

SELLER'S STATEMENT OF PROPERTY CONDITION

THE SELLER AUTHORIZES THE BROKERS OR SALESPERSONS TO PROVIDE THE FOLLOWING INFORMATION TO PROSPECTIVE BUYERS. THIS INFORMATION IS BASED UPON THE SELLER'S KNOWLEDGE, BUT IS NOT INTENDED AS A GUARANTEE OF THE CONDITION OF THE PROPERTY AFTER SALE OR THE CONTINUED SATISFACTORY OPERATION OF ANY SYSTEM. THE BUYER SHOULD INDEPENDENTLY VERIFY ALL INFORMATION BEFORE PURCHASE.

Property Address 408 Wellman Avenue

ANSWERS

YES	NO	UNKN	I. TITLE/ZONING/BUILDING/INFORMATION
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1. Seller/Owner <u>Christine + John Foster</u> How long owned? <u>5 yrs</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2. How long occupied? <u>5 yrs</u> Approximate year built? <u>1983</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3. Have you been advised of any title problems or limitations (for example, deed restriction, lot line dispute, order of conditions)? If yes, please explain <u>no</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a) Do you know of any easements, common driveway, or right of way? If yes, explain <u>no</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. Zoning classification of property (if known) <u>Res</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5. Has your city/town issued a notice of any violation which is still outstanding? If yes, explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a) Have you been advised that the current use is nonconforming in any way? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6. Do you know of any variances or special permits? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7. During Seller's ownership, has work been done for which a permit was required? If yes, explain _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	a) Were permits obtained? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b) Was the work approved by inspector? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	c) Is there an outstanding notice of any building code violation? Yes _____ No _____ Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8. Have you been informed that any part of the property is in a designated flood zone or wetlands? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(See Flood Zone disclosure Page 3)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9. Water drainage problems? Explain _____

YES	NO	UNKN	II. SYSTEM UTILITIES INFORMATION
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DO YOU KNOW OF ANY CURRENT PROBLEMS WITH ANY SYSTEMS LISTED BELOW?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10. Has there ever been an UNDERGROUND FUEL TANK? If yes, is it still in use? _____ If not used, was it removed? _____ (See Hazardous Materials Disclosure Page 3)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11. HEATING SYSTEM: Problems? Explain <u>none</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a) Identify any unheated room or area _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	b) Approximate date of last service _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	c) Reason _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12. DOMESTIC HOT WATER: Type <u>gas</u> Age _____ Problems? Explain _____ Burners owned or rented? _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	13. SEWAGE SYSTEM: Problems? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Municipal Sewer _____ Private _____ If private, describe type of system: _____ (cesspool, septic tank, etc.) _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Name of service company _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Date it was last pumped _____ Frequency _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	During your ownership has sewage backed up into house or onto yard? Yes _____ No _____ Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Is system shared with other homes? _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Date a Title 5 inspection last performed _____ Copy attached. Yes _____ No _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	14. PLUMBING SYSTEM: Problems/Leaks/Freezing? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bathroom ventilation problems? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	15. DRINKING WATER SOURCE: Public <input checked="" type="checkbox"/> Private _____ If private:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	a) Location _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	b) Date last tested _____ Report: Attached _____ Not attached _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	c) Water quality problems? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	d) Water quantity problems? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	e) Flow rate (gal. min.) _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	f) Age of pump _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	g) Is there a filtration system? _____ Age/Type of filtration system _____

SELLER'S INITIALS CMF SWS BUYER'S INITIALS _____



ANSWERS

YES	NO	UNKN	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	16. ELECTRICAL SYSTEM: Problems? Explain _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. APPLIANCES: List appliances that are included <u>Stove, dishwasher (w/d fridge neg)</u> Any known problems? _____ If yes, explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	18. SECURITY SYSTEM: None _____ Type _____ Age _____ Company _____ Problems? Explain _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. AIR CONDITIONING: Central <input checked="" type="checkbox"/> Window _____ Other _____ None _____ Problems? Explain _____

III. BUILDING/STRUCTURAL IMPROVEMENTS INFORMATION

YES	NO	UNKN	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20. FOUNDATION / SLAB: Problems? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	21. BASEMENT: Water _____ Seepage _____ Dampness _____ Explain amount, frequency, and location _____ a) _____ Sump Pump? If yes, age _____ location _____ Problems _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22. ROOF: Problems? Explain _____ Location of leaks/problems _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. CHIMNEY/FIREPLACE: Date last cleaned _____ Problems? _____ Wood/Coal/ Pellet Stove in compliance with installation regulations/code/bylaws? _____ If not, explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	24. History of smoke / fire damage to structure, if any? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. FLOORS: Type of floors under carpet/linoleum? <u>plywood</u> Problems with floors (buckling, sagging, etc.)? Explain <u>none</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	26. WALLS: a) INTERIOR Walls: Problems? Explain <u>none</u> b) EXTERIOR Walls: Problems? Explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	27. WINDOWS / SLIDING DOORS / DOORS: Problems or leaks? Explain <u>no</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. INSULATION: Does house have insulation? If yes, type _____ Date installed <u>1983</u> Location _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	29. ASBESTOS: Do you know whether asbestos is present in exterior shingles, pipecovering or boiler insulation? _____ Has a fiber count been performed? _____ If yes, attach copy _____ (See Asbestos disclosure Page 3)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30. LEAD PAINT: Is lead paint present? _____ If yes, locations (attach copy of inspection reports) _____ If yes, describe abatement plan/interim controls, if any _____ Has paint been encapsulated? If yes, when and by whom? _____ (See Lead Paint disclosure Page 3)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	31. RADON: Has test for radon been performed? If yes attach copy _____ (See Radon disclosure Page 3)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	32. INSECTS: History of Termites/Wood Destroying Insects or Rodent Problems? If yes, explain treatment and dates _____ (See Chlordane disclosure Page 3)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	33. SWIMMING POOL / JACUZZI: Problems? Explain _____ Name of Service Company _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	34. GARAGE / SHED / OR OTHER STRUCTURE: Problems? Explain _____

IV. MISCELLANEOUS INFORMATION

YES	NO	UNKN	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	35. Do you know of any other problems which may affect the value or use of the property which may not be obvious to a prospective buyer? Explain _____

V. CONDOMINIUM INFORMATION

YES	NO	UNKN	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	36. If converted to condominium, are documents recorded (Master deed/Unit deed etc.)?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	37. PARKING: Is parking space included? If yes, is it deeded, exclusive easement or common? <u>2 deeded 1 carport</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	38. CONDO FEES: Current monthly fees for Unit are \$ <u>2161</u> Heat included? Yes _____ No _____ Electricity included? Yes _____ No <input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	39. RESERVE FUND: Has an advance payment been made to a condo reserve fund? If yes, how much \$ _____

SELLER'S INITIALS CLY SWG BUYER'S INITIALS _____



ANSWERS

YES	NO	UNKN	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	40. CONDO ASSOC. INFO: Is owners' association currently involved in any litigation? _____ If yes, explain _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	41. Have you been advised of any matter which is likely to result in a special assessment or substantially increase condominium fees? Explain _____

VI. RENTAL PROPERTY INFORMATION

YES	NO	UNKN	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	42. NUMBER OF UNITS: _____ Has a unit been added/subdivided since original construction? If yes, was a permit for new/added unit obtained? _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	43. RENTS: Number of units occupied _____ Rents \$ _____/month Expiration date of each lease _____ Any tenants without leases? _____ Is owner holding last month's rent _____ security deposit? _____ If yes, has interest been paid? _____ If security deposit held attach a copy of statements of condition. Attached _____ Not Attached _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44. Is there any outstanding notice of any sanitary code violation? Yes _____ No _____ Explain _____

VII. ACKNOWLEDGEMENTS

Seller(s) hereby acknowledge that the information set forth above is true and accurate to the best of my (our) knowledge. I (we) further agree to defend and indemnify the broker(s) and any subagents for disclosure of any of the information contained herein. Seller(s) further acknowledge receipt of copy of Seller's Statement of Property Condition.

Date 4/13/07 Seller Christine Foster Seller _____

Buyer/Prospective Buyer acknowledges receipt of Seller's Statement of Property Condition before purchase. Buyer acknowledges that Broker has not verified the information herein and Buyer has been advised to verify information independently.

Date _____ Buyer _____ Buyer _____

VIII. EXPLANATORY MATERIAL

The following clauses are provided for descriptive purposes only. For detailed information, consult the Massachusetts Department of Public Health, the Massachusetts Department of Environmental Protection, or other appropriate agency, or your attorney.

A. Flood Hazard Insurance Disclosure Clause (Question #8)

The lender may require Flood Hazard Insurance as a condition of the mortgage loan if the lender determines that the premises is in a flood hazard zone.

B. Hazardous Materials Disclosure Clause (Question #10)

In certain circumstances Massachusetts law can hold an owner of real estate liable to pay for the cost of removing hazardous or toxic materials from real estate and for damages resulting from the release of such materials, according to the Massachusetts Oil and Hazardous Material Release and Response Act, General Laws, Chapter 21E. The buyer acknowledges that he may have the property professionally inspected for the presence of, or the substantial likelihood of release of oil or hazardous material and such proof of inspection may be required as a prerequisite for financing the property.

C. Asbestos Disclosure Clause (Question #29)

The United States Consumer Product Safety Commission has maintained that asbestos materials are hazardous if they release separate fibers which can be inhaled. Asbestos is a common insulation material on heating pipes, boilers, and furnaces. It may also be present in certain types of floor and ceiling materials, shingles, plaster products, cements and other building materials. The buyer may have the property professionally inspected for the presence of asbestos and if repair or removal of asbestos is desired, proper safety guidelines must be observed.

D. Lead Paint Disclosure Clause (Question #30)

Whenever a child under six years of age resides in any residential premises in which any paint, plaster or other accessible material contains dangerous levels of lead, the owner is required by law, to remove all said paint, plaster or cover with appropriate materials so as to make it inaccessible to a child under six years of age. Consumption of lead is poisonous and may cause serious personal injury. Whenever such residential premises containing dangerous levels of lead undergoes a change of ownership, as a result, a child under six years of age will become a resident, the new owner is required by law to remove said paint, plaster cover or encapsulate it with appropriate materials so as to make it inaccessible to such child. Buyer should receive information pamphlet from Department of Public Health.

E. Radon Disclosure Clause (Question #31)

Radon is an odorless, colorless, tasteless gas produced naturally in the ground by the normal decay of uranium and radium. Radon can lead to the development of radioactive particles which can be inhaled. Studies indicate the result of extended exposure to high levels of radon may increase the risk of developing lung cancer.

F. Chlordane Disclosure Clause (Question #32)

Pesticide products containing chlordane were banned in Massachusetts on June 11, 1985, following a determination by the Department of Food and Agriculture that the use of chlordane may cause unreasonable adverse effects on the environment including risk of cancer. Although existing data does not conclusively prove that significant health effects have occurred as a direct result of chlordane use, the long-term potential health risks are such that is prudent public health policy, according to the Department, to eliminate the further introduction of chlordane into the environment.

G. Mold Information

Molds are naturally occurring organisms that exist both indoors and outdoors. More than 1000 different kinds of mold have been found in homes in the United States. Molds are fungi that reproduce by making spores. Spores are small and lightweight and able to travel through the air. Molds need moisture and food to grow and their growth is stimulated by warm, damp and humid conditions. Molds can use materials such as wood, paper, drywall and carpet as food sources. Reducing dampness indoors is often key to reducing the growth of mold. Depending on the level of mold, allergies, respiratory problems and other health consequences can be triggered in sensitive individuals. However, exposure to mold does not always result in health problems. As of July of 2002, U.S. governmental agencies reported that a determination had not been made what quantity of mold was acceptable in an indoor environment. For more information on mold, contact an engineer or other qualified mold inspector. Information may also be found at the web site for the U. S. Environmental Protection Agency, www.epa.gov.

H. Fair Housing Notice

It is unlawful to discriminate on the basis of race, color, religious creed, national origin, age, gender, sex, ancestry, marital status, veteran status, sexual orientation, disability, presence of a child, receipt of public assistance or other protected classification in the sale or rental of covered housing.

SELLER'S INITIALS CMF JWS BUYER'S INITIALS _____

