

PROPERTY LOCATED AT: 657 Golden Ridge Road, Sherman, ME 04776

### 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 2 wells-one for home, one for barn

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: 2004 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? \_\_\_\_\_~~

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: home-located out by generator & barn-to the left facing the barn

Installed by: Watson

Date of Installation: 1994 & 2004

USE:

Number of persons currently using system: 2

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

Comments: \_\_\_\_\_

Source of Section I information: Seller(s)

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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: back of home OR  Unknown

Date installed: 1995 Date last pumped: May 2020 Name of pumping company: Brown's Septic

Have you experienced any malfunctions? .....  Yes  No

~~If Yes, give the date and describe the problem: \_\_\_\_\_~~

Date of last servicing of tank: None Name of company servicing tank: None

Leach Field: .....  Yes  No  Unknown

If Yes, Location: South of home

Date of installation of leach field: 1995 Installed by: Unknown

Date of last servicing of leach field: None Company servicing leach field: None

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: Seller(s)

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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)	Pensoitti Oil	Harmon Coal	Propane Stove	Fujitsu Heat Pump
Age of system(s) or source(s)	1995	2009	1995	2015
Name of company that services system(s) or source(s)	Bates Fuel	None	None	Valley Satellite
Date of most recent service call	Oct 2021	None	None	August 2020
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)	600+- gallons	Not used in the last few years	Seasonal Use	Seasonal Use
Malfunction per system(s) or source(s) within past 2 years	None	None	None	None
Other pertinent information	None	None	None	None

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: \_\_\_\_\_  
 Date chimney(s) last cleaned: None  
 Direct/Power Vent(s): .....  Yes  No  Unknown  
 Has vent(s) been inspected? .....  Yes  No  Unknown  
     If Yes, date: \_\_\_\_\_

Comments: Also included with the overall heating are two propane wall heaters, one a 1995 and a 2016.

Source of Section III information: Seller(s)

**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:~~ \_\_\_\_\_

Source of information: Seller(s)

**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:~~ \_\_\_\_\_

Source of information: Seller(s)

**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:~~ \_\_\_\_\_

Source of information: Seller(s)

**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:~~ \_\_\_\_\_

Source of information: Seller(s)

**E. METHAMPHETAMINE** - Current or previously existing:

Yes  No  Unknown

~~Comments:~~ \_\_\_\_\_

Source of information: Seller(s)

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Seller Initials L.W. Jew

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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: Seller(s)

**G. OTHER HAZARDOUS MATERIALS** - Current or previously existing:

TOXIC MATERIAL: .....  Yes  No  Unknown

LAND FILL: .....  Yes  No  Unknown

RADIOACTIVE MATERIAL: .....  Yes  No  Unknown

~~Other:~~ \_\_\_\_\_

Source of information: Seller(s)

**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:~~ \_\_\_\_\_

Source of information: Seller(s)

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?~~ \_\_\_\_\_

~~Road Association Name (if known):~~ \_\_\_\_\_

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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: Homestead

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: Propane Tank, Satellite Dish

Year Principal Structure Built: 1995, Barn 2003

What year did Seller acquire property? 2007

Roof: Year Shingles/Other Installed: Summer 2021

Water, moisture or leakage: None

Comments: \_\_\_\_\_

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 spring times maybe a couple of days in a couple of small areas.

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: \_\_\_\_\_~~

Comments: \_\_\_\_\_

Source of Section V information: Seller(s)

Buyer Initials \_\_\_\_\_

Seller Initials LW fw

