



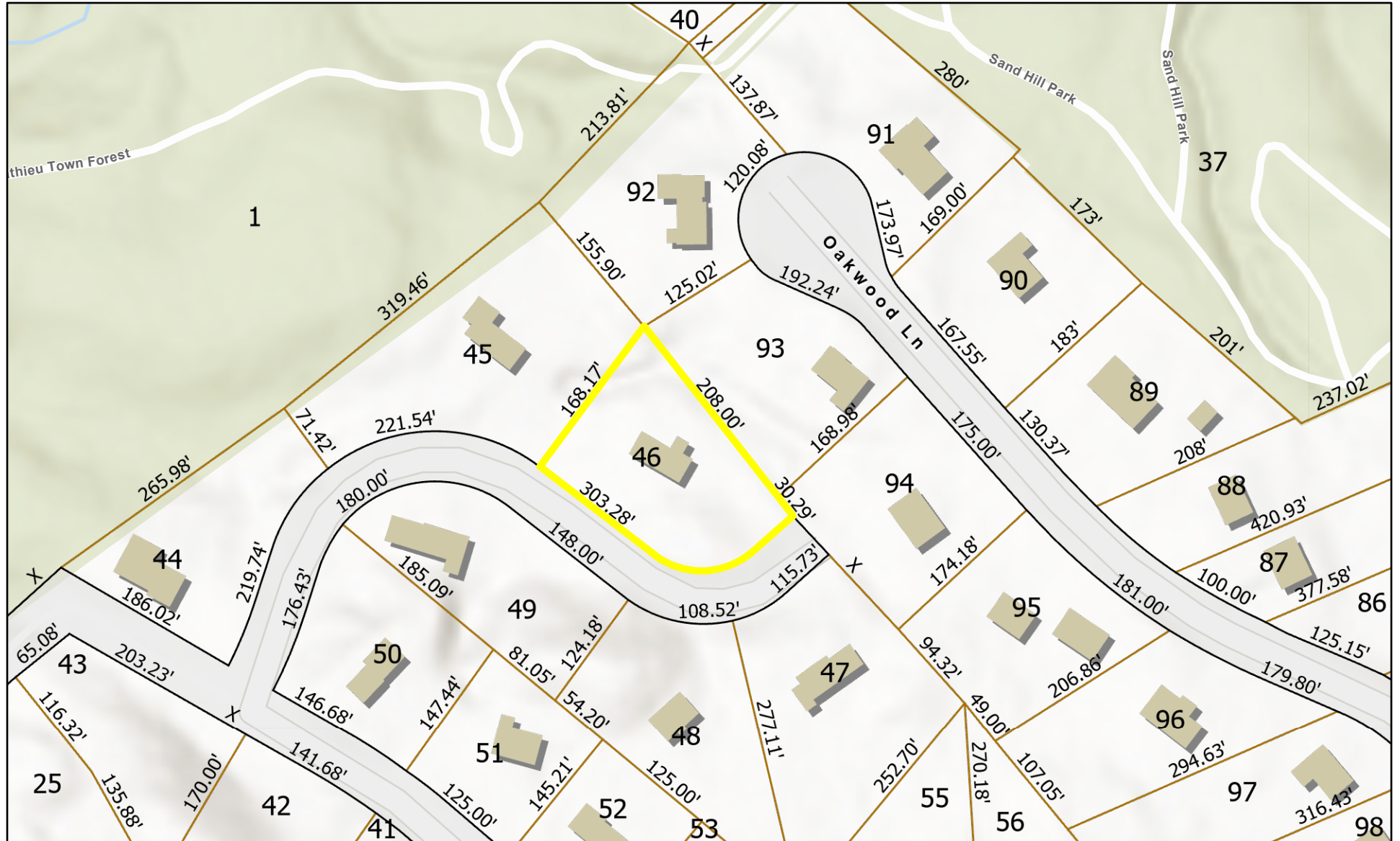
Town of Essex, VT

1 inch = 135 Feet



June 23, 2025

www.cai-tech.com



Data shown on this map is provided for planning and informational purposes only. The municipality and CAI Technologies are not responsible for any use for other purposes or misuse or misrepresentation of this map.

94800223

WARRANTY DEED

KNOW ALL PERSONS BY THESE PRESENTS, that We, J. RAYMOND CUMMINGS (AKA JAMES RAYMOND CUMMINGS, JR.), Trustee of the J. Raymond Cummings Trust dated July 14, 1998 and JANET S. CUMMINGS, Trustee of the Janet S. Cummings Trust dated July 14, 1998, husband and wife, of Essex Junction, County of Chittenden, and the State of Vermont (the "Grantors"), for Ten Dollars, paid to their full satisfaction by JAMES RAYMOND CUMMINGS, JR. AND JANET S. CUMMINGS, Trustees or their successors in trust under the CUMMINGS REVOCABLE LIVING TRUST dated January 12, 2016, of Essex Junction, County of Chittenden, and the State of Vermont, (Grantees), do freely GIVE, GRANT, SELL, CONVEY and CONFIRM unto the said Grantees, a parcel of land in the Town of Essex, County of Chittenden, and the State of Vermont, described as follows:

Being all and the same lands and premises conveyed to J. RAYMOND CUMMINGS (AKA JAMES RAYMOND CUMMINGS, JR.), Trustee of the J. Raymond Cummings Trust dated July 14, 1998 and JANET S. CUMMINGS, Trustee of the Janet S. Cummings Trust dated July 14, 1998, by Warranty Deed of J. Raymond Cummings and Janet S. Cummings, dated February 4, 2004 and recorded in Volume 597 at Page 271-272 of the Town of Essex Land Records.

Said land is further described as:

"Being all and the same lands and premises conveyed to J. Raymond Cummings and Janet S. Cummings by Warranty Deed of Clifton C. Wilson, II and Jean P. Wilson, dated November 17, 1970 and recorded in Book 95 on Pages 190-192 of the Land Records of the Town of Essex."

Reference is hereby made to the above instruments and to the records and references contained therein in further aid of this description.

TO HAVE AND TO HOLD said granted Premises to the Grantees, in fee simple, with the appurtenances thereunto belonging and for the uses and purposes set forth herein, subject to the reservation below.

RESERVING, unto the Grantors, for their respective lifetimes, a life estate in the above-described property with full power to mortgage, lease, sell or otherwise convey said property, with or without consideration, without joinder of the Grantees in such conveyance, and the right to all income and proceeds from such transfer, free of the interest of the Grantees, during their lifetimes. Grantors shall be solely responsible for the payment of taxes on said property.

The remainder interest herein granted shall pass to Grantees subject to any lease or mortgage created by the life tenant(s); and shall be extinguished by any sale or other conveyance by life tenant or by foreclosure sale by a mortgagee, without the necessity of joining the remainderman in such foreclosure.

Except as herein above noted, the Grantors covenants that they have the right to convey the Premises to the Grantees in the manner aforesaid, that they are **FREE FROM EVERY ENCUMBRANCE**; except as aforesaid, and the Grantors hereby engage to **WARRANT AND DEFEND** the same against all lawful claims whatever, except as aforesaid, that the Grantees shall have quiet possession of the Premises, free from all encumbrances, except as aforesaid, and that Grantors will execute such further assurances as may be required.

94800224

This deed was prepared without the benefit of a title search and the description of the property was furnished by the parties. The preparer of this deed assumes no liability whatsoever either for the accuracy of the legal description or the status of the title to the property.

IN WITNESS WHEREOF, Grantors have hereunto caused this instrument to be signed, this 12th day of January, 2016.

IN THE PRESENCE OF:

[Signature]
Witness

[Signature]
JAMES RAYMOND CUMMINGS, JR.

[Signature]
Witness

[Signature]
JANET S. CUMMINGS

STATE OF VERMONT, SS)
COUNTY OF CHITTENDEN)

At Essex Junction, in said County and State, this 12th day of January, 2016, personally appeared JAMES RAYMOND CUMMINGS, JR. AND JANET S. CUMMINGS and they acknowledged this instrument to be their free act and deed.

Before me, [Signature]
Notary Public

My commission expires: 2/10/19

ACKNOWLEDGEMENT

Return Received (including Certificates and, if Required Act 250 Disclosure Statement) PTTR # 12-516

Signed [Signature] Clerk

Date 1-19-2016

Essex, Vermont Town Clerk's Office
1-19, 2016 at
9 o'clock 30 minutes AM
Received for record and recorded in
book 948 on page 223-224
of Essex Land records
Attest: [Signature]
Town Clerk



Vermont Mandatory Flood Disclosure



Date Prepared: 06/23/2025

Seller's Name(s): Cummings Revocable Living Trust James Raymond Cummings

Janet S. Cummings

Property Address: 6 Cypress Ln, Essex, VT 05452
Street City/Town

27 V.S.A. § 380 requires all Sellers of real property in Vermont to disclose the flood status of their property to the Purchaser. The FEMA search engine can be found at <https://msc.fema.gov/portal/home>.

Descriptions of FEMA's flood hazard areas can be found at <https://www.fema.gov/glossary/flood-zones>.

1	Is the real property located in a Federal Emergency Management Agency (FEMA) mapped Special Flood Hazard Area?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2	Is the real property located in a Federal Emergency Management Agency (FEMA) mapped Moderate Flood Hazard Area?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3	Has the real property been subject to flooding or flood damage while the seller possessed the property, including flood damage from inundation or from flood-related erosion or landslide damage?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3a	If yes, please describe:		
4	Does the seller maintain flood insurance on the real property?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Seller has completed this form personally, reviewed the FEMA map and associated data themselves, and has not relied upon anyone else to provide this information.

THE STATEMENTS IN THIS REPORT ARE MADE BY THE SELLER. THEY ARE NOT STATEMENTS OR REPRESENTATIONS MADE BY ANY REAL ESTATE AGENT(S).

Seller: 06/23/25
(Signature) (Date)

Seller: _____
(Signature) (Date)

Seller: 06/23/25
(Signature) (Date)

Seller: _____
(Signature) (Date)

Purchaser acknowledges receipt of this Disclosure

Purchaser: _____
(Signature) (Date)

Purchaser: _____
(Signature) (Date)

Purchaser: _____
(Signature) (Date)

Purchaser: _____
(Signature) (Date)

DISCLOSURE OF INFORMATION ON LEAD-BASED PAINT AND/OR LEAD-BASED PAINT HAZARDS

Required Federal Lead Warning Statement

Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular problem to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

Property Address: 6 Cypress Ln, Essex, VT 05452

Seller's Disclosure (initial applicable sections)

- | | | |
|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Presence of lead-based paint and/or lead based paint hazards: |
| <input type="checkbox"/> | <input type="checkbox"/> | a. Known lead-based paint and/or lead-based paint hazards are present in the housing (explain). |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Records and reports available to the Seller: |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Seller has provided the Purchaser with all available records and reports available pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below): |
| <input type="checkbox"/> | <input type="checkbox"/> | b. Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing. |

Purchaser's Acknowledgement (initial applicable sections)

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Purchaser has received copies of all information listed above. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Purchaser has received the pamphlet <i>Protect Your Family from lead in Your Home</i> . |

Seller's Initials

Buyer's Initials

Purchaser has:

a. Received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or

b. Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

Agent's Acknowledgement (initial)



Agent has informed the Seller of the Seller's obligations under 42 U.S.C. 4852(d) and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information respectively provided by each of them is true and accurate.

Seller: Raymond Cummings 6/23/25
(Signature) Date

Purchaser: _____
(Signature) Date

Seller: Janet Cummings 6/23/25
(Signature) Date

Purchaser: _____
(Signature) Date

Seller: _____
(Signature) Date

Purchaser: _____
(Signature) Date

Seller: _____
(Signature) Date

Purchaser: _____
(Signature) Date



SELLER'S PROPERTY INFORMATION REPORT

TO BE COMPLETED BY SELLER



Date Prepared: 06/23/2025

Seller's Name(s): Cummings Revocable Living Trust James Raymond Cummings

Janet S. Cummings

Physical Property Address: 6 Cypress Ln Essex
Street City/Town

Type of Property: Single Family Residence Multi-Family Residence (duplex, triplex, etc.)
 Condominium/Townhouse Land Only Commercial

Use of Property: Primary Residence Vacation Property Rental Property Other: _____

INTRODUCTION: This Report provides information from the Seller based on Seller's personal knowledge concerning the above Property. Unless otherwise disclosed, Seller does not have any expertise in construction, architecture, engineering, surveying or any other skills that would provide Seller with special knowledge concerning the condition of the Property. Other than having owned the Property, Seller has no greater knowledge about the Property than that which could be obtained by a careful inspection performed by or on behalf of a potential buyer. The real estate agents involved with the sale of this Property do not conduct or perform any inspection of the Property. Unless otherwise disclosed, Seller has not inspected or examined those portions of the Property that are generally inaccessible. **THIS REPORT DOES NOT CONSTITUTE A WARRANTY OF ANY KIND BY THE SELLER OR BY ANY REAL ESTATE AGENT CONCERNING THE CONDITION OF THE PROPERTY. THIS REPORT IS NOT A SUBSTITUTE FOR A PROPERTY INSPECTION. BUYER HAS THE OPPORTUNITY TO REQUEST THAT SELLER AGREE TO A PROPERTY INSPECTION AS PART OF ANY CONTRACT FOR THE SALE OF THE PROPERTY.**

INSTRUCTIONS TO SELLER: (1) Complete this form yourself. (2) Answer ALL questions. (3) Disclose conditions that you know about that affect the Property. (4) Attach additional pages to this Report if additional information is provided. (5) IF YOU DO NOT KNOW THE FACTS, WRITE "DON'T KNOW." DO NOT GUESS THE ANSWER TO ANY QUESTION.

**THE STATEMENTS IN THIS REPORT ARE MADE BY THE SELLER.
THEY ARE NOT STATEMENTS OR REPRESENTATIONS MADE BY ANY REAL ESTATE AGENT(S).**

1. LAND (SOILS, DRAINAGE, BOUNDARIES AND EASEMENTS)

(a)	Has any fill or off-site material been placed on the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(b)	Do you know of any sliding, settling, subsidence, earth movement, upheaval or earthstability problems that have affected the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(c)	Is the Property located in a federal flood hazard zone or wetlands, public waters or conservation zones designated by federal, state or local statute, regulation or ordinance?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(d)	Do you know of any past or present drainage, high water table, or flood problems affecting the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(e)	Is the Property served by a road maintained by the municipality?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(f)	If the answer to (e) above is "No," how is the road serving the property maintained? <input type="checkbox"/> Road Maintenance Agreement <input type="checkbox"/> Homeowners/Road Association <input type="checkbox"/> Shared Driveway Other (explain): _____ Annual Cost(s): _____			
(g)	Are there public or private landfills or dumps (compacted or otherwise) on the Property or on any abutting property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW

Seller's Initials 

Purchaser's Initials

(h)	Are there currently any underground fuel storage tanks on the Property? If "Yes," Fuel Type: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(i)	Have there been any underground fuel storage tanks on the Property in the past? If "Yes," have they been removed? _____ When? _____ By whom? _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(j)	Do you know the location of the boundary lines of the Property?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(k)	Are the boundary lines of the Property marked in any way? If "Yes," how are they marked? _____	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(l)	Has the Property been surveyed? If "Yes," when? _____ By whom? _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(m)	Are copies of any of the following available? <input type="checkbox"/> Site Plan <input type="checkbox"/> Survey <input checked="" type="checkbox"/> Tax Map <input type="checkbox"/> Subdivision Plan/Sketch	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(n)	Are there any easements or rights of way affecting the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(o)	Are there any boundary line disputes, claims of adverse possession, encroachments, or zoning set back violations affecting the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW

Further explanation of any of the above:

2. MECHANICAL, ELECTRICAL, APPLIANCES & OTHER SYSTEMS

HEATING/AIR CONDITIONING/HOT WATER SYSTEMS

(a)	Heating System (check all that apply): <input checked="" type="checkbox"/> Base Board <input type="checkbox"/> Hot Air <input type="checkbox"/> Radiant <input type="checkbox"/> Heat Pump <input type="checkbox"/> Direct <input type="checkbox"/> Vent <input type="checkbox"/> Steam Other (explain): _____ Age of Furnace/Boiler: _____ <input type="checkbox"/> Don't Know Primary Fuel Type: <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Electric <input type="checkbox"/> Wood <input type="checkbox"/> Wood Pellet <input type="checkbox"/> Coal <input type="checkbox"/> Solar <input type="checkbox"/> Geothermal <input type="checkbox"/> Other (explain) _____ Primary Annual Fuel Usage: _____ Gallons (or other measure) Date Range _____ Provider: _____ Secondary Fuel Type: <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Electric <input type="checkbox"/> Wood <input type="checkbox"/> Wood Pellet <input type="checkbox"/> Coal <input type="checkbox"/> Solar <input type="checkbox"/> Geothermal <input type="checkbox"/> Other (explain) _____ Secondary Annual Fuel Usage: _____ Gallons (or other measure) Date Range _____ Provider: _____ If propane, who owns propane tank? <input type="checkbox"/> Owner <input type="checkbox"/> Propane Supplier <input type="checkbox"/> Association Property used: <input type="checkbox"/> Full Time <input type="checkbox"/> Seasonally <i>Fuel consumption may vary by user, number of occupants and weather conditions.</i>			
(b)	Air Conditioning: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If "Yes," describe type and number of units (central, heat pump, window, etc.)			
(c)	Hot Water System (check all that apply): <input type="checkbox"/> Hot Water Tank <input type="checkbox"/> Domestic/Off Boiler <input checked="" type="checkbox"/> On Demand <input type="checkbox"/> Heat Pump Water Heater Age of Hot Water System: <u>3 YEARS OLD</u> <input type="checkbox"/> Don't Know Fuel Type: <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Coal <input type="checkbox"/> Solar <input type="checkbox"/> Wood Pellet <input type="checkbox"/> Other Hot Water Tank is: <input type="checkbox"/> Owned <input type="checkbox"/> Rented If rented, from whom: _____ Monthly rental fee: \$ _____			
(d)	Alternative Energy System(s) (check all that apply): <input type="checkbox"/> Solar <input type="checkbox"/> Wind <input type="checkbox"/> Hydroelectric <input type="checkbox"/> Geothermal <input type="checkbox"/> Unknown Energy returned to grid: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Owned or Leased: _____			
(e)	Electrical System: Electrical service panel has: <input type="checkbox"/> Fuses <input checked="" type="checkbox"/> Circuit Breakers <input type="checkbox"/> Other (explain) _____ Annual electricity usage: \$ <u>996.00</u> Date Range: <u>Jan-Dec 31</u> Electric utility provider: <u>GREEN MOUNTAIN POWER</u> Property used: <input checked="" type="checkbox"/> Full <input type="checkbox"/> Time Seasonally <i>Electricity consumption may vary by user, number of occupants, number of appliances and weather conditions.</i> Main Breaker Amperes: <u>100</u> Amps <input type="checkbox"/> Don't Know			
(f)	Has a Vermont Home Energy Profile been created? If yes, when? _____ By whom? _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(g)	Are you aware of any problems or conditions that affect any of the above systems? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If "Yes," explain in detail:			

Seller's Initials

--	--	--	--

Purchaser's Initials

--	--	--	--

TELEPHONE/INTERNET/TELEVISION

(h) Is landline telephone service present at the Property? YES NO If "Yes," current provider: _____

(i) Is cellular telephone service available at the Property? YES NO If "Yes," list available providers: VERIZON

(j) Is internet service available at the Property? YES NO If "Yes," current provider: COMCAST
 If "Yes," service is: Dial Up Broadband Cable Satellite DSL Fiber Optic

(k) Is television service available at the Property? YES NO If "Yes," current provider: _____
 If "Yes," source is: Antenna Cable Satellite DSL Fiber Optic

OTHER EQUIPMENT AND APPLIANCES

(l) Check the items that will be **included** in the sale of the Property:

Electric Garage Door Opener - Number of Transmitters 1 Security Alarm System Owned Leased

Humidifier Dehumidifier Lawn Sprinklers Automatic Timer Smoke Detectors - How Many? 3

Whirlpool Bath Swimming Pool Pool Heater Spa/Hot Tub

Pool/Spa Equipment (list): _____ Refrigerator Stove Hood/Fan Microwave Oven

Dishwasher Garbage Disposal Trash Compactor Washer Dryer Central Vacuum Freezer

Intercom Ceiling Fans Woodstove Sump Pump Well Pump Satellite Dish Indoor/Outdoor Grill

Attic Fan(s) Window A/C Mini Split Compost Bin

Wood/Gas/Pellet/Other Stove (describe): FRANKS WOOD FURNACE

OTHER: _____

List additional equipment and appliances, including any AC units, that will be **excluded** from the sale of the Property:
Security Alarm System

Are any of the items that will be included in the sale of the Property in need of repair or replacement? YES NO
 If "yes", explain in detail: Frank's Wood Furnace

3. STRUCTURAL COMPONENTS

Type of construction (check all that apply)
 Manufactured Modular Wood Frame Other (describe): _____

Age of Building(s): Main Bldg. 58 YEARS Additions to Main Bldg. _____ Additional Building(s): (a) SHED (b) _____


Has Seller built or caused to be built any of the buildings on the Property, or made any additions, modifications, alterations or renovations to any building on the Property? Yes No
 If "Yes," please explain: _____

If "yes," did you obtain all necessary permits and approvals for such work? Yes No Don't know

Check any of the following items that have significant defects or malfunctions or that need significant repair:
 Foundation Slab Chimney Fireplace Interior Walls Ceilings Floors Windows Doors
 Storms/Screens Exterior Walls Driveway Sidewalks Pool Roof Outside Retaining Walls
 Other Structures/Components: Crack on Garage floor. Back Entry Door sometimes sticks

If any of the above items are checked, describe the defect, malfunction or item(s) that need significant repair: _____

Has there ever been damage to the Property or any of the structures from fire, wind, floods, earth movements or landslides?
 YES NO DON'T KNOW If "Yes," explain in detail, including any repairs: _____

Seller's Initials 

Purchaser's Initials

BASEMENT/CELLAR/CRAWL SPACE:

Has there ever been any water leakage, accumulation of water, dampness or visible mold within the basement, cellar or any crawl space? YES NO

If "Yes," explain in detail: Solved with Foundation Drains. Normal Dampness a Dehumidifier ^{we use}

Have there been any repairs or other attempts to control any water or dampness within the basement, cellar or crawl space?

YES NO DON'T KNOW If "Yes," explain in detail, including any repairs: See Above

Are any of the above recurring problems? YES NO If "Yes," what are the problems and how often have they recurred?

ROOF: Shingle Slate Metal Tile Other (describe) _____ Don't Know

Approximate age of roof? _____

Has the roof ever leaked since you have owned the Property? YES NO DON'T KNOW

If "Yes," explain: _____

Has the roof been replaced or repaired since you have owned the Property? YES NO DON'T KNOW

If "Yes," when? New 2019, Minor Repairs 2025

Are there any current problems with the roof? YES NO DON'T KNOW

If "Yes," explain: _____

4. WATER SUPPLY

Special Notice: Water supplies, especially those that are not public or municipal supplies, are affected by many conditions about which Seller may have no knowledge or have any ability to control. These water supply systems can change, deteriorate or fail, often with no warning signs. Seller makes no warranty or representation whatsoever that the water supply, including quality or quantity, will operate or continue to function for any period of time. Inspection of these systems by a qualified inspector is strongly recommended. As required by law, any Seller with a potable water supply that is not served by a public water system shall provide the Purchaser with an informational brochure developed by the Vermont Department of Health regarding Testing Water from Private Water Supplies within 72 hours of the execution of a contract for the purchase of the Property.

TYPE OF WATER SYSTEM The Property is connected to and serviced by (check all applicable boxes):

Public or Municipal Community Private Shared Driven Point Well On-site Off-site
 Drilled Well Dug Well Spring Lake/Pond None Don't Know Other

Water System Features: Cistern/Reservoir/Holding Tank Water Softener/Conditioner Reverse Osmosis

Infrared Light Ultraviolet Other: _____ None Don't Know

Water Pipes are: Copper Galvanized Metal Lead PVC (Plastic) Combination Don't Know

Age of Water System: _____

If Drilled Well: Drilled by: _____ Tag #: _____ Depth: _____

Gallons Per Minute (at time of driller's report): _____ Date of driller's report: _____

What is the annual cost for municipal water \$ _____ Date Range: _____ Metered YES NO

CONDITION OF WATER AND WATER SYSTEM

Has the water been tested for coliform bacteria? YES NO DON'T KNOW

If "Yes," when? _____ By whom? _____ Results: _____

Has any other water quality or water chemistry testing been done? YES NO DON'T KNOW

If "Yes," when? _____ By whom? _____ Results: _____

Water softener YES NO If "Yes," Own Rent If rented, from whom: _____

Are you aware of low pressure in your water system? YES NO

Has your water supply ever run out or run low? YES NO If "Yes," describe: _____

Does the water have any odor, bad taste, cloudiness or discoloration? YES NO If "Yes," describe in detail: _____

Describe in detail any other problems you have had with your water system, including water quality or quantity: _____

Seller's Initials KE

Purchaser's Initials

5. SEWER/SEPTIC/WASTEWATER SYSTEM

Special Notice: Sewer septic and wastewater systems that are not public or municipal systems are not designed to perform indefinitely and are affected by many conditions about which Seller may have no knowledge or have any ability to control. In addition, the useful life of these systems is affected by the amount and type of use, soil conditions, maintenance, the inherent design of these systems and many other factors. *Seller makes no warranty or representation whatsoever that these systems will operate or continue to function for any period of time. Inspection of these systems by a qualified inspector is recommended. State and local permits may be required for sewer, septic and wastewater systems.*

TYPE OF SYSTEM The Property is connected to and serviced by (check appropriate boxes):
 Public or Municipal Sewer System Shared On-site septic/wastewater system Off-site septic/wastewater system
 Septic Tank New or Alternate Technology (explain technology): _____
 Holding Tanks Cesspool Sewage Pump Dry Well Conventional disposal area Mound System disposal area
 At Grade Other Don't Know If other, please explain: _____
 What is the annual cost of municipal sewer? \$ N/A Date Range: _____

CONDITION OF SYSTEM If other than public or municipal sewer/wastewater system, answer the following:
 Date system installed: 1990's Replaced Is the system entirely on your Property? YES NO DON'T KNOW
 If "No," where is it? _____

Has the system been repaired since you have owned the Property? YES NO If "Yes," when? _____
 What was done? see Above By whom? _____

Type of septic tank: Concrete Metal Fiberglass Other (describe) _____ Don't Know
 Septic tank capacity (in gallons) _____ Don't Know
 Date Septic Tank Last Inspected? 2020 Don't Know Reports of last inspection/pumping attached YES NO
 Date Septic Tank Last Pumped? 2020 Don't Know By whom? _____
 If required by a State of Vermont wastewater permit, have required periodic maintenance/inspections been completed Yes No
 If so, date of most recent service 2020 Cost: \$ _____ By whom: _____

To your knowledge, is any portion of the system in need of repair or replacement? YES NO If "Yes," describe in detail: _____

Has the property been occupied as a primary residence for at least 181 days during any one calendar year between December 31, 1986 and December 31, 2006? YES NO DON'T KNOW

6. ADDITIONAL INFORMATION CONCERNING THE PROPERTY

(a)	Is Seller currently occupying the Property? If "No," how long has it been since Seller occupied? _____	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
(b)	Are any property or development rights (e.g. conservation easements to Land Trusts, etc.) owned by others? If "Yes," by whom: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(c)	Is property enrolled in Vermont's Current Use program?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(d)	Has Seller received written notice of any violations of local, state or federal laws, building codes and/or zoning ordinances affecting the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(e)	Are there any property tax abatements, land use value appraisal, land use tax stabilization agreements or other special property tax arrangements applicable to the Property? If yes, explain: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(f)	If the house was built after December 31, 1997, is a Residential Building Energy Standard (RBES) certification available?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(g)	Has Seller received notice that the Property will be reassessed by any taxing authority during the next 12 months?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<u>November 2024</u>
(h)	Does the property have Urea-Formaldehyde Foam Insulation?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(i)	Does the Property have Asbestos and/or Asbestos Materials in the siding, walls, plaster, flooring, insulation, heating system?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW

Seller's Initials

Purchaser's Initials

(j)	Has the Property been tested for Radon Gas? If "Yes," when? _____ By whom? _____ Results: _____	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(k)	Has paint containing lead been used on the Property?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(l)	Does the Property have evidence of mold? If "Yes," what has been done about the mold? _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(m)	Are you aware of any off-site conditions in your neighborhood/community that could affect the value or desirability of the Property, such as noise, proposed major new development, relocation or major construction of roads or highways, proposed zoning changes, etc.? If "Yes," explain in detail: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(n)	Is there any infestation by pests that affect the property? If "Yes," explain: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(o)	Do you have any knowledge of any damage to the Property caused by pests?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(p)	Is the Property currently under warranty or other coverage by a pest control company?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(q)	Do you know of any termite/pest control reports or treatments for the Property in the last five years?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(r)	Does the Property have any audio and/or video surveillance or recording equipment? If Yes, will said equipment be active during showings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(s)	Further explanation of answers to any of the above: <i>Ring Door Bell only. Just Driveway.</i>			

7. CONDOMINIUMS/SUBDIVISIONS/HOMEOWNERS' ASSOCIATIONS

(a)	Is the Property part of a condominium or other common interest ownership association or is it subject to covenants, conditions and restrictions (CC&R's)? If "Yes," Condo docs or CC&R's attached?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(b)	Is there any defect, damage, or problem with any common elements or common areas? If "Yes," describe below.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(c)	Is there any condition or claim which may result in an increase in assessment or fees? If "Yes," describe below.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(d)	Are pets allowed? If yes, what is allowed? _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(e)	Are there any rental restrictions? _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
(f)	Are there any homeowners' association dues associated with the Property? If "Yes," amount: \$ _____ <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
(g)	Are there any special assessments on the Property? If "Yes," amount: \$ _____ <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly Purpose of special assessments: _____ Years or term remaining on any outstanding special assessments: _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
(h)	Are there any current actions, disputes or lawsuits pending between the homeowners/condominium owners' association and any other parties? If "Yes," describe below.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(i)	Do you know of any violations of local, state, or federal laws or regulations, condominium rules or CC&R's relating to the Property? If "Yes," describe below.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(j)	Contact person/manager for condominium/homeowner association: Name: _____ Phone number/e-mail _____			
Further explanation of any of the above:				

Seller's Initials

AC

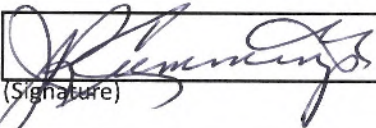
Purchaser's Initials

IS THERE ANYTHING ELSE THAT SHOULD BE DISCLOSED ABOUT THE CONDITION OF THE PROPERTY? (In answering this question, you should be guided by what you would want to know about the condition of the Property if you were buying it.)

YES NO DON'T KNOW OF ANYTHING ELSE. If "Yes," explain:

SELLER'S STATEMENT: Seller is providing the information in this report to reduce the likelihood of DISPUTES or LEGAL ACTION concerning the sale of the Property. The information provided herein does not constitute any warranty, express or implied, by Seller about the Property or any feature of the Property. Seller hereby authorizes any real estate agent to provide a copy of this report to any prospective buyer. IN DELIVERING THIS REPORT TO A BUYER OR PROSPECTIVE BUYER, NO REPRESENTATION IS MADE BY ANY REAL ESTATE AGENT THAT THEY HAVE ANY INDEPENDENT OR PERSONAL KNOWLEDGE ABOUT THE CONDITION OF THE PROPERTY, THAT THEY HAVE MADE ANY INQUIRY OR INVESTIGATION ABOUT THE CONDITION OF THE PROPERTY OR ANY OF THE INFORMATION PROVIDED IN THIS REPORT BY SELLER OR THAT THEY HAVE VERIFIED THE INFORMATION PROVIDED IN THIS REPORT BY THE SELLER. Seller acknowledges that the information provided in this report is correct to the best of Seller's knowledge as of the date signed by Seller.

BUYER/PROSPECTIVE BUYER ACKNOWLEDGES RECEIPT OF A COPY OF THIS REPORT ON THE DATE SET FORTH BELOW. BUYER/PROSPECTIVE BUYER UNDERSTANDS THAT THIS REPORT PROVIDES INFORMATION ABOUT THE PROPERTY MADE BY THE SELLER AS OF THE ABOVE DATE. IT IS NOT A WARRANTY OF ANY KIND BY SELLER OR ANY REAL ESTATE AGENT. THIS REPORT IS NOT A SUBSTITUTE FOR ANY PROPERTY INSPECTION. BUYER/PROSPECTIVE BUYER MAY OBTAIN A PROPERTY INSPECTION. HOWEVER, ANY SUCH INSPECTION MUST BE BY WRITTEN AGREEMENT WITH SELLER. BUYER/PROSPECTIVE BUYER UNDERSTANDS THAT THERE MAY BE MATTERS RELATING TO THE PROPERTY WHICH ARE NOT ADDRESSED IN THIS REPORT.

Seller:  6/25/25
(Signature) (Date)

Purchaser: _____
(Signature) (Date)

Seller: _____
(Signature) (Date)

Purchaser: _____
(Signature) (Date)

Seller: _____
(Signature) (Date)

Purchaser: _____
(Signature) (Date)

Seller: _____
(Signature) (Date)

Purchaser: _____
(Signature) (Date)