

**MASSACHUSETTS ASSOCIATION OF REALTORS®
 SELLER'S STATEMENT OF PROPERTY CONDITION**

THE SELLER AUTHORIZES THE BROKERS OR SALESPERSONS TO PROVIDE THE FOLLOWING INFORMATION TO PROSPECTIVE BUYERS. THIS INFORMATION IS BASED UPON THE SELLER'S KNOWLEDGE, BUT IS NOT INTENDED AS A GUARANTEE OF THE CONDITION OF THE PROPERTY OR THE CONTINUED SATISFACTORY OPERATION OF ANY SYSTEM. THE BUYER SHOULD INDEPENDENTLY VERIFY ALL INFORMATION BEFORE PURCHASE.

Property Address _____

ANSWERS

YES NO UNKN

I. TITLE/ZONING/BUILDING INFORMATION

- 1. Seller/Owner ROBERT T. LROWN How long owned? 53 YEARS
- 2. How long occupied? SAME Approximate year built? _____
- 3. Have you been advised of any title problems or limitations (for example, deed restriction, lot line dispute, order of conditions)? If yes, please explain _____
- a) Do you know of any easement, common driveway, or right of way? If yes, please explain _____
- 4. Zoning classification of property (if known) _____
- 5. Has your city/town issued a notice of any violation which is still outstanding? If yes, explain _____
- a) Have you been advised that the current use is nonconforming in any way? Explain _____
- 6. Do you know of any variances or special permits? Explain _____
- 7. During Seller's ownership, has work been done for which a permit was required? If yes, explain _____
- a) Were permits obtained?
- b) Was the work approved by inspector?
- c) Is there an outstanding notice of any building code violation? Yes ___ No ___ Explain _____
- 8. Have you been informed that any part of the property is in a designated flood zone or wetlands? Explain _____
- 9. Water drainage problems? Explain _____

(See Flood Zone disclosure Page 4)

YES NO UNKN

II. SYSTEM AND UTILITIES INFORMATION

- DO YOU KNOW OF ANY CURRENT PROBLEM WITH ANY SYSTEM LISTED BELOW?**
- 10. Has there ever been an UNDERGROUND FUEL TANK?
 If yes, is it still in use? _____
 If not used, was it removed? _____
 (See Hazardous Materials Disclosure Page 4)
- 11. HEATING SYSTEM: Problems? Explain _____
- a) Identify any unheated room or area _____
- b) Approximate date of last service _____
- c) Reason _____
- 12. DOMESTIC HOT WATER: Type GAS Age _____ Problems? Explain _____
- 13. SEWAGE SYSTEM: Problems? Explain _____
- Type: Municipal Sewer Private _____ If private, describe type of system:
 (cesspool, septic tank, etc.) _____
- Name of service company _____
- Date it was last pumped _____ Frequency _____
- During your ownership has sewage backed up into house or onto yard? Yes ___ No Explain _____
- Is system shared with other homes? _____
- Date a Title 5 inspection last performed _____ Copy attached. Yes No

SELLER'S INITIALS RTL

BUYER'S INITIALS _____



ANSWERS

- 14. PLUMBING SYSTEM: Problems/Leaks/Freezing? Explain _____
Bathroom ventilation problems? Explain _____
- 15. DRINKING WATER SOURCE: Public Private _____ If private:
a) Location _____
b) Date last tested _____ Report: Attached _____ Not attached _____
c) Water quality problems? Explain _____
d) Water quantity problems? Explain _____
e) Flow rate (gal. min.) _____
f) Age of pump _____
g) Is there a filtration system? _____ Age/Type of filtration system _____
- 16. ELECTRICAL SYSTEM: Problems? Explain _____
- 17. APPLIANCES: List appliances that are included _____
Any known problems? _____
If yes, explain _____
- 18. SECURITY SYSTEM: None _____ Type _____ Age _____ Company _____
Problems? Explain _____
- 19. AIR CONDITIONING: Central _____ Window _____ Other _____ None
Problems? Explain _____

III. BUILDING/STRUCTURAL IMPROVEMENTS INFORMATION

- | YES | NO | UNKN | |
|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 20. FOUNDATION/SLAB:
Problems? Explain _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. BASEMENT: Water _____ Seepage _____ Dampness _____ <i>VERY RARELY</i>
Explain amount, frequency, and location _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | a) Sump pump? If yes, age _____ location _____ Problems? _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 22. ROOF:
Problems? Explain _____
Location of leaks/repairs _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 23. CHIMNEY/FIREPLACE: Date last cleaned _____ Problems? _____
Wood/Coal/Pellet Stove in compliance with installation regulations/code/bylaws? _____
If not, explain _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 24. History of smoke/fire damage to structure, if any? Explain _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 25. FLOORS: Type of floors under carpet/linoleum? _____
Problems with floors (buckling, sagging, etc.)? Explain _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 26. WALLS:
a) INTERIOR Walls: Problems? Explain <i>CHIMNEY AREA</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b) EXTERIOR Walls: Problems? Explain _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 27. WINDOWS/SLIDING DOORS/DOORS:
Problems or leaks? Explain _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 28. INSULATION: Does house have insulation? If yes, type <i>unknown</i> Date installed _____ Location _____ |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 29. ASBESTOS: Do you know whether asbestos is present in exterior shingles, pipecovering or boiler insulation?
Has a fiber count been performed? <i>NO</i>
If yes, attach copy _____
(See Asbestos disclosure Page 4) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 30. LEAD PAINT: Is lead paint present?
If yes, locations (attach copy of inspection reports) _____
If yes, describe abatement plan/interim controls, if any _____
Has paint been encapsulated? If yes, when and by whom? _____
(See Lead Paint disclosure Page 4) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 31. RADON: Has test for radon been performed? If yes, attach copy _____
(See Radon disclosure Page 4) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 32. INSECTS: History of Termites/Wood Destroying Insects or Rodent Problems? If yes, explain treatment and dates <i>SILL NEAR KITCHEN</i>
(See Chlordane disclosure Page 4) |

SELLER'S INITIALS

BUYER'S INITIALS

ANSWERS

- 33. SWIMMING POOL/JACUZZI: Problems? Explain _____
Name of service company _____
- 34. GARAGE/SHED/OR OTHER STRUCTURE: Problems, explain _____

IV. MISCELLANEOUS INFORMATION

- YES NO UNKN
- 35. Do you know of any other problem which may affect the value or use of the property which may not be obvious to a prospective buyer?
Explain _____

V. CONDOMINIUM INFORMATION

- YES NO UNKN
- 36. If converted to condominium, are documents recorded (Master deed/Unit deed etc.)?
 - 37. PARKING: Is parking space included? If yes, is it deeded, exclusive easement or common? _____
 - 38. CONDO FEES: Current monthly fees for Unit are \$ _____
Heat included? Yes ___ No ___
Electricity included? Yes ___ No ___
 - 39. RESERVE FUND: Has an advance payment been made to a condo reserve fund?
If yes, how much \$ _____
 - 40. CONDO ASSOC. INFO: Is owners' association currently involved in any litigation? _____
If yes, explain _____
 - 41. Have you been advised of any matter which is likely to result in a special assessment or substantially increase condominium fees?
Explain _____

VI. RENTAL PROPERTY INFORMATION

- YES NO UNKN
- 42. NUMBER OF UNITS: _____
Has a unit been added/subdivided since original construction?
If yes, was a permit for new/added unit obtained? _____
 - 43. RENTS: Number of units occupied _____ Rents \$ _____ /month
Expiration date of each lease _____
Any tenants without leases?
Is owner holding last month's rent _____ security deposit? _____
If yes, has interest been paid? _____
If security deposit held attach a copy of statements of condition. Attached _____ Not attached _____
 - 44. Is there any outstanding notice of any sanitary code violation? Yes ___ No ___ Explain _____

VII. ACKNOWLEDGMENT

Seller(s) hereby acknowledge that the information set forth above is true and accurate to the best of my (our) knowledge. I (we) further agree to defend and indemnify the broker(s) and any subagents for disclosure of any on the information contained herein. Seller(s) further acknowledge receipt of copy of Seller's Statement of Property Condition.

Date 5/07/2018 Seller Robert T. Cronin Seller _____

Buyer/Prospective Buyer acknowledges receipt of Seller's Statement of Property Condition before purchase. Buyer acknowledges that Broker has not verified the information herein and Buyer has been advised to verify information independently.

Date _____ Buyer _____ Buyer _____

SELLER'S INITIALS RTC _____

BUYER'S INITIALS _____

