PROPERTY LOCATED AT: **36 Concord Place 36, Cape Elizabeth, ME 04107**

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: [X] Public [ ] Private [ ] Seasonal _____ [ ] Unknown
[ ] Drilled [ ] Dug [ ] Other _____

MALFUNCTIONS: Are you aware of or have you experienced any malfunctions with the (public/private/other) water system?

Pump (if any): ..... [ ] N/A [ ] Yes [X] No [ ] Unknown
Quantity: ..... [ ] Yes [X] No [ ] Unknown
Quality: ..... [ ] Yes [X] 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 [X] No
If Yes, Date of most recent test: _____ Are test results available? .. [ ] Yes [X] No
To your knowledge, have any test results ever been reported as unsatisfactory or satisfactory with notation? ..... [ ] Yes [X] No
If Yes, are test results available? ..... [ ] Yes [X] No
What steps were taken to remedy the problem? _____

~~IF PRIVATE: (Strike Section if Not Applicable):~~
~~INSTALLATION: Location:~~ _____
~~Installed by:~~ _____
~~Date of Installation:~~ _____
USE: ~~Number of persons currently using system:~~ _____
~~Does system supply water for more than one household? [ ] Yes [ ] No [ ] Unknown~~

Comments: **none**

Source of Section I information: **Seller, Public Record**

SECTION II – WASTE WATER DISPOSAL

TYPE OF SYSTEM: [X] Public [ ] Private [ ] Quasi-Public _____ [ ] Unknown

IF PUBLIC OR QUASI-PUBLIC (Strike Section if Not Applicable):
Have you had the sewer line inspected? ..... [ ] Yes [X] No
If Yes, what results: _____
Have you experienced any problems such as line or other malfunctions? ..... [ ] Yes [X] 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:~~ _____ ~~OR~~ [ ] ~~Unknown~~
~~Date installed:~~ _____ ~~Date last pumped:~~ _____ ~~Name of pumping company:~~ _____
~~Have you experienced any malfunctions?~~ ..... [ ] Yes [ ] No
~~If Yes, give the date and describe the problem~~: _____
_____
~~Date of last servicing of tank:~~ _____ ~~Name of company servicing tank:~~ _____
~~Leach Field:~~ ..... [ ] Yes [ ] No [ ] Unknown
~~If Yes, Location:~~ _____
~~Date of installation of leach field:~~ _____ ~~Installed by:~~ _____
~~Date of last servicing of leach field:~~ _____ ~~Company servicing leach field:~~ _____
~~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: **none**
Source of Section II information: **Seller, Public Record**

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SECTION III – HEATING SYSTEM(S)/HEATING SOURCE(S)

Heating System(s) or Source(s)	SYSTEM 1	SYSTEM 2	SYSTEM 3	SYSTEM 4
TYPE(S) of System	**Propane Monitor Rinnai**	**Electric Baseboard**	**Propane Fireplace**	
Age of system(s) or source(s)	**November 2019**	**original**	**17 +/1 years**	
TYPE(S) of Fuel	**Propane**	**---------**	**Propane**	
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)	**255.30 gallons**	**14,659 kwh**	**Used only on occassion**	
Name of company that services system(s) or source(s)	**Dead River**	**CMP**	**----------**	
Date of most recent service call				
Malfunctions per system(s) or source(s) within past 2 years	**none**	**none**	**none**	
Other pertinent information				

Are there fuel supply lines? ..... [X] Yes [ ] No [ ] Unknown
Are any buried? ..... [ ] Yes [ ] No [X] Unknown
Are all sleeved? ..... [X] Yes [ ] No [ ] Unknown
Chimney(s): ..... [X] Yes [ ] No
If Yes, are they lined: ..... [ ] Yes [ ] No [X] Unknown
Is more than one heat source vented through one flue? ..... [ ] Yes [X] No [ ] Unknown
Had a chimney fire: ..... [ ] Yes [X] No [ ] Unknown
Has chimney(s) been inspected? ..... [ ] Yes [ ] No [X] Unknown
If Yes, date: _____
Date chimney(s) last cleaned: _____
Direct/Power Vent(s): ..... [X] Yes [ ] No [ ] Unknown
Has vent(s) been inspected? ..... [ ] Yes [X] No [ ] Unknown
If Yes, date: _____
Comments: **none**
Source of Section III information: **Seller**

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 [X] Unknown
If Yes, are tanks in current use? ..... [ ] Yes [ ] No [X] 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 [X] Unknown
Are tanks registered with DEP? ..... [ ] Yes [ ] No [X] Unknown
Age of tank(s): _____ Size of tank(s): _____
Location: _____

What materials are, or were, stored in the tank(s)? _____

Have you experienced any problems such as leakage: ..... ☐ Yes ☐ No ☐ Unknown

Comments: **Seller has no knowledge of there being any underground tanks on site**

Source of information: **Seller**

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: **none**

Source of information: **Seller**

C. RADON/AIR - Current or previously existing:

Has the property been tested? ..... ☐ Yes ☐ No ☒ Unknown

If Yes: Date: **Unk** By: **Unk**

Results: **Unk**

If applicable, what remedial steps were taken? **Unk**

Has the property been tested since remedial steps? ..... ☐ Yes ☐ No ☒ Unknown

Are test results available? ..... ☐ Yes ☒ No

Results/Comments: **none**

Source of information: **Seller**

D. RADON/WATER - Current or previously existing:

Has the property been tested? ..... ☐ Yes ☒ No ☐ Unknown

If Yes: Date: _____ By: _____

Results: **n/a**

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: **public water**

Source of information: **Seller**

E. METHAMPHETAMINE - Current or previously existing: ☐ Yes ☐ No ☒ Unknown

Comments: **none known**

Source of information: **Seller**

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: **none**

Source of information: **Seller**

G. OTHER HAZARDOUS MATERIALS - Current or previously existing:

TOXIC MATERIAL: ..... ☐ Yes ☒ No ☐ Unknown

LAND FILL: ..... ☐ Yes ☒ No ☐ Unknown

RADIOACTIVE MATERIAL: ..... ☐ Yes ☒ No ☐ Unknown

Other: **n/a**

Source of information: **Seller**

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: **Hobstone Homeowners Association**

Source of information: **Hobstone Homeowners Association**

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? **Hobstone HOA**

Road Association Name (if known): **Hobstone HOA**

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**

Year Principal Structure Built: **1985**

What year did Seller acquire property? **2019**

Roof: Year Shingles/Other Installed: **2021**

Water, moisture or leakage: **None**

Comments: **New roof and sky lights installed 2021**

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: **none**

Mold: Has the property ever been tested for mold? ..... ☐ Yes ☒ No ☐ Unknown

If Yes, are test results available? ..... ☐ Yes ☐ No

Comments: **none**

Electrical: ☐ Fuses ☒ Circuit Breaker ☐ Other: _____ ☐ Unknown

Comments: **none**

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 defects or hazardous materials caused by insect or animal infestation inside or on the residential structure ..... ☐ Yes ☒ No ☐ Unknown

Comments: **none**

KNOWN MATERIAL DEFECTS about Physical Condition and/or value of Property, including those that may have an adverse impact on health/safety: **Garage door scheduled to be replaced Fall 2024 by HOA.**

Continued... See Addendum Known material defects 1

Comments: **none**

Source of Section V information: **Seller, Condo Association**

SECTION VI – ADDITIONAL INFORMATION

Owners plan to retain the dining room chandelier and the living room and dining room curtains.

ATTACHMENTS EXPLAINING CURRENT PROBLEMS, PAST REPAIRS OR ADDITIONAL INFORMATION IN ANY SECTION IN DISCLOSURE: ..... ☐ Yes ☒ No

Seller shall be responsible and liable for any failure to provide known information regarding known material defects to the Buyer.

Neither Seller nor any Broker makes any representations as to the applicability of, or compliance with, any codes of any sort, whether state, municipal, federal or any other, including but not limited to fire, life safety, building, electrical or plumbing.

As Sellers, we have provided the above information and represent that all information is correct. To the best of our knowledge, all systems and equipment, unless otherwise noted on this form, are in operational condition.

SELLER	DATE	SELLER	DATE
Holly Stone Farrally-Plourde			
SELLER	DATE	SELLER	DATE

I/We have read and received a copy of this disclosure, the arsenic in wood fact sheet, the arsenic in water brochure, and understand that I/we should seek information from qualified professionals if I/we have questions or concerns.

BUYER	DATE	BUYER	DATE
BUYER	DATE	BUYER	DATE

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EQUAL HOUSING OPPORTUNITY

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ADDENDUM

PROPERTY: **36 Concord Place 36, Cape Elizabeth, ME 04107**

1) Known material defects

Repair to garage door opener done March 5, 2024. Motor works but is loud and may need to be replaced at some point.

Date: _____ Date: _____

_____ _____

Signature Signature

Date: _____ Date: _____

_____ _____

Signature Signature