

PROPERTY LOCATED AT: 80 State Street, Ellsworth, 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 \_\_\_\_\_

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? \_\_\_\_\_

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: \_\_\_\_\_  
Installed by: \_\_\_\_\_  
Date of Installation: \_\_\_\_\_

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

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

Source of Section I information: **Public Record**

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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: \_\_\_\_\_ OR  Unknown

Date installed: \_\_\_\_\_ Date last pumped: \_\_\_\_\_ 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: \_\_\_\_\_

Date of installation of leach field: \_\_\_\_\_ 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: **Public Record**

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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	<b>Buderus</b>			
Age of system(s) or source(s)	<b>2006</b>			
TYPE(S) of Fuel	<b>Oil</b>			
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)				
Name of company that services system(s) or source(s)	<b>Dead River</b>			
Date of most recent service call	<b>07/10/2025</b>			
Malfunctions per system(s) or source(s) within past 2 years	<b>No ~ Annual Servicing</b>			
Other pertinent information	<b>On the Presidential Plan</b>			

- 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 Rep**

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

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: **Seller Rep**

**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: **Seller Rep**

**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: **City Water. Seek Information from Water Department**

Source of information: **Seller Rep**

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

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

Source of information: **Seller Rep**

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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: **Seller Rep**

**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 Rep**

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

Source of information: **Seller Rep**

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 Name (if known): \_\_\_\_\_

Source of information: **Seller Rep**

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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: \_\_\_\_\_ Year: \_\_\_\_\_ (Attach a copy)

Comments: N/A

Source of Section VI information: **Seller Rep**

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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: **1840** What year did Seller acquire property? **1961**

Roof: Year Shingles/Other Installed: **Within the last 5-6 years**

Water, moisture or leakage: **None**

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: **None**

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

Source of Section VII information: **Seller Rep**

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