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SELLER'S PROPERTY CONDITION DISCLOSURE STATEMENT

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88 FAIRMOUNT AVE CHATHAM, NJ 07928 Property Address: EBBEN, GREG M/BREEANNA W The purpose of this Disclosure Statement is to disclose, to the best of Seller's knowledge, the condition of the Property, as of the date set forth below. The Seller is aware that he or she is under an obligation to disclose any known material defects in the Property even if not addressed in this printed form. Seller alone is the source of all information contained in this form. All prospective buyers of the Property are cautioned to carefully inspect the Property and to carefully inspect the surrounding area for any off-site conditions that may adversely affect the Property. Moreover, this Disclosure Statement is not intended to be a substitute for prospective buyer's hiring of qualified experts to inspect the Property. If your property consists of multiple units, systems and/or features, please provide complete answers on all such units, systems and/or features even if the question is phrased in the singular, such as if a duplex has multiple furnaces, water heaters and fireplaces. **OCCUPANCY** Yes No Unknown 1870 1. Age of House, if known _____ []2. Does the Seller currently occupy this property? X If not, how long has it been since Seller occupied the property? 3. What year did the seller buy the property? ______ 2012 []3a. Do you have in your possession the original or a copy of the deed evidencing your ownership of the X property? If "yes," please attach a copy of it to this form. ROOF Yes No Unknown 4. Age of roof _____19 years 5. Has roof been replaced or repaired since seller bought the property? X 6. Are you aware of any roof leaks? M 7. Explain any "yes" answers that you give in this section: ATTIC, BASEMENTS AND CRAWL SPACES (Complete only if applicable) No Unknown Yes X 8. Does the property have one or more sump pumps? X 8a. Are there any problems with the operation of any sump pump? 9. Are you aware of any water leakage, accumulation or dampness within the basement or crawl spaces X or any other areas within any of the structures on the property? 9a. Are you aware of the presence of any mold or similar natural substance within the basement or crawl []M spaces or any other areas within any of the structures on the property? []X 10. Are you aware of any repairs or other attempts to control any water or dampness problem in the basement or crawl space? If "yes," describe the location, nature and date of the repairs:

11. Are you aware of any cracks or bulges in the basement floor or foundation walls? If "yes," specify



location.

31. If your drinking water source is not public, have you performed any tests on the water?

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If so, when?

Attach a copy of or describe the results.

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[]	M		32. Does the wastewater from any clothes washer, dishwasher, or other appliance discharge to any
			location other than the sewer, septic, or other system that services the rest of the property?
		[]	33. When was well installed?
		[]	Location of well?
X	[]		34. Do you have a softener filter, or other water purification system? \square Leased \square Owned
			35. What is the type of sewage system?
			☐ Public Sewer ☐ Private Sewer ☐ Septic System ☐ Cesspool ☐ Other (explain):
[]	[]		36. If you answered "septic system," have you ever had the system inspected to confirm that it is a true
			septic system and not a cesspool?
		[]	37. If Septic System, when was it installed?
			Location?
		[]	38. When was the Septic System or Cesspool last cleaned and/or serviced?
[]	X	[]	39. Are you aware of any abandoned Septic Systems or Cesspools on your property?
[]	[]	[]	39a. If "yes," is the closure in accordance with the municipality's ordinance? (explain):
[]	[X]		40. Are you aware of any leaks, backups, or other problems relating to any of the plumbing systems and
			fixtures (including pipes, sinks, tubs and showers), or of any other water or sewage related problems.
			If "yes," explain:
[]	X		41. Are you aware of any shut off, disconnected, or abandoned wells, underground water or sewag
	0.1		tanks, or dry wells on the property?
[]	X	[]	42. Is either the private water or sewage system shared? If "yes," explain:
L J	23		
			43. Water Heater: Electric Fuel Oil Gas
		[]	Age of Water Heater Oct. 2020
[]	K	LJ	43a. Are you aware of any problems with the water heater?
ГЛ	INZ		44. Explain any "yes" answers that you give in this section:
			111 21 paint any year amonoto amonoto and give in amonotoni
HEATIN Yes	N G ANI No	O AIR CONI Unknown	DITIONING 45. Type of Air Conditioning:
			DITIONING 45. Type of Air Conditioning: □ Central one zone □ Wall/Window Unit □ None
			45. Type of Air Conditioning: ☐ Central one zone ☐ Central multiple zone ☐ Wall/Window Unit ☐ None 46. List any areas of the house that are not air conditioned:
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Yes [] [] [] WOODH Yes	No No No No	Unknown [] [] [] NG STOVE	45. Type of Air Conditioning: Central one zone Central multiple zone Wall/Window Unit None None
Yes [] [] [] WOODI Yes X	No No No Statement No No []	Unknown [] [] [] NG STOVE	45. Type of Air Conditioning: □ Central one zone ☑ Central multiple zone □ Wall/Window Unit □ None 46. List any areas of the house that are not air conditioned: 2nd floor bathroom 47. What is the age of Air Conditioning System? Old unit: ? / New unit: 7 years 48. Type of heat: ☑ Electric □ Fuel Oil ☑ Natural Gas □ Propane □ Unheated □ Other 49. What is the type of heating system? (for example, forced air, hot water or base board, radiator, stean heat) Forced air and steam radiators 50. If it is a centralized heating system, is it one zone or multiple zones? 51. Age of furnace Unknown Date of last service: 2014 52. List any areas of the house that are not heated: 2nd floor bathroom 53. Are you aware of any tanks on the property, either above or underground, used to store fuel or othe substances? 54. If tank is not in use, do you have a closure certificate? 55. Are you aware of any problems with any items in this section? If "yes," explain: OR FIREPLACE (gas) 56. Do you have □ wood burning stove? ☑ fireplace? □ insert? □ other
Yes [] [] [] WOODI Yes X	No No No No IN BURNII No [] []	Unknown [] X [] NG STOVE Unknown	45. Type of Air Conditioning: Central one zone Central multiple zone Wall/Window Unit None 46. List any areas of the house that are not air conditioned: 2nd floor bathroom 47. What is the age of Air Conditioning System? Old unit: ? / New unit: 7 years 48. Type of heat: Electric Fuel Oil Natural Gas Propane Unheated Other 49. What is the type of heating system? (for example, forced air, hot water or base board, radiator, stean heat) Forced air and steam radiators 50. If it is a centralized heating system, is it one zone or multiple zones? 51. Age of furnace Unknown Date of last service: 2014 52. List any areas of the house that are not heated: 2nd floor bathroom 53. Are you aware of any tanks on the property, either above or underground, used to store fuel or othe substances? 54. If tank is not in use, do you have a closure certificate? 55. Are you aware of any problems with any items in this section? If "yes," explain: OR FIREPLACE (gas) 56. Do you have wood burning stove? If fireplace? insert? other 56a. Is it presently usable?
Yes [] [] WOODI Yes X X []	No No I BURNII No [] [] []	Unknown [] NG STOVE Unknown []	45. Type of Air Conditioning: Central one zone Central multiple zone Wall/Window Unit None 46. List any areas of the house that are not air conditioned: 2nd floor bathroom 47. What is the age of Air Conditioning System? Old unit: ? / New unit: 7 years 48. Type of heat: Lectric Fuel Oil Natural Gas Propane Unheated Other 49. What is the type of heating system? (for example, forced air, hot water or base board, radiator, stear heat) Forced air and steam radiators 50. If it is a centralized heating system, is it one zone or multiple zones? 51. Age of furnace Unknown Date of last service: 2014 52. List any areas of the house that are not heated: 2nd floor bathroom 53. Are you aware of any tanks on the property, either above or underground, used to store fuel or othe substances? 54. If tank is not in use, do you have a closure certificate? 55. Are you aware of any problems with any items in this section? If "yes," explain: OR FIREPLACE (gas) 56. Do you have wood burning stove? If fireplace? other 56a. Is it presently usable? 57. If you have a fireplace, when was the flue last cleaned? 2012
Yes [] [] [] Yes	No No	Unknown [] NG STOVE Unknown	45. Type of Air Conditioning: Central one zone Central multiple zone Wall/Window Unit None
Yes [] [] WOODI Yes X X []	No No I BURNII No [] [] []	Unknown [] NG STOVE Unknown []	45. Type of Air Conditioning: Central one zone Central multiple zone Wall/Window Unit None 46. List any areas of the house that are not air conditioned: 2nd floor bathroom 47. What is the age of Air Conditioning System? Old unit: ?/ New unit: 7 years 48. Type of heat: Malectric Fuel Oil Male Natural Gas Propane Unheated Other 49. What is the type of heating system? (for example, forced air, hot water or base board, radiator, stean heat) Forced air and steam radiators 50. If it is a centralized heating system, is it one zone or multiple zones? 51. Age of furnace Unknown Date of last service: 2014 52. List any areas of the house that are not heated: 2nd floor bathroom 53. Are you aware of any tanks on the property, either above or underground, used to store fuel or othe substances? 54. If tank is not in use, do you have a closure certificate? 55. Are you aware of any problems with any items in this section? If "yes," explain: OR FIREPLACE (gas) 56. Do you have wood burning stove? If fireplace? other 56a. Is it presently usable? 57. If you have a fireplace, when was the flue last cleaned? 2012

ELECT	RICAL	SYSTEM	
Yes	No	Unknown	
			60. What type of wiring is in this structure? □ Copper □ Aluminum □ Other ☒ Unknown
			61. What amp service does the property have? □ 60 □ 100 □ 150 ☒ 200 □ Other □ Unknown
×	[]	[]	62. Does it have 240 volt service? Which are present ☑ Circuit Breakers, ☐ Fuses or ☐ Both?
	[]	r 1	63. Are you aware of any additions to the original service?
	LJ		If "yes," were the additions done by a licensed electrician? Name and address:
			2nd circuit panel was installed in storage room during 2013-2014 addition work. Work was done by
			RB Electric Co. P.O. Box 521 Cranford, NJ.
F.3		F.3	
<u> </u>	[]	[]	64. If "yes," were proper building permits and approvals obtained?
[]	×		65. Are you aware of any wall switches, light fixtures or electrical outlets in need of repair?
			66. Explain any "yes" answers you give in this section:
			AND BOUNDARIES)
Yes	No	Unknown	
[]	X		67. Are you aware of any fill or expansive soil on the property?
[]	×		68. Are you aware of any past or present mining operations in the area in which the property is located?
[]	×		69. Is the property located in a flood hazard zone?
[]	×		70. Are you aware of any drainage or flood problems affecting the property?
[]	×	[]	71. Are there any areas on the property which are designated as protected wetlands?
[]		ΓJ	72. Are you aware of any encroachments, utility easements, boundary line disputes, or drainage or
[]	[X]		
F 3			other easements affecting the property?
[]	×		73. Are there any water retention basins on the property or the adjacent properties?
[]	X		74. Are you aware if any part of the property is being claimed by the State of New Jersey as land
			presently or formerly covered by tidal water (Riparian claim or lease grant)? Explain:
[]	X		75. Are you aware of any shared or common areas (for example, driveways, bridges, docks, walls,
			bulkheads, etc.) or maintenance agreements regarding the property?
			76. Explain any "yes" answers to the preceding questions in this section:
×	[]		77. Do you have a survey of the property?
		NTAL HAZA	
		Unknown	
[]	X		78. Have you received any written notification from any public agency or private concern informing you that
			the property is adversely affected, or may be adversely affected, by a condition that exists on a property in
			the vicinity of this property? If "yes," attach a copy of any such notice currently in your possession.
[]	×		78a. Are you aware of any condition that exists on any property in the vicinity which adversely affects,
			or has been identified as possibly adversely affecting, the quality or safety of the air, soil, water, and/
			or physical structures present on this property? If "yes," explain:
Г1	[]		79. Are you aware of any underground storage tanks (UST) or toxic substances now or previously
[]	×		
			present on this property or adjacent property (structure or soil), such as polychlorinated biphenyl
			(PCB), solvents, hydraulic fluid, petro-chemicals, hazardous wastes, pesticides, chromium, thorium,
			lead or other hazardous substances in the soil? If "yes," explain:
[]	[]		80. Are you aware if any underground storage tank has been tested?
			(Attach a copy of each test report or closure certificate if available).
×	[]	[]	81. Are you aware if the property has been tested for the presence of any other toxic substances, such
1 ∕\$	ГЛ	ΓJ	as lead-based paint, urea-formaldehyde foam insulation, asbestos-containing materials, or others?
			· · · · · · · · · · · · · · · · · · ·
			(Attach copy of each test report if available).
			82. If "yes" to any of the above, explain:
			2012 - An underground tank sweep and lead paint inspection.

291 292			nstructions to 26:2D-73), a p		s owner who has had his or her property tested or treated for radon gas may require that information	
293		_		_	ept confidential until the time that the owner and a buyer enter into a contract of sale, at which time	
294					of any subsequent mitigation or treatment shall be provided to the buyer. The law also provides that	
295	owners m	ay waiv			nt of confidentiality. As the owner(s) of this property do you wish to waive this right?	
296	Yes	No	h	<u></u> %	Ma	
297	×	[]		2 <i>!}</i>		
298			(Init	this right	(Initials)	
299 300	If you res	sponded			(Initials) (Initials) (Initials)	
301	,	•	•	7 (110 101	and the second s	
302	Yes	No	Unknown			
303 304	×	[]			are you aware if the property has been tested for radon gas? (Attach a copy of each test report if vailable.)	
305	[]	X			Are you aware if the property has been treated in an effort to mitigate the presence of radon gas?	
306	LJ	Κ.)			Are you aware it the property has been treated in an effort to mitigate the presence of radon gas: (If "yes," attach a copy of any evidence of such mitigation or treatment.)	
307	гэ	ÑΣ			Is radon remediation equipment now present in the property?	
	[]	X	rv1			
308	[]	[]	[X]	101a.	. If "yes," is such equipment in good working order?	
309						
310						
311	_		IANCES AN			
312					ated by the seller shall be controlling as to what appliances or other items, if any, shall be included	
313	in the sal	e of th	e property. W	Vhich of	f the following items are present in the property? (For items that are not present, indicate "not	
314	applicable	e.")				
315						
316	Yes	No	Unknown	N/A		
317	[]	[]		×	102. Electric Garage Door Opener	
318	[]	[]		[]	102a. If "yes," are they reversible? Number of Transmitters	
319	X	[]	[]	[]	103. Smoke Detectors	
320		LJ	LJ	LJ	☑ Battery ☑ Electric ☑ Both How many	
321					☑ Carbon Monoxide Detectors How many	
322	F 3	F 3		F 3	Location	
323	[]	X		[]	104. With regard to the above items, are you aware that any item is not in working order?	
324					104a. If "yes," identify each item that is not in working order or defective and explain the nature	
325					of the problem:	
326						
327						
328	[]	[]		X	105. □ In-ground pool □ Above-ground pool □ Pool Heater □ Spa/Hot Tub	
329	[]	[]	[]	[]	105a. Were proper permits and approvals obtained?	
330	[]	[]		[]	105b. Are you aware of any leaks or other defects with the filter or the walls or other structural or	
331					mechanical components of the pool or spa/hot tub?	
332	[]	[]		[]	105c. If an in-ground pool, are you aware of any water seeping behind the walls of the pool?	
333	[r J		r J	106. Indicate which of the following may be included in the sale? (Indicate Y for yes N for no.)	
334					[Y] Refrigerator	
335					[Y] Range	
336					Microwave Oven	
337					[Y] Dishwasher	
338					Trash Compactor	
339					[Y] Garbage Disposal	
340					[] In-Ground Sprinkler System	
341					[] Central Vacuum System	
342					[Y] Security System	
343					[Y] Washer	
344					[Y] Dryer	
345					[] Intercom	
346					$[\gamma]$ Other (water softener)	
347	[]	X	[]		107. Of those that may be included, is each in working order?	
348		4.3			If "no," identify each item not in working order, explain the nature of the problem:	
349					Water softener is not operational, included in sale in as-is condition.	
350						

Yes	No	Unknown	
		[]	108. When was the Solar Panel System Installed?N/A
[]	[]	[]	109. Are SRECs available from the Solar Panel System?
		[]	109a. If SRECs are available, when will the SRECs expire?
[]	[]	[]	110. Is there any storage capacity on your Property for the Solar Panel System? 111. Are you aware of any defects in or damage to any component of the Solar Panel System? If you explain:
			112. Choose one of the following three options:
[]			112a. The Solar Panel System is financed under a power purchase agreement or other type of financir arrangement which requires me/us to make periodic payments to a Solar Panel System provide in order to acquire ownership of the Solar Panel System ("PPA")? If yes, proceed to <u>Section</u> below.
[]			112b. The Solar Panel System is the subject of a lease agreement. If yes, proceed to <u>Section B</u> below. 112c. I/we own the Solar Panel System outright. If yes, you do not have to answer any further question
			SECTION A - THE SOLAR PANEL SYSTEM IS SUBJECT TO A PPA
		[]	113. What is the current periodic payment amount? \$
		[]	 114. What is the frequency of the periodic payments (check one)? ☐ Monthly ☐ Quarterly 115. What is the expiration date of the PPA, which is when you will become the owner of the Solar Pan System? ("PPA Expiration Date")
[]	[]		116. Is there a balloon payment that will become due on or before the PPA Expiration Date?
		[]	117. If there is a balloon payment, what is the amount? \$
			118. Choose one of the following three options:
[]			118a. Buyer will assume my/our obligations under the PPA at Closing.
[]			118b. I/we will pay off or otherwise obtain cancellation of the PPA as of the Closing so that the Sola Panel System can be included in the sale free and clear.
[]			118c. I/we will remove the Solar Panel System from the Property and pay off or otherwise obta cancellation of the PPA as of the Closing.
			Section B - The Solar Panel System Is Subject to a Lease
		[]	119. What is the current periodic lease payment amount? \$
		[]	120. What is the frequency of the periodic lease payments (check one)? ☐ Monthly ☐ Quarterly 121. What is the expiration date of the lease?
			122. Choose one of the following two options:
[]			122a. Buyer will assume our obligations under the lease at Closing. 122b. I/we will obtain an early termination of the lease and will remove the Solar Panel System prior

11 m 21/1	1/26/2021
CLIER	DATE
115 1	1/26/2021
CLER	DATE
ELLER	DATE
SELLER	DATE
XECUTOR, ADMINISTRATOR, TRUSTE f applicable) The undersigned has never occupicatement.	ed the property and lacks the personal knowledge necessary to complete this Disclosur
	DATE
	DATE
ECEIPT AND ACKNOWLEDGMENT BY	PROSPECTIVE BUYER
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471 472 473 474 475 476	form and that the information contained in the form was provided. The Seller's real estate broker/broker-salesperson/salesperson also diligence to ascertain the accuracy of the information disclosed by to the buyer.	lesperson acknowledges receipt of the Property Disclosure Statement by the Seller. confirms that he or she visually inspected the property with reasonable the seller, prior to providing a copy of the property disclosure statement
477 478	The Prospective Buyer's real estate broker/broker-salesperson/sales form for the purpose of providing it to the Prospective Buyer.	sperson also acknowledges receipt of the Property Disclosure Statement
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480	Sue Ader -42E1237DEAEF457	
481	SELLER'S REAL ESTATE BROKER/	DATE
482	BROKER-SALESPERSON/SALESPERSON:	
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486 487	PROSPECTIVE BUYER'S REAL ESTATE BROKER/ BROKER-SALESPERSON/SALESPERSON:	DATE
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DISCLOSURE OF ITEMS TO BE EXCLUDED

The following items at	88 FAIRMOUNT AVE CHATHAM, NJ U	are to
be excluded from the sale of the	property:	
No exclusions except the wall-r	mounted TV in family room. TV goes, mount	stays.
Acknowledged by:	У Л.	
Seller: Dr H	- II V.	1/26/21
ν	1/26/21 Seller: / (date)	(date)
Buyer:	Buyer:	
	(date)	(date)

488 SPRINGFIELD AVE • SUMMIT, NJ 07901 • OFFICE: 908.273.2991 x101 • CELL: 973-464-9129 • VIP@SUEADLER.COM





MANDELL ENVIRONMENTAL CONSULTING

409 MINNISINK ROAD • SUITE 102 • TOTOWA, NJ 07512 • (973) 785-7574 • FAX (973) 785-0561

LEAD PAINT INSPECTION REPORT

INSPECTION FOR:

Mr. Greg Ebben

1300 Grand Street, Apt. 222

Hoboken, NJ 07030

PERFORMED AT:

88 Fairmount Avenue

Chatham, NJ

INSPECTION DATE:

04/19/12

INSTRUMENT TYPE:

SCITEC

XRF TYPE ANALYZER Serial Number: 1473

ACTION LEVEL:

1.0 mg/cm2

OPERATOR LICENSE:

003783

THIS REPORT IS NON TRANSFERABLE

The measurements contained within are accurate to the best of our knowledge. Mandell Environmental Consulting does not under any circumstances make any representation guarantee or warranty as to the reported or future condition of the property.

SIGNED:

Stuart Casciano

Date:

4-24-12

Mandell Environmental Consulting 409 Minnisink Road, Suite 102

Totowa, NJ 07512

973-785-7574

Lead-based Paint Screening With "XRF" Technology

On April 19, 2012, Mandell Environmental Consulting conducted a limited inspection for the possible presence of Lead-based Paint at 88 Fairmount Avenue, Chatham, NJ. Sampling of selected areas was performed in accordance with HUD Guidelines (1997 Revisions) using "XRF" technology.

Enclosed please find a Detailed Report, which provides a listing of all the readings collected during the inspection, organized by room and structure type. The positive readings are highlighted and include those readings that were at or above the action level 1.0 mg/cm2. We found that **some** of the readings taken were positive. However, some painted surfaces may contain levels of lead below 1.0 mg/cm2 (e.g. inconclusive), which could create dust or lead-contaminated soil hazards if the paint is turned into dust by abrasion, scraping, or sanding.

When reviewing the reports please consider that XRF readings were only collected on representative painted surfaces which were visible to the inspector at the time of the inspection, and accessible from ground level. Readings were not collected in areas where the presence or absence of paint could not be determined, or accessed. The overall condition of the painted surfaces at these locations is also provided. This information should be utilized by you when evaluating interim controls or abatement actions, particularly for friction (windows, floors, stair treads) and impact surfaces (faces of doors). Be aware that friction and impact surfaces are considered to be in unsound condition due to their inherent dust production.

The enclosed information will primarily assist you in identifying the location(s) of lead-based paint on the exterior and interior painted surfaces tested during the inspection. It should not be used to assess whether an individual has been exposed to harmful levels of lead and/or the future for potential for future exposure. However, this information can provide the basis for a more detailed risk assessment, which includes an in depth, hazard evaluation as well as soil, and dust wipe sampling. Since there are several possible sources of lead in addition to paint (i.e. water, glassware, soil, etc.), it is recommended that you consider baseline blood testing for lead, particularly for children from 6 months to 6 years old, and in any individual where exposure to lead is suspected. Contact your physician for further information regarding this.

SUMMARY PAGE

We found that some of the lead paint analysis readings taken at 88 Fairmount Avenue, Chatham, NJ, were positive for lead-based paint.

The paint on most of the components was intact and therefore not an immediate hazard unless the paint is disrupted (especially any type of demolition or renovation). Any component that is in fair or poor condition needs the paint on that surface to be stabilized using the appropriate lead safe techniques.

Areas that may contain lead dust should not be cleaned up using regular vacuum cleaners as this may spread the contamination through the exhaust. A HEPA vacuum is the type of filtered vacuum that is recommended if lead dust may be present.

The paint on some of the exterior components tested positive for lead based paint. The same techniques used for lead paint on the interior **must** also be used on this area if the exterior is going to be repainted.

LOMBARDOENVIRONMENTAL, INC

Environmental Construction, Service Station Maintenance, Tank Installation and Removal

April 23, 2012

Greg Ebben 1300 Grand Street, APT 222 Hoboken, NJ 07030

Dear Mr. Ebben:

As requested, Lombardo Environmental sent a technician on April 19, 2012 to 88 Fairmont Avenue, Chatham, NJ to locate and identify if any undisclosed underground storage tanks were on the property.

The technician arrived at the location and began the search. The technician checked the grounds visually for any vent or oil fill pipes and did not discover any vent pipes or oil fill pipes during his visual inspection.

Using electronic metal & cave detection equipment, the technician swept the grounds searching for any buried metallic objects. The technician swept outward from the building in all directions in accessible areas. The detection equipment utilized is capable of locating a metal object up to a depth of 8 feet. The technician's testing did not reveal the presence of any buried underground storage tanks in searchable areas.

In summary, no underground storage tanks were located at 88 Fairmont Avenue, Chatham, NJ.

For more information about our company and the services we offer I encourage you check us out on the World Wide Web at **www.lombardoenvironmental.com**

If you have any further questions or concerns regarding oil tank needs please feel free to give us a call. Thanks for your patronage!

Sincerely

Tris Clifton

NOTICE: The methods used at this site have been used successfully at many sites to locate underground storage tanks and drums. There can be no guarantee, however, that every target will be detected at a particular site. Subsurface conditions may prevent some or all geophysical methods from working properly.

72 Bushes Lane, PO Box 62, Elmwood Park, New Jersey 07407 Phone: 201-796-3390 Fax: 201-796-2254 NJ License # US00987

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TERMINITE &	
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Hillside, N.J. 07205 (908) 353-6938 • Fax 353-3107	
 TERMITE CONTROL	-

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SPECIFI	CATIONS

To:		Ebb	en		Inspection Report #		### ### ##############################
Premises	28	Pair	mou A	- Oue	Date	لرز	22(17
City: CL	Li	5 -4	Telephone:		Inspector:	R	

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Concrete Slabs Drill perimeter of concrete garage floor	Crawl Space Provide access to crawl space. (see	sidebar)	Treatment Precautions Active sump
Drill through existing floor covering Drill through foundation, treat under slab by rodding (Sc	Treat perimitter of crawl space, pler, Remove wood and cellulose deibs a	100	Active Well Sub-Slab heat
Drill along partition walls & recement. Other Span - bout - 2003 as for Corporate and s	Outside Treatment Treat soil abuiting structure Drill & treat slabs that abut structure	, patios, sidewalks, etc.	Recessed Porch Other
Additional Terms, Conditions and/or comme Jew Waran Condict our after f	ents. Drill & treat dirt filled porches & rece Les a treatments So a carage evalue	ment.	Customer Resposible for: Providing access to crawl space
Foundation Poured Concrete Concrete Block Rubble Basement Water Strick Basement Flo	Wood Framer Concrete Block Brick Veneer Stone	Water Supply Public Slab Heating	Crawl Well Soil Cancrete
Basement Concrete Full Slab Spit-Level Wood on Sleepers One Year Warranty on Treatment, SEE REVERSE		Land None	ATIONS OF PROPOSAL
		care	eran-bodier -cementeran Space
Termote Daraged Debris cure porc		-cetus Don	ape to pora
TREATMENT COST \$ 750 > TAX \$ 45 =	TOTAL \$ 755 P	destroying i required be	uluation of wood insect damage fore damage
AUTHORIZATION:	Annual Renewal Fee 🚲 👇	estimate iss	sued

Wood Destroying Insect Inspection Report Notice	e: Please read important consum	er information on page 2.
Section I. General Information	Company's Business Lic. No.	Date of Inspection
Inspection Company, Address & Phone Terminite, Inc.	93338	4/20/12
48 Looker St.	Address of Property Inspected	chaird are
Hillside, NJ 07205	00 100	
908-353-6938	Chatha	* NIJ
Inspector's Name, Signature & Certification, Registration, or Lic. #	Stru	acture(s) Inspected
Brian Smar Bl 201041	7	love ont
Section II. Inspection Findings This report is indicative of the condition of t guarantee or warranty against latent, concealed, or future infestations or defects. Base inspected:		
A. No visible evidence of wood destroying insects was observed.		
B. Visible evidence of wood destroying insects was observed as follows:	ter and a	1-00-000 0-01
1. Live insects (description and location):	to and a	x viagreports
2. Dead insects, insect parts, frass, shelter tubes, exit holes, or staining (c	lescription and location):	carpenderant
3. Visible damage from wood destroying insects was noted as follows (de	escription and location):	Le Dosiger Debry
NOTE: This is not a structural damage report. If box B above is checked, it sho present. If any questions arise regarding damage indicated by this report, it is professional to determine the extent of damage and the need for repairs.		
Yes No It appears that the structure(s) or a portion thereof may	have been previously treated.	Visible evidence of possible previous treatment:
The inspecting company can give no assurances with regard to work done by other on treatment and any warranty or service agreement which may be in place.	companies. The company that per	formed the treatment should be contacted for information
Section III. Recommendations	OSOCIONI CONTINUENTI CONTINUENTI CONTINUENTI CONTINUENTI CONTINUENTI CONTINUENTI CONTINUENTI CONTINUENTI CONTI	
☐ No treatment recommended: (Explain if Box B in Section II is checked)		
Tech 200 of	Ca mo Jaco	2-4
Recommend treatment for the control of:		
Section IV. Obstructions and Inaccessible Areas	os transionales en 1932 o monte en 1944 en 1940 en 194 O transionales en 1932 o monte en 1944	The inspector may write out obstructions
The following areas of the structure(s) inspected were obstructed or inaccessible:		or use the following optional key:
Basement 1,234.0989.11424		1. Fixed ceiling 13. Only visual access 2. Suspended ceiling 14. Cluttered condition
Crawlspace 3 + 11 2 4. Main Level 13 4 6 9 5 2 1		3. Fixed wall covering 15. Standing water 4. Floor covering 16. Dense vegetation
Main Level 1390255		5. Insulation 17. Exterior siding
Garage		6. Cabinets or shelving 18. Window well covers 7. Stored items 19. Woodpile
Exterior 10:		8. Furnishings 20. Snow
Porch		9. Appliances 21. Unsafe conditions 10. No access or entry 22. Rigid foam board
Addition		11. Limited access 23. Synthetic stucco 12. No access beneath 24. Duct work, plumbing, and/or wiring
Section V. Additional Comments and Attachments (these are an in	tegral part of the report)	ectral ectral
Attachments Soc Das and 3376	3	
Signature of Seller(s) or Owner(s) if refinancing. Seller acknowledges that all information regarding W.D.I. infestation, damage, repair, and treatment history has been disclosed to the buyer.		The undersigned hereby acknowledges receipt of a age 2 of this report and understands the information