

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:** Frank Robertson and Cristy Anne Robertson

2. **PROPERTY LOCATION:** 22 Middleton Drive, Bedford, NH 03110

3. **CONDOMINIUM, CO-OP, PUD DISCLOSURE RIDER OR MULTIFAMILY DISCLOSURE RIDER ATTACHED?** Yes No

4. **SELLER:** has has not occupied the property for 4 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: _____
Installed By: _____ Date of Installation: _____
What is the source of your information? _____

c. USE: Number of persons currently using the system: 4
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 _____

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 _____ Gal. Unknown Other
Tank Type Concrete Metal Unknown Other

Location: _____ Location Unknown Date of Installation: _____
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: _____ Size _____ Unknown
Date of installation of leach field: _____ Installed by: _____

Have you experienced any malfunctions? Yes No
Comments: _____

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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"/>	_____	_____	<input type="checkbox"/>
	Crawl Space	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
	Exterior Walls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
	Floors	<input checked="" type="checkbox"/>	<input 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)? _____

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: _____
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: _____

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: 22 Type: hydro air Fuel: oil Tank/Location: basement
Owner of Tank: _____
Annual Fuel Consumption: _____ Price: _____ Gallons: _____
Date system was last serviced and by whom? serviced thoroughly every fall
Solar Panels: Leased Owned If leased, explain terms of agreement: _____
Comments: _____

k. Roof Age: 2 Type of Roof Covering: _____
Moisture or leakage: _____
Comments: _____

l. Foundation/Basement: Full Partial Other: _____ Type: _____
Moisture or leakage: _____
Comments: _____

m. Chimney(s) How Many? 1 Lined? partial Last Cleaned: 1yr Problems? no

n. Plumbing Type: _____ Age: _____
Comments: _____

o. Domestic Hot Water: Age: 1 Type: indirect Gallons: 40

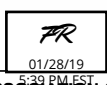
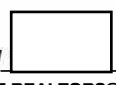
p. Electrical System Amps: 200 Circuit Breakers Fuses
Comments: _____

q. Modifications: Are you aware of any modifications or repairs made without the necessary permits? Yes No
If Yes, please explain: generator

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

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).

Frank Robertson
dotloop verified
01/28/19 5:39 PM EST
PTSH-MMCM-VSAV-XIDF

SELLER _____ DATE _____

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.

BUYER _____ DATE _____

BUYER _____ DATE _____