PROPERTY DISCLOSURE - RESIDENTIAL ONLY

New Hampshire Association of REALTORS® Standard Form

REALTOR® EQUAL HOUSING OPPORTUNITY

TO BE COMPLETED BY SELLER

The following answers and explanations are true and complete to the best of SELLER'S knowledge. This statement has been prepared to assist prospective BUYERS in evaluating SELLER'S property. This disclosure is not a warranty of any kind by the SELLER, or any real estate FIRM representing the SELLER, and is not a substitute for any inspection by the BUYER. SELLERS authorize FIRM in this transaction to disclose the information in this statement to other real estate agents and to prospective buyers of this property.

NOTICE TO SELLER(S): COMPLETE ALL INFORMATION AND STATE NOT APPLICABLE OR UNKNOWN AS APPROPRIATE. IF ANY OF THE INFORMATION IN THIS PROPERTY DISCLOSURE FORM CHANGES FROM THE DATE OF COMPLETION, YOU ARE TO NOTIFY THE LISTING FIRM PROMPTLY IN WRITING.

1. **SELLER:** James M. Speltz Revocable Trust
2. **PROPERTY LOCATION:** 36 Little Bay Drive, Dover, NH 03820
3. **CONDOMINIUM, CO-OP, PUD DISCLOSURE RIDER OR MULTIFAMILY DISCLOSURE RIDER ATTACHED?** ☑ Yes ☐ No
4. **SELLER:** ☒ has ☐ has not occupied the property for 1.3 years.
5. **WATER SUPPLY**

   Please answer all questions regardless of type of water supply.

   a. TYPE OF SYSTEM: ☒ Public ☐ Private ☐ Seasonal ☐ Unknown
   ☐ Drilled ☐ Dug ☐ Other

   b. INSTALLATION: Location: N/A
   Installed By: Orig. Builder Date of Installation: 2023
   What is the source of your information? Prior closing

   c. USE: Number of persons currently using the system: 2
   Does system supply water for more than one household? ☒ Yes ☐ No

   d. MALFUNCTIONS: Are you aware of or have you experienced any malfunctions with the (public/private/other) water systems?
   Pump: ☐ Yes ☒ No ☐ N/A Quantity: ☐ Yes ☒ No
   Quality: ☐ Yes ☒ No ☐ Unknown
   If YES to any question, please explain in Comments below or with attachment.

   e. WATER TEST: Have you had the water tested? ☐ Yes ☒ No Date of most recent test
   IF YES to any question, please explain in Comments below or with attachment.
   Are you aware of any test results reported as unsatisfactory or satisfactory with notations? ☐ Yes ☐ No
   IF YES, are test results available? ☐ Yes ☐ No
   What steps were taken to remedy the problem?
   COMMENTS:

6. **SEWAGE DISPOSAL SYSTEM**

   a. TYPE OF SYSTEM: Public: ☒ Yes ☐ No Community/Shared: ☐ Yes ☐ No
   Private: ☐ Yes ☐ No ☐ Unknown
   Septic Design Available: ☐ Yes ☐ No

   b. IF PUBLIC OR COMMUNITY/SHARED
   Have you experienced any problems such as line or other malfunctions? ☐ Yes ☒ No
   What steps were taken to remedy the problem?

   c. IF PRIVATE:
   TANK: ☐ Septic Tank ☐ Holding Tank ☐ Cesspool ☐ Unknown
   Tank Size _____ Gal. ☐ Unknown ☐ Other
   Tank Type ☐ Concrete ☐ Metal ☐ Unknown ☐ Other
   Location: ☐ Location Unknown Date of Installation:
   Date of Last Servicing: Name of Company Servicing Tank:
   Have you experienced any malfunctions? ☐ Yes ☐ No
   Comments:

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d. LEACH FIELD: ☐ Yes ☐ No ☐ Other _____
IF YES, Location: _____ Size: _____ ☐ Unknown
Date of installation of leach field: _____ Installed By: _____
Have you experienced any malfunctions? ☐ Yes ☐ No
Comments: _____

e. IS SYSTEM LOCATED ON "DEVELOPED WATERFRONT" as described in RSA 485-A? ☐ Yes ☐ No ☐ Unknown
IF YES, has a septic system evaluation been done within 180 days? ☐ Yes ☐ No ☐ Unknown
Date of Evaluation: _____
Comments: _____
FOR ADDITIONAL INFORMATION THE BUYER IS ENCOURAGED TO CONTACT THE NH DEPARTMENT OF ENVIRONMENTAL SERVICES SUBSURFACE SYSTEMS BUREAU, 603-271-3501

7. INSULATION

LOCATION	Yes	No	Unknown	If YES, Type	Amount	Unknown
Attic or Cap	☒	☐	☐	Foam, air seal + R49 blown		☐
~~Crawl Space~~	☐	☐	☐			☐
Exterior Walls	☐	☐	☐	R15, CCSPF 2" + R11 fiberglass		☐
Floors	☐	☐	☐	Fiberglass		☐
_____	☐	☐	☐			☐

8. HAZARDOUS MATERIAL

a. UNDERGROUND STORAGE TANKS - **Current or previously existing**:
Are you aware of any past or present underground storage tanks on your property? ☐ Yes ☒ No ☐ Unknown
IF YES: Are tanks currently in use? ☐ Yes ☐ No
IF NO: How long have tank(s) been out of service? N/A
What materials are, or were, stored in the tank(s)? _____
Age of tank(s): _____ Size of tank(s): _____
Location: _____
Are you aware of any past or present problems such as leakage, etc? ☐ Yes ☐ No
Comments: _____
If tanks are no longer in use, have the tanks been removed? ☐ Yes ☐ No ☐ Unknown
Comments: _____

b. ASBESTOS - **Current or previously existing:**
As insulation on the heating system pipes or ducts? ☐ 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
If YES, Source of information: _____
Comments: _____

c. RADON/AIR - **Current or previously existing:**
Has the property been tested? ☐ Yes ☒ No ☐ Unknown
If YES: Date: _____ By: _____
Results: _____ If app _____
Has the property been tested since remedial steps? ☐ Yes ☐ No
Are test results available? ☐ Yes ☐ No
Comments: _____

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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
Are test results available? ☐ Yes ☐ No Comments: _____

e. LEAD-BASED PAINT - **Current or previously existing:**
Are you aware of lead-based paint on this property? ☐ Yes ☒ No
If YES: Source of information: _____
Are you aware of any cracking, peeling, or flaking lead-based paint? ☐ Yes ☐ No
Comments: _____

f. Are you aware of any other hazardous materials? ☐ Yes ☒ No
If YES: Source of information: _____
Comments: _____

9. GENERAL INFORMATION

a. Is this property subject to liens, encroachments, easements, rights-of-way, leases, restrictive covenants, attachments, life estates, or right of first refusal?
☒ Yes ☐ No ☐ Unknown If YES, Explain: See deed for easement / ROW details
What is your source of information? _____

b. Is this property subject to special assessments, betterment fees, association fees, or any other transferable fees?
☒ Yes ☐ No ☐ Unknown If YES, Explain: Monthly HOA & annual marina
What is your source of information? Association

c. Are you aware of any onsite landfills or any other factors, such as soil, flooding, drainage, etc?
☐ Yes ☒ No If YES, Explain: _____

d. Are you aware of any problems with other buildings on the property? ☐ Yes ☒ No
If YES, Explain: _____

e. Are you receiving a tax exemption or reduction for this property for any reason including but not limited to current use, land conservation, etc.? ☐ YES ☒ NO ☐ UNKNOWN If YES, Explain: _____

f. Is this property located in a Federally Designated Flood Hazard Zone? ☐ Yes ☒ No ☐ Unknown
Comments: _____

g. Has the property been surveyed? ☒ Yes ☐ No ☐ Unknown If YES, By: See public offering stmt
If YES, is survey available? ☒ Yes ☐ No ☐ Unknown

h. How is the property zoned? Little Bay Waterfront

i. Heating System Age: 2 yrs Type: Forced Air Fuel: Nat Gas Tank Location: 1st floor
Owner of Tank: seller
Annual Fuel Consumption: UNK Price: est $150/mo Gallons: UNK
Date system was last serviced and by whom? Installation — filters changed July 2025
Secondary Heat Systems: Heat & Flo linear fireplace, nat gas
Comments: _____

j. Roof Age: 2 yrs Type of Roof Covering: Asphalt Shingle
Moisture or leakage: No
Comments: _____

SELLER(S) INITIALS MMS / _____ BUYER(S) INITIALS _____ / _____

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k. Foundation/Basement: ☐ Full ☐ Partial ☒ Other: slab on grade ☐ Type: _____
Moisture or leakage _____
Comments: _____

l. Chimney(s) How Many? 0 Lined? _____ Last Cleaned: _____ Problems? _____
Comments: _____

m. Plumbing Type: Mix of PVC & PEX Age: 2yr
Comments: _____

n. Domestic Hot Water: Age: 2yr Type: Nat Gas Gallons: 50

o. Electrical System: # of Amps 150 ☐ Circuit Breakers ☐ Fuses
Comments: EV charging avail in garage
Solar Panels: ☐ Leased ☐ Owned If leased, explain terms of agreement: _____
Comments: _____

p. Modifications: Are you aware of any modifications or repairs made without the necessary permits? ☐ Yes ☒ No
If Yes, please explain: _____

q. Pest Infestation: Are you aware of any past or present pest infestations? ☐ Yes ☒ No Type: _____
Comments: _____

r. Methamphetamine Production: Do you have knowledge of methamphetamine production ever occurring on the property?
(Per RSA 477:4-g) ☐ Yes ☒ No If YES, please explain: _____

s. Air Conditioning: Type: Forced Air Age: 2yr Date Last Serviced and by whom: Installation + July '25 filter
Comments: _____

t. Pool: Age: _____ Heated: ☐ Yes ☒ No Type: _____ Last Date of Service: _____
By Whom: _____

u. Generator: Portable: ☐ Yes ☒ No Whole House: ☒ Yes ☐ No Kw/Size: UNK Last Date of Service: Apr '25
If Portable: ☐ Included ☐ Negotiable
Comments: Generac & circuit auto transfer

v. Internet: Type Currently Used at Property: Xfinity

w. Other (e.g. Alarm System, Irrigation System, etc.) Fully integrated alarm system, door cameras, irrigation
Comments: _____

NOTICE TO PURCHASER(S): PRIOR TO SETTLEMENT YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM NECESSARY WITH RESPECT TO ADJACENT PARCELS IN ACCORDANCE WITH THE TERMS AND CONDITIONS AS MAY BE CONTAINED IN PURCHASE AND SALES AGREEMENT AND DEPOSIT RECEIPT. YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM NECESSARY WITH RESPECT TO INFORMATION ON ANY SEXUAL OFFENDERS REGISTERED UNDER NH RSA CHAPTER 651-B. SUCH INFORMATION MAY BE OBTAINED BY CONTACTING THE LOCAL POLICE DEPARTMENT.

SELLER(S) INITIALS JM / _____ BUYER(S) INITIALS _____ / _____

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10. ADDITIONAL INFORMATION

a. ATTACHMENT EXPLAINING CURRENT PROBLEMS, PAST REPAIRS, OR ADDITIONAL INFORMATION?
☐ Yes ☒ No

b. ADDITIONAL COMMENTS:

Basically brand new!

ACKNOWLEDGEMENTS:

SELLER ACKNOWLEDGES THAT HE/SHE HAS PROVIDED THE ABOVE INFORMATION AND THAT SUCH INFORMATION IS ACCURATE, TRUE AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE. SELLER AUTHORIZES THE LISTING BROKER TO DISCLOSE THE INFORMATION CONTAINED HEREIN TO OTHER BROKERS AND PROSPECTIVE PURCHASERS.

SELLER(S) MAY BE RESPONSIBLE AND LIABLE FOR ANY FAILURE TO PROVIDE *KNOWN* INFORMATION TO BUYER(S).

[signature]	9-3-25		
SELLER	DATE	SELLER	DATE

BUYER ACKNOWLEDGES RECEIPT OF THIS PROPERTY DISCLOSURE RIDER AND HEREBY UNDERSTANDS THE PRECEDING INFORMATION WAS PROVIDED BY SELLER AND IS NOT GUARANTEED BY BROKER/AGENT. THIS DISCLOSURE STATEMENT IS NOT A REPRESENTATION, WARRANTY OR GUARANTY AS TO THE CONDITION OF THE PROPERTY BY EITHER SELLER OR BROKER. BUYER IS ENCOURAGED TO UNDERTAKE HIS/HER OWN INSPECTIONS AND INVESTIGATIONS VIA LEGAL COUNSEL, HOME, STRUCTURAL OR OTHER PROFESSIONAL AND QUALIFIED ADVISORS AND TO INDEPENDENTLY VERIFY INFORMATION DIRECTLY WITH THE TOWN OR MUNICIPALITY.

BUYER	DATE	BUYER	DATE

SELLER(S) INITIALS [initials] / [ ]

BUYER(S) INITIALS [ ] / [ ]

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PROPERTY DISCLOSURE RIDER
CONDOMINIUM, CO-OP, PUD AND OTHER HOMEOWNER ORGANIZATIONS
(To be used in conjunction with Property Disclosure - Residential)
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In compliance with the requirements of RSA 477:4-f, the following information is provided to BUYER relative to the purchase of a condominium unit.

RIGHT TO INFORMATION: In accordance with RSA 356-B:58, a party interested in purchasing a condominium unit has the right to obtain from the Condominium Unit Owner's Association the following information: a copy of the condominium declaration, by-laws, any formal rules of the association, a statement of monthly and annual fees and any special assessments made within the last 3 years.

1. Seller and Property Address: James M. Speltz Revocable Trust
36 Little Bay Drive, Dover, NH 03820
2. Association Name (if applicable): Breakwater at Little Bay Condominium Assc, Inc.
3. Property Manager/Agent: Arthur Thomas Properties Phone: 603-413-6175
4. GENERAL AND LEGAL
   a. Are there any Association or Corporation approvals required for transfer of Ownership? ☐ Yes ☒ No ☐ Unknown
   b. Is there a time share operation existing at Property? ☐ Yes ☒ No ☐ Unknown
   c. Is there a vacation rental operation or other organized rental program at Property? ☐ Yes ☒ No ☐ Unknown
   d. Are you aware of any rental, use or age restrictions? ☐ Yes ☐ No ☒ Unknown
   e. Number of allocated parking spaces available for this unit: 2 car garage + 2 spots in front + overflow in lots
   f. Are you aware of any pending or existing litigation? ☐ Yes ☒ No If Yes, please explain:
   g. Are the minutes of the Condominium Association annual meeting available? ☒ Yes ☐ No ☐ Unknown
   h. Are there any pet policies? Restrictions: ☒ Yes ☐ No Dogs/Cats Allowed: ☒ Yes ☐ No
5. MASTER INSURANCE POLICY
   a. Name of Company: Avery Insurance
   b. Name of Agent: Deb Rourke Phone: 603-731-2162
6. FINANCIAL
   a. Monthly maintenance fee(s): $ 415.00
   b. What do the monthly fees include?
      ☐ Air Conditioning ☐ Cable TV Signal ☐ Electricity ☐ Garage/Parking ☐ Gas ☐ Other:
      ☐ Hot Water ☒ Landscaping ☐ Lot Rent ☐ Real Property Tax ☒ Recreation/Community Association Dues
      ☐ Road Maintenance ☐ Sewer ☒ Snow Removal ☒ Trash Removal ☐ Water
   c. Are there any additional fees? If so, please specify: $1500 annual marina dues
   d. Are you aware of any special assessments or loans in effect at this time? ☐ Yes ☒ No
      If Yes, explain:

Additional Comments:

7. **ACKNOWLEDGEMENTS:**
SELLER ACKNOWLEDGES THAT HE/SHE HAS PROVIDED THE ABOVE INFORMATION AND THAT SUCH INFORMATION IS ACCURATE, TRUE AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE. SELLER AUTHORIZES THE LISTING BROKER TO DISCLOSE THE INFORMATION CONTAINED HEREIN TO OTHER BROKERS AND PROSPECTIVE PURCHASERS.

J. Speltz 9-3-25
SELLER DATE SELLER DATE

BUYER ACKNOWLEDGES RECEIPT OF THIS PROPERTY DISCLOSURE RIDER AND HEREBY UNDERSTANDS THE PRECEDING INFORMATION WAS PROVIDED BY SELLER AND IS NOT GUARANTEED BY BROKER/AGENT. THIS DISCLOSURE STATEMENT IS NOT A REPRESENTATION, WARRANTY OR GUARANTY AS TO THE CONDITION OF THE PROPERTY BY EITHER SELLER OR BROKER. BUYER IS ENCOURAGED TO UNDERTAKE HIS/HER OWN INSPECTIONS AND INVESTIGATIONS VIA LEGAL COUNSEL, HOME, STRUCTURAL AND OTHER ADVISORS.

BUYER DATE BUYER DATE

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