

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:** Gregory E. Miller and Cynthia S. Miller

2. **PROPERTY LOCATION:** 136 Northbrook Circle, Unit #96, Conway NH 03860

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

4. **SELLER:** ☒ has ☐ has not occupied the property for 9 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 ASSOCIATION

b. **INSTALLATION:** Location: UNKNOWN

Installed By: UNKNOWN Date of Installation: _____

What is the source of your information? _____

c. **USE:** Number of persons currently using the system: 2 IN OUR UNIT
Does system supply water for more than one household? ☐ Yes ☐ No UNKNOWN (SEPERATE SHUTOFF)

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: _____

SELLER(S) INITIALS [Signature] [Signature]

BUYER(S) INITIALS _____

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d. LEACH FIELD: ☐ Yes ☒ No ☐ Other _____
IF YES, Location: _____ 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. <u>INSULATION</u>	<u>LOCATION</u>	<u>Yes</u>	<u>No</u>	<u>Unknown</u>	<u>If YES, Type</u>	<u>Amount</u>	<u>Unknown</u>
	Attic or Cap	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
	Crawl Space	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
	Exterior Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
	Floors	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" 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 NOT SINCE FEB 2017

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: _____

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d. RADON/WATER - Current or previously existing:

Has the property been tested? ☐ Yes ☒ No ☐ Unknown NOT SINCE FEB 2017

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: HOA FEES

What is your source of information? _____

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: VETERANS DISCOUNT

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? UNKNOWN

i. Heating System Age: 33y Type: ELEC BASEBOARD Fuel: _____ Tank Location: _____

Owner of Tank: _____

Annual Fuel Consumption: _____ Price: _____ Gallons: _____

Date system was last serviced and by whom? _____

Secondary Heat Systems: _____

Comments: _____

j. Roof Age: UNK Type of Roof Covering: UNK

Moisture or leakage: _____

Comments: _____

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[Signature]

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- k. Foundation/Basement ☐ Full ☐ Partial ☒ Other: SLAB ☐ Type: _____
Moisture or leakage: _____
Comments: _____
- l. Chimney(s) How Many? 1 Lined? UNK Last Cleaned: JUN 25 Problems? NONE
Comments: _____
- m. Plumbing Type: UNK Age: 33 yrs
Comments: _____
- n. Domestic Hot Water Age: 20 yrs Type: ELEC Gallons: 80
- o. Electrical System # of Amps UNK ☒ Circuit Breakers ☐ Fuses
Comments: _____
Solar Panels: ☐ Leased ☐ Owned If leased, explain terms of agreement: NONE
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: NONE Age: _____ Date Last Serviced and by whom: _____
Comments: _____
- t. Pool Age: NONE 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: NONE
- v. Internet Type Currently Used at Property: SPECTRUM (END JUN '25)
- 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.

SELLER(S) INITIALS

[Signature] [Signature]

BUYER(S) INITIALS

[Signature] [Signature]

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10. ADDITIONAL INFORMATION

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

☐ Yes ☒ No

b. ADDITIONAL COMMENTS:

HOT WATER HEATER SERVICED JUN '23. ANODE
ONLY 1/3 ERODED, BUT REPLACED.

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).

Priscilla E. Miller 1/5/26
SELLER DATE

Cynthia S. Miller 1/5/26
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

BUYER DATE

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