PROPERTY LOCATED AT: **45 MacKenzie Drive, Newport, , ME 04953**

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 _____ [ ] 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 [X] Unknown
Quantity: ..... [ ] Yes [ ] No [X] Unknown
Quality: ..... [ ] Yes [ ] No [X] 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: _____

Source of Section I information: _____

Trundy & Company Real Estate, P.O. Box 123 Newport ME 4953 Phone: **(207)368-5555** Fax:
Sherri-Lynn Hanson
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SECTION II - WASTE WATER DISPOSAL

TYPE OF SYSTEM: [X] Public [ ] Private [ ] Quasi-Public _____ [ ] 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: _____

Have you experienced any problems such as line or other malfunctions? ..... [ ] Yes [X] 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: _____

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: _____

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SECTION III - HEATING SYSTEM(S)/HEATING SOURCE(S)

Heating System(s) or Source(s)	SYSTEM 1	SYSTEM 2	SYSTEM 3	SYSTEM 4
TYPE(S) of System	**ELECTRIC PUMP**			
Age of system(s) or source(s)	**1 yr**			
TYPE(S) of Fuel	**elect**			
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)	**unknown**			
Name of company that services system(s) or source(s)	**ae Robinson**			
Date of most recent service call				
Malfunctions per system(s) or source(s) within past 2 years				
Other pertinent information				

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: _____

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: _____

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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: _____

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: _____

D. RADON/WATER - Current or previously existing:

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

If Yes: Date: _____ By: _____

Results: _____

If applicable, what remedial steps were taken? _____

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

Are test results available? ..... ☐ Yes ☐ No

Results/Comments: _____

Source of information: _____

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: _____

Source of information: _____

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: _____

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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: _____

Source of Section VI information: _____

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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

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: _____

From Whom: _____

Year Principal Structure Built: **1989** What year did Seller acquire property? **2024**

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

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: _____

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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: _____

_____

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	SELLER	DATE
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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