PROPERTY LOCATED AT: **12 Fairway Vista Unit 2, Trenton, ME 04605**

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 Well

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: 10/20/23 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? Kinetico $250 + Ultraviolet light system

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: 12 Fairway Vista
Installed by: Air + Water Quality Inc
Date of Installation: 10/2023

USE: Number of persons currently using system: 4
Does system supply water for more than one household? ☑ Yes ☐ No ☐ Unknown

Comments: _____

Source of Section I information: _____

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

Alliance Home Inspectors
14 Carriage Ln
Hampden, ME 04444

Date Printed:	**10/14/2021**
Work Order #:	**2110-01835**
Client Job #:	
Date Received:	**10/12/2021**
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

ANALYSIS RELATED NOTES:

- RL: "Reporting limit" means the lowest level of an analyte that can be accurately recovered from the matrix of interest.
- A & L Laboratory / Granite State Analytical Services LLC. 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.

SAMPLE STATE SPECIFIC NOTES:

- The thermal preservation requirement of 4°C for nitrate & nitrite has been waived by the Maine CDC for all samples submitted to the Drinking Water Program.
- 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

A DIVISION OF GRANITE STATE ANALYTICAL SERVICES, LLC.

155 Center Street, Building C, Auburn, Maine 04210

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

CERTIFICATE OF ANALYSIS FOR DRINKING WATER

DATE PRINTED: 10/14/2021
CLIENT NAME: Alliance Home Inspectors

CLIENT ADDRESS: 14 Carriage Ln
Hampden, ME 04444

SAMPLE ID #: 2110-01835-001
SAMPLED BY: Ronnie

SAMPLE ADDRESS: Smith
12 Fairway Vista 1-2
Trenton ME 04605

MORE LOC INFO: Kitchen

Legend	
Passes	✓
Fails EPA Primary	⊗
Fails EPA Secondary	▽
Fails State Guideline	✕
Attention	⚠

DATE AND TIME COLLECTED: 10/11/2021 12:30PM
DATE AND TIME RECEIVED: 10/12/2021 11:50AM
ANALYSIS PACKAGE: A & L-IC-Comp-ME
RECEIPT TEMPERATURE: 18° 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	JLR-NH	10/13/2021 03:30PM
Calcium	33.3	mg/L			0.1	No Limit	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Copper*	0.0176	mg/L	✓		0.001	1.3 mg/L	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Hardness (calc.)	117	mg CaCO3/L			0.25	No Limit	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Iron	0.20	mg/L	✓		0.1	0.3 mg/L	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Lead*	0.0010	mg/L	✓		0.001	0.015 mg/L	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Magnesium	8.11	mg/L			0.1	No Limit	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Manganese*	0.0814	mg/L	▽		0.001	0.05 mg/L	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Sodium	15.9	mg/L			0.1	No limit	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Uranium*	<1	ug/L	✓		1	30 ug/L	EPA 200.8	JLR-NH	10/13/2021 03:30PM
Uranium	<0.67	pCi/L	✓		0.67	20 pCi/L	EPA 200.8 Calc.	JLR-NH	10/13/2021 03:30PM
Chloride*	41	mg/L	✓		2	250 mg/L	EPA 300.0	JR-ME	10/12/2021 05:47PM
Fluoride*	<0.2	mg/L	✓		0.2	4.0 mg/L	EPA 300.0	JR-ME	10/12/2021 05:47PM
Nitrate as N*	<0.2	mg/L	✓		0.2	10 mg/L	EPA 300.0	JR-ME	10/12/2021 05:47PM
Nitrite as N*	<0.2	mg/L	✓		0.2	1 mg/L	EPA 300.0	JR-ME	10/12/2021 05:47PM
pH*	7.25	SU	✓	H	–	6.5 - 8.5 SU	SM 4500-H+B	JR-ME	10/12/2021 02:05PM
Coliform Bacteria*	Present	P-A/100mL	⚠		Absent	No Limit	SM 9223 B	JR-ME	10/13/2021 09:55AM
E. coli Bacteria*	Absent	P-A/100mL	✓		Absent	Absent	SM 9223 B	JR-ME	10/13/2021 09:55AM
Total Coliform / E.coli Bacteria Preparation (Colilert®-18) 20th ED							SM 9223 B	JR-ME	10/12/2021 02:30PM

Rebecca L. Labranche
Laboratory Director

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

CERTIFICATE OF ANALYSIS FOR DRINKING WATER

Legend	
Passes	✓
Fails EPA Primary	⊗
Fails EPA Secondary	▼
Fails State Guideline	✕
Attention	⚠

DATE PRINTED: 10/14/2021
CLIENT NAME: Alliance Home Inspectors
CLIENT ADDRESS: 14 Carriage Ln
Hampden, ME 04444

SAMPLE ID #: 2110-01835-002
SAMPLED BY: Ronnie
SAMPLE ADDRESS: Smith
12 Fairway Vista 1-2
Trenton ME 04605
MORE LOC INFO: Drilled Well

DATE AND TIME COLLECTED: 10/11/2021 01:30PM
DATE AND TIME RECEIVED: 10/12/2021 11:50AM
ANALYSIS PACKAGE: A & L Radon Water
RECEIPT TEMPERATURE: 18° CELSIUS
CLIENT JOB #:

Test Description	Result	Test Units	Pass /Fail	DQ Flag	RL	Limit	Method	Analyst	Date - Time Analyzed
Radon+	897	pCi/L	✓		100	4000 pCi/L	SM 7500-RN B	TT-ME	10/12/2021 07:35PM

Rebecca L. Labranche
Laboratory Director

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

Jeremiah Graham
jegraham207@gmail.com

Date Printed:	**10/21/2023**
Work Order #:	**2310-04543**
Client Job #:	
Date Received:	**10/20/2023**
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.
- 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: None

SAMPLE STATE SPECIFIC NOTES:

- The thermal preservation requirement of 4°C for nitrate & nitrite has been waived by the Maine CDC for all samples submitted to the Drinking Water Program.

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

A DIVISION OF GRANITE STATE ANALYTICAL SERVICES, LLC.

155 Center Street, Building C, Auburn, Maine 04210

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

CERTIFICATE OF ANALYSIS FOR DRINKING WATER

DATE PRINTED: 10/21/2023
CLIENT NAME: Jeremiah Graham
CLIENT ADDRESS: jegraham207@gmail.com

SAMPLE ID #: 2310-04543-001
SAMPLED BY: Bill Chaploney
SAMPLE ADDRESS: Graham
12 Fairway Vista
Trenton ME 04605
MORE LOC INFO: Bath

Legend	
Passes	✓
Fails EPA Primary	⊗
Fails EPA Secondary	▼
Fails State Guideline	✕
Attention	⚠

DATE AND TIME COLLECTED: 10/19/2023 01:50PM
DATE AND TIME RECEIVED: 10/20/2023 07:45AM
ANALYSIS PACKAGE: A & L MPN-ME
RECEIPT TEMPERATURE: 21° CELSIUS
CLIENT JOB #:

Test Description	Result	Test Units	Pass /Fail	DQ Flag	RL	Limit	Method	Analyst	Date - Time Analyzed
Coliform MPN*	<1	MPN/100mL	✓		1	No Limit	SM 9223 B	TT-ME	10/21/2023 08:55AM
E. coli MPN*	<1	MPN/100mL	✓		1	0	SM 9223 B	TT-ME	10/21/2023 08:55AM
Total Coliform / E.coli Bacteria Preparation (Colilert® Quanti-Tray®) 20th ED							SM 9223 B	RL-ME	10/20/2023 08:30AM

Rebecca L. Labranche
Laboratory Director

AIR & WATER QUALITY INC.
160 US Route 1•Freeport, ME 04032
388 Bangor Road•Ellsworth, Me 04605

Air & Water Quality Inc.
160 US Route 1
Freeport, ME 04032

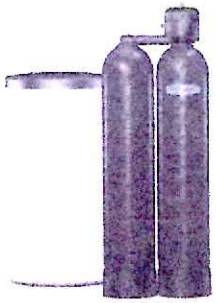
Phone: (207) 865-9200
info@awqinc.com
www.awqinc.com

Bill to
Jeremiah Graham
12 Fairway Vista
Trenton, ME 04605

Ship to
Jeremiah Graham
12 Fairway Vista
Trenton, ME 04605

Quote #: q13402 Quote Expiration Date: 10/5/2023 Sales Rep: Sales - Rod C

Option 1 Total: $6,790.00



Kinetico S250 twin tank water softener with Ultraviolet light system for coliform bacteria

Description	Quantity	Price	Amount
Installation of a Kinetico S250 twin-tank, non-electric water softener. The system is designed to reduce the concentration of dissolved iron, manganese and hardness below levels that can cause staining or scaling. The softener system includes the following: - Kinetico S250 water softener - Sanitary Air Gap drain connection - 3 - 40 lb. bags of solar salt - Includes 3 ball valve by-pass - Includes Big Blue 50 micron cartridge filter and housing	1	$4,495.00	$4,495.00
Installation of Viqua UV light system. Installation includes: - Viqua UV light system - Isolation valves Note: This system is designed to neutralize coliform bacteria. It is not intended to be a primary disinfection system and will NOT treat Ecoli bacteria. A 120V outlet is required and is to be provided by the homeowner.	1	$2,295.00	$2,295.00

10/13/23

PROPERTY LOCATED AT: **12 Fairway Vista Unit 2, Trenton, ME 04605**

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: 1500 each

Tank Type: ☑ Concrete ☐ Metal ☐ Unknown ☐ Other: _____

Location: Right side of Unit #2 OR ☐ Unknown

Date installed: 2007 Date last pumped: 10/23 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: 10/23 Name of company servicing tank: _____

Leach Field: Sec HHE-200 ..... ☑ Yes ☐ No ☐ Unknown

If Yes, Location: Over Lots 1 + 2

Date of installation of leach field: 2007 Installed by: _____

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: _____

_____

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: _____

Source of Section II information: _____

Produced with Lone Wolf Transact 717 N Harwood St, Suite 2200, Dallas, TX 75201 www.lwolf.com

HHE-200

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

City, Town, or Plantation	TRENTON
Street or Road	JORDAN RIVER ROAD
Subdivision, Lot #	N/A

TRENTON PERMIT # 1602 TOWN COPY

Date Permit Issued: 8/6/07 $200 FEE (If Double Fee Charged)

William a LaBelle
Local Plumbing Inspector Signature

L.P.I. # 603

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	GRAHAM JEREMIAH ☒ Owner ☒ Applicant
Mailing Address of Owner/Applicant	SUNNYSIDE PROPERTIES LLC 13 DEER RUN LAMOINE, ME. 04605
Daytime Tel. #	664-4082

Municipal Tax Map # _____ Lot # _____

OWNER OR APPLICANT STATEMENT

I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

Signature of Owner or Applicant — Date 8/9/07

CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. 8-6-07 (1st) date approved

William a LaBelle 8-9-07
Local Plumbing Inspector Signature — (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

- ☒ 1. First Time System
- ☐ 2. Replacement System
  - Type replaced: _____
  - Year installed: _____
- ☐ 3. Expanded System
  - ☐ a. Minor Expansion
  - ☐ b. Major Expansion
- ☐ 4. Experimental System
- ☐ 5. Seasonal Conversion

THIS APPLICATION REQUIRES

- ☒ 1. No Rule Variance
- ☐ 2. First Time System Variance
  - ☐ a. Local Plumbing Inspector Approval
  - ☐ b. State & Local Plumbing Inspector Approval
- ☐ 3. Replacement System Variance
  - ☐ a. Local Plumbing Inspector Approval
  - ☐ b. State & Local Plumbing Inspector Approval
- ☐ 4. Minimum Lot Size Variance
- ☐ 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS

- ☒ 1. Complete Non-engineered System
- ☐ 2. Primitive System (graywater & alt. toilet)
- ☐ 3. Alternative Toilet, specify: _____
- ☐ 4. Non-engineered Treatment Tank (only)
- ☐ 5. Holding Tank, _____ gallons
- ☐ 6. Non-engineered Disposal Field (only)
- ☐ 7. Separated Laundry System
- ☐ 8. Complete Engineered System (2000 gpd or more)
- ☐ 9. Engineered Treatment Tank (only)
- ☐ 10. Engineered Disposal Field (only)
- ☐ 11. Pre-treatment, specify: _____
- ☐ 12. Miscellaneous Components

SIZE OF PROPERTY

3.75 ☐ SQ. FT. ☒ ACRES

SHORELAND ZONING

☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE

- ☐ 1. Single Family Dwelling Unit, No. of Bedrooms: ____
- ☒ 2. Multiple Family Dwelling, No. of Units: 4
- ☐ 3. ~~Other~~ TOTAL 10 BEDROOMS (specify)

Current Use ☐ Seasonal ☐ Year Round ☒ Undeveloped

TYPE OF WATER SUPPLY

☒ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private
☐ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- ☒ 1. Concrete
  - ☒ a. Regular — TOP SEAM
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other: 2-1500 GAL TANKS
- CAPACITY: 1500 GAL EACH

DISPOSAL FIELD TYPE & SIZE

- ☐ 1. Stone Bed ☐ 2. Stone Trench
- ☒ 3. Proprietary Device
  - ☐ a. cluster array ☒ c. Linear
  - ☐ b. regular load ☐ d. H-20 load
- ☐ 4. ~~Other~~ ENVIRO-SEPTIC PIPE
- SIZE: 900 ☐ sq. ft. ☒ lin. ft.

GARBAGE DISPOSAL UNIT

☒ 1. (No) ☐ 2. Yes ☐ 3. Maybe
If Yes or Maybe, specify one below:
- ☐ a. multi-compartment tank
- ☐ b. ___ tanks in series
- ☐ c. increase in tank capacity
- ☒ d. Filter on Tank Outlet UNLIKELY

DESIGN FLOW

900 gallons per day
BASED ON:
- ☒ 1. Table 501.1 (dwelling unit(s))
- ☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS for other facilities
☒ SECT. 501.3

- ☐ 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
9 D/C 3
at Observation Hole # 1, 2, 4, 5, 6
Depth 13"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

- ☐ 1. Small—2.0 sq. ft. / gpd
- ☐ 2. Medium—2.6 sq. ft. / gpd
- ☐ 3. Medium—Large 3.3 sq. ft / gpd
- ☐ 4. Large—4.1 sq. ft. / gpd
- ☒ 5. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

- ☐ 1. Not Required BLDG. "A"
- ☐ 2. May Be Required
- ☒ 3. Required BLDG. "B"

Specify only for engineered systems:
DOSE: Specified By DISTRIBUTOR gallons

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44 d 29 m 22.2 s
Lon. 68 d 21 m 51.6 s
if g.p.s, state margin of error: +/- 3 mt.

SITE EVALUATOR STATEMENT

I certify that on 6-12-06 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

J. Peter Crane — # 33 — 4/19/07
Site Evaluator Signature — SE # — Date

J. PETER CRANE — 667-5007 — _____
Site Evaluator Name Printed — Telephone Number — E-mail Address

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation: TRENTON

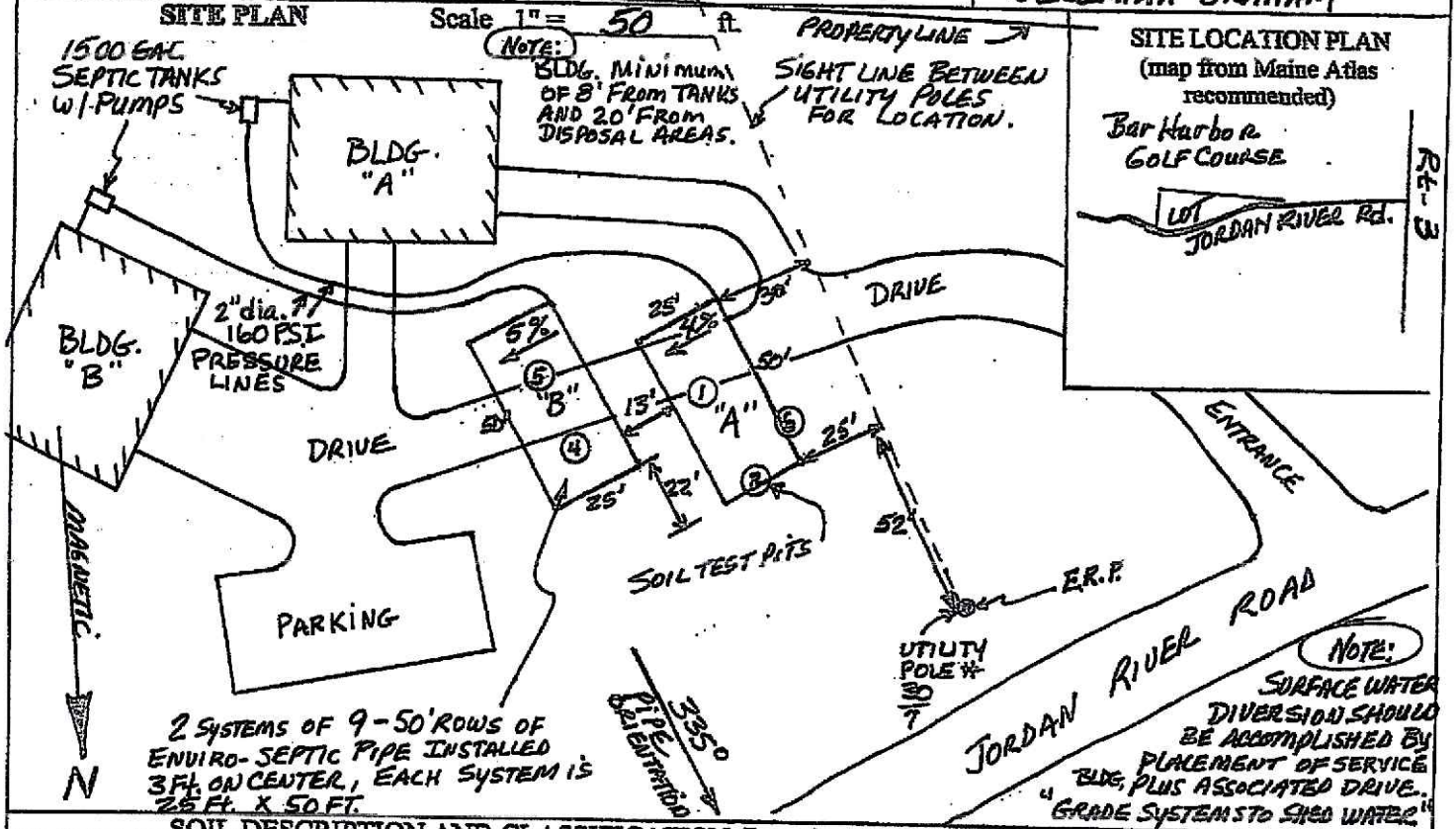
Street, Road, Subdivision: JORDAN RIVER ROAD (UTILITY POLE)

Lot #: N/A

Owner's Name: SUNNYSIDE PROPERTIES LLC JEREMIAH GRAHAM

SITE PLAN

Scale 1" = 50 ft.



SITE LOCATION PLAN

(map from Maine Atlas recommended)

SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole 1 — ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10	SILT LOAM	FRIABLE	BROWN; DARK REDDISH BROWN; YELLOWISH BROWN	NONE
10–20	SILTY CLAY LOAM	SOMEWHAT FIRM	LIGHT OLIVE BROWN	COMMON DISTINCT
20–30	SILTY CLAY	FIRM	OLIVE	GRADING to MANY PROMINANT
30–40		VERY FIRM		
40–50				

Soil Classification	Slope	Limiting Factor	
9 D (Profile / Condition)	4 %	14"	☒ Ground Water; [ ] Restrictive Layer; [ ] Bedrock; [ ] Pit Depth

Observation Hole 2 — ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10	SILT LOAM	FRIABLE	BROWN; YELLOWISH BROWN	NONE
10–20			DARK REDDISH BROWN	COMMON DISTINCT
20–30	SILTY CLAY LOAM	SOMEWHAT FIRM	YELLOWISH BROWN; LIGHT OLIVE BROWN	MANY
30–40	SILTY CLAY	FIRM	OLIVE	PROMINANT
40–50				

Soil Classification	Slope	Limiting Factor	
9 D (Profile / Condition)	4 %	13"	☒ Ground Water; [ ] Restrictive Layer; [ ] Bedrock; [ ] Pit Depth

SEE ADDITION SOIL TEST PITS ATTACHED

J Peter Crane — Site Evaluator Signature

#33 — SE #

4/19/07 — Date

LOG OF SOIL TEST PITS "ATTACHMENT TO HHE:200"

SUNNYSIDE PROPERTIES LLC
TRENTON, ME

SOIL DESCRIPTION AND CLASSIFICATION

Observation Hole 4 ■ Test Pit ☐ Boring
0" Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10	SILT LOAM	FRIABLE	BROWN	NONE
10–20			YELLOWISH BROWN / LIGHT OLIVE BROWN	COMMON DISTINCT
20–30	SILTY CLAY LOAM	FIRM		
30–50	SILTY CLAY	VERY FIRM	OLIVE	

Soil Classification: Profile 9, Condition D
Slope: 5%
Limiting Factor: 14½"
■ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole 5 ■ Test Pit ☐ Boring
0" Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10	SILT LOAM	FRIABLE	BROWN	NONE
10–20	SILTY CLAY LOAM	FIRM	LIGHT OLIVE BROWN	COMMON DISTINCT
20–30	SILTY CLAY	VERY FIRM	OLIVE	

Soil Classification: Profile 9, Condition C
Slope: 5%
Limiting Factor: 15"
■ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole 6 ■ Test Pit ☐ Boring
0" Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10	SILT LOAM	FRIABLE	BROWN	NONE
10–20			YELLOWISH BROWN / LIGHT OLIVE BROWN	COMMON DISTINCT
20–30	SILTY CLAY LOAM	FIRM		
30–50	SILTY CLAY	VERY FIRM	OLIVE	

Soil Classification: Profile 9, Condition C
Slope: 4%
Limiting Factor: 15"
■ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole ____ ☐ Test Pit ☐ Boring
____" Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–50	NOTE: ALL PERMITS AND OR NOTIFICATIONS PRIOR TO CONSTRUCTION ARE THE RESPONSIBILITY OF THE OWNER.			

Soil Classification: Profile ____, Condition ____
Slope: ____%
Limiting Factor: ____"
☐ Ground Water ☑ Restrictive Layer ☐ Bedrock ☐ Pit Depth

J. Peter Crane
Site Evaluator Signature

#33
SE -

4/19/07
Date

ATTACHMENT TO HHE:200

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 Fax: (207) 287-3165

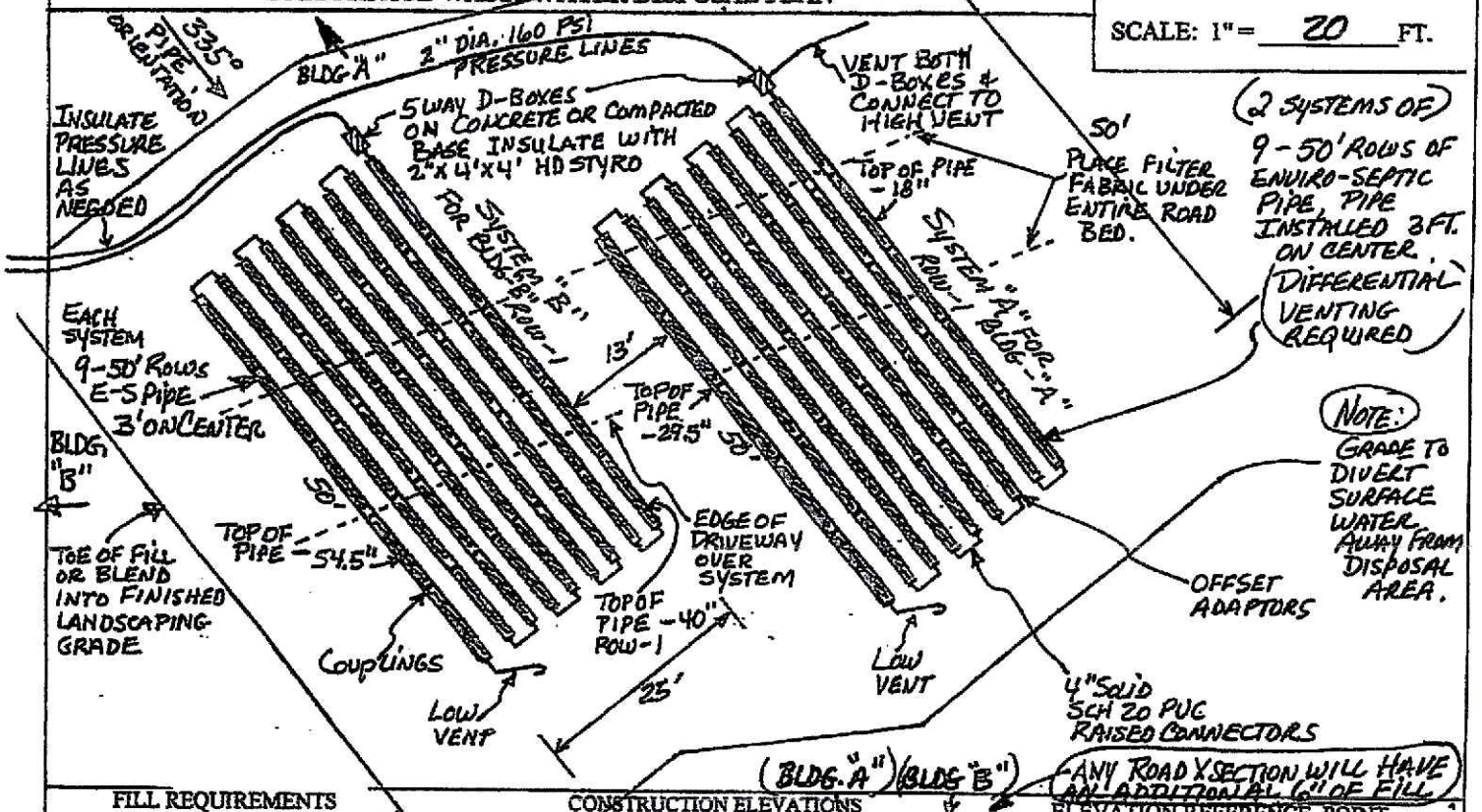
Town, City, Plantation: TRENTON

Street, Road, Subdivision: JORDAN RIVER ROAD

Owner's Name: SUNNYSIDE PROPERTIES LLC JEREMIAH GRAHAM

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.

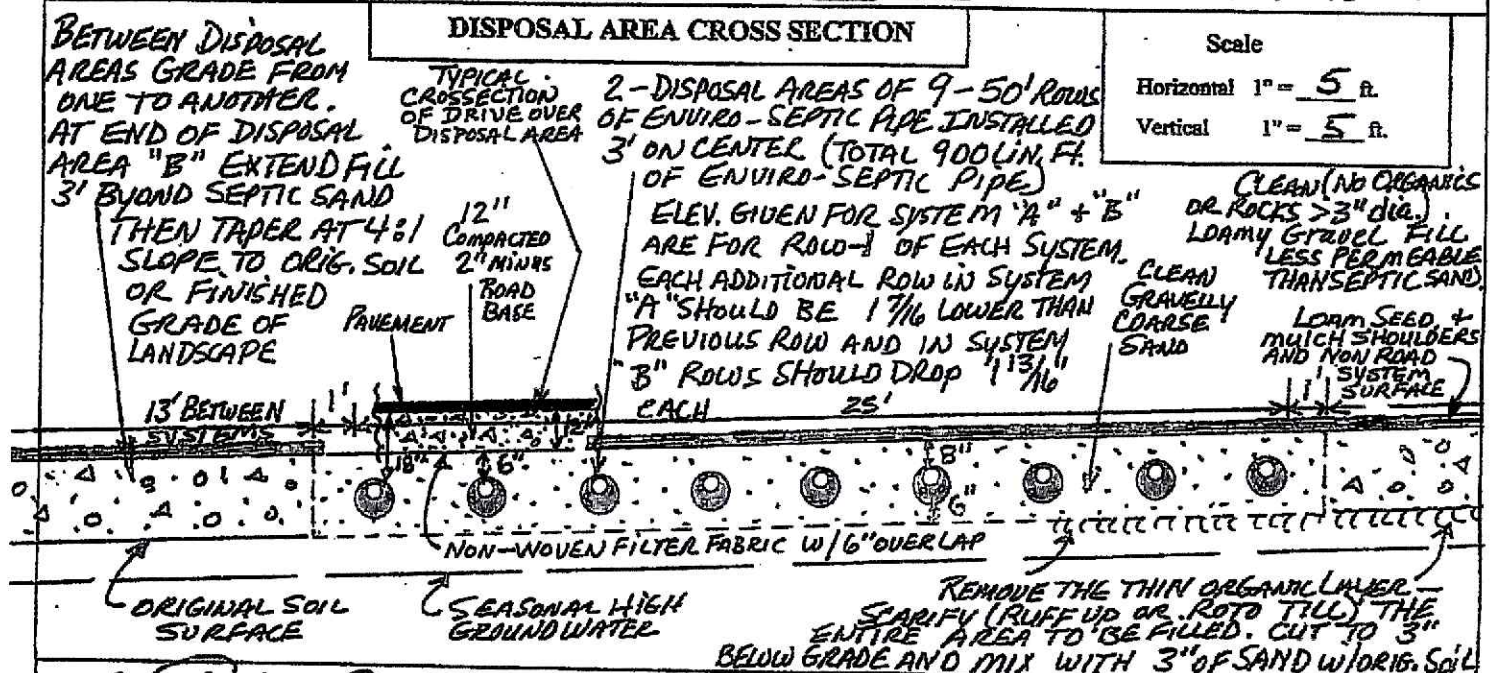


(BLDG. "A") (BLDG "B") ANY ROAD X SECTION WILL HAVE AN ADDITIONAL 6" OF FILL

FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS	(BLDG. "A")	(BLDG "B")	ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	29"	Finished Grade Elevation ROW-1's ONLY	-6"	-28"	Location & Description: NAIL 26" UP IN UTILITY POLE # 30/7
Depth of Fill (Downslope)	29" +/-	Top of ~~Distribution Pipe or~~ Proprietary Device	-18	-40"	
		Bottom of Disposal Area SAND	-36	-58"	Reference Elevation: ASSUMED 0"

DISPOSAL AREA CROSS SECTION

Scale: Horizontal 1" = 5 ft. Vertical 1" = 5 ft.



J. Peter Crane — Site Evaluator Signature

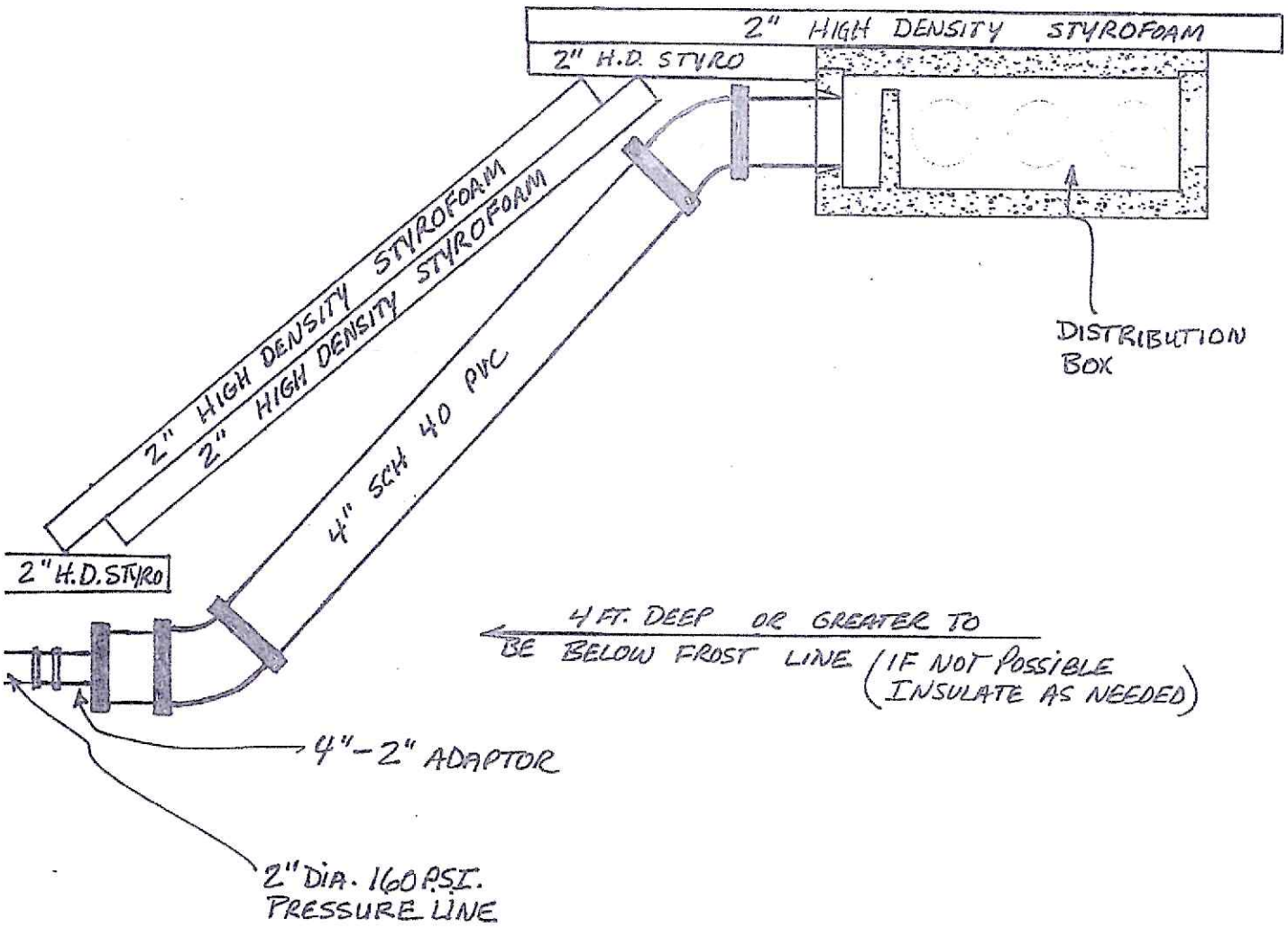
33 — SE

4/19/07 — Date

HHE-200 Rev. 8/01

DETAIL OF PRESSURE LINE CONNECTION TO DISTRIBUTION BOX

GREATER REDUCTION IN VELOCITY OVER
2" PRESSURE LINE DIRECTLY INTO BOTTOM OF D-BOX



NOT TO SCALE

Section J
Venting Requirements

General rule

Locate vent openings to ensure air is drawn completely through each line or section of Enviro-Septic® pipe.

When to vent

Venting is required if systems are pumped, under more than 18" of cover, or installed under parking areas, roads, or surface features that restrict air passage through the soil.

One 4" vent is required for every 1,000 feet of pipe. If necessary, a single 6" vent opening may be installed in place of a maximum of three 4" vent openings.

All Multi-Level™ systems require venting.

Vent locations

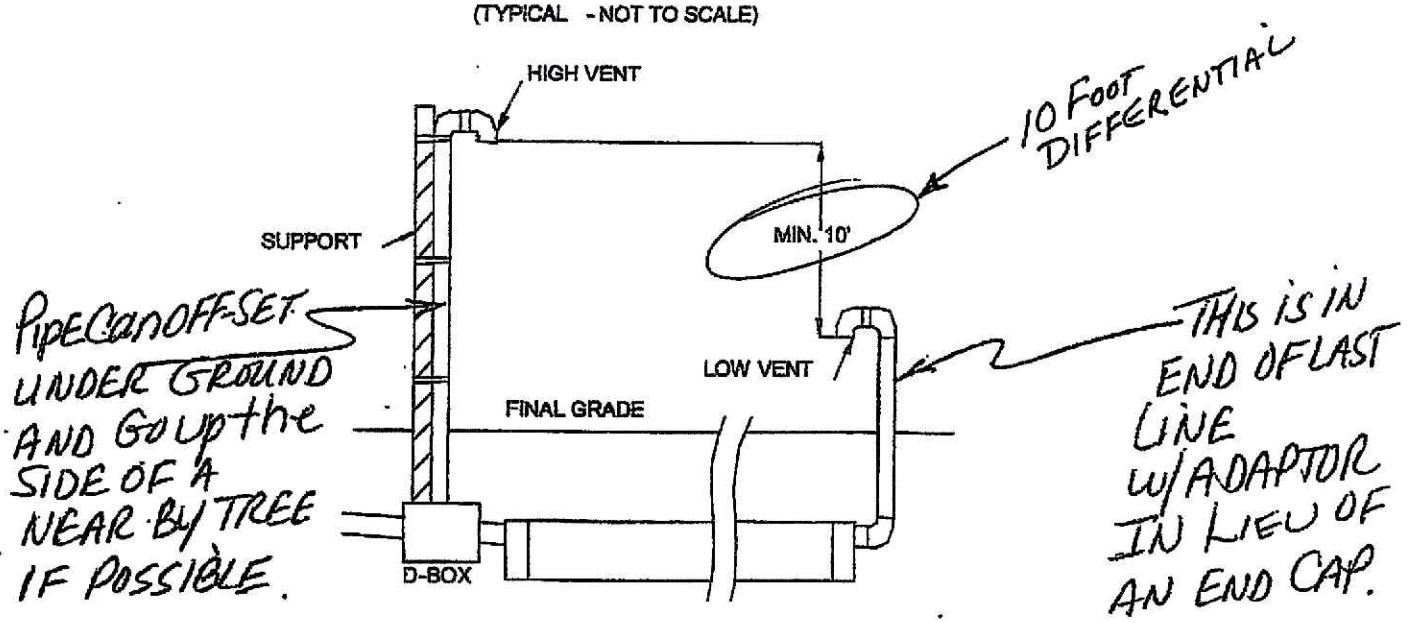
Enviro-Septic® systems can be vented in three locations.

1. Through an unused distribution box outlet.
2. Through a tee installed in the PVC pipe near the inlet of the Enviro-Septic® pipe.
3. Through an offset adapter installed at the end of a section or line.

Differential venting

Differential venting is the use of high and low vents in a system. High vents are connected to the distribution box and low vents are connected to the opposite end of the system. This arrangement enhances the circulation of air throughout the entire system.

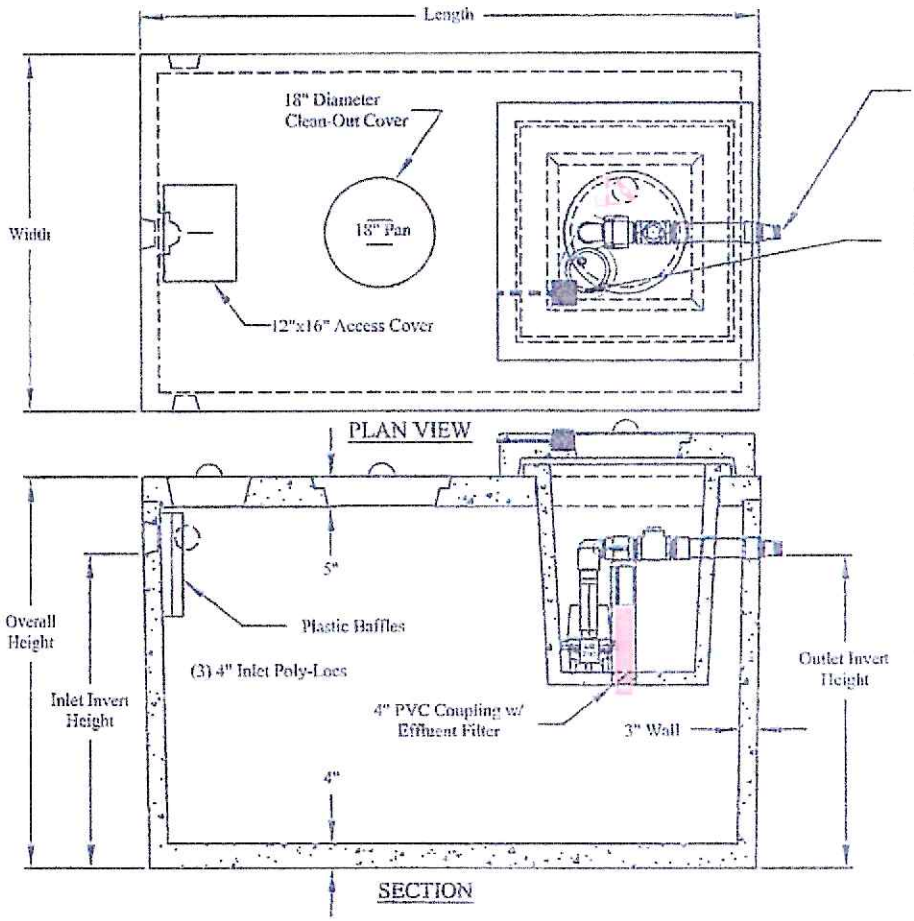
DIFFERENTIAL VENTING
(TYPICAL - NOT TO SCALE)



Continued

Gagne Precast
CONCRETE PRODUCTS

RESIDENTIAL SEPTIC TANK ONE-PIECE LIFT STATION



2" Dia. Cast Brass Male Insert Adapter

Cast in PVC Junction Box w/ Side Connection Point and Flush Cover Plate

A Complete Pump Package Includes:

(1) Pump
(2) Schedule 40 Male Pressure Adapter
(1) 2" Dia. Schedule 40 Pipe Spool
(1) 2" Dia. Schedule 40, 90° Ell, Slip x MPT
(1) 2" NPT Polypropylene Quick Disconnect
(1) 2" Dia. Brass Check Valve FPT
(1) 2" Dia. Schedule 40 Female Pressure Adapter
(1) 2" Dia. Brass Male Insert Adapter
(1) Float Switch for the Pump "On - Off"
(1) High Water Alarm Float Switch and Remote Alarm Unit Supplied
(1) Junction Box
(1) 30' Length of 12 AWG, 7 Conductor Direct Burial Cable Standard, Other Lengths Available At Additional Cost

All Complete Pump Packages are Prewired ready for connection to Customer power.

Capacity	Type	Length	Width	Height	Inlet	Outlet	REG. Item #	H.D. Item #	Weight
750 Gal.	1 Piece	8'-5"	4'-9"	4'-1"	3'-2"	2'-11"	20110	20130	8,700 lbs.
1,000 Gal.	1 Piece	8'-6"	4'-10"	5'-4"	4'-6"	4'-3"	20440	20460	9,700 lbs.
1,000 Gal.	Low Boy	10'-5 1/2"	6'-3"	4'-1"	3'-1"	2'-10"	20521	20541	11,000 lbs.
1,500 Gal.	1 Piece	10'-5"	6'-2 1/2"	5'-5"	4'-6"	4'-3"	20680	20700	13,900 lbs.
2,000 Gal.	1 Piece	10'-5 1/2"	6'-3"	6'-3"	5'-4"	5'-1"	20830	20850	16,000 lbs.

DESIGN NOTES:

1) Regular and Heavy Duty Tanks are suitable for installation in NON-Traffic areas up to burial depths of 3 feet and 5 feet, respectively.
2) Concrete Mix Design is 4,000 PSI standard at 28 days, Type 3 Cement.
3) Reinforcing Steel, ASTM A615, Grade 60
4) Shiplap joint sealed with butyl sealant.
5) All covers provided with pencil rod lift loops
6) The plastic baffels for this tank can be moved to any of the Inlets.
7) POLYLOK PIPE SEALS standard at all pipe penetrations.
8) Installations under driveways and when the top is more than 3' below grade, require heavy duty tanks reinforced with #5 rebar.
9) Residential Effluent Pumps standard. Other Pumps available upon request.
10) Sump capacity approximately 30 gallons.

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	Radiant Heat	Heat Pumps		
Age of system(s) or source(s)	2007	2025		
TYPE(S) of Fuel	Propane	Electric		
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)	478 Gallons			
Name of company that services system(s) or source(s)	Dead River	MDI Heat Pumps		
Date of most recent service call	April 29, 2026	9/12/2025		
Malfunctions per system(s) or source(s) within past 2 years	Ø	Ø		
Other pertinent information	Relocated tanks 4/2026	NEW A/C Samsung 2025		

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: _____

Direct and/or Power Vent(s): ..... ☐ Yes ☐ No ☑ Unknown

Has vent(s) been inspected? ..... ☐ Yes ☐ No ☐ Unknown

If Yes, date: _____

Comments: See Samsung Product Registration Confirmation

Source of Section III information: _____

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: _____

SAMSUNG

776 Henrietta Creek Rd.
Suite 100
Roanoke TX 76262
Phone : (817)838-6066

MDI Heat Pumps
7 Newbury Lane
BAR HARBOR ME 04609
Phone : 207-266-9533

Product Registration Confirmation

Installer	MDI Heat Pumps 7 Newbury Lane BAR HARBOR ME 04609 USA 207-266-9533	**End User**	Paul M. Smith 12 Fairway Vis Trenton ME 04605
B2B/E Submit No.	105448	**Registered Date**	9/17/2025 12:00:00 AM
Installed Date	9/12/2025 12:00:00 AM	**Registered By**	Yvette Sillers
Installed Type	Residential	**Regr. By EMail**	

Registered Product(s)

Unit Name	Unit US Code	Description	S/N	Warranty End Date (Part)	Warranty End Date (Compressor)
AR09CSFCMWKNCV	RNS09CMC	WindFree™* 3.0e, Wall Mount, 9k BTU, 1Ph, 60Hz, 208~230V	0KMSPDCX801412F	9/9/2037	9/9/2037
AR09CSFCMWKNCV	RNS09CMC	WindFree™* 3.0e, Wall Mount, 9k BTU, 1Ph, 60Hz, 208~230V	0KMSPDCX801437V	9/9/2037	9/9/2037
AR09CSFCMWKNCV	RNS09CMC	WindFree™* 3.0e, Wall Mount, 9k BTU, 1Ph, 60Hz, 208~230V	0KMSPDCX801438F	9/9/2037	9/9/2037
AR09CSFCMWKNCV	RNS09CMC	WindFree™* 3.0e, Wall Mount, 9k BTU, 1Ph, 60Hz, 208~230V	0KMSPDCX801439A	9/9/2037	9/9/2037
AR09CSFCMWKXCV	RXS09CMC	WindFree™* 3.0e, Outdoor, 9k BTU, 1Ph, 60Hz, 208~230V	0KMTPDOX700055P	9/9/2037	9/9/2037
AR09CSFCMWKXCV	RXS09CMC	WindFree™* 3.0e, Outdoor, 9k BTU, 1Ph, 60Hz, 208~230V	0KMTPDOX700066D	9/9/2037	9/9/2037
AR09CSFCMWKXCV	RXS09CMC	WindFree™* 3.0e, Outdoor, 9k BTU, 1Ph, 60Hz, 208~230V	0KMTPDPX401297V	9/9/2037	9/9/2037
AR09CSFCMWKXCV	RXS09CMC	WindFree™* 3.0e, Outdoor, 9k BTU, 1Ph, 60Hz, 208~230V	0KMTPDPX800021F	9/9/2037	9/9/2037

LIMITED WARRANTY

Thank you for registering your SAMSUNG HVAC Product(s).

(a) SAMSUNG HVAC warrants to the original end-user of SAMSUNG Heat Pump System ("Product") that, if purchased and installed by a SAMSUNG HVAC trained licensed mechanical contractor for HVAC installation under applicable local and state laws within the continental United States, Alaska, Hawaii and Canada, and if the Product proves defective by reason of defects arising from manufacturer improper workmanship and/or material.

(b) *The Warranty on the replacement compressor and replacement parts will be limited to the unexpired term of*

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: _____

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: 10/12/2021 By: A+L Laboratory

Results: Pass

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: _____

D. RADON/WATER - Current or previously existing:

Has the property been tested? ..... ☑ Yes ☐ No ☐ Unknown

If Yes: Date: 10/12/2021 By: A+L Laboratory

Results: Pass

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: _____

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: _____

Source of information: _____

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: _____

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: Easement/Access to well, leachfield and utilities

Source of information: Filed Plat

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? 12 Fairway Vista Condominium Asso.

Road Association Name (if known): _____

Source of information: _____

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: _____ Year: _____ (Attach a copy)

Comments: _____

Source of Section VI information: _____

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PROPERTY LOCATED AT: **12 Fairway Vista Unit 2, Trenton, ME 04605**

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, solar panels, wind turbines): Type: Propane Tanks

From Whom: Dead River

Year Principal Structure Built: 2007 What year did Seller acquire property? Dec 2021

Roof: Year Shingles/Other Installed: 2007

Water, moisture or leakage: No

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: _____

Buyer Initials _____ Seller Initials _____

PROPERTY LOCATED AT: **12 Fairway Vista Unit 2, Trenton, ME 04605**

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: _____

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 10/31/2026	SELLER	DATE
239 Madison Avenue Associates LLC			
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

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EQUAL HOUSING OPPORTUNITY

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