

PROPERTY LOCATED AT: 800 Summer Harbor Road, Winter Harbor, ME 04693

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: Feb 25, 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? _____

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: Right side of driveway near the house
Installed by: PL Jones & Sons
Date of Installation: June 9, 2007

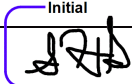
USE: Number of persons currently using system: Rental- Varies
Does system supply water for more than one household? Yes No Unknown

Comments: Water test was done by seller with Home Depot test. Recommend Buyers conduct their own testing.

Source of Section I information: Seller

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: _____

Tank Size: 500 Gallon 1000 Gallon Unknown Other: _____

Tank Type: Concrete Metal Unknown Other: _____

Location: Right (north) side of house OR Unknown

Date installed: 2008 Date last pumped: Unknown Name of pumping company: _____

Have you experienced any malfunctions? Yes No

If Yes, give the date and describe the problem: N/A

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

Leach Field: Yes No Unknown

If Yes, Location: Right (north) side of house

Date of installation of leach field: 2008 Installed by: AR Whitten

Date of last servicing of leach field: _____ 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: N/A

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

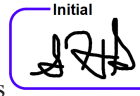
If Yes, are they available? Yes No

Is System located in a Shoreland Zone? Yes No Unknown

Comments: Seller had septic system inspected April 2025 - Report available upon request, Seller is having the tank pumped this summer

Source of Section II information: Seller

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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	Electric Baseboard	Fireplace		
Age of system(s) or source(s)	2007	2025		
TYPE(S) of Fuel	Electric	LP Gas		
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)	Unknown	Dependent on use		
Name of company that services system(s) or source(s)	N/A	Dead River		
Date of most recent service call		2025		
Malfunctions per system(s) or source(s) within past 2 years	None	New Insert installed 2/2025		
Other pertinent information	Only run in summer months	Isolated Gas		

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: Unknown
 Direct/Power Vent(s): Yes No Unknown
 Has vent(s) been inspected? Yes No Unknown
 If Yes, date: _____

Comments: _____

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? N/A
 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): N/A Size of tank(s): N/A
 Location: N/A

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What materials are, or were, stored in the tank(s)? N/A

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

Comments: _____

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: Seller

C. RADON/AIR - Current or previously existing:

Has the property been tested? Yes No Unknown

If Yes: Date: 2/2025 By: Seller

Results: Test #1: 7.1 pCi/L Test #2: 5.5 pCi/L

If applicable, what remedial steps were taken? Remediation system installed May 2026 by Air & Water Quality

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

Are test results available? Yes No

Results/Comments: _____

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: _____

Source of information: Seller

E. METHAMPHETAMINE - Current or previously existing:

Yes No Unknown

Comments: _____

Source of information: Seller

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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: Unlikely due to age of home

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: Seller had exterior painted in 2025, first floor of interior painted 2026

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: Deed Restrictions- See Deed

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? N/A

Road Association Name (if known): N/A

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? _____

Relevant Panel Number: 23009C1036D Year: 2016 (Attach a copy)

Comments: Property is not located in an area of special flood hazard

Source of Section VI information: Seller - FEMA Maps

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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

Are there any actual or alleged violations of a shoreland zoning ordinance including those that are imposed by the state or municipality? 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: _____

Year Principal Structure Built: 2007 What year did Seller acquire property? 1984

Roof: Year Shingles/Other Installed: 2007

Water, moisture or leakage: Some leakage around the chimney, contract repaired spring 2026

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: _____

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

If Yes, are test results available? Yes No

Comments: _____

Electrical: Fuses Circuit Breaker Other: _____ Unknown

Comments: _____

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: _____

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

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SECTION VIII - ADDITIONAL INFORMATION

Home exterior painted in May 2025. Small front section to be painted summer 2026.

New propane fireplace insert installed April 2025.

Home first floor interior painted 2026.

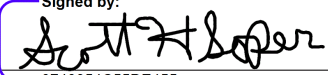
1st and 2nd floor bedroom bathrooms have been retiled in 2025 and 2026.

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:  6/4/2026
SELLER _____ DATE _____ SELLER _____ DATE _____
Edwin H. Soper Living 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 _____

