

PROPERTY LOCATED AT: 163 Back Road, Brooklin, ME 04616

PROPERTY DISCLOSURE

Under Maine Law, certain information must be made available to buyers prior to or during preparation of an offer. This statement has been prepared to assist prospective buyers in evaluating this property. This disclosure is not a warranty of the condition of the property and is not part of any contract between Seller and any Buyer. Seller authorizes the disclosure of the information in this statement to real estate licensees and to prospective buyers of this property. The Seller agrees to provide prompt notice of any changes in the information and this form will be appropriately changed with an amendment date. Inspections are highly recommended.

DO NOT LEAVE ANY QUESTIONS BLANK. STRIKE, WRITE N/A OR UNKNOWN IF NEEDED.

SECTION I - WATER SUPPLY

TYPE OF SYSTEM: Public Private Seasonal _____ Unknown
 Drilled Dug Other _____

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

Pump (if any): N/A Yes No Unknown
Quantity: Yes No Unknown
Quality: Yes No Unknown

If Yes to any question, please explain in the comment section below or with attachment.

WATER TEST: Have you had the water tested? Yes No
If Yes, Date of most recent test: 2025 Are test results available? .. Yes No
To your knowledge, have any test results ever been reported as unsatisfactory or satisfactory with notation? Yes No
If Yes, are test results available? Yes No
What steps were taken to remedy the problem? Aug. 2025 test showed total coliform at 2.0 MPN/100mL Well has been shock-chlorinated for coliform in the past. Full test results available online. See also section IV D.

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: In the basement

Installed by: Jones, Ellsworth

Date of Installation: 1960's

USE: Number of persons currently using system: main house 2-5 and up to 2 in cabin

Does system supply water for more than one household? Yes No Unknown

Comments: Water is turned off and drained in the winter in the main house and cabin

Source of Section I information: sellers

Buyer Initials _____

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SECTION II - WASTE WATER DISPOSAL

TYPE OF SYSTEM: Public Private Quasi-Public _____ Unknown

IF PUBLIC OR QUASI-PUBLIC (Strike Section if Not Applicable):

Have you had the sewer line inspected?..... Yes No

If Yes, what results: _____

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

What steps were taken to remedy the problem? _____

IF PRIVATE (Strike Section if Not Applicable):

Tank: Septic Tank Holding Tank Cesspool Other: _____
 Overboard Discharge (38 MRS Section 413(3) and (3-A))

Tank Size: 500 Gallon 1000 Gallon Unknown Other: _____

Tank Type: Concrete Metal Unknown Other: **PVC**

Location: **In front of main house 50'** OR Unknown

Date installed: 2023 Date last pumped: 2023 Name of pumping company: _____

Have you experienced any malfunctions? Yes No

If Yes, give the date and describe the problem: **Tank was replaced in 2023. Webb Excavating installed the tank for Prin Allen**

Date of last servicing of tank: 2023 Name of company servicing tank: **Prin Allen and Sons**

Leach Field: Yes No Unknown

If Yes, Location: **30' in front of tank**

Date of installation of leach field: 1986 Installed by: **Prin Allen**

Date of last servicing of leach field: unk Company servicing leach field: **Prin Allen**

Have you experienced any malfunctions? Yes No

If Yes, give the date and describe the problem and what steps were taken to remedy: _____

Do you have records of the design indicating the # of bedrooms the system was designed for? Yes No

If Yes, are they available? Yes No

Is System located in a Shoreland Zone? Yes No Unknown

Comments: **Inspection for both systems is scheduled**

Source of Section II information: **Sellers**

SECTION III - HEATING SYSTEM(S)/HEATING SOURCE(S)

| Heating System(s) or Source(s) | SYSTEM 1 | SYSTEM 2 | SYSTEM 3 | SYSTEM 4 |
|--|--------------------------|--|----------|----------|
| TYPE(S) of System | Propane Fireplace | Fireplace | | |
| Age of system(s) or source(s) | | 70's | | |
| TYPE(S) of Fuel | propane | wood | | |
| Annual consumption per system or source (i.e., gallons, kilowatt hours, cords) | 100 Gallons | 1/2 cord | | |
| Name of company that services system(s) or source(s) | Dead River | Hancock Chimney Sweep | | |
| Date of most recent service call | 2025 | 2025 | | |
| Malfunctions per system(s) or source(s) within past 2 years | trouble starting | none | | |
| Other pertinent information | See Comments | chimney was cleaned and inspected | | |

- Are there fuel supply lines? Yes No Unknown
 Are any buried? Yes No Unknown
 Are all sleeved? Yes No Unknown
 Chimney(s): Yes No
 If Yes, are they lined: Yes No Unknown
 Is more than one heat source vented through one flue? Yes No Unknown
 Had a chimney fire: Yes No Unknown
 Has chimney(s) been inspected? Yes No Unknown

If Yes, date: 2025

Date chimney(s) last cleaned: 2025, pointed 2024

- Direct and/or Power Vent(s): Yes No Unknown
 Has vent(s) been inspected? Yes No Unknown

If Yes, date: 2025

Comments: Dead River serviced propane stoves in main house and cabin in 2025; stoves required service call to restart after seasonal startup difficulty.

Source of Section III information: **seller**

SECTION IV - HAZARDOUS MATERIAL

The licensee is disclosing that the Seller is making representations contained herein.

- A. UNDERGROUND STORAGE TANKS** - Are there now, or have there ever been, any underground storage tanks on the property? Yes No Unknown
~~If Yes, are tanks in current use? Yes No Unknown~~
~~If no longer in use, how long have they been out of service?~~
~~If tanks are no longer in use, have tanks been abandoned according to DEP? Yes No Unknown~~
~~Are tanks registered with DEP? Yes No Unknown~~
~~Age of tank(s): _____ Size of tank(s): _____~~

~~Location: _____~~

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

~~Have you experienced any problems such as leakage: Yes No Unknown~~

Comments: none

Source of information: sellers

B. ASBESTOS - Is there now or has there been asbestos:

As insulation on the heating system pipes or duct work? Yes No Unknown

In the ceilings? 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

Comments: none

Source of information: sellers

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 Unknown~~

~~Are test results available? Yes No~~

Results/Comments: none

Source of information: sellers

D. RADON/WATER - Current or previously existing:

Has the property been tested? Yes No Unknown

If Yes: Date: August 18, 2025 By: Inspector, Michael Chaisson MRCHAI, Inc.

Results: 4,032 pCi/L limit is 4000 pCi/L

If applicable, what remedial steps were taken? Sellers decided not to put in radon water system. Minimally above limit.

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

Are test results available? Yes No

Results/Comments: none

Source of information: sellers

E. METHAMPHETAMINE - Current or previously existing:

Yes No Unknown

Comments: none

Source of information: seller

Buyer Initials _____

Seller Initials _____

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F. LEAD-BASED PAINT/PAINT HAZARDS - (Note: Lead-based paint is most commonly found in homes constructed prior to 1978)

Is there now or has there ever been lead-based paint and/or lead-based paint hazards on the property?
..... Yes No Unknown Unknown (but possible due to age)

If Yes, describe location and basis for determination: Older section of the house. Untested but possible due to age

Do you know of any records/reports pertaining to such lead-based paint/lead-based paint hazards: Yes No

If Yes, describe: _____

Are you aware of any cracking, peeling or flaking paint? Yes No

Comments: Window sills in older section of the house

Source of information: sellers

G. OTHER HAZARDOUS MATERIALS - Current or previously existing:

TOXIC MATERIAL: Yes No Unknown

LAND FILL: Yes No Unknown

RADIOACTIVE MATERIAL: Yes No Unknown

Other: n/a

Source of information: seller

Buyers are encouraged to seek information from professionals regarding any specific issue or concern.

SECTION V - ACCESS TO THE PROPERTY

Is the property subject to or have the benefit of any encroachments, easements, rights-of-way, leases, rights of first refusal, life estates, private ways, trails, homeowner associations (including condominiums and PUD's) or restrictive covenants? Yes No Unknown

If Yes, explain: see deed

Source of information: seller

Is access by means of a way owned and maintained by the State, a county, or a municipality over which the public has a right to pass? Yes No Unknown

If No, who is responsible for maintenance? Owners maintain driveway

Road Association Name (if known): none

Source of information: sellers

Buyer Initials _____

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Seller Initials _____

SECTION VI – FLOOD HAZARD

For the purposes of this section, Maine law defines "flood" as follows:

- (1) A general and temporary condition of partial or complete inundation of normally dry areas from:(a) The overflow of inland or tidal waters; or (b) The unusual and rapid accumulation or runoff of surface waters from any source; or
- (2) The collapse or subsidence of land along the shore of a lake or other body of water as a result of erosion or undermining caused by waves or currents of water exceeding anticipated cyclical levels or suddenly caused by an unusually high water level in a natural body of water, accompanied by a severe storm or by an unanticipated force of nature, such as a flash flood or an abnormal tidal surge, or by some similarly unusual and unforeseeable event that results in flooding as described in subparagraph (1), division (a).

For purposes of this section, Maine law defines “area of special flood hazard” as land in a floodplain having 1% or greater chance of flooding in any given year, as identified in the effective federal flood insurance study and corresponding flood insurance rate maps.

During the time the seller has owned the property:

Have any flood events affected the property? Yes No Unknown

If Yes, explain: _____

Have any flood events affected a structure on the property? Yes No Unknown

If Yes, explain: _____

Has any flood-related damage to a structure occurred on the property? Yes No Unknown

If Yes, explain: _____

Has there been any flood insurance claims filed for a structure on the property? Yes No Unknown

If Yes, indicate the dates of each claim: _____

Has there been any past disaster-related aid provided related to the property or a structure on the property from federal, state or local sources for purposes of flood recovery? Yes No Unknown

If Yes, indicate the date of each payment: _____

Is the property currently located wholly or partially within an area of special flood hazard mapped on the effective flood insurance rate map issued by the Federal Emergency Management Agency on or after March 4, 2002? Yes No Unknown

If yes, what is the federally designated flood zone for the property indicated on that flood insurance rate map?

Zone VE (EL 14) affects the shoreline/waterfront portion; Zone X (Area of Minimal Flood Hazard) applies to the upland/house area

Relevant Panel Number: **23009C1381D** Year: **2016** (Attach a copy)

Comments: The principal structures are located in Zone X (minimal flood hazard). The shoreline along Eggmoggin Reach falls within Zone VE (Base Flood Elevation 14 ft).

Source of Section VI information: **Sellers**

Buyer Initials _____

Seller Initials _____

SECTION VII - GENERAL INFORMATION

Are there any tax exemptions or reductions for this property for any reason including but not limited to: Tree Growth, Open Space and Farmland, Veteran's, Homestead Exemption, Blind, Working Waterfront?.....
..... Yes No Unknown

~~If Yes, explain: _____~~

Is a Forest Management and Harvest Plan available?..... Yes No Unknown

Is the property subject to any of the following relating to shoreland zoning ordinances: a) A notice of violation issued by a municipal official or state agency; b) A pending enforcement action; c) Litigation; d) A court judgment; or e) A settlement or consent agreement?..... Yes No Unknown

~~If Yes, explain: _____~~

Equipment leased or not owned (including but not limited to, propane tank, hot water heater, satellite dish, water filtration system, photovoltaics, wind turbines): Type: propane tanks

Year Principal Structure Built: late 1800's 1963 What year did Seller acquire property? 1960

Roof: Year Shingles/Other Installed: Early 2000s

Water, moisture or leakage: very minimal

Comments: Sellers maintain and replace shingles when needed

Foundation/Basement:

Is there a Sump Pump? Yes No Unknown

Water, moisture or leakage since you owned the property: Yes No Unknown

Prior water, moisture or leakage? Yes No Unknown

Comments: none

Mold: Has the property ever been tested for mold? Yes No Unknown

~~If Yes, are test results available? Yes No~~

Comments: none

Electrical: Fuses Circuit Breaker Other: _____ Unknown

Comments: none

Has all or a portion of the property been surveyed? Yes No Unknown

If Yes, is the survey available? Yes No Unknown

Manufactured Housing - Is the residence a:

Mobile Home Yes No Unknown

Modular Yes No Unknown

Known defects or hazardous materials caused by insect or animal infestation inside or on the residential structure
..... Yes No Unknown

Comments: Occasional ant and mouse activity observed; both treated as needed.

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KNOWN MATERIAL DEFECTS about Physical Condition and/or value of Property, including those that may have an adverse impact on health/safety: Per August 2025 inspection report, roof shingles on main house are at or near end of service life and replacement is anticipated within a few years.

Comments: none

Source of Section VII information: sellers

SECTION VIII - ADDITIONAL INFORMATION

ATTACHMENTS EXPLAINING CURRENT PROBLEMS, PAST REPAIRS OR ADDITIONAL INFORMATION IN ANY SECTION IN DISCLOSURE: Yes No

Seller shall be responsible and liable for any failure to provide known information regarding known material defects to the Buyer.

Neither Seller nor any Broker makes any representations as to the applicability of, or compliance with, any codes of any sort, whether state, municipal, federal or any other, including but not limited to fire, life safety, building, electrical or plumbing.

As Sellers, we have provided the above information and represent that all information is correct. To the best of our knowledge, all systems and equipment, unless otherwise noted on this form, are in operational condition.

SELLER DATE
Jeremiah McLane, Trustee of CBM CHILDREN'S REAL ESTATE

SELLER DATE
Elisabeth B. McLane, Trustee of CBM CHILDREN'S REAL ESTATE TRUST

SELLER DATE

SELLER DATE

I/We have read and received a copy of this disclosure, the arsenic in wood fact sheet, the arsenic in water brochure, and understand that I/we should seek information from qualified professionals if I/we have questions or concerns.

BUYER DATE

BUYER DATE

BUYER DATE

BUYER DATE

CBM Children's Real Estate Property: MAINTENANCE DETAILS

The property was purchased in 1960 as one piece with two other families; the Mathewsons (old friends) and the Bradleys (our father's sister's family). House-sites were chosen and our parents chose the old house on the "hill" looking westward down the reach to the Deer Island bridge. The house had previously been owned by Florence Kelley, a fact that was important to our parents. The house itself consisted of two parts: the part still existing today and an old extension that was removed by my parents. The addition of the newer house took place in 1962-3 to provide more room for our 6-kid family. On the shore, and still there today, was a small cabin that had been used by the Kelley family. Our father used this cabin as a study, and various kids brought his lunch to him every day he was working (which was most days that he and mom were not out on a boat). In 1986 the "small house" to the north of the main house was built. This building has been used as a rental and as a place for family overflow.

The property was split up sometime before the small house was built, aiming to provide a total of three building lots for each family. Lots were sold at various times, as well, leaving what we own today. Somewhere in that dividing up of lots, my family purchased two small lots along Back Road, on either side of our driveway.

Maintenance:

Our parents aimed to paint one side of the old house every year for their entire ownership. As far as I know that worked out since there was never much peeling paint on the house. In about 2000, we hired a young local to paint the entire old house, which he did. In roughly 2018-2020 we painted again. We had a professional come do some work that the insurance company required about 2 years ago (mostly dormers that we couldn't easily reach).

Windows: The old house windows were all reglazed and painted in about 2010. They were getting pretty funky though and we were advised to protect them with storms with screens and that was done in about 2015. The small house has had some issues with double pane windows fogging up. Two were replaced in 2025. The large west facing window closest to the entry was newly installed in 2022-23.

Roofs and Structural Repairs: The roofs have had regular replacement of broken shingles, but were more completely redone early in 2000. This work included the big house, the small house, and the study. Structural work was done on the study around this time as well, replacing rotten joists and posts.

Ants: Prin Allen and Sons, Inc. has put borax around the houses periodically and we have used ant treatments inside both houses when it seemed needed. For the big house: Usually every

spring we would see SOME signs of ants, usually related to the laundry room. None were noted this year. In the small house there have been occasional signs of ants in the vicinity of the central roof rafter. This house also seems clear of ants this spring.

Animals: The old house occasionally gets critters in it. They don't seem pervasive though. In the spring the kitchen area is almost always free of signs of mice nesting, although there is scattered mouse poop in various places. This winter of 2024-25 a squirrel was trapped in the old house living room (a door blew open and was closed without noticing the trapped squirrel). The squirrel did a bit of damage to the edges of some of the windows in that room. The small house generally seems to get more mice over the winter. Some springs there have been mice nests in drawers and behind the water tank in the closet. This did not occur this year. Previous to 2020 there had sometimes been porcupines nesting under the small house. That area was treated with lime and no porcupines have been there since. There have never been signs of animals living under the main house.

Grounds: Brown tail moth populations were rising a bit in 2022-23 so we hired Active Intelligence Drone Services to cut caterpillar webs out of 42 trees in the fields and along the shore. This was very effective and we have not seen them since. Old trees have been coming down between the big and small houses. In 2024 we planted a group of spruce trees between the houses and an oak down by the small house for future screening and shade.

PROPERTY LOCATED AT: 163 Back Road, Brooklin (Guest Cottage)

PROPERTY DISCLOSURE

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DO NOT LEAVE ANY QUESTIONS BLANK. STRIKE, WRITE N/A OR UNKNOWN IF NEEDED.

SECTION I - WATER SUPPLY

TYPE OF SYSTEM: Public Private Seasonal _____ Unknown
 Drilled Dug Other _____

MALFUNCTIONS: Are you aware of or have you experienced any malfunctions with the (public/private/other) water system?
Pump (if any): N/A Yes No Unknown
Quantity: Yes No Unknown
Quality: Yes No Unknown

If Yes to any question, please explain in the comment section below or with attachment.

WATER TEST: Have you had the water tested? Yes No
If Yes, Date of most recent test: _____ Are test results available? .. Yes No
To your knowledge, have any test results ever been reported as unsatisfactory or satisfactory with notation? Yes No
If Yes, are test results available? Yes No

What steps were taken to remedy the problem? Aug. 2025 test showed total coliform at 2.0 MPN/100mL Well has been shock-chlorinated for coliform in the past. Full test results available online. See also section IV D.

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: Basement of the main house
Installed by: Jones, Ellsworth
Date of Installation: 1960's

USE: Number of persons currently using system: Occasional guests in the summer
Does system supply water for more than one household? Yes No Unknown

Comments: Well is for the main house and the cabin, see disclosures for main house for more info

Source of Section I information: Sellers
Buyer Initials _____ Page 1 of 8 Seller Initials _____

PROPERTY LOCATED AT: 163 Back Road, Brooklin (Guest Cottage)

SECTION II - WASTE WATER DISPOSAL

TYPE OF SYSTEM: Public Private Quasi-Public _____ Unknown

~~IF PUBLIC OR QUASI-PUBLIC (Strike Section if Not Applicable):~~

~~Have you had the sewer line inspected?..... Yes No~~

~~If Yes, what results: _____~~

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

~~What steps were taken to remedy the problem? _____~~

IF PRIVATE (Strike Section if Not Applicable):

Tank: Septic Tank Holding Tank Cesspool Other: _____
 Overboard Discharge (38 MRS Section 413(3) and (3-A))

Tank Size: 500 Gallon 1000 Gallon Unknown Other: _____

Tank Type: Concrete Metal Unknown Other: _____

Location: Left of the cottage if facing the water OR Unknown

Date installed: 1985 Date last pumped: unk Name of pumping company: Unk

Have you experienced any malfunctions? Yes No

If Yes, give the date and describe the problem: _____

Date of last servicing of tank: unk Name of company servicing tank: unk

Leach Field: Yes No Unknown

If Yes, Location: Right of the cottage if facing the water

Date of installation of leach field: 1985 Installed by: Prin Allen

Date of last servicing of leach field: unk Company servicing leach field: unk

Have you experienced any malfunctions? Yes No

If Yes, give the date and describe the problem and what steps were taken to remedy: _____

Do you have records of the design indicating the # of bedrooms the system was designed for? Yes No

If Yes, are they available? Yes No

Is System located in a Shoreland Zone? Yes No Unknown

Comments: Inspection for both systems is scheduled

Source of Section II information: Sellers

Buyer Initials _____

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Seller Initials _____

PROPERTY LOCATED AT: _____

SECTION III - HEATING SYSTEM(S)/HEATING SOURCE(S)

| Heating System(s) or Source(s) | SYSTEM 1 | SYSTEM 2 | SYSTEM 3 | SYSTEM 4 |
|--|-----------------------------|--------------------|----------|----------|
| TYPE(S) of System | Propane wood stove | Electric heater in | | |
| Age of system(s) or source(s) | 10 Years | bathroom | | |
| TYPE(S) of Fuel | propane | | | |
| Annual consumption per system or source (i.e., gallons, kilowatt hours, cords) | Shared bill with main house | | | |
| Name of company that services system(s) or source(s) | Dead River | unk | | |
| Date of most recent service call | 2025 | | | |
| Malfunctions per system(s) or source(s) within past 2 years | See Comments | | | |
| Other pertinent information | | | | |

- Are there fuel supply lines? Yes No Unknown
- Are any buried? Yes No Unknown
- Are all sleeved? Yes No Unknown
- Chimney(s): Yes No
- If Yes, are they lined: Yes No Unknown
- Is more than one heat source vented through one flue? Yes No Unknown
- Had a chimney fire: Yes No Unknown
- Has chimney(s) been inspected? Yes No Unknown

 If Yes, date: _____

 Date chimney(s) last cleaned: unk

- Direct and/or Power Vent(s): Yes No Unknown
- Has vent(s) been inspected? Yes No Unknown

 If Yes, date: _____

Comments: Dead River serviced propane stoves in main house and cottage in 2025; stoves required service call to restart after seasonal startup difficulty.
Source of Section III information: Sellers

SECTION IV - HAZARDOUS MATERIAL

The licensee is disclosing that the Seller is making representations contained herein.

- A. UNDERGROUND STORAGE TANKS** - Are there now, or have there ever been, any underground storage tanks on the property? Yes No Unknown
- ~~If Yes, are tanks in current use? Yes No Unknown~~
- ~~If no longer in use, how long have they been out of service? _____~~
- ~~If tanks are no longer in use, have tanks been abandoned according to DEP? Yes No Unknown~~
- ~~Are tanks registered with DEP? Yes No Unknown~~
- Age of tank(s): _____ Size of tank(s): _____

Location: _____

Buyer Initials _____

Seller Initials _____

PROPERTY LOCATED AT: _____

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

~~Have you experienced any problems such as leakage: Yes No Unknown~~

~~Comments: _____~~

Source of information: Sellers

B. ASBESTOS - Is there now or has there been asbestos:

As insulation on the heating system pipes or duct work? Yes No Unknown

In the ceilings? 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

Comments: none

Source of information: Sellers

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 Unknown~~

~~Are test results available? Yes No~~

~~Results/Comments: _____~~

Source of information: Sellers

D. RADON/WATER - Current or previously existing:

Has the property been tested? Yes No Unknown

If Yes: Date: 8/18/2025 By: Michael Chaisson MRCHAI, Inc.

Results: 4,032 pCi/L — exceeds Maine MEG of 4,000 pCi/L

If applicable, what remedial steps were taken? Sellers decided not to put in radon water system. Minimally above limit.

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

Are test results available? Yes No

Results/Comments: none

Source of information: Sellers

E. METHAMPHETAMINE - Current or previously existing: Yes No Unknown

Comments: none

Source of information: Sellers

Buyer Initials _____

Seller Initials _____

PROPERTY LOCATED AT: _____

F. LEAD-BASED PAINT/PAINT HAZARDS - (Note: Lead-based paint is most commonly found in homes constructed prior to 1978)

Is there now or has there ever been lead-based paint and/or lead-based paint hazards on the property?
..... Yes No Unknown Unknown (but possible due to age)

If Yes, describe location and basis for determination: _____

Do you know of any records/reports pertaining to such lead-based paint/lead-based paint hazards: Yes No

If Yes, describe: _____

Are you aware of any cracking, peeling or flaking paint? Yes No

Comments: none

Source of information: sellers

G. OTHER HAZARDOUS MATERIALS - Current or previously existing:

TOXIC MATERIAL: Yes No Unknown

LAND FILL: Yes No Unknown

RADIOACTIVE MATERIAL: Yes No Unknown

Other: none

Source of information: Sellers

Buyers are encouraged to seek information from professionals regarding any specific issue or concern.

SECTION V - ACCESS TO THE PROPERTY

Is the property subject to or have the benefit of any encroachments, easements, rights-of-way, leases, rights of first refusal, life estates, private ways, trails, homeowner associations (including condominiums and PUD's) or restrictive covenants? Yes No Unknown

If Yes, explain: See Deed

Source of information: Sellers

Is access by means of a way owned and maintained by the State, a county, or a municipality over which the public has a right to pass? Yes No Unknown

If No, who is responsible for maintenance? owners

Road Association Name (if known): none

Source of information: sellers

Buyer Initials _____

Seller Initials _____

PROPERTY LOCATED AT: _____

SECTION VI – FLOOD HAZARD

For the purposes of this section, Maine law defines "flood" as follows:

- (1) A general and temporary condition of partial or complete inundation of normally dry areas from:(a) The overflow of inland or tidal waters; or (b) The unusual and rapid accumulation or runoff of surface waters from any source; or
- (2) The collapse or subsidence of land along the shore of a lake or other body of water as a result of erosion or undermining caused by waves or currents of water exceeding anticipated cyclical levels or suddenly caused by an unusually high water level in a natural body of water, accompanied by a severe storm or by an unanticipated force of nature, such as a flash flood or an abnormal tidal surge, or by some similarly unusual and unforeseeable event that results in flooding as described in subparagraph (1), division (a).

For purposes of this section, Maine law defines “area of special flood hazard” as land in a floodplain having 1% or greater chance of flooding in any given year, as identified in the effective federal flood insurance study and corresponding flood insurance rate maps.

During the time the seller has owned the property:

Have any flood events affected the property? Yes No Unknown

If Yes, explain: _____

Have any flood events affected a structure on the property? Yes No Unknown

If Yes, explain: _____

Has any flood-related damage to a structure occurred on the property? Yes No Unknown

If Yes, explain: _____

Has there been any flood insurance claims filed for a structure on the property? Yes No Unknown

If Yes, indicate the dates of each claim: _____

Has there been any past disaster-related aid provided related to the property or a structure on the property from federal, state or local sources for purposes of flood recovery? Yes No Unknown

If Yes, indicate the date of each payment: _____

Is the property currently located wholly or partially within an area of special flood hazard mapped on the effective flood insurance rate map issued by the Federal Emergency Management Agency on or after March 4, 2002? Yes No Unknown

If yes, what is the federally designated flood zone for the property indicated on that flood insurance rate map?
See Disclosures for main house

Relevant Panel Number: _____ Year: _____ (Attach a copy)

Comments: See disclosures for main house

Source of Section VI information: Sellers

Buyer Initials _____ Page 6 of 8 Seller Initials _____

PROPERTY LOCATED AT: _____

SECTION VII - GENERAL INFORMATION

Are there any tax exemptions or reductions for this property for any reason including but not limited to: Tree Growth, Open Space and Farmland, Veteran's, Homestead Exemption, Blind, Working Waterfront?.....
..... Yes No Unknown

If Yes, explain: _____

Is a Forest Management and Harvest Plan available?..... Yes No Unknown

Is the property subject to any of the following relating to shoreland zoning ordinances: a) A notice of violation issued by a municipal official or state agency; b) A pending enforcement action; c) Litigation; d) A court judgment; or e) A settlement or consent agreement?..... Yes No Unknown

If Yes, explain: _____

Equipment leased or not owned (including but not limited to, propane tank, hot water heater, satellite dish, water filtration system, photovoltaics, wind turbines): Type: Propane tank

Year Principal Structure Built: 1985 What year did Seller acquire property? 1960's

Roof: Year Shingles/Other Installed: _____

Water, moisture or leakage: _____

Comments: _____

Foundation/Basement:

Is there a Sump Pump? Yes No Unknown

Water, moisture or leakage since you owned the property: Yes No Unknown

Prior water, moisture or leakage? Yes No Unknown

Comments: None

Mold: Has the property ever been tested for mold? Yes No Unknown

If Yes, are test results available? Yes No

Comments: none

Electrical: Fuses Circuit Breaker Other: _____ Unknown

Comments: none

Has all or a portion of the property been surveyed? Yes No Unknown

If Yes, is the survey available? Yes No Unknown

Manufactured Housing - Is the residence a:

Mobile Home Yes No Unknown

Modular Yes No Unknown

Known defects or hazardous materials caused by insect or animal infestation inside or on the residential structure
..... Yes No Unknown

Comments: Occasional ant and mouse activity observed; both treated as needed.

Buyer Initials _____

Seller Initials _____

PROPERTY LOCATED AT: _____

KNOWN MATERIAL DEFECTS about Physical Condition and/or value of Property, including those that may have an adverse impact on health/safety: none

Comments: None

Source of Section VII information: Sellers

SECTION VIII - ADDITIONAL INFORMATION

ATTACHMENTS EXPLAINING CURRENT PROBLEMS, PAST REPAIRS OR ADDITIONAL INFORMATION IN ANY SECTION IN DISCLOSURE: Yes No

Seller shall be responsible and liable for any failure to provide known information regarding known material defects to the Buyer.

Neither Seller nor any Broker makes any representations as to the applicability of, or compliance with, any codes of any sort, whether state, municipal, federal or any other, including but not limited to fire, life safety, building, electrical or plumbing.

As Sellers, we have provided the above information and represent that all information is correct. To the best of our knowledge, all systems and equipment, unless otherwise noted on this form, are in operational condition.

SELLER DATE SELLER DATE

SELLER DATE SELLER DATE

I/We have read and received a copy of this disclosure, the arsenic in wood fact sheet, the arsenic in water brochure, and understand that I/we should seek information from qualified professionals if I/we have questions or concerns.

BUYER DATE BUYER DATE

BUYER DATE BUYER DATE





A & L LABORATORY

A DIVISION OF GRANITE STATE ANALYTICAL SERVICES, LLC.

155 Center Street, Building C, Auburn, Maine 04210
Phone (207) 784-5354 website www.allaboratory.com

Laboratory Report

MRCHAI, Inc.
60 Thundermist Rd
Bar Harbor, ME 04609

Date Printed: 08/21/2025
Work Order #: 2508-03805
Client Job #:
Date Received: 08/19/2025
Sample collected in: Maine

Attached please find results for the analysis of the samples received on the date referenced above.

Unless otherwise noted in the attached report, the analyses performed met the requirements of the analyzing laboratory's Quality Assurance Plan, Standard Operating Procedures and State Accreditation. This certificate shall not be reproduced, except in full, without the written approval of the analyzing laboratory. The results presented in this report relate to the samples listed on the following pages in the condition in which they were received. Accreditation for each analyte is identified by the * symbol following the analyte name. Location of our analyzing laboratory is identified by the code in the Analyst Column.

A & L Laboratory:
Identified by ME in Analyst Column
155 Center Street, Auburn, Maine 04210
www.allaboratory.com

Granite State Analytical Services LLC:
Identified by NH in Analyst Column
22 Manchester Road, Derry, NH 03038
www.granitestateanalytical.com

Nashoba Analytical:
Identified by MA in the Analyst Column
31A Willow Road, Ayer, MA 01432
www.nashobaanalytical.com

ANALYSIS RELATED NOTES:

- RL: "Reporting limit" means the lowest level of an analyte that can be accurately recovered from the matrix of interest.
- DF: "Dilution factor" means the ratio of the volume of the sample to the volume of the final (dilute) solution.
- MDL: "Minimum Detection Limit" means the minimum result which can be reliably discriminated from a blank with a predetermined confidence level.
- ND: Non-detect. Results reported as Non-Detect (ND) have been evaluated down to the concentration listed in the MDL column.
- A & L Laboratory / Granite State Analytical Services LLC / Nashoba Analytical. accreditation lists can be found on our websites listed above.
- Subcontracted samples will be identified by the Accreditation number of the subcontract laboratory in the analyst field for each analyte and the appropriate laboratory will be listed here. **None**
- Data Qualifiers (DQ) Flags provide additional information in regards to the receipt, analysis or quality control of a sample. These are indicated under the DQ Flags Column on your report and listed here if necessary: **Data Qualifier (DQ) Flags: H = Hold time non-compliant., T = Thermal preservation non-compliant.**

SAMPLE STATE SPECIFIC NOTES:

- The State of Maine requires the reporting of radon test results in accordance with the Act (22 MSRA sec. 771 et seq.). The following for all tests completed by A & L will be reported to the state on a monthly basis: address of the structure tested, radon result, and whether or not there is a mitigation system in place. A + symbol indicates State of Maine Radon Registration.
- The Maximum Exposure Guideline(MEG) for water radon in Maine is 4,000pCi/L

Additional Narrative or Comments: **None**

We appreciate the opportunity to provide you with laboratory services. If you have any questions regarding the enclosed report, please contact the laboratory and we will be happy to assist you.

Rebecca L. Labranche
Laboratory Director

A & L Laboratory: Accreditations: Maine ME00021, New Hampshire 2501, Maine Radon Registration ID # SPC20
Granite State Analytical Services, LLC: Accreditations: New Hampshire 1015; Maine NH00003;
Massachusetts M-NH0003; Rhode Island 101513; Vermont VT-101507
Nashoba Analytical: Accreditations: Massachusetts M-MA1118



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 Phone (207) 784-5354 website www.allaboratory.com

CERTIFICATE OF ANALYSIS FOR DRINKING WATER

DATE PRINTED: 08/21/2025
CLIENT NAME: MRCHAI, Inc.
CLIENT ADDRESS: 60 Thundermist Rd
 Bar Harbor, ME 04609
SAMPLE ID #: 2508-03805-001
SAMPLED BY: Michael Chaisson
SAMPLE ADDRESS: Kehler
 163 Back Road
 Brooklin Me 04616
MORE LOC INFO: Drilled Well Kitchen

| Legend | |
|-----------------------|---|
| Passes | ✓ |
| Fails EPA Primary | ⊗ |
| Fails EPA Secondary | ⚠ |
| Fails State Guideline | ✗ |
| Attention | ⚠ |

DATE AND TIME COLLECTED: 08/18/2025 11:40AM
DATE AND TIME RECEIVED: 08/19/2025 07:50AM
ANALYSIS PACKAGE: A & L-IC-Comp+RN-MPN-ME
RECEIPT TEMPERATURE: 20° CELSIUS
CLIENT JOB #:

| Test Description | Result | Test Units | Pass /Fail | DQ Flag | RL | Limit | Method | Analyst | Date - Time Analyzed |
|------------------|--------|------------|------------|---------|-------|--------------|-----------------|---------|----------------------|
| Arsenic* | <0.001 | mg/L | ✓ | | 0.001 | 0.010 mg/L | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Calcium | 6.63 | mg/L | | | 0.1 | No Limit | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Copper* | 0.0936 | mg/L | ✓ | | 0.001 | 1.3 mg/L | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Hardness (calc.) | 26.9 | mg CaCO3/L | | | 0.25 | No Limit | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Iron | <0.1 | mg/L | ✓ | | 0.1 | 0.3 mg/L | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Lead* | <0.001 | mg/L | ✓ | | 0.001 | 0.015 mg/L | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Magnesium | 2.51 | mg/L | | | 0.1 | No Limit | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Manganese* | <0.001 | mg/L | ✓ | | 0.001 | 0.05 mg/L | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Sodium | 8.42 | mg/L | | | 0.1 | No limit | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Uranium* | <1 | ug/L | ✓ | | 1 | 30 ug/L | EPA 200.8 | NM-NH | 08/20/2025 01:04PM |
| Uranium | <0.67 | pCi/L | ✓ | | 0.67 | 20 pCi/L | EPA 200.8 Calc. | NM-NH | 08/20/2025 01:04PM |
| Chloride* | 8 | mg/L | ✓ | | 2 | 250 mg/L | EPA 300.0 | JR-ME | 08/19/2025 05:42PM |
| Fluoride* | <0.2 | mg/L | ✓ | | 0.2 | 4.0 mg/L | EPA 300.0 | JR-ME | 08/19/2025 05:42PM |
| Nitrate as N* | 0.80 | mg/L | ✓ | T | 0.2 | 10 mg/L | EPA 300.0 | JR-ME | 08/19/2025 05:42PM |
| Nitrite as N* | <0.2 | mg/L | ✓ | T | 0.2 | 1 mg/L | EPA 300.0 | JR-ME | 08/19/2025 05:42PM |
| pH* | 6.64 | SU | ✓ | H | -- | 6.5 - 8.5 SU | SM 4500H+B | JR-ME | 08/19/2025 01:51PM |
| Radon+ | 4,032 | pCi/L | ✗ | | 100 | 4000 pCi/L | SM 7500-RN B | TT-ME | 08/19/2025 05:58PM |
| Coliform MPN* | 2.0 | MPN/100mL | ⚠ | | 1 | No Limit | SM 9223 B | JR-ME | 08/20/2025 10:40AM |
| E. coli MPN* | <1 | MPN/100mL | ✓ | | 1 | 0 | SM 9223 B | JR-ME | 08/20/2025 10:40AM |

Total Coliform / E.coli Bacteria Preparation (Colilert® Quanti-Tray®) 20th ED SM 9223 B JR-ME 08/19/2025 09:45AM

Rebecca L. Labranche
 Laboratory Director



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CHAIN OF CUSTODY

2508-03805-001



Sampled: 08/18/25 11:40
 Kehler 163 Back Road
 Brooklin Me 04616
 PKG:A & L-IC-Comp+RN-
 MPN-ME

Customer Name: Kehler _____ Sample Date: 08/18/25 Time: 11:40 AM

Sample Address: 163 Back Road _____ City: Brooklin _____ State: ME Zip: 04616

Sample Taken By: Michael Chaisson _____

Type of Well (circle) DUG DRILLED SPRING LAKE

PLEASE SELECT PAYMENT OPTION

Check enclosed made payable to A & L Lab

PLEASE INVOICE MRCHAI, Inc Thank you

****Results will not be released until payment is received. ****

Sample Collected From:

- Kitchen
 Bath
 Other _____
- Treatment System Y N
 Radon Treatment Y N

Report To Be Sent To: Please Note: If results are emailed hard copies will not be sent unless requested.

Name: Michael Chaisson _____

Reason for Testing:

Address: _____

____ Personal Information

City: _____ State: _____ Zip: _____

Real Estate Transaction

E-Mail: mrchai@roadrunner.com _____

____ State License Renewal

Phone: _____ Signature: Michael Chaisson

____ State Drinking Water Program
 Please enter the PWSID below if this is to be reported to the State of Maine # _____

- YES PRIVATE WELL TESTING:** I authorize A & L Laboratory to analyze and report results if samples do not meet the thermal preservation requirement (on ice & ≤ 6 °C) for Nitrate and Nitrite upon arrival at the lab. Data for these analytes will be qualified on the final report. See sampling instructions for more details.
- NO** Nitrite upon arrival at the lab. Data for these analytes will be qualified on the final report. See sampling instructions for more details.

Please check desired analysis-Pricing on reverse side

- | | |
|---|--|
| <u>Packages</u> | <u>Individual Tests</u> |
| <input type="checkbox"/> Food License/Safety | <input type="checkbox"/> *Bacteria-P/A |
| <input type="checkbox"/> Basic | <input checked="" type="checkbox"/> Bacteria Count |
| <input type="checkbox"/> Basic + Arsenic | <input type="checkbox"/> Uranium |
| <input type="checkbox"/> FHA☆/VA | <input type="checkbox"/> Total Arsenic |
| <input checked="" type="checkbox"/> Comprehensive | <input checked="" type="checkbox"/> Water Radon |

*All Bacteria Results Will Be Reported as Present/Absent Unless Requested Below.

TO RECEIVE NUMERIC BACTERIA RESULTS:
 Check here and add \$5.00 to the price of your selected test.

Other: _____

☆ Analysis marked with a star (☆) need a special test kit for processing.
 See Reverse Side for Testing Parameters in each package and pricing

LAB USE ONLY

DATE/TIME RECEIVED: 8/19/25 7:50

TEMPERATURE [°C]: ICE _____ AMBIENT 20°

OUT OF HOLD TIME: YES NO

PROPER CONTAINER: YES NO

DELIVERY: WALK IN MAIL UPS/FEDEX COURIER DROP BOX

PAID _____ BILL NO CHG _____

CK# _____ CC CASH A&L INITIALS HP

Lab Use Only / Note