

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:** Anne T. Ekdahl and Gary I. Ekdahl

2. **PROPERTY LOCATION:** 10 Braeburn Court, 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 8 _____ 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: Back of house
Installed By: Capitol Well Dunbarton, NH _____ Date of Installation: 2001
What is the source of your information? _____

c. **USE:** Number of persons currently using the system: Two
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: 1500 Gal. Unknown Other: _____
Tank Type: Concrete Metal Unknown Other: _____
Location: Front of House _____ Location Unknown Date of Installation: 2001
Date of Last Servicing: 12/29/22 _____ Name of Company Servicing Tank: Maznek
Have you experienced any malfunctions? Yes No
Comments: _____

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BUYER(S) INITIALS _____ / _____

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d. LEACH FIELD: Yes No Other: _____
IF YES, Location: Along ridge, parallel to driveway Size: Unknown: unknown
Date of installation of leach field: 2001 Installed By: _____
Have you experienced any malfunctions? Yes No
Comments: _____

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. <u>INSULATION</u>	<u>LOCATION</u>	<u>Yes</u>	<u>No</u>	<u>Unknown</u>	<u>If YES, Type</u>	<u>Amount</u>	<u>Unknown</u>
	Attic or Cap	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Batten	_____	<input checked="" 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"/>	Batten	_____	<input checked="" type="checkbox"/>
	Floors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Batten	_____	<input checked="" 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
Comments: _____

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: _____

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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: _____

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: _____
Veteran Credit

f. Is this property located in a Federally Designated Flood Hazard Zone? Yes No Unknown

Comments: _____

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? Residential


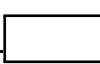
i. Street (check one): Public Private Association

If private, is there a written road maintenance agreement? Yes No
Additional Information: _____

j. Heating System Age: 23 Type: Smith Cast Iron Boiler Fuel: oil Tank Location: Basement

Owner of Tank: Property owner
Annual Fuel Consumption: 800-1000 Price: Varies Gallons: _____
Date system was last serviced and by whom? October 2023 Leblanc Heating
Secondary Heat Systems: 4 propane gas stoves
Comments: Fireplace, basement, 4 season room, 2-sided gas fireplace primary bedroom

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k. Roof Age: 23 Type of Roof Covering: Asphalt shingles
Moisture or leakage: _____
Comments: _____

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

m. Chimney(s) How Many? one Lined? Tile flu Last Cleaned: 2022 Problems? no
Comments: _____

n. Plumbing Type: Forced Hot Air Age: 23
Comments: _____

o. Domestic Hot Water: Age: 4 years Type: Storage tank Gallons: 75

p. Electrical System: # of Amps 200 Circuit Breakers Fuses
Comments: _____
Solar Panels: Leased Owned If leased, explain terms of agreement: _____
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. Air Conditioning: Type: Central Air Age: 5 Date Last Serviced and by whom: 5/24/22 W.L. Bradley Corp.
Comments: _____

u. Pool: Age: 14 years Heated: Yes No Type: Heat Pump Last Date of Service: 2022
By Whom: W. L. Bradley Corp.

v. Generator: Portable: Yes No Whole House: Yes No Kw/Size: 5500 Last Date of Service: _____
If Portable: Included Negotiable
Comments: _____

w. Internet: Type Currently Used at Property: xfinity

x. Other (e.g. Alarm System, Irrigation System, etc.) Alarm system, irrigation system
Comments: _____

NOTICE TO PURCHASER(S): PRIOR TO SETTLEMENT YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM NECESSARY WITH RESPECT TO ADJACENT PARCELS IN ACCORDANCE WITH THE TERMS AND CONDITIONS AS MAY BE CONTAINED IN PURCHASE AND SALES AGREEMENT AND DEPOSIT RECEIPT. YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM NECESSARY WITH RESPECT TO INFORMATION ON ANY SEXUAL OFFENDERS REGISTERED UNDER NH RSA CHAPTER 651-B. SUCH INFORMATION MAY BE OBTAINED BY CONTACTING THE LOCAL POLICE DEPARTMENT.

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10. ADDITIONAL INFORMATION

a. ATTACHMENT EXPLAINING CURRENT PROBLEMS, PAST REPAIRS, OR ADDITIONAL INFORMATION?

Yes No

b. ADDITIONAL COMMENTS:

See attachment

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).

Anne T. Ekdahl
SELLER
dotloop verified
05/15/24 10:37 AM EDT
GFVY-99HE-SZNP-TFXC
DATE

Gary J. Ekdahl
SELLER
dotloop verified
05/15/24 6:51 PM EDT
HPUM-KD6C-ZWCR-LJUE
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