

PROPERTY ADDRESS: 74 Jackman Street, Georgetown, MA 01833

ITEM	INCLUDED	EXCLUDED	NEGOTIABLE	NONE	NOTES
A/C Central				X	
A/C Individual				X	
Air Filter				X	
Area Rugs		X			
Attic Vent Fan				X	
Basketball Hoop	X				
Ceiling Fan	X				
Central Vacuum	X				
Chandelier	X				
Cupola/Weathervane				X	
Curtains & Drapes			X		
Dishwasher	X				
Dog Fence - Control Unit				X	
Dog Fence - Underground				X	
Electric Garage Door	X				
Fence				X	
Fire Alarm	X				
Fireplace Screens				X	
Freezer - Standalone				X	
Garbage Disposal				X	
Ice Maker				X	
Lighting Fixtures	X				
Mailbox / Mailbox Post	X				
Mantel				X	
Microwave	X				
Mirrors	X				
Outside Lights	X				
Refrigerator			X		
Sauna				X	
Security System				X	
Shelves / Brackets	X				
Soaking Tub	X				Master Bathroom
Stereo Equipment				X	
Storage Shed				X	
Stove	X				
Stove Hood				X	
Sump Pump				X	
Swimming Pool				X	
Swing Set				X	
Trash Compactor	X				
TV Antenna				X	
Vent Fan	X				
Wall to Wall Carpet	X				
Washer/Dryer		X			
Water Filter	X				
Water Softener	X				
Window Blinds			X		
Window Screens	X				
Window Shades				X	
Wood Stove				X	

All negotiable items, unless referenced, shall be excluded from the Sale.

Buyer Initial(s): _____

Seller Initial(s): _____

Special Features

74 Jackman Street
Georgetown, MA 01833

- Kitchen: 3 ¼" Oak Hardwood Floor / Cherry Cabinets / Granite Countertops & Backsplash / Granite Kitchen Island & Breakfast Bar / Built-In Microwave / Trash Compactor / Recessed Lights / Desk Area
- Dining Room: 3 ¼" Oak Hardwood Floor
- Great Room: 3 ¼" Oak Hardwood Floor / 2 Story Ceiling / Radiant Heating / Ceiling Fan / Fireplace with Raised Granite Hearth / Recessed Lights / Access to Deck / Large Fixed Picture Windows
- 2 Story Foyer: Tile Floor / Wall Sconces / Wood Turned Staircase / Two Side Lights / Oval Stationary Window / Loft View of Great Room
- First Floor Bedroom or Office with Palladium Window / Second Floor Sitting or Media Area / Second Floor Walk-In Hallway Closet
- First Floor Laundry Room with Tile Floor / Pantry or Storage Closet / Mud Room with access to 3 Car Garage & Bonus Room
- Master Bedroom Suite: His & Her Walk-In Closets / Palladium Window / Master Bathroom with Tile Floor / Double Cherry Vanity with Corian Counter / Separate Shower / Soaking Tub / Linen Closet / Recessed Lights
- Powder Bathroom and Full Bathroom: Tile Floors / Corian Counters
- Bonus Room Above Garage: Heated / Vaulted Ceiling / Palladium Window / Closet Storage
- Andersen Windows & Doors / Architectural Shingle Roof / 9' Smooth Ceilings / Central Vacuum System / Cable Hook Up / Satellite Dish / 200 Amp Electric Service & Electric Sub Panel / Reverse Osmosis Water Filtration System / 5 Zone FHW Heating / (2) - 275 Gallon Oil Tanks
- 3 Car Oversized Attached Garage / Extra Large Driveway / Large Private Yard / Level Lot / Well Landscaped / Picturesque / Panoramic Views / Underground Utilities / Trex Decking and Large Farmers Porch
- Day Light Basement: Steel Eye Beam Construction / Double Door Walk Out
- Easy Access to Route 95, the Commuter Rail, Boston and 3 Major Airports.

EXCLUSIVE BROKER: MARK R. DICKINSON

RE/MAX On the River
50 Water Street
Newburyport, MA 01950
Telephone: (978)499-8808

**SINGLE FAMILY
SELLER'S STATEMENT OF PROPERTY CONDITION**

Property Address: 74 Jackman Street, Georgetown, MA 01833

NOTICE TO BUYERS AND SELLERS – PLEASE READ

- 1. The information contained in this statement has been completed by the Seller to the best of his/her/their/its personal knowledge, information and belief. The Seller understands that a copy of this statement will be furnished to any prospective Buyer of the property. The Broker/Realtor has not prepared or provided any of the information contained herein.**
- 2. All information in this statement is subject to verification by the Buyer. The Broker/Realtor is not responsible for the accuracy of any of such information.**
- 3. Neither Seller nor Broker/Realtor has made any representations, warranty or guarantee as to the condition of the property or the information contained herein.**
- 4. Buyer has been advised to obtain independent counsel and/or professional advisors to verify the condition of the property and investigate all matters related to the property, including, without limitation, the information contained in the statement.**
- 5. Neither Seller nor Broker/Realtor is an expert on any of the matters described in this statement nor have they made any independent investigation of said matters.**
- 6. IF APPLICABLE (estates and bank OREO): Seller has never occupied the property and has acquired the property either through foreclosure, by deed in lieu of foreclosure, or as a result of the death of the former Owner(s) of the property. Seller has had the property inspected. A copy of said inspection report is available for review by Buyer but only with the understanding and agreement that: neither Seller nor Broker/Realtor is responsible for the accuracy of the information contained in said report; that neither Seller nor Broker/Realtor is making any representation or warranty about the information contained in said report; and that Buyer will not rely on the information contained in said report in deciding whether to purchase the premises.**

Buyers Initials:

Sellers Initials:

MB

Property Owner's Name: Russell Beegan

Age of Structure: 6 yrs Years Owned: 6 yrs

Years occupied by the Owner: 6 yrs

Number of current residents: 3 If vacant, date of last occupancy: ___/___/___

Year-Round? Yes Seasonal Living? _____

Number of bedrooms: 3

Type of Deed Quit Claim Copy attached? Yes No

If Registered Land, location of original Certificate of Title: _____

Did Seller obtain a title insurance policy when he/she/they purchased the premises?
 Yes No

IF SO, PLEASE ATTACH A COPY OF THE PLAN.

of Parcels: _____ Lot Size: _____ sq.ft. Plot Plan attached? Yes No

If the deed refers to a recorded plan, do you have a copy? Yes No N.A.

IF SO, PLEASE ATTACH A COPY OF THE PLAN.

Has Seller/Owner conveyed any portion of the property originally deeded to him/her/they?
 Yes No

HAVE YOU EVER OR ARE YOU CURRENTLY EXPERIENCING ANY PROBLEMS WITH THE FOLLOWING?

IF YES, DESCRIBE. (For additional space use the Additional Comments Sections)

1. **BASEMENT:** Any water seepage cracks dampness leaks damage etc.?
If yes, explain None

2. **SUMP PUMP:** Yes No Permanent? Portable? Currently operational? Yes No
No Source of Power? NA Where located? _____

3. **ROOFING:** Age of Shingles: 6 yrs Leaks seepage dampness
 or other water problems?

Explain: _____

Was part of roofing replaced? Yes No Unknown N.A.

Which part? _____ When? _____

Was entire roofing replaced? Yes No Unknown N.A.

When? _____

4. **FIREPLACE:** How many? 1 Working? Yes - Used only once

Location: Great Room

Non-working? _____ Location: _____

Date last cleaned: ___/___/___ Date last inspected: ___/___/___

5. **CHIMNEY:** How many? 1 Working? Yes

Location: Back of House

Non-working? _____ Location: _____

Date last cleaned: ___/___/___ Date last inspected: ___/___/___

6. **WOOD/COAL BURNING STOVE:** How many? None Working? _____

Location: _____

Date last cleaned: ___/___/___ Date last inspected: ___/___/___ When installed? ___/___/___

Permit received? Yes No Unknown N.A.

7. **ANY FIRE OR SMOKE DAMAGE?** Yes No Unknown N.A.
If yes, describe: _____

8. **ANY EXTERIOR OR INTERIOR STRUCTURAL PROBLEMS?** NO

Buyers Initials:

Sellers Initials: RB

(for example, floors, ceilings, walls, windows) Yes No Unknown N.A.
 If yes, describe: _____

9. ANY DAMPNESS ANYWHERE? Yes No Unknown N.A.
 If yes, describe: _____

10. ANY VENTILATION PROBLEMS? Yes No Unknown N.A.
 If yes, describe: _____

11. INSULATION? Yes No Unknown N.A.
 If yes, describe: Fiberglass
 Walls type: _____ Ceiling type: _____
 When installed: ___/___/___ By whom? Jones Boys When? ___/___/___
 Room Location: _____
 Is there now, or has there ever been Urea Formaldehyde Foam-in-place Insulation (UFFI)
 Installed? Yes No If yes, when? ___/___/___ By whom? _____
 Removed? Yes No By whom? _____ When? ___/___/___ Has air test
 for UFFI been done? Yes No Unknown N.A.
 Is there a report available? Yes No Unknown N.A.

12. TERMITE OR OTHER INSECT INFESTATION?
 If yes, identify None
 Type of treatment: _____
 By whom: _____ When? ___/___/___
 Treatment contract in effect? Yes No Unknown N.A.
 When does treatment contract expire? ___/___/___
 Is treatment contract transferable? Yes No Unknown N.A.

13. LEAD PAINT:
 Was the house built prior to 1978? Yes No Unknown N.A.
 Have you ever had a lead paint inspection conducted?
 Yes No Unknown N.A.
 If yes, by whom? _____ When? ___/___/___
 Copy of report available? Yes No Unknown N.A.
 Are you aware of the existence of any lead paint anywhere inside or outside?
 Yes No Unknown N.A.
 If yes, location: _____

14. RADON:
 Has the property been tested for radon? Yes No Unknown N.A.
 If yes, date: 5/19/08 Copy of report available? Yes No Unknown N.A.

15. ASBESTOS AND HAZARDOUS WASTE:
 Is asbestos and/or asbestos containing insulation or materials present in exterior shingles, floor
 tiles, ceiling tiles, walls, cement, plaster products or otherwise present on the pipes or property?
 Yes No Unknown N.A.
 If yes, describe: _____
 Are you aware of any hazardous waste on this property? Yes No Unknown N.A.
 Are you aware of any hazardous waste site within one mile or near this property?
 Yes No Unknown N.A.
 If yes to either question, explain: _____

Buyers Initials:

Sellers Initials: RB

If you indicated a history of any repairs, improvements, or problems with any of the following by checking yes, then please give dates of problems, or repairs and explain.

16. **ELECTRICAL SERVICE:** Service: Amps 200 Circuit breakers Fuses
Type of wiring: Copper Aluminum Knob and Tube
Any electrical permits or approvals by City/Town conducted during ownership?
 Yes No Unknown N.A.
Improvements and Repairs? Yes No Unknown N.A.

17. **HEATING SYSTEM:** Type of fuel: oil If oil, size of tank: 2-275 gals.
Estimated annual fuel / oil consumption / Gallons: _____ / year
Estimated annual fuel / gas consumption / Dollars: _____ / year
Includes domestic hot water fuel usage? Yes No
Oven/stove usage? Yes No
 Underground In Basement Other
Improvements and repairs? Yes No Unknown N.A.

If yes, explain: _____
Age of heating system : 6 YRS
Heating Company's name: Installed by K+B Plumbers
Heating Contractor's name: Olsen Heating cleans burner last June 3/7/08
Any service contract in effect now? Yes No Unknown N.A.
Is copy available? Yes No Unknown N.A.
Any unheated finished rooms? Yes No Unknown N.A.
Location: Garage
Any supplemental heating? Yes No Unknown N.A.
If yes, what kind? _____
Any change in type of fuel used during ownership? Yes No Unknown N.A.
Has heating system been converted from oil to:
 Gas Wood/Coal Electric Other
If yes, has oil tank been removed or capped? Yes No Unknown N.A.
Is there an **underground oil storage tank** present on the property?
 Yes No Unknown N.A.
If yes, give location: _____
Has it been tested for leaks and/or ground contamination? Yes No Unknown N.A.
If yes, by whom: _____ When? ____/____/____
If not in use, has the Fire Department been notified? Yes No Unknown N.A.
To Seller's knowledge, has any underground tank ever existed on the property?
 Yes No Unknown N.A.
What kind? _____

18. **AIR CONDITIONING SYSTEM:** Type: None Central Window Other
Improvements and Repairs or Problems? Yes No Unknown N.A.
If yes, explain: _____

19. **PLUMBING SYSTEM:** Plumbing leaks Freezing Seepage Back-up
Improvements and Repairs? Yes No Unknown N.A.
If yes, explain: _____

Any plumbing permits or approvals obtained from City/Town during ownership?
 Yes No Unknown N.A.
Bathroom ventilation problems? Yes No Unknown N.A.
If yes, explain: _____

20. **SEWAGE SYSTEM:** If there is a private sewer system on the premises, the buyer should consult a qualified professional regarding its condition and compliance with applicable laws.

Buyers Initials:

Sellers Initials: RB

Type: Private Public Both Unknown
If private, type of system: Septic Cesspool Size of tank 2000 gallon
Location of system Back yard - See Plan
When installed ___/___/___ When last pumped? ___/___/___
Improvements, repairs or problems? Yes No Unknown N.A.
If yes, explain: _____

If septic system or cesspool, was the system pumped 4 times or more in the last year?

Yes No Unknown

Garbage grinder?

Yes No

Is the laundry connected to the septic system or cesspool?

Yes No Unknown N.A.

Is the septic system or cesspool shared with any other property owner?

Yes No Unknown N.A.

Has the septic system or cesspool been upgraded during your ownership? Yes No

If yes, was a Certificate of Compliance obtained from the Board of Health? Yes No

Any current or outstanding water or sewage betterments existing, in process or planned?

Yes No Unknown N.A.

If yes, give dollar amount and specify \$ _____

21. **WATER SYSTEM: Improvements and Repairs?** Yes No Unknown N.A.

If yes, explain: _____

22. **DRINKING WATER SOURCE:**

Private Public If private: Dug well Shallow Artesian Drilled well

Location: Front of Garage Tested quality _____ quantity _____

Date last tested: ___/___/___

Is inspection certificate available?

Yes No Unknown N.A.

IF YES, ATTACH COPY.

Has a back flow device been installed (MA. CMR222)?

Yes No Unknown N.A.

Improvements, repairs or problems currently experienced,

Known or believed by Seller to exist?

Yes No Unknown N.A.

If yes, explain: _____

23. **DOMESTIC HOT WATER:**

Type: Gas Electric Oil Capacity of tank 50 Age, if known 6yrs

Free standing Off furnace Tankless

Owned Rented

If rented, what are the monthly costs \$ _____

Improvements and/or Repairs

Yes No Unknown N.A.

If yes, explain: _____

24. **APPLIANCES:**

Which appliances stay with the house? (Refer to Inclusion / Exclusion Sheet) _____

See Sheet

Any Problems?

Yes No Unknown N.A.

Which appliances do not stay with the house? (Refer to Inclusion / Exclusion Sheet) _____

25. **TAXES:** \$ _____ for fiscal year ending ____ Tax rate \$ _____ Assessed Value \$ _____

Any re-evaluation of taxes in process or expected?

Yes No Unknown N.A.

If yes, when ___/___/___ Any abatements granted?

Yes No Unknown N.A.

If so when? ___/___/___ How much? \$ _____

Buyers Initials:

Sellers Initials: RB

26. **EASEMENTS:** Any recorded or unrecorded easements, restrictions, covenants, encroachments, agreements, or rights of way on or affecting the property?
 Yes No Unknown N.A.

If yes, please explain _____

27. **BETTERMENTS.**
Are street, sidewalk, water or sewerage betterments in process or planned?
 Yes No Unknown N.A.

Any street, sidewalk, water, or sewage betterment charges outstanding?
 Yes No Unknown N.A.

Amount \$ _____ (Seller must payoff prior to closing)

28. **BANKRUPTCY:**
Are you involved in any current litigation/bankruptcy which may involve your right to full and complete enjoyment, use or the right to convey, free and clear of liens or claims of others?
 Yes No Unknown N.A.

If yes, please explain _____

29. **AGREEMENTS:** List all oral or written agreements or contracts affecting the property that would bind Buyer or the property.

30. **ROADS AND SIDEWALKS ABUTTING PROPERTY:** Public Private Paper
Explain: _____

Town/City approved roads? Sidewalks? Yes No Unknown N.A.
Explain: _____

Town/City plowed roads? Yes No Unknown N.A.
Explain: _____

31. **TRASH PICK-UP:** Private Public Fee \$?

32. **FENCES:**
Are fences surrounding the property owned by you? Yes No Unknown N.A.
If no, explain: _____

Are fences within property boundaries? Yes No Unknown N.A.
If no, explain: _____

34. **BOUNDARY, POSSESSION, OR OTHER DISPUTES**
Are there any pending or threatened legal proceedings against or involving the property or your right to ownership, use or possession of any part of the property?
 Yes No Unknown N.A.

Explain: _____

Has anyone suggested or asserted or have the right to assert, any claim against the ownership, use or possession of any part of the property?
 Yes No Unknown N.A.

Buyers Initials:

Sellers Initials: *RB*

Explain: _____

Are all structures, shrubs, driveways within the boundaries of the property as described in the deed? Yes No Unknown N.A.

Explain: _____

35. ZONING:

Is the current use a permitted use under the current zoning regulations? Yes No Unknown N.A.

Classification? res. If no, explain: _____

Is the current use non-conforming in any way? Yes No Unknown N.A.

Does the structure meet the current setback and sideline requirements? Yes No Unknown N.A.

If no, did it conform with the setback requirements with built? Yes No Unknown N.A.

Have you applied for, been granted or denied any permit or variance on this property? Yes No Unknown N.A.

Explain: _____

Have you ever received any notices of zoning violations? Yes No Unknown N.A.

Explain: _____

36. BUILDING PERMITS:

Has there been an improvement or repair to the property during the current ownership exceeding \$1,000 in cost? Yes No Unknown N.A.

If so, list: _____

Were permits obtained? Yes No Unknown N.A.

Are you aware of any **building code or sanitary code** violations? Yes No Unknown N.A.

If yes, explain: _____

37. SOIL REPORTS:

Are percolation, hazardous waste, etc. reports available for inspection by the Buyer? Yes No Unknown N.A.

IF SO, ATTACH APPLICATION COPIES and list type of report and date here:

38. FLOOD PLAIN:

Is the property or any part of the property within a Flood Plain? Yes No Unknown N.A.

Buyers Initials:

Sellers Initials: RB

Are you required to carry Flood Plain Insurance? Yes No Unknown N.A.

39. STANDING WATER:

Is there any standing water on the property? Yes No Unknown N.A.

40. WETLANDS:

Is the property or any part of the property within Wetlands? Yes No Unknown N.A.

Explain: _____

Is the property subject to a Conservation Commission Order of Conditions?

Yes No Unknown N.A.

IF SO, ATTACH COPY:

41. POOLS & EQUIPMENT: Type of swimming pool None

Have you ever experienced any problems? Yes No Unknown N.A.

If yes, explain: _____

Maintenance history: _____

Was permit obtained for the pool? Yes No Unknown N.A.

42. SMOKE DETECTOR: Yes No Portable Hard-wired

NOTE: Seller is required to provide a certificate prior to closing.

43. RENTAL INFORMATION:

a. Is the property subject to rent control, regulation or review?

Yes No Unknown N.A.

b. If no, reason: Exempt Decontrolled Other

c. If yes, list maximum rents _____

d. Are there written leases in effect? Yes No Unknown N.A.

e. If rented, lease periods/tenancy at will _____

Rents \$ _____ /Month _____

ATTACH ANY LEASES, RENTAL AGREEMENTS, TENANT CORRESPONDENCE, STATEMENTS OF CONDITION, ECT.

f. If rented, owner is holding:

i. last month's rent: Amount \$ _____

ii. security deposit in escrow: Amount \$ _____

g. If rented, has interest been paid on last month's rent/security deposit?

Date ___ / ___ / ___ Amount _____

44. OTHER MATERIAL INFORMATION:

Is Seller aware of any other information concerning any part of the property, which might affect the decision of a Buyer to buy or affect the value of the property or its use by a Buyer?

Yes No Unknown N.A.

Explain: _____

Buyers Initials:

Sellers Initials: RB

Are you aware of any town plans that would affect the property?

Yes No Unknown N.A.

Explain: _____

45. **ADDITIONAL COMMENTS SECTION (If additional space is needed, attach sheet)**

Buyers Initials:

Sellers Initials: *RB*

The following clauses are provided for descriptive purposes only. For detailed information, consult the Massachusetts Department of Public Health, the Massachusetts Department of Environment Protection, or other appropriate agency, or your attorney.

- A. **Flood Hazard Insurance Disclosure Clause.** The lender may require Flood Hazard Insurance as a condition of the mortgage loan, if the lender determines that the premises is in a flood hazard zone.
- B. **Chlordane Disclosure Clause.** Pesticide products containing chlordane were banned in Massachusetts on June 11, 1985, following a determination by the Department of Food and Agriculture that the use of chlordane may cause unreasonable adverse effects on the environment including a risk of cancer. Although existing data does not conclusively prove that significant health effects have occurred as a direct result of chlordane use, the long-term potential health risks are such that it is prudent public health policy, according to the Department, to eliminate the further introduction of chlordane into the environment.
- C. **Urea-Formaldehyde Foam Insulation Disclosure Clause.** The Buyer acknowledges that s/he/they has/have been advised that Urea Formaldehyde Foam Insulation (UFFI) has been declared by the Massachusetts Department of Public Health (DPH) to be a banned hazardous substance and that new installation is prohibited. Where UFFI was previously installed, the Seller is required to advise the Buyer (1) where such UFFI is located and, if known, when it was installed; (2) a copy test results concerning the air level of formaldehyde; and (3) a copy of information form the DPH concerning UFFI and formaldehyde levels. Under certain circumstances the cost of removal may be reimbursed. Exposure to hazardous levels or formaldehyde may cause personal injuries, including headaches, nausea or cancer. The Buyer acknowledges that s/he/they has/have been advised to consult the DPH or her/his/their attorney for further information.
- D. **Asbestos Disclosure Clause.** The United States Consumer Product Safety Commission has maintained that asbestos materials are hazardous if they release separate fibers, which can be inhaled. Asbestos is a common insulation material on heating pipes, boilers, and furnaces. It may also present in certain types of floor and ceiling materials, shingles, plaster products, cements and other building materials. The Buyer may have the property professionally inspected for the presence of asbestos and if repair or removal of asbestos is desired, proper safety guidelines must be observed.
- E. **Lead Paint Disclosure Clause.** Whenever a child under six years of age resides in any residential premises in which any paint, plaster, or other accessible material contains dangerous levels of lead, the owner is required by law, to remove said paint, plaster or cover with appropriate materials so as to make it inaccessible to a child under six years of age. Consumption of lead is poisonous and may cause serious personal injury. Whenever such residential premises containing dangerous levels of lead undergoes a change of ownership, and, as a result, a child under six years or age will become a resident, the new owner is required by law to remove said paint, plaster or cover with appropriate materials so as to make it inaccessible to such child.
- F. **Hazardous Material Disclosure Clause.** In certain circumstances Massachusetts law can hold an owner of real estate liable to pay for the cost of removing hazardous or toxic material from real estate and for damages resulting from the release of such materials, according to the Massachusetts Oil and Hazardous Material Release and Response Act, General Laws, Chapter 21E. The Buyer acknowledges that s/he/they may have the property professional inspected for the presence of, or the substantial likelihood of release of oil or hazardous material and such proof of inspection may be required as a prerequisite for financing the property.

Buyers Initials:

Sellers Initials:

RB

