

PROPERTY LOCATED AT: 14 Fuller Dr, Winslow, Me 04901

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 _____

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: N/A 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? N/A

~~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: Owner

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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: System had tree roots removed as a preventive measure

Have you experienced any problems such as line or other malfunctions? Yes No

What steps were taken to remedy the problem? N/A

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: System had tree roots removed as a preventive measure

Source of Section II information: Owner

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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)	Hot Water Baseboard			
Age of system(s) or source(s)	2008			
Name of company that services system(s) or source(s)	Downeast			
Date of most recent service call	Approximately 2020			
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)	653 Gallons			
Malfunction per system(s) or source(s) within past 2 years	No			
Other pertinent information				

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: 2009

Date chimney(s) last cleaned: 2009

Direct/Power Vent(s): Yes No Unknown

Has vent(s) been inspected? Yes No Unknown

If Yes, date: N/A

Comments: Central air conditioning upstairs

Source of Section III information: Owner

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? N/A

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): N/A Size of tank(s): N/A

Location: N/A

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What materials are, or were, stored in the tank(s)? N/A

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

Comments: None

Source of information: Owner

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: N/A Yes No Unknown

Comments: N/A

Source of information: Owner

C. RADON/AIR - Current or previously existing:

Has the property been tested? Yes No Unknown

If Yes: Date: N/A By: N/A

Results: N/A

If applicable, what remedial steps were taken? N/A

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

Are test results available? Yes No

Results/Comments: N/A

Source of information: Owner

D. RADON/WATER - Current or previously existing:

Has the property been tested? Yes No Unknown

If Yes: Date: N/A By: N/A

Results: N/A

If applicable, what remedial steps were taken? N/A

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

Are test results available? Yes No

Results/Comments: N/A

Source of information: Owner

E. METHAMPHETAMINE - Current or previously existing:

Yes No Unknown

Comments: N/A

Source of information: Owner

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[initials]

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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: N/A

Do you know of any records/reports pertaining to such lead-based paint/lead-based paint hazards: Yes No

If Yes, describe: N/A

Are you aware of any cracking, peeling or flaking paint? Yes No

Comments: N/A

Source of information: Owner

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: Owner

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: Deed Restrictions and Easement

Source of information: Deed 10360/246 and Deed 4449/4

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? N/A

Road Association Name (if known): N/A

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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: N/A

Year Principal Structure Built: 1970

What year did Seller acquire property? 2010

Roof: Year Shingles/Other Installed: Shingle installed in 2007

Water, moisture or leakage: None

Comments: None

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: None

Comments: None

Source of Section V information: Owner

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SECTION VI – ADDITIONAL INFORMATION


Central air conditioning upstairs. Steel support beam in basement that spans entire house.

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.

 04/09/2023

SELLER _____ DATE
Ann Lindeman

 04/09/2023

SELLER _____ DATE
Scott Greeley

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

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