

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:** Jason D Garber and Karena J Martin

2. **PROPERTY LOCATION:** 7 Summit Vista Road, B4, 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 2.5 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: Shared meter under parking area, valves in front of Unit 1
Installed By: Lower Bartlett Water Precinct Date of Installation: mid-'90s, 2025
What is the source of your information? LBWP fixed a leak in 2025; line replaced under the stairs

c. USE: Number of persons currently using the system: 4 units
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:

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: _____ Location Unknown. Date of Installation: _____
Date of Last Servicing: _____ Name of Company Servicing Tank: _____
Have you experienced any malfunctions? Yes No
COMMENTS:

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d. LEACH FIELD: Yes No Other Community/Shared
IF YES, Location: Downhill of septic tank Size: _____ Unknown
Date of installation of leach field: 1987 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

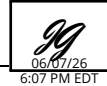

7. INSULATION	LOCATION	Yes	No	Unknown	If YES, Type	Amount	Unknown
	Attic or Cap	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input checked="" type="checkbox"/>
	Crawl Space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input type="checkbox"/>
	Exterior Walls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	<input checked="" 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: _____ 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: _____

SELLER(S) INITIALS
 / 
06/07/26 6:07 PM EDT / 06/07/26 6:09 PM EDT

BUYER(S) INITIALS _____ / _____

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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: Quarterly association fees, 0 current special assessments
 What is your source of information? SVL8 COA bylaws and annual report
- 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?** Ridgeline and Hillside Overlay District (RHOD)
- i. Heating System** Age: 10-20 yrs Type: Toyostove Fuel: K1 Tank Location: South of building
 Owner of Tank: Unit
 Annual Fuel Consumption: FT: 275ga PT: 175ga Price: Feb: \$5.139 Gallons: 250
 Date system was last serviced and by whom? Fuel filter replaced by Frechette 10/24. Heater self-serviced 9/22.
 Secondary Heat Systems: Baseboard, mini-split
 Comments: Mini-split is efficient down to 32°F. Bedrooms have Mysa baseboard thermostats.
- j. Roof** Age: 3 yrs Type of Roof Covering: Asphalt shingles
 Moisture or leakage: None
 Comments: _____

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k. Foundation/Basement Full Partial Other: _____ Type: _____

Moisture or leakage: _____
Comments: _____

l. Chimney(s) How Many? 1 Lined? Y Last Cleaned: Not needed Problems? _____

Comments: Inspected annually

m. Plumbing Type: PVC Age: 39

Comments: Add-on Z-Wave main valve acutuator

n. Domestic Hot Water Age: 8? Type: Electric Gallons: 30

o. Electrical System # of Amps 200 Circuit Breakers Fuses

Comments: Main room has Z-Wave switches
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: _____

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: Mini split Age: 5 Date Last Serviced and by whom: 5/21 Gaynor Heating Cooling

Comments: Remote control, WiFi control via MQTT

t. Pool Age: _____ 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: Cable internet

w. Other (e.g. Alarm System, Irrigation System, etc.) Duct fan circulates air from balcony to two bedrooms (WiFi).

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:

Water heater relay installed for long-term vacancy. Turn on remotely several days before occupancy. Do not cycle daily; stagnant or repeatedly cooled water may promote Legionella growth.

Improvements 2020-26:

- Replaced carpet throughout
- Installed mini-split HVAC
- Replaced refrigerator and dishwasher, kitchen faucet, microwave oven
- Replaced all furniture except dining room and bunk bed
- Added storage above upstairs hallway
- Replaced main room light switches, chandeliers, and thermostat
- Replaced bedroom thermostats
- Replaced slider screen, some window screens, sealed windows
- Replaced bathroom light fixture, mirror
- Replaced window coverings

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).

Jason D Garber

dotloop verified
06/07/26 6:07 PM EDT
4SUT-1WAS-TN63-PTBN

SELLER

DATE

Karena J Martin

dotloop verified
06/07/26 6:09 PM EDT
MCC9-PQ5W-BP1O-DPKK

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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BUYER

DATE

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