

PROPERTY LOCATED AT: 135 Friends Way, Blue Hill, ME 04614**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: N/A Are test results available? .. ☐ Yes ☐ No

To your knowledge, have any test results ever:

a) Been reported as unsatisfactory or satisfactory with notation?..... ☐ Yes ☒ No

b) Detected perfluoroalkyl and polyfluoroalkyl (PFA) substances? ☐ Yes ☒ No

If Yes to (a) and/or (b) above, are test results available? ..... ☐ Yes ☒ No

What steps were taken to remedy the problem? \_\_\_\_\_

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: North side of Cottage

Installed by: Jones & Son, Inc.

Date of Installation: 2008

USE: Number of persons currently using system: 1-5

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

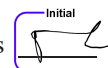
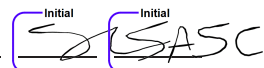
Comments: Seasonal Rental, Well has a filter for Iron.

Source of Section I information: Seller

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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: \_\_\_\_\_

Location: **Tank is located between the house and the garden shed.** OR ☐ Unknown

Date installed: **2009** Date last pumped: **N/A** Name of pumping company: \_\_\_\_\_

Have you experienced any malfunctions? ..... ☐ Yes ☒ No

If Yes, give the date and describe the problem: \_\_\_\_\_

Date of last servicing of tank: \_\_\_\_\_ Name of company servicing tank: \_\_\_\_\_

Leach Field: ..... ☒ Yes ☐ No ☐ Unknown

If Yes, Location: **Left side of the driveway after the power junction box on the south side.**

Date of installation of leach field: **2009** Installed by: **Paul Carter**

Date of last servicing of leach field: **N/A** Company servicing leach field: \_\_\_\_\_

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

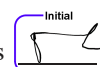
Comments: **Septic system has a lift station from tank to leach field.**

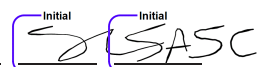
Source of Section II information: **See HHE-200 Application.**

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| Heating System(s) or Source(s)                                                 | SYSTEM 1         | SYSTEM 2 | SYSTEM 3 | SYSTEM 4 |
|--------------------------------------------------------------------------------|------------------|----------|----------|----------|
| TYPE(S) of System                                                              | <b>Heat pump</b> |          |          |          |
| Age of system(s) or source(s)                                                  | <b>2022</b>      |          |          |          |
| TYPE(S) of Fuel                                                                | <b>Electric</b>  |          |          |          |
| Annual consumption per system or source (i.e., gallons, kilowatt hours, cords) |                  |          |          |          |
| Name of company that services system(s) or source(s)                           |                  |          |          |          |
| Date of most recent service call                                               |                  |          |          |          |
| Malfunctions per system(s) or source(s) within past 2 years                    | <b>None</b>      |          |          |          |
| Other pertinent information                                                    |                  |          |          |          |

Are there fuel supply lines? ..... ☐ Yes ☒ No ☐ UnknownAre any buried? ..... ☐ Yes ☒ No ☐ UnknownAre all sleeved? ..... ☐ Yes ☒ No ☐ UnknownChimney(s): ..... ☒ Yes ☐ NoIf Yes, are they lined: ..... ☒ Yes ☐ No ☐ UnknownIs more than one heat source vented through one flue? ..... ☐ Yes ☒ No ☐ UnknownHad a chimney fire: ..... ☐ Yes ☒ No ☐ UnknownHas chimney(s) been inspected? ..... ☐ Yes ☒ No ☐ Unknown

If Yes, date: \_\_\_\_\_

Date chimney(s) last cleaned: \_\_\_\_\_

Direct and/or Power Vent(s): ..... ☐ Yes ☒ No ☐ UnknownHas vent(s) been inspected? ..... ☐ Yes ☒ No ☐ Unknown

If Yes, date: \_\_\_\_\_

Comments: **Chimney section from wood stove has been removed. Could be reconnected. No Woodstove currently.**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 ☐ UnknownIf 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 ☐ UnknownAre tanks registered with DEP? ..... ☐ Yes ☐ No ☐ Unknown

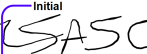
Age of tank(s): \_\_\_\_\_ Size of tank(s): \_\_\_\_\_

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: There are no underground tanks on the property.

Source of information: Seller

**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: \_\_\_\_\_

Source of information: \_\_\_\_\_

**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: No radon air test has been conducted.

Source of information: Seller

**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 ☐ Unknown

Are test results available? ..... ☐ Yes ☐ No

Results/Comments: No Radon Water has been conducted.

Source of information: Seller

**E. METHAMPHETAMINE** - Current or previously existing:

☐ Yes ☒ No ☐ Unknown

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

Source of information: \_\_\_\_\_

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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: \_\_\_\_\_

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: **The floor may have been once but there is no other paint in the cottage.**

Source of information: **Seller**

**G. OTHER HAZARDOUS MATERIALS** - Current or previously existing:

TOXIC MATERIAL: ..... ☐ Yes ☒ No ☐ Unknown

LAND FILL: ..... ☐ Yes ☒ No ☐ Unknown

RADIOACTIVE MATERIAL: ..... ☐ Yes ☒ No ☐ Unknown

Other: \_\_\_\_\_

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: **25' ROW for access from Falls Bridge Road**

Source of information: **Deed**

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? **Road Association**

Road Association Name (if known): **Friends Way Road Association**

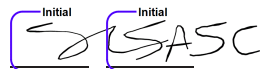
Source of information: **Seller**

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## 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?

AE EL 9

Relevant Panel Number: 23009C1152D Year: 2016 (Attach a copy)

Comments: Cottage is well above the flood zone.

Source of Section VI information: FEMA Flood Maps

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PROPERTY LOCATED AT: 135 Friends Way, Blue Hill, ME 04614**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 ☐ UnknownIs 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, solar panels, wind turbines): Type: PropaneFrom Whom: Dead River CoYear Principal Structure Built: 1950's What year did Seller acquire property? 2006Roof: Year Shingles/Other Installed: 2010Water, moisture or leakage: None

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

Foundation/Basement:

Is there a Sump Pump? ..... ☐ Yes ☒ No ☐ UnknownWater, moisture or leakage since you owned the property: ..... ☐ Yes ☒ No ☐ UnknownPrior water, moisture or leakage? ..... ☐ Yes ☒ No ☐ UnknownComments: Cottage is on posts.Mold: Has the property ever been tested for mold? ..... ☐ Yes ☒ No ☐ UnknownIf Yes, are test results available? ..... ☐ Yes ☒ No

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

Electrical: ☐ Fuses ☒ Circuit Breaker ☐ Other: \_\_\_\_\_ ☐ UnknownComments: 100 Amp Service.Has all or a portion of the property been surveyed? ..... ☒ Yes ☐ No ☐ UnknownIf Yes, is the survey available? ..... ☒ Yes ☐ No ☐ Unknown

Manufactured Housing - Is the residence a:

Mobile Home ..... ☐ Yes ☒ No ☐ UnknownModular ..... ☐ Yes ☒ No ☐ Unknown

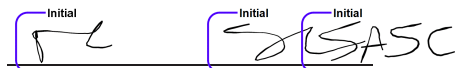
Known defects or hazardous materials caused by insect or animal infestation inside or on the residential structure

..... ☒ Yes ☐ No ☐ UnknownComments: Mice seasonally.

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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: \_\_\_\_\_

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

Source of Section VII information: Seller

**SECTION VIII - ADDITIONAL INFORMATION**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

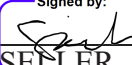
ATTACHMENTS EXPLAINING CURRENT PROBLEMS, PAST REPAIRS OR ADDITIONAL INFORMATION IN ANY SECTION IN DISCLOSURE: ..... ☐ Yes ☒ No

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.

Signed by: \_\_\_\_\_ 9/20/2026  
  
SELLER \_\_\_\_\_ DATE  
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**Crowe Family Real Estate Trust By:**  
Signed by: \_\_\_\_\_ 9/20/2026  
  
SELLER \_\_\_\_\_ DATE  
8D89780B32E54E3...

**Simone Crowe, Trustee**

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

\_\_\_\_\_  
SELLER \_\_\_\_\_ DATE  
Thomas G. Crowe, Trustee  
Signed by: \_\_\_\_\_ 9/20/2026  
  
SELLER \_\_\_\_\_ DATE  
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**Sean Crowe, Trustee**

\_\_\_\_\_  
BUYER \_\_\_\_\_ DATE

\_\_\_\_\_  
BUYER \_\_\_\_\_ DATE