

**PROPERTY DISCLOSURE - RESIDENTIAL ONLY**

New Hampshire Association of REALTORS® Standard Form

**TO BE COMPLETED BY SELLER**

The following answers and explanations are true and complete to the best of SELLER'S knowledge. This statement has been prepared to assist prospective BUYERS in evaluating SELLER'S property. This disclosure is not a warranty of any kind by the SELLER, or any real estate FIRM representing the SELLER, and is not a substitute for any inspection by the BUYER. SELLERS authorize FIRM in this transaction to disclose the information in this statement to other real estate agents and to prospective buyers of this property.

**NOTICE TO SELLER(S): COMPLETE ALL INFORMATION AND STATE NOT APPLICABLE OR UNKNOWN AS APPROPRIATE. IF ANY OF THE INFORMATION IN THIS PROPERTY DISCLOSURE FORM CHANGES FROM THE DATE OF COMPLETION, YOU ARE TO NOTIFY THE LISTING FIRM PROMPTLY IN WRITING.**

1. **SELLER:** Eleanor Slye

2. **PROPERTY LOCATION:** 65 Mittenwald Strasse, Bartlett, NH 03812

3. **CONDOMINIUM, CO-OP, PUD DISCLOSURE RIDER OR MULTIFAMILY DISCLOSURE RIDER ATTACHED?** ☐ Yes ☐ No

4. **SELLER:** ☒ has ☐ has not occupied the property for 30 years.

**5. WATER SUPPLY**

Please answer all questions regardless of type of water supply.

a. **TYPE OF SYSTEM:** ☒ Public ☐ Private ☐ Seasonal ☐ Unknown  
☐ Drilled ☐ Dug ☐ Other

b. **INSTALLATION:** Location: facing house on left side under side stairs is meter  
Installed By: Lower Bartlett Water Precinct Date of Installation: 4-1-25  
What is the source of your information? Cindi Currier, Executive Admin. Asst. Lower Bartlett

c. **USE:** Number of persons currently using the system: 2-4  
Does system supply water for more than one household? ☐ Yes ☒ No

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

Pump: ☐ Yes ☒ No ☐ N/A Quantity: ☐ Yes ☒ No  
Quality: ☐ Yes ☒ No ☐ Unknown

If YES to any question, please explain in Comments below or with attachment.

e. **WATER TEST:** Have you had the water tested? ☐ Yes ☒ No Date of most recent test

If YES to any question, please explain in Comments below or with attachment.

Are you aware of any test results reported as unsatisfactory or satisfactory with notations? ☐ Yes ☒ No

If YES, are test results available? ☐ Yes ☒ No

What steps were taken to remedy the problem?

COMMENTS: Lower Bartlett Water Precinct, tests water yearly, monthly for bacteria  
and constant water quality monitoring -

**6. SEWAGE DISPOSAL SYSTEM**

a. **TYPE OF SYSTEM:** Public: ☐ Yes ☐ No Community/Shared: ☐ Yes ☐ No  
Private: ☒ Yes ☐ No ☐ Unknown  
Septic Design Available: ☐ Yes ☐ No

**b. IF PUBLIC OR COMMUNITY/SHARED**

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

What steps were taken to remedy the problem?

**c. IF PRIVATE:**

TANK: ☐ Septic Tank ☐ Holding Tank ☐ Cesspool ☐ Unknown

Tank Size 1000 Gal. ☐ Unknown ☐ Other

Tank Type ☒ Concrete ☐ Metal ☐ Unknown ☐ Other

Location: out back 11 ft from sidewalk ☐ Location Unknown Date of Installation: 1978

Date of Last Servicing: 11/17/22 Name of Company Servicing Tank: Turner Septic

Have you experienced any malfunctions? ☐ Yes ☒ No

Comments: next service due 10/1/2025

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d. LEACH FIELD: ☒ Yes ☐ No ☐ Other

IF YES, Location: back left of yard

Size: ☐ Unknown

Date of installation of leach field:

Installed By:

Have you experienced any malfunctions? ☐ Yes ☒ No

Comments:

e. IS SYSTEM LOCATED ON "DEVELOPED WATERFRONT" as described in RSA 485-A? ☐ Yes ☒ No ☐ Unknown

IF YES, has a septic system evaluation been done within 180 days? ☐ Yes ☐ No ☐ Unknown

Date of Evaluation:

Comments:

FOR ADDITIONAL INFORMATION THE BUYER IS ENCOURAGED TO CONTACT THE NH DEPARTMENT OF ENVIRONMENTAL SERVICES SUBSURFACE SYSTEMS BUREAU, 603-271-3501

7. INSULATION

LOCATION	Yes	No	Unknown	If YES, Type	Amount	Unknown
Attic or Cap	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
Crawl Space (basement)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2" blue insulating board		<input type="checkbox"/>
Exterior Walls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2x6 construction		<input type="checkbox"/>
Floors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2" blue insulating board		<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>

8. HAZARDOUS MATERIAL

a. UNDERGROUND STORAGE TANKS - Current or previously existing:

Are you aware of any past or present underground storage tanks on your property? ☐ Yes ☒ No ☐ Unknown

IF YES: Are tanks currently in use? ☐ Yes ☐ No

IF NO: How long have tank(s) been out of service?

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

Age of tank(s): Size of tank(s):

Location:

Are you aware of any past or present problems such as leakage, etc? ☐ Yes ☐ No

Comments:

If tanks are no longer in use, have the tanks been removed? ☐ Yes ☐ No ☐ Unknown

Comments:

b. ASBESTOS - Current or previously existing:

As insulation on the heating system pipes or ducts? ☐ 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

If YES, Source of information:

Comments:

c. RADON/AIR - Current or previously existing:

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

If YES: Date:

By:

Results: If app

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

Are test results available? ☐ Yes ☐ No

Comments:

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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

Are test results available? ☐ Yes ☐ No Comments: \_\_\_\_\_

e. LEAD-BASED PAINT - Current or previously existing:

Are you aware of lead-based paint on this property? ☐ Yes ☒ No

If YES: Source of information: \_\_\_\_\_

Are you aware of any cracking, peeling, or flaking lead-based paint? ☐ Yes ☐ No

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

f. Are you aware of any other hazardous materials? ☐ Yes ☒ No

If YES: Source of information: \_\_\_\_\_

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

9. GENERAL INFORMATION

a. Is this property subject to liens, encroachments, easements, rights-of-way, leases, restrictive covenants, attachments, life estates, or right of first refusal?

☐ Yes ☒ No ☐ Unknown If YES, Explain: \_\_\_\_\_

What is your source of information? \_\_\_\_\_

b. Is this property subject to special assessments, betterment fees, association fees, or any other transferable fees?

☐ Yes ☐ No ☐ Unknown If YES, Explain: there is an association fee if you opt in

What is your source of information? LMOA

c. Are you aware of any onsite landfills or any other factors, such as soil, flooding, drainage, etc?

☐ Yes ☒ No If YES, Explain: \_\_\_\_\_

d. Are you aware of any problems with other buildings on the property? ☐ Yes ☒ No

If YES, Explain: \_\_\_\_\_

e. Are you receiving a tax exemption or reduction for this property for any reason including but not limited to current use, land conservation, etc.?

☐ YES ☒ NO ☐ UNKNOWN

If YES, Explain: \_\_\_\_\_

f. Is this property located in a Federally Designated Flood Hazard Zone? ☐ Yes ☐ No ☒ Unknown

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

g. Has the property been surveyed? ☐ Yes ☐ No ☒ Unknown If YES, By: \_\_\_\_\_

If YES, is survey available? ☐ Yes ☐ No ☐ Unknown

h. How is the property zoned? Residential

i. Heating System Age: 19 yrs Type: Rinnai Fuel: propane Tank Location: looking at house located on left side

Owner of Tank: white Mountain oil & propane (two 115 gall. tanks)

Annual Fuel Consumption: 700-800 gall. Price: 3.51 per gall Gallons: 700-800 per year

Date system was last serviced and by whom? 2021, white mountain oil & propane.

Secondary Heat Systems: 2nd - gas fireplaces, 3rd - electric base board heat

Comments: we have three sources of heat, Rinnai's are main source + efficient.

j. Roof Age: 11 month Type of Roof Covering: GAF fiberglass, Patriot red, 35 year

Moisture or leakage: ice damming

Comments: replaced roof 11 months ago, no issues since

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- k. Foundation/Basement: ☐ Full ☒ Partial ☐ Other: \_\_\_\_\_ ☒ Type: crawl space  
Moisture or leakage \_\_\_\_\_  
Comments: 5 ft foundation with correct footing underneath foundation
- l. Chimney(s) How Many? 0 Lined? \_\_\_\_\_ Last Cleaned: \_\_\_\_\_ Problems? \_\_\_\_\_  
Comments: gas log fireplace
- m. Plumbing Type: 1/2 copper, 2/3 pex Age: \_\_\_\_\_  
Comments: pex done 12 years ago
- n. Domestic Hot Water: Age: 12 years Type: electric Gallons: 80
- o. Electrical System: # of Amps 120/240 ☒ Circuit Breakers ☐ Fuses  
Comments: \_\_\_\_\_  
Solar Panels: ☐ Leased ☐ Owned If leased, explain terms of agreement: \_\_\_\_\_  
Comments: \_\_\_\_\_
- p. Modifications: Are you aware of any modifications or repairs made without the necessary permits? ☐ Yes ☒ No  
If Yes, please explain: \_\_\_\_\_
- q. Pest Infestation: Are you aware of any past or present pest infestations? ☐ Yes ☒ No Type: \_\_\_\_\_  
Comments: we prevent any pest issues by using a pest company to maintain our property.
- r. Methamphetamine Production: Do you have knowledge of methamphetamine production ever occurring on the property?  
(Per RSA 477:4-g) ☐ Yes ☒ No If YES, please explain: \_\_\_\_\_
- s. Air Conditioning: Type: portable Age: \_\_\_\_\_ Date Last Serviced and by whom: \_\_\_\_\_  
Comments: we use portable a/c unit when needed (not staying w/prop.)
- t. Pool: Age: N/A Heated: ☐ Yes ☐ No Type: \_\_\_\_\_ Last Date of Service: \_\_\_\_\_  
By Whom: \_\_\_\_\_
- u. Generator: Portable: ☐ Yes ☒ No Whole House: ☐ Yes ☐ No Kw/Size: \_\_\_\_\_ Last Date of Service: \_\_\_\_\_  
If Portable: ☐ Included ☐ Negotiable  
Comments: \_\_\_\_\_
- v. Internet: Type Currently Used at Property: Spectrum
- w. Other (e.g. Alarm System, Irrigation System, etc.) N/A  
Comments: \_\_\_\_\_

**NOTICE TO PURCHASER(S):** PRIOR TO SETTLEMENT YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM NECESSARY WITH RESPECT TO ADJACENT PARCELS IN ACCORDANCE WITH THE TERMS AND CONDITIONS AS MAY BE CONTAINED IN PURCHASE AND SALES AGREEMENT AND DEPOSIT RECEIPT. YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM NECESSARY WITH RESPECT TO INFORMATION ON ANY SEXUAL OFFENDERS REGISTERED UNDER NH RSA CHAPTER 651-B. SUCH INFORMATION MAY BE OBTAINED BY CONTACTING THE LOCAL POLICE DEPARTMENT.

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10. ADDITIONAL INFORMATION

a. ATTACHMENT EXPLAINING CURRENT PROBLEMS, PAST REPAIRS, OR ADDITIONAL INFORMATION?

☐ Yes ☒ No

b. ADDITIONAL COMMENTS:

all the white "Icides" on decking is new plastic Aztec product which will never rot  
all decking is composite and pressure treated.  
The complete exterior was painted, had landscaping done to left of property 3 months ago, had asphalt in front of left garage done and re-sealed driveway, new exterior stairs done with composite + P.T. material. When we purchased home we put a poured concrete floor in basement and fixed any wood with P.T. that we needed to.

ACKNOWLEDGEMENTS:

SELLER ACKNOWLEDGES THAT HE/SHE HAS PROVIDED THE ABOVE INFORMATION AND THAT SUCH INFORMATION IS ACCURATE, TRUE AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE. SELLER AUTHORIZES THE LISTING BROKER TO DISCLOSE THE INFORMATION CONTAINED HEREIN TO OTHER BROKERS AND PROSPECTIVE PURCHASERS.

SELLER(S) MAY BE RESPONSIBLE AND LIABLE FOR ANY FAILURE TO PROVIDE KNOWN INFORMATION TO BUYER(S).

Eleanor Skye 8-28-25  
SELLER DATE

SELLER DATE

BUYER ACKNOWLEDGES RECEIPT OF THIS PROPERTY DISCLOSURE RIDER AND HEREBY UNDERSTANDS THE PRECEDING INFORMATION WAS PROVIDED BY SELLER AND IS NOT GUARANTEED BY BROKER/AGENT. THIS DISCLOSURE STATEMENT IS NOT A REPRESENTATION, WARRANTY OR GUARANTY AS TO THE CONDITION OF THE PROPERTY BY EITHER SELLER OR BROKER. BUYER IS ENCOURAGED TO UNDERTAKE HIS/HER OWN INSPECTIONS AND INVESTIGATIONS VIA LEGAL COUNSEL, HOME, STRUCTURAL OR OTHER PROFESSIONAL AND QUALIFIED ADVISORS AND TO INDEPENDENTLY VERIFY INFORMATION DIRECTLY WITH THE TOWN OR MUNICIPALITY.

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