, easements, rights-of-way, leases, restrictive covenants, attachments, life estates, or right of first refusal?							
	b.	Is this property subject to special assessments, betterment fees, association fees, or any other transferable fees?							
	c.	Are you aware of any onsite landfills or any other factors, such as soil, flooding, drainage, etc? Yes No If YES, Explain:							
	d.	Are you aware of any problems with other buildings on the property? \Yes_\vec{X}_No If YES, Explain:							
	e.	A							
	f.	Is this property located in a Federally Designated Flood Hazard Zone? Yes No Unknown Comments:							
	g.	g. Has the property been surveyed? Yes No Unknown If YES, By: If YES, is survey available? Yes No Unknown							
	h.	How is the property zoned?							
	i.	Street (check one): Public							
		If private, is there a written road maintenance agreement? Yes No							
		Additional Information:							
	j.	Heating System Age: Type: 463-force chr Fuel: 56 Tank Location:							
		Annual Fuel Consumption:Price:Gallons:							
		Date system was last serviced and by whom?Secondary Heat Systems:							
		Comments:							
	SELL	ER(S) INITIALS BUYER(S) INITIALS /							

New Hampshire Association of REALTORS® Standard Form



TO BE COMPLETED BY SELLER PROPERTY LOCATION: A Whi 10. ADDITIONAL INFORMATION a. ATTACHMENT EXPLAINING CURRENT PROBLEMS, PAST REPAIRS, OR ADDITIONAL INFORMATION? Yes No b. ADDITIONAL COMMENTS: **ACKNOWLEDGEMENTS** SELLER ACKNOWLEDGES THAT HE/SHE HAS PROVIDED THE ABOVE INFORMATION AND THAT SUCH INFORMATION IS ACCURATE, TRUE AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE. SELLER AUTHORIZES THE LISTING BROKER TO DISCLOSE THE INFORMATION CONTAINED HEREIN TO OTHER BROKERS AND PROSPECTIVE PURCHASERS. SELLER(S) MAY BE RESPONSIBLE AND LIABLE FOR ANY FAILURE TO PROVIDE KNOWN INFORMATION TO BUYER(S). DATE SELLER SELLER DATE BUYER ACKNOWLEDGES RECEIPT OF THIS PROPERTY DISCLOSURE RIDER AND HEREBY UNDERSTANDS THE PRECEDING INFORMATION WAS PROVIDED BY SELLER AND IS NOT GUARANTEED BY BROKER/AGENT. THIS DISCLOSURE STATEMENT IS NOT A REPRESENTATION, WARRANTY OR GUARANTY AS TO THE CONDITION OF THE PROPERTY BY EITHER SELLER OR BROKER. BUYER IS ENCOURAGED TO UNDERTAKE HIS/HER OWN INSPECTIONS AND INVESTIGATIONS VIA LEGAL COUNSEL, HOME, STRUCTURAL OR OTHER PROFESSIONAL AND QUALIFIED ADVISORS AND TO INDEPENDENTLY VERIFY INFORMATION DIRECTLY WITH THE TOWN OR MUNICIPALITY. BUTER DATE DUTER

BUYER(S) INITIALS

SELLER(S) INITIALS

New Hampshire Association of REALTORS® Standard Form



TO BE COMPLETED BY SELLER

		PROPERTY LOCATION: A WINKED CT							
	k.	Roof Age:Type of Roof Covering:							
	l.	Foundation/Basement:							
	m.	Chimney(s) How Many? Lined? No Last Cleaned: Uhhou Problems? Problems?							
	n.	Plumbing Type: Age: Age:							
	0.	Domestic Hot Water: Age: UNMAUA Type: On demand Gallons:							
	p.								
	q.	Modifications: Are you aware of any modifications or repairs made without the necessary permits? Yes No If Yes, please explain:							
	r.	Pest Infestation: Are you aware of any past or present pest infestations? Yes No Type:							
	S.	Methamphetamine Production: Do you have knowledge of methamphetamine production ever occurring on the property? (Per RSA 477:4-g) Yes No If YES, please explain:							
	t.	Air Conditioning: Type: Age: Age:							
	u.	Pool: Age : Heated: Yes No Type: Last Date of Service: By Whom:							
	V.								
	w.	Internet: Type Currently Used at Property:							
	x.	Other (e.g. Alarm System, Irrigation System, etc.) ADT Alarm with video							
BE DU UN	CO E D	E TO PURCHASER(S): PRIOR TO SETTLEMENT YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM SSARY WITH RESPECT TO ADJACENT PARCELS IN ACCORDANCE WITH THE TERMS AND CONDITIONS AS MAY NTAINED IN PURCHASE AND SALES AGREEMENT AND DEPOSIT RECEIPT. YOU SHOULD EXERCISE WHATEVER ILIGENCE YOU DEEM NECESSARY WITH RESPECT TO INFORMATION ON ANY SEXUAL OFFENDERS REGISTERED REPORT OF THE NEW OFFENDERS REGISTERED RECEIVED BY CONTACTING THE LOCAL POLICE REMORD.							
SE	LLEF	R(S) INITIALS BUYER(S) INITIALS /							
		7							

New Hampshire Association of REALTORS® Standard Form



TO BE COMPLETED BY SELLER

PR	OPE	ERTY LOCATION	ON: a white	ct				
			D: Yes No	Other:		Size: Unkı		
			lation of leach field:			Size:Unki Installed By:	nown:	
			perienced any malfun	ctions?	□No			15/0 +2 1/4
	e.	IS SYSTEM L	OCATED ON "DEVE	ELOPED WATER	FRONT" as de	scribed in RSA 4	85-A? <u> </u>	loUnknown
		IF YES, has a site assessment been done? No Unknown Source of Information:						
		Comments:_ FOR ADDITI	BURNING AND AND	ON THE BUYE	R IS ENCOU	RAGED TO CO	NTACT THE NH D	DEPARTMENT OF
7.	<u>INS</u>	SULATION	LOCATION Attic or Cap Crawl Space Exterior Walls Floors	Yes No	Unknown	If YES, Type	Amount	Unknown
8.	HA a.	ZARDOUS MA UNDERGRO	ATERIAL UND STORAGE TAN	IKS - Current or	previously exi	sting:		
YES: Are tanks currently in use? \[Yes \] No IF NO: How long have tank(s) been out of service? What materials are, or were, stored in the tank(s)? Age of tank(s): \[Size of tank(s): \] Location: Are you aware of any past or present problems such as leakage, etc? \[Yes \] No Comments: If tanks are no longer in use, have the tanks been removed? \[Yes \] No \[Unknown Comments:								
	b.	ASBESTOS - As insulation of In the siding? In flooring tiles	Current or previous on the heating systen Yes No s? No e of information:	n pipes or ducts?	In the roofi Other		/n ☐Yes☐No ☐Yes☐No	
c. RADON/AIR - Current or previously existing: Has the property been tested?								
s	ELLE	ER(S) INITIALS_				виу	ER(S) INITIALS	