



SELLER'S PROPERTY CONDITION DISCLOSURE STATEMENT

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Property Address: 6 Plymouth Rd Summit, NJ 07901

Seller: Sabido, Agustin I & Cristiani, Sofia

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 | |
| | | | 1964 |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Age of House, if known _____ |
| | | | 2. Does the Seller currently occupy this property? |
| | | | If not, how long has it been since Seller occupied the property? _____ |
| | | | 3. What year did the seller buy the property? 2019 _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 3a. Do you have in your possession the original or a copy of the deed evidencing your ownership of the property? If "yes," please attach a copy of it to this form. |

ROOF

| | | | |
|-------------------------------------|-------------------------------------|--------------------------|---|
| Yes | No | Unknown | |
| | | | 4. Age of roof 2020 _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Has roof been replaced or repaired since seller bought the property? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 6. Are you aware of any roof leaks? |
| | | | 7. Explain any "yes" answers that you give in this section: Roof replaced in 2020 |

ATTIC, BASEMENTS AND CRAWL SPACES (Complete only if applicable)

| | | | |
|--------------------------|-------------------------------------|---------|--|
| Yes | No | Unknown | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 8. Does the property have one or more sump pumps? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 8a. Are there any problems with the operation of any sump pump? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 9. Are you aware of any water leakage, accumulation or dampness within the basement or crawl spaces or any other areas within any of the structures on the property? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 9a. Are you aware of the presence of any mold or similar natural substance within the basement or crawl spaces or any other areas within any of the structures on the property? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 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: |
| | | | _____ |
| | | | _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 11. Are you aware of any cracks or bulges in the basement floor or foundation walls? If "yes," specify location. _____ |



- 51 12. Are you aware of any restrictions on how the attic may be used as a result of the manner in which
- 52 the attic or roof was constructed?
- 53 13. Is the attic or house ventilated by: a whole house fan? an attic fan?
- 54 13a. Are you aware of any problems with the operation of such a fan?
- 55 14. In what manner is access to the attic space provided?
- 56 staircase pull down stairs crawl space with aid of ladder or other device
- 57 other _____
- 58 15. Explain any "yes" answers that you give in this section:
- 59 _____
- 60 _____

TERMITES/WOOD DESTROYING INSECTS, DRY ROT, PESTS

- | 63 | Yes | No | Unknown | |
|----|-------------------------------------|-------------------------------------|---------|--|
| 64 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 16. Are you aware of any termites/wood destroying insects, dry rot, or pests affecting the property? |
| 65 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 17. Are you aware of any damage to the property caused by termites/wood destroying insects, dry rot, or pests? |
| 66 | | | | |
| 67 | <input type="checkbox"/> | <input type="checkbox"/> | | 18. If "yes," has work been performed to repair the damage? |
| 68 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | 19. Is your property under contract by a licensed pest control company? If "yes," state the name and address of the licensed pest control company: Viking Pest Control |
| 69 | | | | _____ |
| 70 | | | | |
| 71 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 20. Are you aware of any termite/pest control inspections or treatments performed on the property in the past? |
| 72 | | | | |
| 73 | | | | 21. Explain any "yes" answers that you give in this section: Quarterly inspection and treatment as necessary |
| 74 | | | | |
| 75 | | | | |
| 76 | | | | |

STRUCTURAL ITEMS

- | 78 | Yes | No | Unknown | |
|----|--------------------------|-------------------------------------|---------|--|
| 78 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 22. Are you aware of any movement, shifting, or other problems with walls, floors, or foundations, including any restrictions on how any space, other than the attic or roof, may be used as a result of the manner in which it was constructed? |
| 79 | | | | |
| 80 | | | | |
| 81 | | | | 23. Are you aware if the property or any of the structures on it have ever been damaged by fire, smoke, wind or flood? |
| 82 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| 83 | | | | 24. Are you aware of any fire retardant plywood used in the construction? |
| 84 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 25. Are you aware of any current or past problems with driveways, walkways, patios, sinkholes, or retaining walls on the property? |
| 85 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| 86 | | | | 26. Are you aware of any present or past efforts made to repair any problems with the items in this section? |
| 87 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| 88 | | | | 27. Explain any "yes" answers that you give in this section. Please describe the location and nature of the problem. |
| 89 | | | | _____ |
| 90 | | | | _____ |
| 91 | | | | |
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ADDITIONS/REMODELS

- | 95 | Yes | No | Unknown | |
|-----|--------------------------|-------------------------------------|--------------------------|---|
| 95 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | 28. Are you aware of any additions, structural changes or other alterations to the structures on the property made by any present or past owners? |
| 96 | | | | |
| 97 | | | | 29. Were the proper building permits and approvals obtained? Explain any "yes" answers you give in this section: |
| 98 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 99 | | | | _____ |
| 100 | | | | _____ |

PLUMBING, WATER AND SEWAGE

- | 104 | Yes | No | Unknown | |
|-----|--------------------------|--------------------------|---------|---|
| 104 | | | | 30. What is the source of your drinking water? |
| 105 | | | | <input checked="" type="checkbox"/> Public <input type="checkbox"/> Community System <input type="checkbox"/> Well on Property <input type="checkbox"/> Other (explain) _____ |
| 106 | | | | |
| 107 | <input type="checkbox"/> | <input type="checkbox"/> | | 31. If your drinking water source is not public, have you performed any tests on the water? If so, when? |
| 108 | | | | _____ |
| 109 | | | | _____ Attach a |
| 110 | | | | copy of or describe the results. |

- 111 32. Does the wastewater from any clothes washer, dishwasher, or other appliance discharge to any
 112 location other than the sewer, septic, or other system that services the rest of the property?
 113 33. When was well installed? _____
 114 Location of well? _____
 115 34. Do you have a softener, filter, or other water purification system? Leased Owned
 116 35. What is the type of sewage system?
 117 X Public Sewer Private Sewer Septic System Cesspool Other (explain): _____
 118 36. If you answered "septic system," have you ever had the system inspected to confirm that it is a true
 119 septic system and not a cesspool?
 120 37. If Septic System, when was it installed? _____
 121 Location? _____
 122 38. When was the Septic System or Cesspool last cleaned and/or serviced? _____
 123 39. Are you aware of any abandoned Septic Systems or Cesspools on your property?
 124 39a. If "yes," is the closure in accordance with the municipality's ordinance? (explain):
 125 _____
 126 40. Are you aware of any leaks, backups, or other problems relating to any of the plumbing systems and
 127 fixtures (including pipes, sinks, tubs and showers), or of any other water or sewage related problems?
 128 If "yes," explain: _____
 129 _____
 130 41. Are you aware of any shut off, disconnected, or abandoned wells, underground water or sewage
 131 tanks, or dry wells on the property?
 132 42. Is either the private water or sewage system shared? If "yes," explain: _____
 133 _____
 134 43. Water Heater: Electric Fuel Oil Gas
 135 Age of Water Heater 2018
 136 43a. Are you aware of any problems with the water heater?
 137 44. Explain any "yes" answers that you give in this section:
 138 _____
 139 _____

HEATING AND AIR CONDITIONING

- 141 Yes No Unknown
 142
 143 45. Type of Air Conditioning:
 144 X Central one zone Central multiple zone Wall/Window Unit None
 145 46. List any areas of the house that are not air conditioned: Basement
 146 47. What is the age of Air Conditioning System? 2017
 147 48. Type of heat: Electric Fuel Oil Natural Gas Propane Unheated Other
 148 49. What is the type of heating system? (for example, forced air, hot water or base board, radiator, steam
 149 heat) Base board - hot water
 150 50. If it is a centralized heating system, is it one zone or multiple zones? Multiple zones
 151 51. Age of furnace _____ Date of last service: October 2021 - PipeWorks
 152 52. List any areas of the house that are not heated: All areas are heated
 153 53. Are you aware of any tanks on the property, either above or underground, used to store fuel or other
 154 substances?
 155 54. If tank is not in use, do you have a closure certificate?
 156 55. Are you aware of any problems with any items in this section? If "yes," explain:
 157 _____
 158
 159
 160
 161

WOODBURNING STOVE OR FIREPLACE

- 162 Yes No Unknown
 163
 164 56. Do you have wood burning stove? fireplace? insert? other
 165 56a. Is it presently usable?
 166 57. If you have a fireplace, when was the flue last cleaned? _____
 167 57a. Was the flue cleaned by a professional or non-professional? _____
 168 58. Have you obtained any required permits for any such item?
 169 59. Are you aware of any problems with any of these items? If "yes," please explain: Seller has never
 170 used the fireplace(s) and are not aware of any defects. Fireplace(s) and all associated components will
 convey strictly in AS-IS condition.

171 ELECTRICAL SYSTEM

172 Yes No Unknown

173 60. What type of wiring is in this structure? Copper Aluminum Other Unknown174 61. What amp service does the property have? 60 100 150 200 Other Unknown175 62. Does it have 240 volt service? Which are present Circuit Breakers, Fuses or Both?176 63. Are you aware of any additions to the original service?177 If "yes," were the additions done by a licensed electrician? Name and address: Oliver Browne
178 Electrical Contracting LLC

179 64. If "yes," were proper building permits and approvals obtained?

180 65. Are you aware of any wall switches, light fixtures or electrical outlets in need of repair?181 66. Explain any "yes" answers you give in this section: Transfer Switch added by previous owners

182

183

184

185

186 LAND (SOILS, DRAINAGE AND BOUNDARIES)

187 Yes No Unknown

188 67. Are you aware of any fill or expansive soil on the property?189 68. Are you aware of any past or present mining operations in the area in which the property is located?190 69. Is the property located in a flood hazard zone?191 70. Are you aware of any drainage or flood problems affecting the property?192 71. Are there any areas on the property which are designated as protected wetlands?193 72. Are you aware of any encroachments, utility easements, boundary line disputes, or drainage or
194 other easements affecting the property?195 73. Are there any water retention basins on the property or the adjacent properties?196 74. Are you aware if any part of the property is being claimed by the State of New Jersey as land
197 presently or formerly covered by tidal water (Riparian claim or lease grant)? Explain:

198

199

200 75. Are you aware of any shared or common areas (for example, driveways, bridges, docks, walls,
201 bulkheads, etc.) or maintenance agreements regarding the property?

202 76. Explain any "yes" answers to the preceding questions in this section:

203

204

205 77. Do you have a survey of the property?

206

207 ENVIRONMENTAL HAZARDS

208 Yes No Unknown

209 78. Have you received any written notification from any public agency or private concern informing you that
210 the property is adversely affected, or may be adversely affected, by a condition that exists on a property in
211 the vicinity of this property? If "yes," attach a copy of any such notice currently in your possession.212 78a. Are you aware of any condition that exists on any property in the vicinity which adversely affects,
213 or has been identified as possibly adversely affecting, the quality or safety of the air, soil, water, and/
214 or physical structures present on this property? If "yes," explain:

215

216

217 79. Are you aware of any underground storage tanks (UST) or toxic substances now or previously
218 present on this property or adjacent property (structure or soil), such as polychlorinated biphenyl
219 (PCB), solvents, hydraulic fluid, petro-chemicals, hazardous wastes, pesticides, chromium, thorium,
220 lead or other hazardous substances in the soil? If "yes," explain:

221

222

223 80. Are you aware if any underground storage tank has been tested?

224 (Attach a copy of each test report or closure certificate if available).

225 81. Are you aware if the property has been tested for the presence of any other toxic substances, such
226 as lead-based paint, urea-formaldehyde foam insulation, asbestos-containing materials, or others?
227 (Attach copy of each test report if available).

228 82. If "yes" to any of the above, explain:

229

230

231 82a. If "yes" to any of the above, were any actions taken to correct the problem? Explain:
 232 _____
 233 _____

234 [X] 83. Is the property in a designated Airport Safety Zone?
 235
 236 **DEED RESTRICTIONS, SPECIAL DESIGNATIONS, HOMEOWNERS ASSOCIATION/CONDOMINIUMS**
 237 **AND CO-OPS**

238 Yes No Unknown
 239 [X] 84. Are you aware if the property is subject to any deed restrictions or other limitations on how it may
 240 be used due to its being situated within a designated historic district, or a protected area like the
 241 New Jersey Pinelands, or its being subject to similar legal authorities other than typical local zoning
 242 ordinances?
 243 [X] 85. Is the property part of a condominium or other common interest ownership plan?
 244 85a. If so, is the property subject to any covenants, conditions, or restrictions as a result of its being part
 245 of a condominium or other form of common interest ownership?
 246 [X] 86. As the owner of the property, are you required to belong to a condominium association or homeowners
 247 association, or other similar organization or property owners?
 248 86a. If so, what is the Association's name and telephone number?
 249 _____
 250 86b. If so, are there any dues or assessments involved?
 251 If "yes," how much? _____
 252 87. Are you aware of any defect, damage, or problem with any common elements or common areas that
 253 materially affects the property?
 254 88. Are you aware of any condition or claim which may result in an increase in assessments or fees?
 255 89. Since you purchased the property, have there been any changes to the rules or by-laws of the
 256 Association that impact the property?
 257 90. Explain any "yes" answers you give in this section:
 258 _____
 259 _____

261 **MISCELLANEOUS**

262 Yes No Unknown
 263 [X] 91. Are you aware of any existing or threatened legal action affecting the property or any condominium
 264 or homeowners association to which you, as an owner, belong?
 265 [X] 92. Are you aware of any violations of Federal, State or local laws or regulations relating to this property?
 266 [X] 93. Are you aware of any zoning violations, encroachments on adjacent properties, non-conforming
 267 uses, or set-back violations relating to this property? If so, please state whether the condition is pre-
 268 existing non-conformance to present day zoning or a violation to zoning and/or land use laws.
 269 _____
 270 _____
 271 [X] 94. Are you aware of any public improvement, condominium or homeowner association assessments
 272 against the property that remain unpaid? Are you aware of any violations of zoning, housing,
 273 building, safety or fire ordinances that remain uncorrected?
 274 [X] 95. Are there mortgages, encumbrances or liens on this property?
 275 [X] 95a. Are you aware of any reason, including a defect in title, that would prevent you from conveying
 276 clear title?
 277 [X] 96. Are you aware of any material defects to the property, dwelling, or fixtures which are not disclosed
 278 elsewhere on this form? (A defect is "material," if a reasonable person would attach importance
 279 to its existence or non-existence in deciding whether or how to proceed in the transaction.)
 280 If "yes," explain: _____
 281 _____
 282 [X] 97. Other than water and sewer charges, utility and cable tv fees, your local property taxes, any special
 283 assessments and any association dues or membership fees, are there any other fees that you pay on
 284 an ongoing basis with respect to this property, such as garbage collection fees?
 285 98. Explain any other "yes" answers you give in this section:
 286 _____
 287 _____

291 RADON GAS Instructions to Owners

292 By law (N.J.S.A. 26:2D-73), a property owner who has had his or her property tested or treated for radon gas may require that information
293 about such testing and treatment be kept confidential until the time that the owner and a buyer enter into a contract of sale, at which time
294 a copy of the test results and evidence of any subsequent mitigation or treatment shall be provided to the buyer. The law also provides that
295 owners may waive, in writing, this right of confidentiality. As the owner(s) of this property, do you wish to waive this right?

296 Yes No
297 AIS SSC AIS SSC
298 (Initials) (Initials)
299

300 If you responded "yes," answer the following questions. If you responded "no," proceed to the next section.

301
302 Yes No Unknown
303 99. Are you aware if the property has been tested for radon gas? (Attach a copy of each test report if
304 available.)
305 100. Are you aware if the property has been treated in an effort to mitigate the presence of radon gas?
306 (If "yes," attach a copy of any evidence of such mitigation or treatment.)
307 101. Is radon remediation equipment now present in the property?
308 101a. If "yes," is such equipment in good working order?
309
310

311 MAJOR APPLIANCES AND OTHER ITEMS

312 The terms of any final contract executed by the seller shall be controlling as to what appliances or other items, if any, shall be included
313 in the sale of the property. Which of the following items are present in the property? (For items that are not present, indicate "not
314 applicable.")
315

316 Yes No Unknown N/A
317 102. Electric Garage Door Opener
318 102a. If "yes," are they reversible? Number of Transmitters 2 _____
319 103. Smoke Detectors
320 X Battery Electric Both How many 5 _____
321 X Carbon Monoxide Detectors How many 6 _____
322 Location Basement, Family Room, Dining Room, Living Room, 2nd floor bedroom
323 104. 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
328 105. 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?
333 106. 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 [Y] Microwave Oven
337 [Y] Dishwasher
338 [N/A] Trash Compactor
339 [N/A] Garbage Disposal
340 [N/A] In-Ground Sprinkler System
341 [N/A] Central Vacuum System
342 [Y] Security System
343 [N] Washer
344 [N] Dryer
345 [N/A] Intercom
346 [] Other
347 107. Of those that may be included, is each in working order?
348 If "no," identify each item not in working order, explain the nature of the problem:
349 _____
350

NOT APPLICABLE - NO SOLAR PANEL SYSTEMS ON PROPERTY

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SOLAR PANEL SYSTEMS

By completing this section, Seller is acknowledging that the Property is serviced by a Solar Panel System, which means a system of solar panels designed to absorb the sunlight as a source of energy for generating electricity or heating, any and all inverters, net meter, wiring, roof supports and any other equipment pertaining to the Solar Panels (collectively, the "Solar Panel System"). This information may be used, among other purposes, to prepare a Solar Panel Addendum to be affixed to and made a part of a contract of sale for the Property.

Yes No Unknown

- 108. When was the Solar Panel System Installed? _____
- 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 yes, 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 financing arrangement which requires me/us to make periodic payments to a Solar Panel System provider in order to acquire ownership of the Solar Panel System ("PPA")? If yes, proceed to **Section A** below.
- 112b. The Solar Panel System is the subject of a lease agreement. If yes, proceed to **Section B** below.
- 112c. I/we own the Solar Panel System outright. If yes, you do not have to answer any further questions.

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 Panel 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 Solar 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 obtain 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 to Closing.

ACKNOWLEDGMENT OF SELLER

The undersigned Seller affirms that the information set forth in this Disclosure Statement is accurate and complete to the best of Seller's knowledge, but is not a warranty as to the condition of the Property. Seller hereby authorizes the real estate brokerage firm representing or assisting the seller to provide this Disclosure Statement to all prospective buyers of the Property, and to other real estate agents. Seller alone is the source of all information contained in this statement. If the Seller relied upon any credible representations of another, the Seller should state the name(s) of the person(s) who made the representation(s) and describe the information that was relied upon.

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DocuSigned by:
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SELLER

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EXECUTOR, ADMINISTRATOR, TRUSTEE

(If applicable) The undersigned has never occupied the property and lacks the personal knowledge necessary to complete this Disclosure Statement.

DATE

DATE

RECEIPT AND ACKNOWLEDGMENT BY PROSPECTIVE BUYER

The undersigned Prospective Buyer acknowledges receipt of this Disclosure Statement prior to signing a Contract of Sale pertaining to this Property. Prospective Buyer acknowledges that this Disclosure Statement is not a warranty by Seller and that it is Prospective Buyer's responsibility to satisfy himself or herself as to the condition of the Property. Prospective Buyer acknowledges that the Property may be inspected by qualified professionals, at Prospective Buyer's expense, to determine the actual condition of the Property. Prospective Buyer further acknowledges that this form is intended to provide information relating to the condition of the land, structures, major systems and amenities, if any, included in the sale. This form does not address local conditions which may affect a purchaser's use and enjoyment of the property such as noise, odors, traffic volume, etc. Prospective Buyer acknowledges that they may independently investigate such local conditions before entering into a binding contract to purchase the property. Prospective Buyer acknowledges that he or she understands that the visual inspection performed by the Seller's real estate broker/broker-salesperson/salesperson does not constitute a professional home inspection as performed by a licensed home inspector.

PROSPECTIVE BUYER

DATE

PROSPECTIVE BUYER

DATE

PROSPECTIVE BUYER

DATE

PROSPECTIVE BUYER

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ACKNOWLEDGMENT OF REAL ESTATE BROKER/BROKER-SALESPERSON/SALESPERSON

The undersigned Seller's real estate broker/broker-salesperson/salesperson acknowledges receipt of the Property Disclosure Statement form and that the information contained in the form was provided by the Seller.

The Seller's real estate broker/broker-salesperson/salesperson also confirms that he or she visually inspected the property with reasonable diligence to ascertain the accuracy of the information disclosed by the seller, prior to providing a copy of the property disclosure statement to the buyer.

The Prospective Buyer's real estate broker/broker-salesperson/salesperson also acknowledges receipt of the Property Disclosure Statement form for the purpose of providing it to the Prospective Buyer.

DocuSigned by:
Sue Adler

11/3/2022 | 10:04 AM PDT

SELLER'S REAL ESTATE BROKER/
BROKER-SALESPERSON/SALESPERSON:

DATE

PROSPECTIVE BUYER'S REAL ESTATE BROKER/
BROKER-SALESPERSON/SALESPERSON:

DATE



EMSL Analytical, Inc.

200 Route 130 North Cinnaminson, NJ 08077
Tel/Fax:(800) 220-3675 / (856) 786-0327
<http://www.EMSL.com / cinnaminsonradonlab@emsl.com>

EMSL Order: 381911275
Customer ID: PFP34
Customer PO:
Project ID:

Attention: **John Ahearn**
Pillar to Post
3 Rustic Court
Florham Park, NJ 07932
Phone: (973) 769-1256
Fax:
Received Date: 09/03/2019 12:17 PM
Analysis Date: 09/04/2019
Project: **Suarez / 6 Plymouth Rd**

Test **Suarez**
Site: **6 Plymouth Rd**
Summit, NJ 07901

Test Report: Radon in Air Test Results

Samples for EMSL Kit 221279

| Liquid Scintillation | Location | Radon Activity pCi/L | Start | Stop | Temperature F | Humidity % | Sample Type |
|----------------------|----------|----------------------|------------|-------------|---------------|------------|-------------|
| 387269 | Basement | 1.4 | 8/27/2019 | 8/29/2019 | 76 | 30 | Customer |
| 381911275-0001 | | | 9:15:00 am | 11:15:00 am | | | |

Sample Notes:

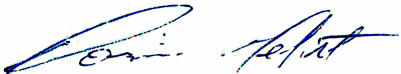
The result indicates that the test device registered at or below the United States Environmental Protection Agency (EPA) action level of 4.0 picoCuries per liter of air (pCi/L). The radon test was performed using a liquid scintillation radon detector/s and counted on a liquid scintillation counter using approved EPA testing protocols for Radon in Air testing.

For NJ Clients: Please reference the guidance document entitled RADON TESTING AND MITIGATION:THE BASICS for further information.

For NJ Clients: This notice is provided to you by an organization or individual certified by the New Jersey Department of Environmental Protection to perform radon and/or radon progeny measurements. N.J.S.A. 26:2D-73 requires that no certified person disclose to any individual, except the Department of Environmental Protection or the Department of Health the address or owner of a nonpublic building that the person has tested or treated for the presence of radon gas and radon progeny, unless the owner of the building waives, in writing, this right of confidentiality. In the case of a prospective sale of a building which has been tested for radon gas and/or radon progeny, the seller shall provide the buyer, at the time the contract of sale is entered into, with a copy of the results of that test and evidence of any subsequent mitigation or treatment, and any prospective buyer who contracts for the testing shall have the right to receive the results of that testing. Any questions, comments, or complaints regarding the persons performing these measurements, or related mitigation, or safeguarding services should be directed to the New Jersey Department of Environmental Protection. Attention: Radon Section, Bureau of Environmental Radiation (1-800-648-0394). This test was performed using EPA device protocol EPA-402-R-92-004.

Report Notes:

Analyst(s):
Racquel Hafiz Radon (1)


Dominic Gehret, Radiochemistry Laboratory Manager, NJ Radon Measurement Specialist MES 13910 or other approved signatory

In no event shall EMSL be liable for indirect, special, consequential, or incidental damages, including, but not limited to, damages for loss of profit or goodwill regardless of the negligence (either sole or concurrent) of EMSL and whether EMSL has been informed of the possibility of such damages, arising out of or in connection with EMSL's services thereunder or the delivery, use, reliance upon or interpretation of test results by client or any third party. We accept no legal responsibility for the purposes for which the client uses the test results. In no event shall EMSL be liable to a client or any third party, whether based upon theories of tort, contract or any other legal or equitable theory, in excess of the amount paid to EMSL by client thereunder. The test results meets all NELAC requirements unless otherwise specified.
Samples analyzed by EMSL Analytical, Inc. Cinnaminson, NJ Accreditations: NRSB ARL6006, NJ DEP 03036, MEB 92525, PA 2573, IN 00455, IA L00032, ME 20200C, NE RMB-1083, NY ELAP 10872, NM 885-10L, FL RB2034, OH RL-39, NRPP #109000AL, KS-LB-0005, IL RNL2008202.

Initial report from: 09/05/2019 11:19:28

Please visit www.radontestinglab.com



63 Glenside Trail, Sparta, NJ 07871

August 27, 2019

Agustin Izquierdo & Sofia Suarez
6 Plymouth Rd.
Summit New Jersey
Union County
Re: Tank Location Service
Job #TS19082014

Dear Agustin and Sofia,

As requested, this company performed a tank sweep at above address on August 27th, 2019. This inspection began by the technician entering the basement and the furnace area of the dwelling looking for patchwork in the foundation walls which may be consistent with a tank removal. We then searched for abandoned piping and copper lines in the wall and floor. There was no patchwork on the walls or abandoned pipes, or copper lines found. We then went outside and inspected the foundation of the structure searching for any vent or fill pipes. There was no oil vent or fill pipes found. We then scanned a 30 Ft radius around the structure to a depth of 8 Ft searching for any metallic objects consistent with the size and shape of an underground storage tank.

During this inspection, no suspicious area consistent with a possible underground storage tank was found on the property within a 30-foot radius of the dwelling.

If you have any questions, please do not hesitate to contact us. Thank you for allowing Ever-Green to meet your inspections needs.

Sincerely,

Edward Eltringham
Technician



Viking Termite & Pest Control, LLC
 PO Box 158
 Liberty Corner, NJ 07938
 800-618-2847

Viking Pest Control Service Report

INVOICE #: A140205071

WORK DATE: 10/07/2022

MARYLAND Consumer Information Notice: The pesticides that we use are regulated by State Regulatory Officials. If you need additional information please contact 1-800-618-2487. Maryland Dept of Agriculture License # 29497. Maryland Poison Control Center: 1-800-222-1222. Copies of all Labels & (Material) Safety Data Sheets are available on our website: www.vikingpest.com. Hard copies are available for any product. Ask your technician or call our office at: 1-800-618-2847.

| | | | | | |
|---|-----------------|---|-----------------|-------------------------------|-----------------------|
| BILL-TO | 14000991 | LOCATION | 14000991 | Time In: | 10/7/2022 12:10:47 PM |
| | | | | Time Out: | 10/7/2022 12:33:41 PM |
| AGUSTIN IZQUIERDO 6 PLYMOUTH RD SUMMIT, NJ 07901-3232 | | AGUSTIN IZQUIERDO 6 PLYMOUTH RD SUMMIT, NJ 07901-3232 | | Customer Signature | |
| Phone: 973-932-8604 | | Phone: 908-608-4646 | | Customer Unavailable to Sign | |
| Alt. Phone: 732-205-6326 xoffic | | Alt. Phone: 732-205-6326 xoffic | | Technician Signature | |
| | | Mobile: 908-608-4646 | | | |
| | | | | Jason Raymond | |
| | | | | License #: NJ - 80558C | |

| Purchase Order | Terms | Service Description | Quantity |
|----------------|--------|---------------------------------|----------|
| None | NET 30 | 72P-CONVENIENCE PLUS - EXTERIOR | 1.00 |

GENERAL COMMENTS / INSTRUCTIONS
 Exterior: Knocked on door nobody was home treated Foundation one foot up one foot out. That's around cracks Travis's door frames and window frames. Put granular bite in mulch bed and grass area around foundation changed bait and bait stations due to activity please let dry 30 minutes or 2 hours thank you for using Viking Pest Control

| CONDITIONS / OBSERVATIONS | Reported | Severity | Responsibility | Reviewed |
|---------------------------|----------|----------|----------------|----------|
| None Noted. | | | | |

PRODUCTS APPLICATION SUMMARY

| Material | Lot # | EPA # | A.I. % | A.I. Conc. | Active Ingredient | Finished Qty | Undiluted Qty |
|---|-------|-----------|---------|------------|-------------------|----------------|---------------------|
| CONTRAC SOFT BAIT | | 12455-146 | 0.0050% | n/a | Bromadiolone | 6.0000 EACH | 2.1000 OUNCES |
| Areas Applied: Exterior-> Device Ext 1 Target Pests: Mice all species Disclaimer: Avoid contact with skin, eyes and clothing. Any person who retrieves carcasses or unused bait following application of this product must wear gloves. May be harmful if swallowed. No special precautions are necessary when applied in inaccessible areas. If noticeable, avoid contact with material. Do not move! This material is strategically placed for effectiveness and to avoid tampering by children and pets, etc | | | | | | | |
| INTICE GRANULAR BAIT | | 73079-2 | 5.0000% | 1.0000 | ORTHOBORIC ACID | 0.0010 OUNCES | 0.0010 OUNCES |
| Areas Applied: Exterior Target Pests: Ants Disclaimer: Avoid contact with skin, eyes and clothing. | | | | | | | |
| TEMPO 1% DUST | | 432-1373 | 1.0000% | n/a | Cyfluthrin | 0.0020 OUNCES | 0.0020 OUNCES |
| Areas Applied: Exterior Target Pests: STINGING INSECTS EXCLUDING HONEY BEES Disclaimer: Avoid contact with skin, eyes and clothing. All food/feed processing surfaces and utensils should be covered or removed during treatment, or thoroughly washed before use. Exposed food/feed should be covered or removed. In commercial establishments after an application all food contact surfaces must be washed with an effective cleaning compound followed by a potable water rinse before resuming food operations. May be harmful if swallowed. | | | | | | | |
| TERMIDOR SC - ants @ .4 fl oz per gal | | 7969-210 | 9.1000% | 0.0300 | Fipronil | 0.3000 GALLONS | 0.1267 FLUID OUNCES |
| Areas Applied: Exterior Target Pests: Ants Disclaimer: Do not allow people or pets to contact treated surfaces until spray has dried. All food/feed processing surfaces and utensils should be covered or removed during treatment, or thoroughly washed before use. Exposed food/feed should be covered or removed. People present or residing in the structure during application must be advised to remove their pets and themselves from the structure if they see any signs of leakage (during applications for termites). May be harmful if swallowed. | | | | | | | |

NEW JERSEY Consumer Information Notice: The following is being given to you per the NJDEP, Pesticide Control Programs Regulation, N.J.A.C. 7:30-9.12. Sanitation, as well as physical and biological control measures should be considered as a part of a good pest control program. Pesticides may be used as another part of a good pest control program. Pesticides are substances used to control living organisms and vary in degree of toxicity. A copy of the label(s) for the pesticide(s) used is available if requested by the contracting party. I have been told that I have the right to receive consumer information as outlined in N.J.A.C. 7:30-9.12(b)1, 7:30-9.12(c)4, 7:30-9.13(b)2, or 7:30-9.13(c)2. The phone number of the Pesticide Control Program is 1-609-984-6568. This number is for pesticide regulations information, complaints & health referrals. The phone number of the National Pesticide Telecommunications Network at 1-800-858-7378 is for general health & pesticide toxicology information. The phone number of New Jersey Poison Information & Education System is 1-800-222-1222. You should also be aware that you may request notification of the exact date(s) of any pesticide application.



Viking Termite & Pest Control, LLC
 PO Box 158
 Liberty Corner, NJ 07938
 800-618-2847

Viking Pest Control Service Report

INVOICE #: A140205071

WORK DATE: 10/07/2022

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PRODUCTS APPLICATION SUMMARY

| Material | Lot # | EPA # | A.I. % | A.I. Conc. | Active Ingredient | Finished Qty | Undiluted Qty |
|----------|-------|-------|--------|------------|-------------------|--------------|---------------|
|----------|-------|-------|--------|------------|-------------------|--------------|---------------|

PEST ACTIVITY # Areas # Devices Pest Totals

None Noted.

DEVICE INSPECTION SUMMARY

| Device Type | # Inspected | Inspected w/Activity | # Skipped | # Replaced |
|---------------------|------------------|----------------------|-----------|------------|
| RODENT BAIT STATION | 1 of 1 (100.00%) | 1 of 1 (100.00%) | 0 | 0 |
| -Totals: | 1 of 1 (100.00%) | 1 of 1 (100.00%) | 0 | 0 |

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