

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: Stephen R. Crouch, Lynn D. Crouch

2. PROPERTY LOCATION: 25 Lorry Lane, Conway NH 03813

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

4. SELLER: has has not occupied the property for 3+ 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: behind the shed in the woods
Installed By: _____ Date of Installation: _____
What is the source of your information? Seller

c. USE: Number of persons currently using the system: 2
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 2022
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:
Well pump replaced 2024 (1/2). Water filtration system in place.

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 Other
Tank Size _____ Gal. Unknown Other
Tank Type Concrete Metal Unknown Other
Location: see design Location Unknown Date of Installation: _____
Date of Last Servicing: 10/2025 Name of Company Servicing Tank: Turner Septic
Have you experienced any malfunctions? Yes No
COMMENTS: _____

SELLER(S) INITIALS SRC LR

BUYER(S) INITIALS _____

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d. LEACH FIELD: Yes No Other _____
IF YES, Location: see design 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>blown-in</u>		<input type="checkbox"/>
	Crawl Space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
	Exterior Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>
	Floors	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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: 2022 By: _____
Results: per acceptable limit (if applicable, what remedial steps were taken?) _____
Has the property been tested since remedial steps? Yes No
Are test results available? Yes No
Comments: fan not attached to system.

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d. RADON/WATER - Current or previously existing:

Has the property been tested? [] Yes [X] 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 [X] No

If YES: Source of information: _____

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

Comments: _____

f. Are you aware of any other hazardous materials? [] Yes [X] 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 [X] 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?

[X] Yes [] No [] Unknown If YES, Explain: \$ 600/yr road association fee

What is your source of information? Seller

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

[] Yes [X] No If YES, Explain: _____

d. Are you aware of any problems with other buildings on the property?

[] Yes [X] 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 [X] No [] Unknown Comments: _____

g. Has the property been surveyed?

[] Yes [] No [X] Unknown If YES, By: _____

If YES, is survey available? [] Yes [] No [] Unknown

h. How is the property zoned? RA

i. Heating System Age: 2yr Type: heat pump Fuel: Electric Tank Location: _____

Owner of Tank: _____

Annual Fuel Consumption: _____ Price: _____ Gallons: _____

Date system was last serviced and by whom? _____

Secondary Heat Systems: pellet stove, wood stove

Comments: _____

j. Roof Age: Unknown Type of Roof Covering: Metal

Moisture or leakage: none

Comments: _____

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k. Foundation/Basement [X] Full [] Partial [] Other: _____ [] Type: _____

Moisture or leakage: none

Comments: _____

l. Chimney(s) How Many? 1 Lined? unknown Last Cleaned: 2005 Problems? _____

Comments: _____

m. Plumbing Type: _____ Age: _____

Comments: _____

n. Domestic Hot Water Age: 4+ yrs Type: electric Gallons: _____

o. Electrical System # of Amps _____ [X] 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 [X] No

If Yes, please explain: _____

q. Pest Infestation: Are you aware of any past or present pest infestations? [] Yes [X] No Type: _____

Comments: _____

r. Methamphetamine Production Do you have knowledge of methamphetamine production ever occurring on the property? (Per RSA 477:4-g) [] Yes [X] No If YES, please explain: _____

s. Air Conditioning Type: mini split Age: 2 yrs Date Last Serviced and by whom: _____

Comments: _____

t. Pool Age: X Heated: [] Yes [] No Type: _____ Last Date of Service: _____

By Whom: _____

u. Generator Portable: [X] Yes [] No Whole House: [] Yes [] No Kw/Size: _____ Last Date of Service: _____

If Portable: [] Included [X] Negotiable

Comments: _____

v. Internet Type Currently Used at Property: Spectrum

w. Other (e.g. Alarm System, Irrigation System, etc.) none

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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SRB LR

BUYER(S) INITIALS

[] []

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PROPERTY LOCATION: _____

10. ADDITIONAL INFORMATION

a. ATTACHMENT EXPLAINING CURRENT PROBLEMS, PAST REPAIRS, OR ADDITIONAL INFORMATION?
 Yes No

b. ADDITIONAL COMMENTS:

None

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).

Stephen R. Crouch dotloop verified 04/08/26 12:50 PM EDT LQWY-IEFH-NNXB-QAEN
SELLER DATE

Lauren Rudic, P.M. for Lynn D. Crouch dotloop verified 04/10/26 3:37 PM EDT DSCI-ZOYQ-VHMH-WDGW
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.

BUYER DATE

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SELLER(S) INITIALS

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PROPERTY DISCLOSURE RIDER
CONDOMINIUM, CO-OP, PUD AND OTHER HOMEOWNER ORGANIZATIONS
(To be used in conjunction with Property Disclosure - Residential)
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In compliance with the requirements of RSA 477:4-f, the following information is provided to BUYER relative to the purchase of a condominium unit.

RIGHT TO INFORMATION: In accordance with RSA 356-B:58, a party interested in purchasing a condominium unit has the right to obtain from the Condominium Unit Owner's Association the following information: a copy of the condominium declaration, by-laws, any formal rules of the association, a statement of monthly and annual fees and any special assessments made within the last 3 years.

- 1. Seller and Property Address: Stephen R. Crouch and Lynn D. Crouch
25 Lorry Lane, Conway, NH 03813
2. Association Name (if applicable): Benlor Drive/Lorry Lane Property Owners Association
3. Property Manager/Agent: Phone:

4. GENERAL AND LEGAL

- a. Are there any Association or Corporation approvals required for transfer of Ownership?
b. Is there a time share operation existing at Property?
c. Is there a vacation rental operation or other organized rental program at Property?
d. Are you aware of any rental, use or age restrictions?
e. Number of allocated parking spaces available for this unit:
f. Are you aware of any pending or existing litigation?
g. Are the minutes of the Condominium Association annual meeting available?
h. Are there any pet policies? Restrictions: Dogs/Cats Allowed:

5. MASTER INSURANCE POLICY

- a. Name of Company:
b. Name of Agent: Phone:

6. FINANCIAL

- a. Monthly maintenance fee(s): \$ 600/yr
b. What do the monthly fees include?
c. Are there any additional fees? If so, please specify: None
d. Are you aware of any special assessments or loans in effect at this time?
Additional Comments: None

7. ACKNOWLEDGEMENTS:
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Stephen R. Crouch
SELLER DATE

Lauren Radin, PM for Lynn D. Crouch
SELLER DATE

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BUYER DATE

BUYER DATE