

PROPERTY DISCLOSURE - RESIDENTIAL ONLY
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.

NOTICE TO SELLER(S): COMPLETE ALL INFORMATION AND STATE NOT APPLICABLE OR UNKNOWN AS APPROPRIATE. IF ANY OF THE INFORMATION IN THIS PROPERTY DISCLOSURE FORM CHANGES FROM THE DATE OF COMPLETION, YOU ARE TO NOTIFY THE LISTING FIRM PROMPTLY IN WRITING.

1. SELLER: Donald C Cady
2. PROPERTY LOCATION: 1346 So Hemlock Rd Charlestown NH 03603
3. CONDOMINIUM, CO-OP, PUD DISCLOSURE RIDER OR MULTIFAMILY DISCLOSURE RIDER ATTACHED? ☐ Yes ☐ No
4. SELLER: ☒ has ☐ has not occupied the property for 14 years.

5. WATER SUPPLY

Please answer all questions regardless of type of water supply.

- a. TYPE OF SYSTEM: ☐ Public ☒ Private ☐ Seasonal ☐ Unknown
☒ Drilled ☐ Dug ☐ Other _____
- b. INSTALLATION: Location: Blw house and garage
Installed By: _____ Date of Installation: _____
What is the source of your information? _____
- c. USE: Number of persons currently using the system: 1
Does system supply water for more than one household? ☐ Yes ☒ No
- 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
Quality: ☐ 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? ☒ Yes ☐ No Date of most recent test 2005/06
If YES to any question, please explain in Comments below or with attachment.
Are you aware of any test results reported as unsatisfactory or satisfactory with notations? ☐ Yes ☒ No
If YES, are test results available? ☐ Yes ☒ No What steps were taken to remedy the problem? _____

COMMENTS: _____

6. SEWAGE DISPOSAL SYSTEM

- a. 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 1250 Gal. ☐ Unknown ☐ Other _____
Tank Type ☒ Concrete ☐ Metal ☐ Unknown ☐ Other _____
Location: front yard under fence ☐ Location Unknown Date of Installation: 2005
Date of Last Servicing: _____ Name of Company Servicing Tank: _____
Have you experienced any malfunctions? ☐ Yes ☐ No
Comments: _____
- d. LEACH FIELD: ☒ Yes ☐ No ☐ Other _____
If YES, Location: front yard Size _____ ☐ Unknown
Date of installation of leach field: _____ ☐ Installed By: _____
Have you experienced any malfunctions? ☐ Yes ☒ No
Comments: _____

SELLER(S) INITIALS DC 1

BUYER(S) INITIALS _____

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- e. IS SYSTEM LOCATED ON "DEVELOPED WATERFRONT" as described in RSA 485-A? ☐ Yes ☒ No ☐ Unknown
IF YES, has a site assessment been done? ☐ Yes ☐ No ☐ Unknown

Source of Information: _____

Comments: _____

FOR ADDITIONAL INFORMATION THE BUYER IS ENCOURAGED TO CONTACT THE NH DEPARTMENT OF ENVIRONMENTAL SERVICES SUBSURFACE SYSTEMS BUREAU

7. INSULATION	LOCATION	Yes	No	Unknown	If YES, Type	Amount	Unknown
	Attic or Cap	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>blown in</u>		<input type="checkbox"/>
	Crawl Space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
	Exterior Walls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>blown in / fiberglass</u>		<input type="checkbox"/>
	Floors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>

8. HAZARDOUS MATERIAL

a. UNDERGROUND STORAGE TANKS - Current or previously existing:

Are you aware of any past or present underground storage tanks on your property? ☒ Yes ☐ No ☐ Unknown

IF 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)? concrete septic tank

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

b. ASBESTOS - Current or previously existing:

As insulation on the heating system pipes or ducts? ☐ 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

If YES, Source of information: _____

Comments: _____

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

Are test results available? ☐ Yes ☐ No Comments: _____

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

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? ☐ Yes ☒ No

If YES: Source of information: _____

Are you aware of any cracking, peeling, or flaking lead-based paint? ☐ Yes ☐ No

Comments: _____

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f. Are you aware of any other hazardous materials? ☐ Yes ☒ No

If YES: Source of information: _____

Comments: _____

9. GENERAL INFORMATION

a. Is this property subject to liens, encroachments, easements, rights-of-way, leases, restrictive covenants, attachments, life estates, or right of first refusal?

☐ Yes ☐ No ☒ Unknown If YES, Explain: Possible electric r-o-w + others; see deed
What is your source of information? _____

b. Is this property subject to special assessments, betterment fees, association fees, or any other transferable fees?

☐ Yes ☒ No ☐ Unknown If YES, Explain: _____

What is your source of information? _____

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 ☒ No If YES, Explain: _____

e. Are you receiving a tax exemption or reduction for this property for any reason including but not limited to current use, land conservation, etc.? ☐ YES ☒ NO ☐ UNKNOWN If YES, Explain: _____

f. Is any part of this property in Current Use? ☒ Yes ☐ No ☐ Unknown If YES, Explain: see tax cards

g. Is this property located in a Federally Designated Flood Zone? ☐ Yes ☒ No ☐ Unknown

h. Has the property been surveyed? ☒ Yes ☐ No ☐ Unknown

If YES, By: _____

If YES, is survey available? ☐ Yes ☐ No ☐ Unknown

i. How is the property zoned? _____

j. Heating System Age: UNK Type: FHA Fuel: Oil Tank/Location: basement

Owner of Tank: Owner

Annual Fuel Consumption: 600g Price: _____ Gallons: _____

Comments: _____

k. Roof Age: 2013 1/2 Type of Roof Covering: arch shingles

Moisture or leakage: No

Comments: _____

l. Foundation/Basement: ☒ Full ☐ Partial ☐ Other: _____ ☐ Type: _____

Moisture or leakage: NO

Comments: _____

m. Chimney(s) How Many? 2 Lined? 1 Last Cleaned: _____ Problems? NONE

n. Plumbing Type: _____ Age: _____

Comments: _____

o. Domestic Hot Water: Age: 2006 Type: Electric Gallons: 30

p. Electrical System Amps: _____ ☐ Circuit Breakers ☐ Fuses

Comments: _____

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: _____

Comments: _____

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. Other (e.g. Alarm System, Irrigation System, etc.) _____

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10. ADDITIONAL INFORMATION

- ☐
- Yes
- ☐
- No

Residential water supply @ current levels is adequate. Exterior/landscape usage may drain capacity if utilized for an extended period of time.

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 Donald McCady DATE 8/10/10

SELLER _____ DATE _____

BUYER	DATE

BUYER _____ DATE _____