Docusign Envelope ID: 3E5D2282-76D8-8977-8041-C85D1DBEBBB3

PROPERTY LOCATED AT: **26 Fountain St, Gardiner, ME 04345**

# 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: [X] Public [ ] Private [ ] Seasonal **N/A** [ ] Unknown
[ ] Drilled [ ] Dug [ ] Other **N/A**

MALFUNCTIONS: Are you aware of or have you experienced any malfunctions with the (public/private/other) water system?

Pump (if any): ..... [ ] N/A [ ] Yes [X] No [ ] Unknown
Quantity: ..... [ ] Yes [X] No [ ] Unknown
Quality: ..... [ ] Yes [X] 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 [X] No

~~If Yes, Date of most recent test: _____ 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: _____~~
~~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: **Public Water**

Source of Section I information: **Seller**



Coldwell Banker, 826 Boylston St Chestnut Hill MA 02467 Phone: (207)215-9466 Fax: 26 Fountain St_Lynn
Anthony Loiko
Produced with Lone Wolf Transact 717 N Harwood St, Suite 2200, Dallas, TX 75201 www.lwolf.com

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## SECTION II - WASTE WATER DISPOSAL

TYPE OF SYSTEM: [X] Public [ ] Private [ ] Quasi-Public **N/A** [ ] Unknown

IF PUBLIC OR QUASI-PUBLIC (Strike Section if Not Applicable):

Have you had the sewer line inspected? ..... [ ] Yes [X] No

If Yes, what results: **N/A**

Have you experienced any problems such as line or other malfunctions? ..... [ ] Yes [X] No

What steps were taken to remedy the problem? **N/A**

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: _____ 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: **Public System**

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 | **Boiler HWBB** | **Pellet Stove** | **Heat pumps** | **Propane Heater** |
| Age of system(s) or source(s) | **2003** | **2011** | **2015** | **2022** |
| TYPE(S) of Fuel | **Oil** | **Pellets** | **Electric** | **Propane** |
| Annual consumption per system or source (i.e., gallons, kilowatt hours, cords) | **100 gals** | **2 tons** | **unk** | **100 gals** |
| Name of company that services system(s) or source(s) | **McLaughlin Heating** | **Owner** | **Energy Solutions of Maine** | **Fabian installed** |
| Date of most recent service call | **2025** | **Spring 2026** | **2026** | |
| Malfunctions per system(s) or source(s) within past 2 years | **none** | **none** | **none** | **none** |
| Other pertinent information | **used for garage, can use for owner space too** | **used for owner living space** | **two units, 4 heads** | **For apartment** |

Are there fuel supply lines? ..... [X] Yes [ ] No [ ] Unknown

Are any buried? ..... [ ] Yes [X] No [ ] Unknown

Are all sleeved? ..... [X] Yes [ ] No [ ] Unknown

Chimney(s): ..... [ ] Yes [X] 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): ..... [X] Yes [ ] No [ ] Unknown

Has vent(s) been inspected? ..... [X] Yes [ ] No [ ] Unknown

If Yes, date: **2025**

Comments: **None**

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 [X] 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: **None Known**

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: **N/A** | ☐ Yes | ☒ No | ☐ Unknown |

Comments: **Built in 2003**

Source of information: **Seller**

**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: **Not tested**

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: **Public Water**

Source of information: **Seller**

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

Comments: **None**

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: **None Known**

Do you know of any records/reports pertaining to such lead-based paint/lead-based paint hazards: ☐ Yes ☒ No

If Yes, describe: **N/A**

Are you aware of any cracking, peeling or flaking paint? ..... ☐ Yes ☒ No

Comments: **None**

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: **None Known**

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: **ROW, See Deed & Survey**

Source of information: **Seller, Deed, Survey**

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: **N/A**

Have any flood events affected a structure on the property? ……... ☐ Yes ☒ No ☐ Unknown

If Yes, explain: **N/A**

Has any flood-related damage to a structure occurred on the property? ……. ☐ Yes ☒ No ☐ Unknown

If Yes, explain: **N/A**

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: **N/A**

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: **N/A**

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: **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?..... [X] Yes [ ] No [ ] Unknown

If Yes, explain: **Homestead Exemption**

Is a Forest Management and Harvest Plan available?..... [ ] Yes [X] 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 [X] No [ ] Unknown

If Yes, explain: **N/A**

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: **Fabian**

Year Principal Structure Built: **2003** What year did Seller acquire property? **2002**

Roof: Year Shingles/Other Installed: **2023**

Water, moisture or leakage: **none known**

Comments: **none**

Foundation/Basement:

Is there a Sump Pump? ..... [ ] Yes [X] No [ ] Unknown

Water, moisture or leakage since you owned the property: ..... [ ] Yes [X] No [ ] Unknown

Prior water, moisture or leakage? ..... [ ] Yes [X] No [ ] Unknown

Comments: **Slab with frost wall**

Mold: Has the property ever been tested for mold? ..... [ ] Yes [X] No [ ] Unknown

If Yes, are test results available? ..... [ ] Yes [X] No

Comments: **Not tested**

Electrical: [ ] Fuses [X] Circuit Breaker [ ] Other: **N/A** [ ] Unknown

Comments: **None**

Has all or a portion of the property been surveyed? ..... [X] Yes [ ] No [ ] Unknown

If Yes, is the survey available? ..... [X] Yes [ ] No [ ] Unknown

Manufactured Housing - Is the residence a:

Mobile Home ..... [ ] Yes [X] No [ ] Unknown

Modular ..... [ ] Yes [X] No [ ] Unknown

Known defects or hazardous materials caused by insect or animal infestation inside or on the residential structure ..... [ ] Yes [X] No [ ] Unknown

Comments: **None Known**

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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: **None Known**

Comments: **None**

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:
Brock M. Thomas
31177DBCE8CB458...

9/28/2026

SELLER DATE SELLER DATE

**Brock M. Thomas**

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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