



SELLER'S PROPERTY CONDITION DISCLOSURE STATEMENT

© 2018, New Jersey REALTORS®

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38  
39  
40  
41  
42  
43  
44  
45  
46  
47  
48  
49  
50

Property Address: 65 Edgewood Road

Summit NJ 07901

Seller: Stefan Kraemer

Petra Kraemer

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

1. Age of House, if known The house was built in 1937 according to our information

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? 2013

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 \_\_\_\_\_

5. Has roof been replaced or repaired since seller bought the property?

6. Are you aware of any roof leaks?

7. Explain any "yes" answers that you give in this section: The roof was periodically inspected, maintained and individual tiles repaired when needed.

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

Yes No Unknown

8. Does the property have one or more sump pumps?

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 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 spaces or any other areas within any of the structures on the property?

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. \_\_\_\_\_



- 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 checked="" 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: <u>Humphrey, 267 Main Avenue,</u> |
| 69 |                                     |                                     |         | <u>Stirling, NJ 07980</u>  |
| 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:   |
| 74 |                                     |                                     |         | _____  |
| 75 |                                     |                                     |         | _____  |

**STRUCTURAL ITEMS**

- | 78 | Yes                      | No                                  | Unknown |  |
|----|--------------------------|-------------------------------------|---------|--|
| 79 | <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? |
| 80 |                          |                                     |         |  |
| 81 |                          |                                     |         |  |
| 82 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 23. Are you aware if the property or any of the structures on it have ever been damaged by fire, smoke, wind or flood?   |
| 83 |                          |                                     |         |  |
| 84 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 24. Are you aware of any fire retardant plywood used in the construction?  |
| 85 | <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?   |
| 86 |                          |                                     |         |  |
| 87 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |         | 26. Are you aware of any present or past efforts made to repair any problems with the items in this section?   |
| 88 |                          |                                     |         |  |
| 89 |                          |                                     |         | 27. Explain any "yes" answers that you give in this section. Please describe the location and nature of the problem.   |
| 90 |                          |                                     |         | _____  |
| 91 |                          |                                     |         | _____  |

**ADDITIONS/REMODELS**

- | 95  | Yes                                 | No                       | Unknown                  |   |
|-----|-------------------------------------|--------------------------|--------------------------|---|
| 96  | <input checked="" type="checkbox"/> | <input 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? |
| 97  |                                     |                          |                          |   |
| 98  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 29. Were the proper building permits and approvals obtained? Explain any "yes" answers you give in this section:                                  |
| 99  |                                     |                          |                          | <u>Before our time, gym was added to the basement and garage enlarged.</u>  |
| 100 |                                     |                          |                          | <u>we replaced kitchen and reinforced kitchen ceiling; permits received.</u>  |

**PLUMBING, WATER AND SEWAGE**

- | 104 | Yes                      | No                       | Unknown |   |
|-----|--------------------------|--------------------------|---------|---|
| 105 |                          |                          |         | 30. What is the source of your drinking water?  |
| 106 |                          |                          |         | <input checked="" type="checkbox"/> Public <input type="checkbox"/> Community System <input type="checkbox"/> Well on Property <input type="checkbox"/> Other (explain) _____ |
| 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 |                          |                          |         | Attach a copy of or describe the results.   |
| 109 |                          |                          |         |   |
| 110 |                          |                          |         |   |

- 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  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: 2023 sewer lines were scoped in conjunction with
- 129 installation of new toilet bowl in basement
- 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 Hea 2017 (3 - All replaced around the same time).
- 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**

Yes No Unknown

- 141
- 142
- 143 45. Type of Air Conditioning:
- 144  Central one zone  Central multiple zone  Wall/Window Unit  None
- 145 46. List any areas of the house that are not air conditioned:
- 146 \_\_\_\_\_
- 147    47. What is the age of Air Conditioning System? Unknown and 2023 (upstairs)
- 148 48. Type of heat:  Electric  Fuel Oil  Natural Gas  Propane  Unheated  Other
- 149 49. What is the type of heating system? (for example, forced air, hot water or base board, radiator, steam
- 150 heat) Forced air
- 151 50. If it is a centralized heating system, is it one zone or multiple zones?
- 152 1 zone for house, 1 zone for third floor, 1 zone for gym
- 153    51. Age of furnace \_\_\_\_\_ Date of last service: Feb. 23
- 154 52. List any areas of the house that are not heated:
- 155 Attic crawl space.
- 156    53. Are you aware of any tanks on the property, either above or underground, used to store fuel or other
- 157 substances?
- 158    54. If tank is not in use, do you have a closure certificate?
- 159    55. Are you aware of any problems with any items in this section? If "yes," explain:
- 160 \_\_\_\_\_
- 161

**WOODBURNING STOVE OR FIREPLACE**

Yes No Unknown

- 162
- 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? Jan. 2024
- 167    57a. Was the flue cleaned by a professional or non-pr 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: \_\_\_\_\_
- 170 No known defect. The fireplaces will be conveyed in AS-IS condition.  
Please see the attached maintenance and repair documentation.

171 **ELECTRICAL SYSTEM**

172 Yes No Unknown

- 173 60. What type of wiring is in this structure?  Copper  Aluminum  Other  Unknown
- 174 61. What amp service does the property have? 60 100 150 X200 Other  Unknown
- 175    62. Does it have 240 volt service? Which are present  Circuit Breakers,  Fuses or  Both?
- 176   x 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:
- 178 Panel updates w. generator installment (2014) and kitchen remodel (2023)
- 179 \_\_\_\_\_
- 180    64. If "yes," were proper building permits and approvals obtained?
- 181   65. Are you aware of any wall switches, light fixtures or electrical outlets in need of repair?
- 182 66. Explain any "yes" answers you give in this section:
- 183 \_\_\_\_\_
- 184 \_\_\_\_\_

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 other easements affecting the property?
- 194
- 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 presently or formerly covered by tidal water (Riparian claim or lease grant)? Explain:
- 197 \_\_\_\_\_
- 198 \_\_\_\_\_
- 199
- 200   75. Are you aware of any shared or common areas (for example, driveways, bridges, docks, walls, bulkheads, etc.) or maintenance agreements regarding the property?
- 201 76. Explain any "yes" answers to the preceding questions in this section:
- 202 \_\_\_\_\_
- 203 \_\_\_\_\_
- 204
- 205   77. Do you have a survey of the property?

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 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.
- 210
- 211   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:
- 212 \_\_\_\_\_
- 213 \_\_\_\_\_
- 214
- 215
- 216
- 217   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:
- 218 \_\_\_\_\_
- 219 \_\_\_\_\_
- 220
- 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 as lead-based paint, urea-formaldehyde foam insulation, asbestos-containing materials, or others? (Attach copy of each test report if available).
- 226
- 227
- 228 82. If "yes" to any of the above, explain:
- 229 The Lead Paint summary is attached - Summary notes that there is asbestos observed in the garage. This was removed by the previous owners. There is no available documentation.
- 230 \_\_\_\_\_

- 231   82a. If "yes" to any of the above, were any actions taken to correct the problem? Explain:
- 232 Additionally, during the kitchen renovation asbestos insulation was professionally removed and
- 233 remediated from the exterior portion of an air duct. Please see the attached documentation from D & S.
- 234    83. Is the property in a designated Airport Safety Zone?

**DEED RESTRICTIONS, SPECIAL DESIGNATIONS, HOMEOWNERS ASSOCIATION/CONDOMINIUMS AND CO-OPS**

- 238 Yes No Unknown
- 239   84. Are you aware if the property is subject to any deed restrictions or other limitations on how it may be used due to its being situated within a designated historic district, or a protected area like the New Jersey Pinelands, or its being subject to similar legal authorities other than typical local zoning ordinances?
- 240
- 241
- 242
- 243   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 of a condominium or other form of common interest ownership?
- 245
- 246   86. As the owner of the property, are you required to belong to a condominium association or homeowners association, or other similar organization or property owners?
- 247
- 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 materially affects the property?
- 253
- 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 Association that impact the property?
- 256
- 257 90. Explain any "yes" answers you give in this section:
- 258 \_\_\_\_\_
- 259 \_\_\_\_\_

**MISCELLANEOUS**

- 262 Yes No Unknown
- 263   91. Are you aware of any existing or threatened legal action affecting the property or any condominium or homeowners association to which you, as an owner, belong?
- 264
- 265   92. Are you aware of any violations of Federal, State or local laws or regulations relating to this property?
- 266   93. Are you aware of any zoning violations, encroachments on adjacent properties, non-conforming uses, or set-back violations relating to this property? If so, please state whether the condition is pre-existing non-conformance to present day zoning or a violation to zoning and/or land use laws.
- 267 \_\_\_\_\_
- 268 \_\_\_\_\_
- 269
- 270
- 271   94. Are you aware of any public improvement, condominium or homeowner association assessments against the property that remain unpaid? Are you aware of any violations of zoning, housing, building, safety or fire ordinances that remain uncorrected?
- 272
- 273
- 274    95. Are there mortgages, encumbrances or liens on this property?
- 275   95a. Are you aware of any reason, including a defect in title, that would prevent you from conveying clear title?
- 276
- 277   96. Are you aware of any material defects to the property, dwelling, or fixtures which are not disclosed elsewhere on this form? (A defect is "material," if a reasonable person would attach importance to its existence or non-existence in deciding whether or how to proceed in the transaction.)
- 278 If "yes," explain: \_\_\_\_\_
- 279 \_\_\_\_\_
- 280
- 281
- 282   97. Other than water and sewer charges, utility and cable tv fees, your local property taxes, any special assessments and any association dues or membership fees, are there any other fees that you pay on an ongoing basis with respect to this property, such as garbage collection fees?
- 283
- 284
- 285 98. Explain any other "yes" answers you give in this section:
- 286 Garbage collection fees, residential central station alarm, city taxes
- 287 \_\_\_\_\_
- 288
- 289
- 290

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 DS DS  
297   SK PK  
298 (Initials) (Initials)  
299

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

301 Yes No Unknown  
302   99. Are you aware if the property has been tested for radon gas? (Attach a copy of each test report if  
303 available.)  
304   100. Are you aware if the property has been treated in an effort to mitigate the presence of radon gas?  
305 (If "yes," attach a copy of any evidence of such mitigation or treatment.)  
306   101. Is radon remediation equipment now present in the property?  
307   x 101a. If "yes," is such equipment in good working order?  
308  
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 Yes No Unknown N/A  
316     102. Electric Garage Door Opener  
317     102a. If "yes," are they reversible? Number of Transmitters 3  
318     103. Smoke Detectors  
319      Battery  Electric  Both How many \_\_\_\_\_  
320  Carbon Monoxide Detectors How many \_\_\_\_\_  
321 Location All floors  
322     104. With regard to the above items, are you aware that any item is not in working order?  
323 104a. If "yes," identify each item that is not in working order or defective and explain the nature  
324 of the problem: \_\_\_\_\_  
325 \_\_\_\_\_  
326  
327     105.  In-ground pool  Above-ground pool  Pool Heater  Spa/Hot Tub  
328     105a. Were proper permits and approvals obtained?  
329     105b. Are you aware of any leaks or other defects with the filter or the walls or other structural or  
330 mechanical components of the pool or spa/hot tub?  
331     105c. If an in-ground pool, are you aware of any water seeping behind the walls of the pool?  
332 106. Indicate which of the following may be included in the sale? (Indicate Y for yes N for no.)  
333  Refrigerator  
334  Range  
335  Microwave Oven  
336  Dishwasher  
337  Trash Compactor  
338  Garbage Disposal  
339  In-Ground Sprinkler System  
340  Central Vacuum System  
341  Security System  
342  Washer  
343  Dryer  
344  Intercom  
345  Other  
346    107. Of those that may be included, is each in working order?  
347 If "no," identify each item not in working order, explain the nature of the problem:  
348 \_\_\_\_\_  
349  
350



351  
352  
353  
354  
355  
356  
357  
358  
359  
360  
361  
362  
363  
364  
365  
366  
367  
368  
369  
370  
371  
372  
373  
374  
375  
376  
377  
378  
379  
380  
381  
382  
383  
384  
385  
386  
387  
388  
389  
390  
391  
392  
393  
394  
395  
396  
397  
398  
399  
400  
401  
402  
403  
404  
405  
406  
407  
408  
409  
410

**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.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

411  
412  
413  
414  
415  
416  
417  
418  
419  
420  
421  
422  
423  
424  
425  
426  
427  
428  
429  
430  
431  
432  
433  
434  
435  
436  
437  
438  
439  
440  
441  
442  
443  
444  
445  
446  
447  
448  
449  
450  
451  
452  
453  
454  
455  
456  
457  
458  
459  
460  
461  
462  
463  
464  
465  
466  
467  
468  
469  
470

DocuSigned by:  
*Stefan Kraemer*  
SELLER  
93A12C39672D4A7...

1/21/2024 | 10:14 PM EST

DATE

DocuSigned by:  
*Petra Kraemer*  
SELLER  
0873A3E0507C4D2...

1/22/2024 | 11:45 AM EST

DATE

SELLER

DATE

SELLER

DATE

**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

DATE



471  
472  
473  
474  
475  
476  
477  
478  
479  
480  
481  
482  
483  
484  
485  
486  
487  
488  
489  
490  
491  
492  
493  
494  
495  
496  
497  
498  
499  
500  
501  
502  
503  
504  
505  
506  
507  
508  
509  
510  
511  
512  
513  
514  
515  
516  
517  
518  
519  
520  
521  
522  
523  
524  
525  
526  
527  
528  
529  
530

**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:  
*Melissa Bulwith*  
DE654AD2B22485

2/2/2024 | 4:59 PST

\_\_\_\_\_  
SELLER’S REAL ESTATE BROKER/  
BROKER-SALESPERSON/SALESPERSON:

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PROSPECTIVE BUYER’S REAL ESTATE BROKER/  
BROKER-SALESPERSON/SALESPERSON:

\_\_\_\_\_  
DATE



**Addendum to the Seller's Property Condition Disclosure Statement for:** 65 Edgewood Road, Summit NJ 07901

The following items are to be INCLUDED in the sale:

Ski and golf racks in basement; built-in wine cellar shelves; American Security (AmSec) safe (working condition); built-in whole-house generator; removable awning (currently in winter storage); wooden table in Gazebo; shelves in downstairs pantry/storage area, shelf in gym; shelves in garage; paint samples and paint reserves; spare tiles for various locations in house; extra roof tiles (additional roof tiles are owned by Peter Traub and kept at roofing company Peter Traub); fireplace service tools, fire place inserts, fire place wood storage rack for main floor and basement fire places; beverage refrigerator and beverage counter / cabinet in basement family / play room; refrigerator in garage; water softener and spare salt.

The following items are to be EXCLUDED from the sale:

The non-electric, dining room sconces (each sconce is mounted by 2 picture nails. These picture nails will remain).  
The dining room mirror (mount to remain).  
First floor powder room mirror.  
Art, carpets, furniture, garden furniture, garden chairs, and sun umbrella.  
The wine that is in the wine cellar.  
All items that are not listed under the INCLUDED section of this document.

The following items are to convey in strictly AS-IS condition:

The exterior steps that are leading to the lower level of the property (these steps are exhibiting some normal wear and tear and degradation).  
The fireplaces, flues, and all associated components.

Seller: <sup>DocuSigned by:</sup> Stefan Kraemer 1/21/2024 | 10:14 PM EST Buyer: \_\_\_\_\_  
83A12C38072D4A7... (date) (date)

Seller: <sup>DocuSigned by:</sup> Petra Kraemer 1/22/2024 | 11:45 AM EST Buyer: \_\_\_\_\_  
0873A3E0607C4D2... (date) (date)



# K L A S

**ELECTRICAL CONTRACTORS**

## GENERATORS

NJ LIC #6538

4A Great Meadow Lane  
 East Hanover, NJ 07936  
 (973) 635-1009  
 office@klaselectric.com

## Invoice

<b>DATE</b>	05/15/2023
<b>INVOICE#</b>	21326
<b>TERMS</b>	NET 15
<b>DUE DATE</b>	05/30/2023

**BILL TO**

Kraemer, Stephan & Petra  
 65 Edgewood Road  
 Summit NJ 07901  
 (206) 228-6113

**SERVICE LOCATION**

Kraemer, Stephan & Petra  
 65 Edgewood Road  
 Summit NJ 07901  
 (206) 228-6113

JOB#	DATE	PO/REF#	DESCRIPTION
1019929783			8-20kw Full Service - Existing Customer 20RESA 2 visits/year OnCue Monitoring 6/1/23-6/1/24

Job Charges	Qty	Rate	Total
8-20KW Full Service			
8-20KW Generator Full Service & Transfer Switch Inspection with full system test	1.00	\$449.00	\$449.00
8-20KW Inspection Visit			
Additional Inspection during contract period	1.00	\$149.00	\$149.00
OnCue Monitoring			
24hr Monitoring for Kohler Generators	1.00	\$120.00	\$120.00
<b>Job Subtotal</b>			<b>\$718.00</b>
NJ SALES & USE TAX		6.625%	\$47.57
<b>Job Total</b>			<b>\$765.57</b>

**PRE-WORK SIGNATURE**

**POST-WORK SIGNATURE**

Signed By:

Signed By:

**CUSTOMER MESSAGE**

Thank you for choosing Klas Electric and Generator for your Generator Servicing needs.

<b>Invoice Total:</b>	<b>\$765.57</b>
<b>Deposits (-):</b>	<b>\$0.00</b>
<b>Payments (-):</b>	<b>\$0.00</b>
<b>Total Due:</b>	<b>\$765.57</b>

WF

29.5.17.23

# K L A S

**ELECTRICAL CONTRACTORS**

## GENERATORS

NJ LIC #6538

4A Great Meadow lane  
 East Hanover, NJ 07936  
 (973) 635-1009  
 office@klaselectric.com

## Invoice

DATE	05/11/2022
INVOICE#	20446
TERMS	Due Upon Receipt
DUE DATE	05/11/2022

### BILL TO

Kraemer, Stephan & Petra  
 65 Edgewood Road  
 Summit NJ 07901  
 (206) 228-6113

### SERVICE LOCATION

Kraemer, Stephan & Petra  
 65 Edgewood Road  
 Summit NJ 07901  
 (206) 228-6113

JOB#	DATE	PO/REF#	DESCRIPTION	Qty	Rate	Total
77825576			8-20kw Service contract renewal 20RESA 2 visits/year OnCue 6/1/22-6/1/23			
<b>Job Charges</b>						
8-20kw Full Service						
8-20kw Generator Full Service & Transfer Switch Inspection with full system test			1.00	\$449.00		\$449.00
8-20kw Inspection Visit						
Additional Inspection during contract period			1.00	\$149.00		\$149.00
OnCue Monitoring						
24hr Monitoring for Kohler Generators			1.00	\$120.00		\$120.00
<b>Job Subtotal</b>						<b>\$718.00</b>
NJ SALES & USE TAX				6.625%		\$47.57
<b>Job Total</b>						<b>\$765.57</b>

### PRE-WORK SIGNATURE

### POST-WORK SIGNATURE

Signed By:

Signed By:

### CUSTOMER MESSAGE

Thank you for choosing Klas Electric and Generator for your Generator Servicing needs.

<b>Invoice Total:</b>	<b>\$765.57</b>
<b>Deposits (-):</b>	<b>\$0.00</b>
<b>Payments (-):</b>	<b>\$0.00</b>
<b>Total Due:</b>	<b>\$765.57</b>

20, 5, 15, 2022



RUSSO BROS. & CO. INC.  
 PLUMBING \*HEATING\* A/C  
 27 Eagle Rock Avenue  
 East Hanover, NJ 07936  
 973-887-1334

**Invoice** 330383  
 Invoice Date 03/31/2022  
 Technician agermi

Remaining Balance  
**\$0.00**

Invoice To

**Petra Kraemer**  
 65 Edgewood Road  
 Summit, NJ 07901  
 206-228-6113 ext.Mrscel

Location Details

**Petra Kraemer**  
 65 Edgewood Road  
 Summit, NJ 07901  
 206-228-6113 ext.Mrscel

Work Completed Notes

Performed priority serve on 3 ac systems.  
 Found bad compressor on 3rd floor system. Pat to give estimate on mini split system on 4/5/22  
 Replaced contractor and capacitor on basement system  
 Checked and Serviced the following as needed:  
 Thermostat  
 Condenser motor and coil  
 Evaporator motor and coil  
 Refrigerant piping  
 Electrical connections  
 Condensate drain and/or pump  
 Condensate overflow device, if present  
 Air filter (media or EAC additional) Size: 14x24x1,  
 IAQ devices, if present  
 Sequence of operations  
 Airflow and duct work  
 Operational parameters  
 Identified emergency controls  
 System is fully operational at this time.  
 3rd floor system has heat only

Work Suggested Notes

To replace out door fan motor \$1080

Item Description	Qty		Total
<b>Dual Run Capacitor on the Condenser - Replace</b>	1x	\$534.00	\$534.00
<b>HVAC Spring Service</b> Visit for Agreement: 139178, Air Conditioning 1 PSA			\$0.00
<b>HVAC Spring Service</b> Visit for Agreement: 139179, Furnace 2/AC 2			\$0.00



# Superior Lawn Sprinklers

Invoice # 232137

P.O. Box 1305  
Union, NJ 07083  
1-800-464-3301

www.superiorlawnsprinklers.com

Customer Name: Kraemer Date: 11/01/23  
 Street Address: 65 Edgewood Rd. Scheduled Time: 10:00 AM - 12:00 PM  
 Town: Summit State: NJ Zip: 07901 Arrival Time: \_\_\_\_\_  
 Phone: H \_\_\_\_\_ W \_\_\_\_\_ HC (206)335-5510 WC (206)228-6113

Date Installed: 06/19/17 Customer Since: 06/19/17 W On/Off L/T: Bsmt Fm wall ball  
 Clock Loc: Bsmt Fm Clock Type: RB ESP-Me Rain Sen L/T: Rbc garbage Hunter  
 Valve Box L: Rfms, Lfch mulch Mstr Valve L/T: Rfs Dv-100 Back flow L/T: Rfs Wilkins 1" Pvb  
 Valve Type: Dv-100 Rotary Hd Type: Rb-5000 Spray Hd Type: Rb-1800

Service Type: Winterization (Looking At House From Street) 13 Station System \$182.00

Run Time	Location	Comments / Repairs
Station 1 • 10	Right side of house shrubs	<div style="font-size: 2em; font-family: cursive;">No Water Remaining</div>
Station 2 • 10	Front shrubs right	
Station 3 • 10	Front shrubs left	
Station 4 • 30	Front lawn house	
Station 5 • 30	Front lawn middle	
Station 6 • 30	Front lawn street	
Station 7 • 30	Left side of house	
Station 8 • 30	Back lawn left far	
Station 9 • 30	Back lawn left near	
Station 10 • 10	Back right drive shrubs	
Station 11 • 30	R/S of driveway lower near	
Station 12 • 30	R/S of driveway lower far	
Station 13 • 30	R/S of driveway street	
Misc.		
Misc.		

Cycle Start : 12:00 AM Cycle End : 5:10 AM Watering Schedule: Mon, Wed, Fri, Sun Subtotal \$182.00  
 Cycle Start : \_\_\_\_\_ Cycle End : \_\_\_\_\_ Watering Schedule: \_\_\_\_\_ Tax \$12.74  
 Additional Comments: Winterization: Drain water in basement! Total Due \$194.74

Approved by (print): \_\_\_\_\_ Signature: \_\_\_\_\_ 11/01/23  
 SLS Rep (print): Harold Peddie Signature: 11/01/23  
 Method of Payment (circle): Check# \_\_\_\_\_ Credit Card \_\_\_\_\_

**\*PAYMENT DUE IN FULL UPON COMPLETION\***



# Superior Lawn Sprinklers

Invoice # 230215

P.O. Box 1305  
Union, NJ 07083  
1-800-464-3301

www.superiorlawnsprinklers.com

Customer Name: Kraemer Date: 04/19/23  
 Street Address: 65 Edgewood Rd. Scheduled Time: 9:00 AM - 11:00 AM  
 Town: Summit State: NJ Zip: 07901 Arrival Time: \_\_\_\_\_  
 Phone: H \_\_\_\_\_ W \_\_\_\_\_ HC (206)335-5510 WC (206)228-6113

Date Installed: 06/19/17 Customer Since: 06/19/17 W On/Off L/T: Bsmt Fm wall ball  
 Clock Loc: Bsmt Fm Clock Type: RB ESP-Me Rain Sen L/T: Rbc garbage Hunter  
 Valve Box L: Rfms, Lfch mulch Mstr Valve L/T: Rfs Dv-100 Back flow L/T: Rfs Wilkins 1" Pvb  
 Valve Type: Dv-100 Rotary Hd Type: Rb-5000 Spray Hd Type: Rb-1800

Service Type: Spring Startup (Looking At House From Street) 13 Station System \$182.00

Run Time	Location	Comments / Repairs	
Station 1	10	Right side of house shrubs	
Station 2	10	Front shrubs right	
Station 3	10	Front shrubs left	
Station 4	30	Front lawn house	
Station 5	30	Front lawn middle	
Station 6	30	Front lawn street	
Station 7	30	Left side of house	
Station 8	30	Back lawn left far	
Station 9	30	Back lawn left near	60.00#
Station 10	10	Back right drive shrubs	
Station 11	30	R/S of driveway lower near	
Station 12	30	R/S of driveway lower far	
Station 13	30	R/S of driveway street	
Misc.			
Misc.			

Cycle Start : 12:00 AM Cycle End : 5:10 AM Watering Schedule: Mon, Wed, Fri, Sun Subtotal 242.00#  
 Cycle Start : \_\_\_\_\_ Cycle End : \_\_\_\_\_ Watering Schedule: \_\_\_\_\_ Tax 16.94 #  
 Additional Comments: Winterization: Drain water in basement! Total Due 258.94

Approved by (print): \_\_\_\_\_ Signature: [Signature] 04/19/23  
 SLS Rep (print): Carlos Sandres Signature: \_\_\_\_\_ 04/19/23  
 Method of Payment (circle): Check # \_\_\_\_\_ Credit Card \_\_\_\_\_

**\*PAYMENT DUE IN FULL UPON COMPLETION\***

[Signature]  
No. 2765



# Superior Lawn Sprinklers

Invoice # 221935

P.O. Box 1305  
Union, NJ 07083  
1-800-464-3301

www.superiorlawnsprinklers.com

Customer Name: Kraemer Date: 11/01/22  
 Street Address: 65 Edgewood Rd. Scheduled Time: 11:00 AM - 1:00 PM  
 Town: Summit State: NJ Zip: 07901 Arrival Time: \_\_\_\_\_  
 Phone: H \_\_\_\_\_ W \_\_\_\_\_ HC (206)335-5510 WC (206)228-6113

Date Installed: 06/19/17 Customer Since: 06/19/17 W On/Off L/T: Bsmt Fm wall ball  
 Clock Loc: Bsmt Fm Clock Type: RB ESP-Me Rain Sen L/T: Rbc garbage Hunter  
 Valve Box L: Rfms, Lfch mulch Mstr Valve L/T: Rfs Dv-100 Back flow L/T: Rfs Wilkins 1" Pvb  
 Valve Type: Dv-100 Rotary Hd Type: Rb-5000 Spray Hd Type: Rb-1800

Service Type: Winterization (Looking At House From Street) 13 Station System PP2

Run Time	Location	Comments / Repairs
Station 1	10	Right side of house shrubs
Station 2	10	Front shrubs right
Station 3	10	Front shrubs left
Station 4	30	Front lawn house
Station 5	30	Front lawn middle
Station 6	30	Front lawn street
Station 7	30	Left side of house
Station 8	30	Back lawn left far
Station 9	30	Back lawn left near
Station 10	10	Back right drive shrubs
Station 11	30	R/S of driveway lower near
Station 12	30	R/S of driveway lower far
Station 13	30	R/S of driveway street
Misc.		
Misc.		

Water eliminated

Cycle Start : 12:00 AM Cycle End : 5:10 AM Watering Schedule: Mon, Wed, Fri, Sun Subtotal AP  
 Cycle Start : \_\_\_\_\_ Cycle End : \_\_\_\_\_ Watering Schedule: \_\_\_\_\_ Tax \_\_\_\_\_  
 Additional Comments: Winterization: Drain water in basement! Total Due \_\_\_\_\_

Approved by (print): \_\_\_\_\_ Signature: \_\_\_\_\_ 11/01/22  
 SLS Rep (print): Ken Helmstetter Signature: \_\_\_\_\_ 11/01/22  
 Method of Payment (circle): Check # \_\_\_\_\_ Credit Card \_\_\_\_\_

**\*PAYMENT DUE IN FULL UPON COMPLETION\***

# Superior Lawn Sprinklers

Invoice # 220340

P.O. Box 1305  
Union, NJ 07083  
1-800-464-3301

www.superiorlawnsprinklers.com

Customer Name: Kraemer Date: 05/05/22  
 Street Address: 65 Edgewood Rd. Scheduled Time: 2:00 PM - 4:00 PM  
 Town: Summit State: NJ Zip: 07901 Arrival Time: \_\_\_\_\_  
 Phone: H W HC (206)335-5510 WC (206)228-6113

Date Installed: 06/19/17 Customer Since: 06/19/17 W On/Off L/T: Bsmt Fm wall ball  
 Clock Loc: Bsmt Fm Clock Type: RB ESP-Me Rain Sen L/T: Rbc garbage Hunter  
 Valve Box L: Rfms, Lfch mulch Mstr Valve L/T: Rfs Dv-100 Back flow L/T: Rfs Wilkins 1" Pvb  
 Valve Type: Dv-100 Rotary Hd Type: Rb-5000 Spray Hd Type: Rb-1800

Service Type: Spring Startup (Looking At House From Street) 13 Station System PP2

Run Time	Location	Comments / Repairs
Station 1	10	Right side of house shrubs <i>OK</i>
Station 2	10	Front shrubs right <i>OK</i>
Station 3	10	Front shrubs left <i>OK</i>
Station 4	30	Front lawn house <i>OK</i>
Station 5	30	Front lawn middle <i>OK</i>
Station 6	30	Front lawn street <i>OK</i>
Station 7	30	Left side of house <i>OK</i>
Station 8	30	Back lawn left far <i>OK</i>
Station 9	30	Back lawn left near <i>OK</i>
Station 10	10	Back right drive shrubs <i>OK</i>
Station 11	30	R/S of driveway lower near <i>- Garden</i>
Station 12	30	R/S of driveway lower far <i>OK</i>
Station 13	30	R/S of driveway street <i>OK</i>
Misc.		
Misc.		

*mon, wed, fri, sun*

Cycle Start : 12:00 AM Cycle End : 5:10 AM Watering Schedule: Every odd day Subtotal PP  
 Cycle Start : \_\_\_\_\_ Cycle End : \_\_\_\_\_ Watering Schedule: \_\_\_\_\_ Tax \_\_\_\_\_  
 Additional Comments: Winterization: Drain water in basement! Total Due \_\_\_\_\_

Approved by (print): \_\_\_\_\_ Signature: *[Signature]* 05/05/22  
 SLS Rep (print): Ken Helmstetter Signature: *[Signature]* 05/05/22  
 Method of Payment (circle): Check # \_\_\_\_\_ Credit Card \_\_\_\_\_

**\*PAYMENT DUE IN FULL UPON COMPLETION\***



1 Prince Road  
Whippany NJ 07981  
Tel: (800) 545-1020  
Fax: (973) 887-9265  
Cell: (973) 906-3888

June 5, 2022

Acct #: 291190

DR. STEFAN KRAEMER  
65 EDGEWOOD RD  
SUMMIT  
07901

CONTRACTOR: 973-543-8582

WE PROPOSE TO INSTALL THE FOLLOWING (Valid for 30 days):

To install a new 1.5 Tons, High Heat, Heat Pump outside and the following inside:

- Remove existing equipment.
- 1-ducted indoor unit for closet and middle area and ductwork.
- 1-wall mounted head in bedroom area.

Price \$ 15,300

Additional work where possible/needed:

Install ducted fan coil for bathroom over the  
Bedroom area and duct outlet into bathroom Add \$ 2,900

Total \$ 18,200

If Ducted Fan Coil cannot fit, no ac will be  
Installed in bathroom and electric cabinet  
Heater will be installed. \$ 1,930  
(deduct \$2900 and add \$1930)

High Voltage included.

Peter W. Traub Roofing & Carpentry LLC  
83 Industrial Rd  
Berkeley Heights, NJ 07922  
(908)464-9655  
peterwtraubroofing@gmail.com

## Estimate

*Peter W. Traub*  
**ROOFING & CARPENTRY, LLC**  
Est. 1985

ADDRESS

Drs. Stefan and Petra Kraemer  
65 Edgewood Rd.  
Summit, NJ 07901

SHIP TO

Drs. Stefan and Petra Kraemer  
Ludowici Tile Brown 12x7  
Owner has tile  
(973) 520-8835 206-228-6113  
Petra

ESTIMATE #      DATE  
1132              09/02/2016

*Signed and  
mailed  
9-7-2016*

ACTIVITY

PROPOSAL FOR REPAIRS TO BRICK CHIMNEY AND GENERAL  
MAINTENANCE TO ROOF

QTY      RATE      AMOUNT

WE WILL NEED TO RENT A 60' ARTICULATING BOOM TO ACCESS THE  
CHIMNEY

Apply crown saver waterproof cement to crown, 6" ledge and 3 flues

Repoint any bad joints in brick mortar

Install chimney saver waterproofing to entire chimney

Fabricate and install round copper flue caps to 3 flues as discussed

Inspect entire tile roof and replace any damaged tile. Tile supplied by client

TOTAL COST LABOR AND MATERIAL FOR WORK OULINED ABOVE	1	6,000.00	6,000.00
COST OF BOOM RENTAL	1	2,500.00	2,500.00

ROOF RESTORATION  
SLATE - TILE - WOOD SHINGLES  
COPPER GUTTERS & FLASHING - SNOW GUARDS  
All Phases of Carpentry  
N.J. License 13VH00107400



# Certified Chimney Service, Inc.

3122 Route 10 West  
 SUITE 4  
 DENVILLE, N.J. 07834  
 973-361-1783/973-361-4488 FAX

STATE OF NEW JERSEY HOME  
 IMPROVEMENT  
 CONTRACTORS LIC. #  
 13VH00483200

# Estimate

Date	Estimate #
2/14/2013	7477

Name / Address
PETRA KRAMER 24 FRIAR TUCK CIRCLE SUMMIT, N.J. 07901

Project

Description	Qty	Cost	Total
<p>JOB SITE: 65 EDGEWOOD RD SUMMIT</p> <p>A visual inspection of the chimney was performed on 2/6/13. The inspection revealed the chimney is a brick structure with 3 round flues. One round flue is for the gas furnace and 2 gas hot water heaters. This flue has missing and deteriorated flue tiles at the base and has deterioration through out and should be relined with a stainless steel lining.</p> <p>The living room fireplace has a large round flue approximately 20" which visually appears to be satisfactory. The smoke chamber has about a 3" gap between the brick and mortar which needs to be sealed. The damper opens and closes but is old and could use some adjusting. There is debris such as leaves on the smoke shelf and smoke chamber area is dirty. The fireplace and flue should be cleaned. The ash pit door on the floor of the firebox is warped and rusting and should be replaced.</p> <p>The downstairs fireplace also has a large round flue approximately 20" which visually appears to be satisfactory. This one also has debris on the smoke shelf and should be cleaned before usage. The remainder of the fireplace visually appears satisfactory.</p> <p>The top of the chimney does not have caps. It is recommended cutting down height of the flues and installing a multi-flue stainless steel cap to top.</p> <p>ESTIMATE IS AS FOLLOWS:</p>			
		<b>Total</b>	

Customer must provide access to inside of home , electricity and water IF and Where needed to perform work. A deposit of 1/3 is required. Balance due upon completion. Cost of above work is based on a visual inspection. If unforeseen complications arise the price would be adjusted accordingly. Prices are subject to change after 30 days. Upon receipt of deposit estimates are reviews by a supervisor. If an error has been made in an estimate the deposit would be returned.

Signature \_\_\_\_\_



# Certified Chimney Service, Inc.

3122 Route 10 West  
 SUITE 4  
 DENVILLE, N.J. 07834  
 973-361-1783/973-361-4488 FAX

STATE OF NEW JERSEY HOME  
 IMPROVEMENT  
 CONTRACTORS LIC. #  
 13VH00483200

# Estimate

Date	Estimate #
2/14/2013	7477

Name / Address
PETRA KRAMER 24 FRIAR TUCK CIRCLE SUMMIT, N.J. 07901

Project

Description	Qty	Cost	Total
Reline gas furnace and hot water heater chimney flue from top to base using UL Listed Stainless steel lining and components. Open wall at base to install "T" connection at base of chimney to connect to appliance smoke pipe.  Condition of Liner Warranty: 1. Chimney liner has a lifetime warranty to the purchaser, provided you continue to own the home where the liner is installed. 2. Chimney must be swept at least once a year by the installing technician, or in his absence, a certified chimney sweep at the end of each burning season. 3. The use of chemical cleaners is prohibited, as well as the use of treated drift wood, as they contain amounts of salt. 4. The linings system must have a rain cap.  Cost of Permits additional  LIVING ROOM FIREPLACE:  Repair gap in smoke chamber using chamber tech.  Clean fireplace flue using wire brush and vacuum.  Replace ash pit door.  DOWNSTAIRS FIREPLACE:		3,285.00        275.00  164.50  145.00	3,285.00        275.00  164.50  145.00
		<b>Total</b>	

Customer must provide access to inside of home, electricity and water IF and Where needed to perform work. A deposit of 1/3 is required. Balance due upon completion. Cost of above work is based on a visual inspection. If unforeseen complications arise the price would be adjusted accordingly. Prices are subject to change after 30 days. Upon receipt of deposit estimates are reviews by a supervisor. If an error has been made in an estimate the deposit would be returned.

Signature \_\_\_\_\_

Peter W. Traub Roofing & Carpentry LLC  
83 Industrial Rd  
Berkeley Heights, NJ 07922 US  
(908) 464-9655  
peterwtraubroofing@gmail.com

# Invoice

*Peter W. Traub*  
**ROOFING & CARPENTRY, LLC**  
Est. 1985

BILL TO  
Drs. Stefan and Petra Kraemer  
65 Edgewood Rd.  
Summit, NJ 07901

SHIP TO  
Drs. Stefan and Petra Kraemer  
Ludowici Tile Brown 12x7  
Owner has tile  
(973) 520-8835 206-228-6113  
Petra

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
3133	09/08/2020	\$10,265.00	09/08/2020	DUE UPON RECEIPT	

DESCRIPTION	QTY	RATE	AMOUNT
Completed the following work on 9/5/2020 Completed all work as discussed -Built and installed new window on 3rd floor -Painted and completed exterior area around window -Inspected entire roof completed all repair as needed -Trimmed 3 windows with AZEK completing all needed repairs of stucco and trim nailers -Repaired exterior trim as needed -Painted 2 exterior dormers on back of house -Removed all debris -United Rental, articulating boom 76'-85'	1	10,265.00	10,265.00

Payment Due Upon Receipt. Your prompt payment is greatly appreciated. Thank you for your continued patience and trust!

BALANCE DUE

**\$10,265.00**

*Schude*  
11. Sep. 2020

ROOF RESTORATION  
SLATE - TILE - WOOD SHINGLES  
COPPER GUTTERS & FLASHING - SNOW GUARDS  
All Phases of Carpentry  
N.J. License 13VH00107400

# LEAD PAINT INSPECTION REPORT

REPORT NUMBER: S#01404 - 02/06/13 11:33

INSPECTION FOR: Petra Kraemer  
24 Friar Tuck Circle  
Summit, NJ 07901  
Phone:

PERFORMED AT: 65 Edgewood Rd  
Summit, NJ 07901

Year Built:      Block:      Lot:

INSPECTION DATE: 02/06/13

INSTRUMENT TYPE: R M D  
MODEL LPA-1  
XRF TYPE ANALYZER  
Serial Number: 01404

ACTION LEVEL: 1.0 mg/cm<sup>2</sup>

OPERATOR LICENSE: 00121-E

Asbestos observed in garage. \$2,500 to remove.

SIGNED: 

Date: 2/6/13.

G. Luke Schroeder  
NJ dept of Health ID# 001537

**SUMMARY REPORT OF LEAD PAINT INSPECTION FOR: Petra Kraemer**

Inspection Date: 02/06/13 65 Edgewood Rd  
 Report Date: 2/12/2013 Summit, NJ 07901  
 Abatement Level: 1.0  
 Report No. S#01404 - 02/06/13 11:33 Year Built: Block: Lot:  
 Total Readings: 242 Actionable: 9  
 Job Started: 02/06/13 11:33  
 Job Finished: 02/06/13 13:40

Reading No.	Wall	Structure	Location	Member	Paint Cond	Substrate	Color	Lead (mg/cm <sup>2</sup> )	Mode
Exterior Room 023 Exterior									
242	B	Window	Ctr	Sash	I	Wood	Blue	>9.9	Std
Interior Room 009 2ndFl L Bed									
104	C	Window	Lft	Sash	I	Wood	White	3.4	Std
Interior Room 010 Bath Off 9									
114	A	Window	Ctr	Sash	I	Wood	White	4.4	Std
Interior Room 011 2nd Fl Hall									
124	A	Window	Lft	Sash	I	Wood	Natural	6.5	Std
Interior Room 012 2ndFl C Bed									
134	C	Window	Lft	Sash	I	Wood	White	8.0	Std
Interior Room 017 Bsmnt LStor									
188	C	Window	Rgt	Sash	I	Metal	Black	1.8	Std
Interior Room 021 Garage									
224	D	Window	Rgt	Sash	I	Wood	White	5.2	Std
Interior Room 022 Laund/Bath									
231	D	Door	Lft	Rgt jamb	I	Metal	Gray	1.8	Std
232	D	Door	Lft	U Rgt	I	Metal	Gray	1.7	Std
Calibration Readings									
----- End of Readings -----									

# Certificate of Completion

Re: Asbestos Abatement @ 65 Edgewood Rd. Summit, NJ 07901

On May 4, 2022 an asbestos project was performed at the above referenced site location. The project consisted of the following:

**Removal and disposal of an estimated 20 square feet of exposed/accessible asbestos containing paper duct insulation/seams in 3 locations in the 1<sup>st</sup> floor construction area. Wet wipe and Hepa vacuum around the asbestos work area inside the tent.**

The abatement was performed by NJ State licensed asbestos workers. This project conformed to all OSHA & EPA rules & regulations pertaining to the removal of asbestos containing material.

Should you have any questions please do not hesitate to call.

Respectfully submitted,  
D & S RESTORATION, INC., License #01169

*Bob Joldzic, President*





## Phase Contrast Microscopy Analytical Report

<b>Client :</b> Klomax  <b>Address:</b> 144 US Highway 46, Budd Lake NJ 07828  <b>Phone:</b> (833)455-6629  <b>Email:</b> 4klomax@gmail.com		<b>Samples Analyzed:</b> 1  <b>Job Site:</b> 65 Edgewood Road, Summit, NJ 07901		<b>ReportID:</b> RP220504010  <b>Sampled:</b> 05/04/2022 <b>Received:</b> 05/04/2022 <b>Analyzed:</b> 05/04/2022 <b>Reported:</b> 05/04/2022	
Sample ID	Fibers per CC	Fibers per Field	Fibers per Filter	Fibers per mm <sup>2</sup>	Description Location
01	<0.002	<5.5	<2695	<7	Final Air Test
220504003		100			IWA Near Decon (1st Floor)- Volume(L): 1350

Detection Limit = 7 Fibers/mm<sup>2</sup>

Klomax collected the sample(s) above.

Lab Manager: \_\_\_\_\_

Print Name: Rick Eustaquio

Analyst: \_\_\_\_\_

Print Name: Jonathan Williams

*Analysis was performed without method required blank samples for quality control.*

Following the IRIS Analytical SOP Asbestos and Other Fibers by PCM, IRIS bears No responsibility for sample collection activities or analytical method limitations. Interpretation and use of test results are the responsibility of the client. IRIS is not responsible for data reported in fiber/cc, which is dependent on volume collected by non-laboratory personnel. Samples received in good condition unless otherwise noted. This report is not induced by any U.S Government Agency. Intra-laboratory Sr values: 0.29, Inter\_laboratory Sr values: 5-20 fibers =0.45, 20-50=0.29, 50-100=0.40. NJ DEP#: 20045 NIOSH PAT #:173498 ELAP# 12078

Iris Environmental Laboratories, Inc.  
 2333 Route 22 West, Union, NJ 07083  
 Phone: (908) 206-0073





20 CALIFORNIA AVE., PATERSON, NJ 07503 T 973.345.8020 F 973.345.8060

May 4, 2022

Stefan Kraemer  
65 Edgewood Rd.  
Summit, NJ 07901

Tel: 206-335-5510

Email: [Kraemersjm@yahoo.com](mailto:Kraemersjm@yahoo.com)

Re: Asbestos Abatement @ 65 Edgewood Rd. Summit, NJ 07901

**MS # 22-76**

**For Services Rendered:**

Removal and disposal of an estimated 20 square feet of exposed/accessible asbestos containing paper duct insulation/seams in 3 locations in the 1<sup>st</sup> floor construction area. Wet wipe and Hepa vacuum around the asbestos work area inside the tent.

Contracted Amount: Removal and disposal of ACM Only-----\$ 2,400.00  
Notification fee-----\$ 200.00

Total Amount Completed & Stored To Date (100%) \$2,600.00

Paid to date: \$ .00

Contract Balance: \$2,600.00

Thank you for your patronage!!!

PAID PAID



# Accurate Tank Testing LLC

[www.oiltanktesting.com](http://www.oiltanktesting.com)

Featuring EZY3 Locator Plus

P.O. Box 366 • Franklin Lakes, N.J. 07417-0366 • (201) 848-8224 • Fax: (201) 847-0718  
N.J.D.E.P. #US00006

Thursday, October 18, 2012

Elizabeth Yerkes  
65 Edgewood Road  
Summit, NJ 07901

Re: Site Investigation / Underground Storage Tank

Dear Sir/Madam,

A representative from Accurate Tank Testing LLC. (Accurate) performed a limited site investigation at the above property for any evidence of any additional out of service or abandoned, #2 fuel oil, underground storage tank.

An interior inspection revealed an oil line trench going from the boiler towards the front foundation wall. The house is currently heated by gas fired equipment.

A magnetic survey was conducted using a Schonstedt Model GA-72CD flux-gate type magnetometer. The magnetometer utilizes two sensors that detect the magnetic field generated by ferromagnetic objects. The difference in magnetic field strength between the two sensors indicates a magnetic field generated by ferromagnetic objects. The presence of a difference in sensor readings indicates anomalous conditions that are manifested by a signal meter indicating strength and polarity. *No anomalous conditions consistent with an out-of-service or abandoned underground storage tank were detected on the property.*

Accurate Tank Testing LLC. reserves the right to review the findings of this investigation if any additional information is made available that could materially affect our opinion. Accurate is not responsible for detecting USTs that normally cannot be detected by the methods employed or that cannot be detected because of site conditions.

If you have any questions or require additional information, please do not hesitate to contact me.

Thank You,

Peter B. Woodard  
N.J.D.E.P. #21621



Radiation Data  
PO Box 150  
Skillman, NJ 08558  
(609) 466-4300  
Fax (609) 466-4302

NJDEP Radon Laboratory License 18017  
NJDEP Radon Measurement Business License MEB 90016

**Radon Test Result:**

Tue Feb 12 14:51:57 EST 2013

**ADDRESS TESTED:**

KRAEMER  
65 EDGEWOOD RD  
SUMMIT, NJ 07901

TEST ID# - 021213-11

START TIME: 11:15 AM 2/6/2013

STOP TIME: 11:15 AM 2/12/2013

LOCATION: BASEMENT

RESULTS: 2.7 pCi/l

E-PERM  
RAD ELEC, INC  
MODEL - SPER-1  
SERIAL NUMBER - 1225  
TECHNICIAN - HAMMITT  
LICENSE # - MET 10072

COMMENTS: 38356

MES 10128

MES 10116

  
J. Keith Baicker

  
J. A. Baicker

This notice is provided to you by an organization or individual certified by NJDEP to perform radon gas or radon progeny testing measurements. NJSA 26-2D-73 requires that no certified person disclose to anyone except the DEP or the Dept of Health the address or owners of a nonpublic building that the person has tested or treated for the presence of radon gas or 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 that has been tested for radon gas or progeny, the seller shall provide the buyer, at the time the contract of sales is entered into, with a copy of the results of that test and evidence of any subsequent mitigation or treatment. Any prospective buyer who contracts for the testing shall have the right to receive the results of that testing. Any questions, comments or complains regarding the person performing these measurements, or related mitigation, or safeguarding services, should be directed to the NJDEP, Attn: Radon Section, Bureau of Environmental Radiation, at 1-800-648-0394.

**LIMITATION OF LIABILITY:** While we at Radiation Data, and all of our licensed professional technicians, make every effort to maintain quality control (including duplicate canister tests, blanks, and "spiked" detectors), we make no warranty of any kind, either express or implied, for the consequences of false test results. Before any remediation action is taken, it is important that follow-up tests be conducted in accordance with USEPA protocols and NJDEP regulations. It is well known that radon concentrations fluctuate greatly under changing weather conditions. Furthermore, radon tests cannot be CERTIFIED, since there is no chain of custody of the test kit, and the "closed-house" conditions cannot be monitored continuously.