PROPERTY LOCATED AT: **156 N. Main St, Brewer, ME 04412**

# 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 | [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 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: **Backflow testing done in Fall 2025- system passed.**

Source of Section I information: **Personal Rep and public records**



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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: **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: **Prior disclosure indicates that wastewater line was replaced in 2008**

Source of Section II information: **Personal rep, public records & prior disclosure**



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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 | **Hot water - boiler** | **heat pumps** | | |
| Age of system(s) or source(s) | **2015 +/-** | | | |
| TYPE(S) of Fuel | **propane** | **electric** | | |
| Annual consumption per system or source (i.e., gallons, kilowatt hours, cords) | **2024- 3,345 gal<br>2025- 3,498 gal** | **Incl in elec usage** | | |
| Name of company that services system(s) or source(s) | **RH Foster/Smith** | **Installed- Dave's World** | | |
| Date of most recent service call | **Jan 2026** | | | |
| Malfunctions per system(s) or source(s) within past 2 years | **main circulator replaced** | | | |
| Other pertinent information | **Propane tanks-<br>RH Foster** | **Heat pumps need service<br>3 are not working properly** | | |

Are there fuel supply lines? ..... [X] Yes [ ] No [ ] Unknown
Are any buried? ..... [ ] Yes [ ] No [X] Unknown
Are all sleeved? ..... [X] Yes [ ] No [ ] Unknown
Chimney(s): ..... [X] Yes [ ] No
If Yes, are they lined: ..... [ ] Yes [ ] No [X] Unknown
Is more than one heat source vented through one flue? ..... [ ] Yes [ ] No [X] Unknown
Had a chimney fire: ..... [ ] Yes [ ] No [X] Unknown
Has chimney(s) been inspected? ..... [ ] Yes [ ] No [X] Unknown
If Yes, date: **n/a**
Date chimney(s) last cleaned: **unknown**
Direct and/or Power Vent(s): ..... [ ] Yes [ ] No [X] Unknown
Has vent(s) been inspected? ..... [ ] Yes [ ] No [X] Unknown
If Yes, date: **n/a**

Comments: **Freeze up of pipe in hallway wall of lower level due to heating temps being set low while vacant in 2026. Pipe repaired, new insulation added in that wall area**

Source of Section III information: **Personal 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 [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: **Personal rep has no knowledge of underground storage tanks on the property**

Source of information: **Personal rep & prior disclosure**

**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: **Personal rep has no knowledge of asbestos on the property. Prior disclosure indicates asbestos removed in 2000.**

Source of information: **Personal rep & prior disclosure**

**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: **none**

Source of information: **Personal 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: **none**

Source of information: **Personal rep**

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

Comments: **Personal rep has no knowledge of methamphetamine on the property**

Source of information: **Personal 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: **n/a**

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: **some area of exterior paint are peeling/flaking. Older/worn pain noted in back staircase from apt**

Source of information: **Personal rep & agent observation**

**G. OTHER HAZARDOUS MATERIALS** - Current or previously existing:

| | | | |
|---|---|---|---|
| TOXIC MATERIAL: ..... | ☐ Yes | ☐ No | ☒ Unknown |
| LAND FILL: ..... | ☐ Yes | ☐ No | ☒ Unknown |
| RADIOACTIVE MATERIAL: ..... | ☐ Yes | ☐ No | ☒ Unknown |

Other: **Personal rep has no knowledge of hazardous materials on the property.**

Source of information: **Personal 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: **none known**

Source of information: **Deed & public records**

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: **Public records**

## 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?

**N/A**

Relevant Panel Number: **23019C2117D** Year: **2023** (Attach a copy)

Comments: **Property is not located in a federally designated flood zone**

Source of Section VI information: **FEMA Flood Map Service Center**



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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: **n/a**

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: **n/a**

Equipment leased or not owned (including but not limited to, propane tank, hot water heater, satellite dish, water filtration system, photovoltaics, wind turbines): Type: **propane tanks**

Year Principal Structure Built: **1900** What year did Seller acquire property? **2025 (estate)**

Roof: Year Shingles/Other Installed: **Rubber membrane 2016; 2011 shingles replaced**

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

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: **none**

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: **none**

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: **none known**

PROPERTY LOCATED AT: **156 N. Main St, Brewer, ME 04412**

KNOWN MATERIAL DEFECTS about Physical Condition and/or value of Property, including those that may have an adverse impact on health/safety: **Plunge pool has a presumed leak of unknown origin - this will**

**Continued... See Addendum Known material defects 1**

Comments: **Property is being sold in "as-is" condition**

Source of Section VII information: **Personal rep, public records & observation**

## SECTION VIII - ADDITIONAL INFORMATION

**Property underwent substantial renovations 2015-2017. Certificate of Occupancy issued in Apr 2017.**

**Estate sale- property is being sold as-is.**

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 |
| **Estate of Phillip D. Sykes** | | | |
| 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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# ADDENDUM

PROPERTY: **156 N. Main St, Brewer, ME 04412**

**1) Known material defects**
**not be repaired by seller. Areas of rot and deferred maintenance on exterior steps, ramp, porch, deck & shed.**

Date: _____ Date: _____

_____ _____
Signature Signature

Date: _____ Date: _____

_____ _____
Signature Signature

**Addendum**