

# 299 Mountain Road

Stowe, VT



**For more information, please contact:**

Meg Kauffman  
Luxury Real Estate Broker  
mkauffman@landvest.com  
M: 802.318.6034

Ave Cook  
Luxury Real Estate Broker  
acook@landvest.com  
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1940A Mountain Road, Stowe, VT 05672

**LandVest**

CHRISTIE'S  
INTERNATIONAL REAL ESTATE



## **STATEMENT OF LIMITATIONS**

This Property Profile package is a compilation of public record information and additional material and information from the Seller. The Offered Property is currently offered for sale by LandVest, Inc.

This Property Profile is intended to facilitate a prospective buyer's ability to become generally familiar with the Offered Property. However, neither the Seller nor Seller's representatives (including LandVest, Inc.) makes any express or implied representation or warranty as to the accuracy or completeness of any material or information in this Property Profile package (including, without limitation, any of the exhibits attached hereto), and none of such persons shall have any liability whatsoever relating to or arising from the use of any material or information in this Property Profile package or any errors therein or omissions therefrom. More specifically, no prospective buyer of all or any part of the Offered Property is entitled to rely on the accuracy or completeness of any of this material or information and shall be entitled to rely solely on such representations and warranties as may be specifically and expressly set forth in a fully executed Purchase and Sale Agreement relating to any acquisition of all or any part of the Offered Property, subject to the terms and conditions of such Agreement. Any prospective buyer will have to independently verify any material or information contained in this Property Profile which such prospective buyer deems relevant to his or her decision to purchase or not to purchase all or any part of the Offered Property.

Any alternative use of the Offered Property implied in this Property Profile does not constitute a warranty or guarantee of approval for such alternative use by any local, state or federal agency or official. It is the sole responsibility of any buyer to determine the viability of any contemplated use of the Offered Property under pertinent federal, state, and local laws and regulations. The Seller makes no representation as to the likelihood of approval of any proposed use.

Any sketches produced by LandVest, Inc. or plans prepared by other professionals in this Property Profile package are included only to assist the reader in better visualizing the Offered Property.

No access to any part of the Offered Property is allowed unless accompanied by an authorized employee of LandVest, Inc.

**Commercial Sale**  
**5067194**  
**Active**

**299 Mountain Road**  
**Stowe VT 05672**  
**Unit/Lot**

**Listed: 10/24/2025 \$1,695,000**  
**Closed:**  
**DOM: 1**



**County** VT-Lamoille  
**VillDStLoc**  
**Year Built** 1861  
**Building Area Total** 3,874  
**Building Area Source** Public Records  
**Total Available Area** 3,874  
**Total Available Area Source** Public Records  
**Zoning** VC10  
**Road Frontage** Yes  
**Road Frontage Length** 94  
**Lot Size Acres** 0.40  
**Traffic Count**  
**Loss Factor Percentage**  
**Vacancy Factor**

**Taxes TBD** No  
**Tax Year Notes** 2025-2026  
**Tax Annual Amount** \$19,167.32  
**Tax Year** 2025  
**Gross Income**  
**Operating Expense**  
**Net Income**



**Delayed Showing** No  
**Date - Showings Begin**  
**Business Type** Business, Office, Retail

**Directions** From Stowe village, head north on Mountain Road .3 miles and property is on the left.

**Public Remarks** Great opportunity to own a historic building in a prime Stowe location on the Mountain Road. The property is thoughtfully updated and preserved with custom stonework, patios, and a covered porch. This versatile commercial space provides ample options for use. The first-floor level has multiple spaces with two half bathrooms and a mezzanine that could serve as a conference room or lounge. The spacious, well-designed, 1-bedroom, 1-bath apartment in the upper level has a private entrance and dedicated parking. Walking distance to Stowe village, fine dining, shopping, and hotels, this highly visible, mixed-use property is a must-see.

**STRUCTURE**

**Construction Materials** Clapboard Exterior  
**Foundation Details** Concrete  
**Roof** Architectural Shingle, Asphalt Shingle

**Building Number**  
**Total Units** 3  
**# of Stories** 2  
**Divisible SqFt Min**  
**Divisible SqFt Max**  
**List \$/SqFt Total Available** \$437.53

**Basement** Yes  
**Basement Access Type** Interior  
**Basement Description** Concrete Floor, Dirt Floor, Partial, Unfinished

**Ceiling Height**                      **Total Drive-in Doors**                      **Total Loading Docks**  
**Total Elevators**                      **Door Height**                                      **Dock Levelers**

LEVEL			DESCRIPTION	FINANCIAL DETAILS	
UNIT 1	2	Residential		<b>Expenses - CAM</b>	
UNIT 2	1	Retail		<b>Expenses - Taxes</b>	
UNIT 3	1	Office		<b>Expense - Utility</b>	
UNIT 4				<b>Expenses - Insurance</b>	
UNIT 5				<b>Expenses - Management</b>	
UNIT 6				<b>Expenses - Maintenance</b>	
UNIT 7					
UNIT 8					

**UTILITIES**

**Heating** Baseboard, Electric, Hot Water, Multi Zone, Radiant Floor, Propane  
**GasNatAval**  
**Cooling** Mini Split  
**Water Source** Public  
**Sewer** Public  
**Electric** Circuit Breaker(s)

**Utilities** Cable at Site, Multi Phone Lines, Satellite, Telephone at Site  
**Internet** Cable Internet, Fiber Optic Internet, Satellite Internet  
**Fuel Company**  
**Phone Company**  
**Cable Company**  
**Electric Company**  
**Internet Service Provider**

**LOT & LOCATION**

**Submarket**  
**Project Building Name**

**Lot Features** In Town, Near Paths, Near Shopping, Near Skiing, Landscaped

**Waterfront Property**  
**Water View**  
**Water Body Access**  
**Water Body Name**  
**Water Body Type**  
**Water Frontage Length**  
**Waterfront Property Rights**  
**Water Body Restrictions**

**ROW Length**  
**ROW Width**  
**ROW Parcel Access**  
**ROW to other Parcel**  
**Surveyed**  
**Surveyed By**

**FEATURES**

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**Air Conditioning Percent**  
**Sprinkler**  
**Signage**

**Green Verification Body**  
**Green Verification Progrm**  
**Green Verification Year**  
**Green Verification Rating**  
**Green Verification Metric**  
**Green Verification Status**  
**Green Verification Source**  
**Green Verification NewCon**  
**Green Verification URL**

**Railroad Available**  
**Railroad Provider**

**PUBLIC RECORDS**

**Deed Recorded Type** Warranty  
**Total Deeds**  
**Deed Book** 1041  
**Deed Page** 41-42

**Map**  
**Block**  
**Lot**  
**SPAN#** 621-195-12577

**Tax Rate**  
**Tax Class** Non-Homestead  
**Current Use**  
**Land Gains**

**Property ID**  
**Plan Survey Number**

**Assessment Year**  
**Assessment Amount**

**DISCLOSURES**

**Foreclosed/Bank-Owned/REO** No  
**Sale Includes** Land/Building  
**Exclusions**  
**Investment Info**  
**Flood Zone**  
**Seasonal**  
**Easements**  
**Covenants**

**Financing-Current**  
**Financing-Possible Opt**  
**Auction** No  
**Auction Date**  
**Auction Time**  
**Auctioneer Name**  
**Auctioneer License Number**  
**Auction Price Determnd By**

**REMARKS -- OWNER/OCCUPANT -- SHOWING INSTRUCTIONS**

**Private Remarks**

**Private Office Remarks**

**Showing Instructions** Call List Agent, Email Listing Agent, Text List Agent  
**Showing Service** None

**Input of Owner Name** I have written permission to submit name  
**Owner Name** CMR Enterprises LLC  
**Owner Phone**

**Management Company**  
**Management Company Phone**

**LISTING & CLOSING INFORMATION**

**Listing Office - Office Name** LandVest, Inc.  
**Listing Office - Phone Number** Off: 802-528-7606  
**Listing Office - Phone Number 2**  
**List Agent - Agent Name** Meg Kauffman  
**List Agent - Phone Number** Cell: 802-318-6034  
**List Agent - E-mail** mkauffman@landvest.com  
**List Team - Team Name**  
**List Team - Phone Number 1**  
**List Team - Team Email 1**  
**Co List Agent - Agent Name**  
**Co List Agent - Phone Number**  
**Co List Agent - E-mail**  
**Alternate Contact - Agent Name**  
**Alternate Contact - Phone Number**  
**Alternate Contact - E-mail**  
**Buyer Office - Office Name**  
**Buyer Office - Phone Number**  
**Buyer Office - E-mail**  
**Buyer Agent - Agent Name**  
**Buyer Agent - Phone Number**  
**Buyer Agent - E-mail**  
**Buyer Team - Team Name**  
**Buyer Team - Phone Number 1**  
**Buyer Team - Team Email 1**  
**Co Buyer Office - Office Name and Phone**  
**Co Buyer Agent - Agent Name and Phone**

**MLS List Date** 10/24/2025  
**Expiration Date** 10/23/2026  
**Active Under Contract Date**  
**Pending Date**  
**Withdrawn Date**  
**Terminated Date**  
**Close Date**  
**Anticipated Closing Date**  
**Marketed in other Property** No  
**Type**  
**Other MLS#**  
**Comp Only** No  
**Comp Type**  
**Listing Type** Exclusive Right  
**Listing Service** Full Service  
**Designated/Apptd. Agency** No  
**Short Sale** No

**Concessions**  
**Concessions Amount**  
**Concessions Comments**  
**Appraisal Complete**  
**Appraisal Type**  
**Appraiser**  
**Appraiser Phone**  
**Appraiser Email**  
**Buyer Name**  
**Residence**  
**Title Company**

**Buyer Financing**

**Contingencies**

**My Info:** Meg Kauffman - Cell: 802-318-6034

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**WARRANTY DEED**

KNOW ALL PERSONS BY THESE PRESENTS, that I, Donald E. Rowe, Grantor, of the Town of Stowe, County of Lamoille and State of Vermont, in consideration of One Dollar and other good and valuable consideration, paid to my full satisfaction by CMR Enterprises, LLC, Grantee, a Vermont limited liability company with its principal place of business located in Stowe, County of Lamoille and State of Vermont, by these presents, do freely GIVE, GRANT, SELL, CONVEY and CONFIRM unto Grantee, CMR Enterprises, LLC, and its successors and assigns, forever, a certain piece of land located in the Town of Stowe, County of Lamoille and State of Vermont, described as follows:

Being all and the same land and premises conveyed to Donald E. Rowe and Bernhard K. Kuehn by the Warranty Deed of Bordner Real Estate of Vermont Inc. dated October 22, 1992, and of record in Book 247 at Pages 81-83 of the Stowe Land Records. The interest of Bernhard K. Kuehn was conveyed to Donald E. Rowe by the Executrix Deed of Ruth Kuehn dated February 17, 2005, and of record in Book 600 at Pages 325-326 of the Stowe Land Records. Being a parcel land adjacent to VT Route 108, also known as the Mountain Road, with a commercial building thereon, located at 299 Mountain Road in the Town of Stowe.

This conveyance is made subject to and with the benefit of the rights of way noted in the above-referenced Warranty Deed from Bordner Real Estate of Vermont Inc.

Also conveyed to the Grantee and the Grantee's successors and assigns is the right of way and shared parking area more particularly described in the deed of Bordner Real Estate of Vermont Inc. referenced above.

The land and premises are subject to a right of way reserved in favor of the Foster-Taber Corporation and Theodore R. Barnett, as referenced in the deed from Bordner Real Estate of Vermont Inc.

As a further aid, reference is made to a map plan entitled "Plan of Land in Stowe, Vermont, being conveyed by Foster-Taber Corporation to Yodler Motor Inn, Inc." prepared by J. Phillip Rich, Registered Land Surveyor, of J.P.R. Associates, Inc., Stowe, Job No. 72-123, dated August 1972 and filed September 12, 1972, in Book 1 at Map 40 of the Stowe Land Records.

This conveyance is made subject to the terms and conditions of Agency of Natural Resources Water Supply & Wastewater Disposal Permit WW-5-0572 recorded in the Stowe Land Records on December 21, 1993.

The land and premises are also conveyed subject to all permits of record.

This conveyance is made subject to and with the benefit of any highway easements, utility easements, spring rights, easements for ingress and egress and rights incident to each of the same as may appear more particularly of record, provided that this paragraph shall not reinstate any such encumbrance previously extinguished by the Marketable Record Title Act, Subchapter 7, Title 27, Vermont Statutes Annotated.


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Reference is made to the above-noted deeds and their records and to all former instruments and their records for a more particular description of the land and premises being conveyed herein.

This deed shall act as a bill of sale for a washer, dryer, refrigerator, stove and dishwasher, which shall be conveyed in as is condition.

TO HAVE AND TO HOLD said granted premises, with all the privileges and appurtenances thereof, to the said Grantee, CMR Enterprises, LLC, and its successors and assigns, to their own use and behoof forever; and I, the said Grantor, Donald E. Rowe, for myself and my heirs, executors and administrators, do covenant with the said Grantee, CMR Enterprises, LLC, and its successors and assigns, that until the ensealing of these presents I am the sole owner of the premises, and have good right and title to convey the same in manner aforesaid, that they are free from every encumbrance, except as aforesaid, and I hereby engage to WARRANT AND DEFEND the same against all lawful claims whatever, except as aforesaid.

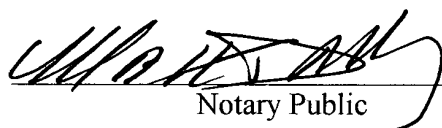
I hereunto set my hand and seal this 1 day of March, 2019.

  
\_\_\_\_\_  
Donald E. Rowe L.S.

STATE OF VERMONT  
CHITTENDEN COUNTY, SS.

At Burlington, this 1<sup>st</sup> day of March, 2019, Donald E. Rowe personally appeared and he acknowledged this instrument, by him sealed and subscribed, to be his free act and deed.

My commission expires: 01/31/21

Before me:   
\_\_\_\_\_  
Notary Public

Stowe, VT. Record Received  
3-4-2019 at 3:45 PM  
Lisa A. Walker, Town Clerk

Transfer Received 3-4-2019  
Lisa A. Walker, Town Clerk, Stowe, VT



# SELLER'S PROPERTY INFORMATION REPORT

TO BE COMPLETED BY SELLER

Date Prepared: 10/07/2025

Seller's Name(s): CMR Enterprises LLC

Physical Property Address: 299 Mountain Road, Stowe, VT 05672

Street

City/Town

Type of Property:  Single Family Residence  Multi-Family Residence (duplex, triplex, etc.)  
 Condominium/Townhouse  Land Only  Commercial

Use of Property:  Primary Residence  Vacation Property  Rental Property  
 Other: \_\_\_\_\_

**INTRODUCTION:** This Report provides information from the Seller based on Seller's personal knowledge concerning the above Property. Unless otherwise disclosed, Seller does not have any expertise in construction, architecture, engineering, surveying or any other skills that would provide Seller with special knowledge concerning the condition of the Property. Other than having owned the Property, Seller has no greater knowledge about the Property than that which could be obtained by a careful inspection performed by or on behalf of a potential buyer. The real estate agents involved with the sale of this Property do not conduct or perform any inspection of the Property. Unless otherwise disclosed, Seller has not inspected or examined those portions of the Property that are generally inaccessible. **THIS REPORT DOES NOT CONSTITUTE A WARRANTY OF ANY KIND BY THE SELLER OR BY ANY REAL ESTATE AGENT CONCERNING THE CONDITION OF THE PROPERTY. THIS REPORT IS NOT A SUBSTITUTE FOR A PROPERTY INSPECTION. BUYER HAS THE OPPORTUNITY TO REQUEST THAT SELLER AGREE TO A PROPERTY INSPECTION AS PART OF ANY CONTRACT FOR THE SALE OF THE PROPERTY.**

**INSTRUCTIONS TO SELLER:** (1) Complete this form yourself. (2) Answer ALL questions. (3) Disclose conditions that you know about that affect the Property. (4) Attach additional pages to this Report if additional information is provided. (5) IF YOU DO NOT KNOW THE FACTS, WRITE "DON'T KNOW." DO NOT GUESS THE ANSWER TO ANY QUESTION.

Seller's Initials



Buyer's Initials

**THE STATEMENTS IN THIS REPORT ARE MADE BY THE SELLER.  
THEY ARE NOT STATEMENTS OR REPRESENTATIONS MADE BY ANY REAL ESTATE AGENT(S).**

<b>1. SOILS, DRAINAGE, BOUNDARIES AND EASEMENTS</b>			
(a)	Has any fill or off-site material been placed on the Property?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input checked="" type="checkbox"/> DON'T KNOW
(b)	Do you know of any sliding, settling, subsidence, earth movement, upheaval or earth stability problems that have affected the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(c)	Is the Property located in a federal flood hazard zone or wetlands, public waters or conservation zones designated by federal, state or local statute, regulation or ordinance?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(d)	Do you know of any past or present drainage, high water table, or flood problems affecting the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(e)	Is the Property served by a road maintained by the municipality? If "No," how is the road serving the Property maintained? <input type="checkbox"/> Road Maintenance Agreement <input type="checkbox"/> Homeowners/Road Assoc. <input type="checkbox"/> Shared Driveway <input type="checkbox"/> Other (explain): _____ Annual Cost(s): _____	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(f)	Are there public or private landfills or dumps (compacted or otherwise) on the Property or on any abutting property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(g)	Are there currently any underground fuel storage tanks on the Property? If "Yes," Fuel Type: <u>Propane</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(h)	Have there been any underground fuel storage tanks on the Property in the past? If "Yes," have they been removed? _____ When? _____ By whom? _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(i)	Do you know the location of the boundary lines of the Property?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(j)	Are the boundary lines of the Property marked in any way? If "Yes," how are they marked?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(k)	Has the Property been surveyed? If "Yes," when? <u>1972</u> By whom? <u>JPR Associates, Inc</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(l)	Are copies of any of the following available? <input checked="" type="checkbox"/> Site Plan <input type="checkbox"/> Survey <input type="checkbox"/> Tax Map <input type="checkbox"/> Subdivision Plan/Sketch	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(m)	Are there any easements or rights of way affecting the Property?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
(n)	Are there any boundary line disputes, claims of adverse possession, encroachments, or zoning set back violations affecting the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
<b>Further explanation of any of the above:</b> _____			

Seller's Initials

			
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Buyer's Initials

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**2. MECHANICAL, ELECTRICAL, AND OTHER SYSTEMS**

(a)	<b>Primary Heating System (check all that apply):</b> <input checked="" type="checkbox"/> Base Board <input type="checkbox"/> Hot Air <input checked="" type="checkbox"/> Radiant <input type="checkbox"/> Direct <input type="checkbox"/> Heat Pump <input type="checkbox"/> Vent <input type="checkbox"/> Steam <input type="checkbox"/> Other (please explain): _____		
(b)	Age of Heating System: <u>29 years</u> <input type="checkbox"/> DON'T KNOW		
(c)	<b>Primary Fuel Type:</b> <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane <input type="checkbox"/> Electric <input type="checkbox"/> Wood <input type="checkbox"/> Wood Pellet <input type="checkbox"/> Coal <input type="checkbox"/> Solar <input type="checkbox"/> Geothermal <input type="checkbox"/> Other (please explain): _____ If propane, who owns the propane tank? <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Propane Supplier <input type="checkbox"/> Association If oil, when was the tank last inspected? _____ By whom? _____		
(d)	When was the <b>primary</b> heating system last serviced? <u>Inspection date and details can be provided</u> By whom? <u>Peak Mechanical</u>		
(e)	Primary heating service and/or inspection reports attached?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
(f)	Primary Annual Fuel Usage: <u>1800</u> Gallons (or other measure) Date Range: <u>Average annual</u> <i>Fuel consumption may vary by user, number of occupants and weather conditions.</i>		
(g)	Primary fuel provider: <u>Bourne's Energy</u>		
(h)	<b>Secondary Heating System (check all that apply):</b> <input type="checkbox"/> Base Board <input type="checkbox"/> Hot Air <input type="checkbox"/> Radiant <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Heat Pump <input type="checkbox"/> Vent <input type="checkbox"/> Steam <input type="checkbox"/> Other (please explain): _____		
(i)	<b>Secondary Fuel Type:</b> <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Wood <input type="checkbox"/> Wood Pellet <input type="checkbox"/> Coal <input type="checkbox"/> Solar <input type="checkbox"/> Geothermal <input type="checkbox"/> Other (please explain): _____ If propane, who owns the propane tank? <input type="checkbox"/> Owner <input type="checkbox"/> Propane Supplier <input type="checkbox"/> Association If oil, when was the tank last inspected? _____ By whom? _____		
(j)	When was the secondary heating system last serviced? <u>August 2025</u> By whom? <u>On the Dot HVAC</u>		
(k)	Secondary heating service and/or inspection reports attached?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
(l)	Secondary Annual Fuel Usage: _____ Gallons (or other measure) Date Range: _____ <i>Fuel consumption may vary by user, number of occupants and weather conditions.</i>		
(m)	Secondary fuel provider: _____		
(n)	Property used: <input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Seasonally		
(o)	Is there air conditioning? If "Yes," describe type and number of units (central, heat pump, window, etc.): <u>5 heat pumps</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
(p)	<b>Hot Water System (check all that apply):</b> <input checked="" type="checkbox"/> Hot Water Tank <input checked="" type="checkbox"/> Domestic/Off Boiler <input type="checkbox"/> On Demand <input type="checkbox"/> Heat Pump Water Heater		
(q)	Age of Hot Water System: <u>4 years</u> <input type="checkbox"/> DON'T KNOW		
(r)	Hot Water Tank is: <input checked="" type="checkbox"/> Owned <input type="checkbox"/> Rented If rented, from whom: _____ Monthly rental fee: \$ _____		
(s)	<b>Alternative Energy System(s) (check all that apply):</b> <input type="checkbox"/> Solar <input type="checkbox"/> Wind <input type="checkbox"/> Hydroelectric <input type="checkbox"/> Geothermal <input type="checkbox"/> Unknown Energy returned to grid?: <input type="checkbox"/> YES <input type="checkbox"/> NO Owned or Leased?: _____		
(t)	<b>Electrical System:</b> Electrical service panel has: <input type="checkbox"/> Fuses <input checked="" type="checkbox"/> Circuit Breakers <input type="checkbox"/> Knob and Tube <input type="checkbox"/> Other (please explain): _____ Main Breaker Amperes: _____ Amps <input checked="" type="checkbox"/> DON'T KNOW		

Seller's Initials



Buyer's Initials



4. TELEPHONE/INTERNET/TELEVISION			
(a)	Is landline telephone service present at the Property? If "Yes," current provider: <u>Stowe Communications</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
(b)	Is cellular telephone service available at the Property? If "Yes," list available providers: <u>ATT, Verizon, etc</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
(c)	Is internet service available at the Property? If "Yes," current provider: <u>Stowe Communications</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
(d)	What type of internet service is available: <input type="checkbox"/> Dial Up <input type="checkbox"/> Broadband <input checked="" type="checkbox"/> Cable <input checked="" type="checkbox"/> Satellite <input type="checkbox"/> DSL <input checked="" type="checkbox"/> Fiber Optic <input type="checkbox"/> None		
(e)	Is television service available at the Property? If "Yes," current provider: <u>Dish or Smart TV services via internet</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
(f)	What type of television service is available: <input type="checkbox"/> Antenna <input checked="" type="checkbox"/> Cable <input checked="" type="checkbox"/> Satellite <input type="checkbox"/> DSL <input checked="" type="checkbox"/> Fiber Optic <input type="checkbox"/> None		

5. STRUCTURAL COMPONENTS			
(a)	Type of construction (check all that apply): <input type="checkbox"/> Manufactured <input type="checkbox"/> Modular <input checked="" type="checkbox"/> Wood Frame <input type="checkbox"/> Other (describe):		
(b)	Year Building(s) Constructed: Main Building <u>1857</u> Additions to Main Building: <u>2008</u> Additional Building(s): (a) _____ (b) _____ (c) _____ (d) _____		
(c)	Have you built, or caused to be built, any of the buildings on the Property, or made any additions, modifications, alterations, or renovations to any building on the Property? If "Yes," please explain: <u>Tenant renovated northeast office into social space in 2025</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
	If required, did you obtain all permits and approvals for such work? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW		
(d)	Check any of the following items that have defects or malfunctions that need repair: <input type="checkbox"/> Foundation <input type="checkbox"/> Slab <input type="checkbox"/> Chimney <input type="checkbox"/> Fireplace <input type="checkbox"/> Interior Walls <input type="checkbox"/> Ceilings <input type="checkbox"/> Floors <input type="checkbox"/> Windows <input type="checkbox"/> Doors <input type="checkbox"/> Storms/Screens <input type="checkbox"/> Exterior Walls <input type="checkbox"/> Driveway <input type="checkbox"/> Sidewalks <input type="checkbox"/> Pool <input type="checkbox"/> Roof <input type="checkbox"/> Outside Retaining Walls <input type="checkbox"/> Other Structures/Components: _____ <b>If any of the above items are checked, describe the defect, malfunction or item(s) that need repair:</b> _____		
(e)	Has there ever been damage to the Property or any of the structures from fire, wind, floods, earth movements, or landslides? If "Yes," explain in detail, including any repairs:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW
	_____		

Seller's Initials

			
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Buyer's Initials

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(f)	Has there ever been damage to the Property due to broken pipes or failed appliances and/or equipment causing water damage? If "Yes," explain in detail, including any repairs: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
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**BASEMENT/CELLAR/CRAWL SPACE**

(g)	Has there ever been any water leakage, accumulation of water, or dampness within the basement, cellar or any crawl space? If "Yes," explain in detail: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(h)	Have there been any repairs or other attempts to control any water or dampness in the basement, cellar or crawl space? If "Yes," explain in detail, including any repairs: Previous owner improved drainage on the south side of the foundation	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(i)	Are any of the above recurring problems? If "Yes," what are the problems and how often have they recurred? _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	

**ROOF**

(j)	Type of roof: <input checked="" type="checkbox"/> Shingle <input type="checkbox"/> Slate <input type="checkbox"/> Standing Seam Metal <input type="checkbox"/> Corrugated Metal <input type="checkbox"/> Tile <input type="checkbox"/> Other (describe) _____ <input type="checkbox"/> DON'T KNOW Approximate age of roof? 16			
(k)	Has the roof ever leaked since you have owned the Property? If "Yes," explain: Ice dams	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(l)	Has the roof been replaced or repaired since you have owned the Property? If "Yes," when?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(m)	Are there any current problems with the roof? If "Yes," explain: Ice dams	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW

Seller's Initials

 10/08/25 12:03 AM EDT			
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Buyer's Initials

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## 6. WATER SUPPLY

Special Notice: Water supplies, especially those that are not public or municipal supplies, are affected by many conditions about which Seller may have no knowledge or have any ability to control. These water supply systems can change, deteriorate or fail, often with no warning signs. *Seller makes no warranty or representation whatsoever that the water supply, including quality or quantity, will operate or continue to function for any period of time. Inspection of these systems by a qualified inspector is strongly recommended. As required by law, any Seller with a water supply that is not served by a public water system shall provide the Buyer with an informational brochure developed by the Vermont Department of Health regarding Testing Water from Private Water Supplies within 72 hours of the execution of a contract for the purchase of the Property.*

### TYPE OF WATER SYSTEM

(a)	The Property is connected to and serviced by (check all applicable boxes): <input checked="" type="checkbox"/> Public or Municipal <input type="checkbox"/> Community <input type="checkbox"/> Private <input type="checkbox"/> Shared <input type="checkbox"/> Driven Point Well <input type="checkbox"/> On-site <input type="checkbox"/> Off-site <input type="checkbox"/> Drilled Well <input type="checkbox"/> Spring <input type="checkbox"/> Lake/Pond <input type="checkbox"/> None <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> OTHER: _____		
(b)	If Drilled Well: Drilled by: _____ Tag #: _____ Depth: _____ Gallons Per Minute (at time of driller's report): _____ Date of driller's report: _____		
(c)	Age of Water System: _____		
(d)	Water System Features: <input type="checkbox"/> Cistern/Reservoir/Holding Tank <input type="checkbox"/> Water Softener/Conditioner <input type="checkbox"/> Reverse Osmosis <input type="checkbox"/> Infrared Light <input type="checkbox"/> Ultraviolet <input type="checkbox"/> Sediment Filter <input type="checkbox"/> Other: _____ <input type="checkbox"/> None <input type="checkbox"/> DON'T KNOW		
(e)	What is the annual cost for municipal water? \$ <u>1000</u> Date Range: <u>2024</u> Metered <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		

### CONDITION OF WATER AND WATER SYSTEM

(f)	Has the water been tested for coliform bacteria? If "Yes," when? _____ By whom? _____ Results: _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(g)	Has any other water quality or water chemistry testing been done? If "Yes," when? _____ By whom? _____ Results: _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(h)	Are you aware of low pressure in your water system?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(i)	Has your water supply ever run out or run low? If "Yes," describe: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(j)	Does the water have any odor, bad taste, cloudiness or discoloration? If "Yes," describe in detail: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(k)	Describe in detail any other problems you have had with your water system, including water quality or quantity: _____			

Seller's Initials

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Buyer's Initials

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## 7. SEWER/SEPTIC/WASTEWATER SYSTEM

Special Notice: Sewer, septic and wastewater systems that are not public or municipal systems are not designed to perform indefinitely and are affected by many conditions about which Seller may have no knowledge or have the ability to control. In addition, the useful life of these systems is affected by the amount and type of use, soil conditions, maintenance, the inherent design of these systems and many other factors. *Seller makes no warranty or representation whatsoever that these systems will operate or continue to function for any period of time. Inspection of these systems by a qualified inspector is recommended. State and local permits may be required for sewer, septic and wastewater systems.*

### TYPE OF SYSTEM

(a)	The Property is connected to and serviced by (check all applicable boxes): <input checked="" type="checkbox"/> Public or Municipal <input type="checkbox"/> Community <input type="checkbox"/> Private <input type="checkbox"/> Shared <input type="checkbox"/> On-site septic/wastewater system <input type="checkbox"/> Off-site septic/wastewater system <input type="checkbox"/> Septic Tank <input type="checkbox"/> New or Alternate Technology (explain technology): _____ <input type="checkbox"/> Holding Tanks <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage Pump <input type="checkbox"/> Dry Well <input type="checkbox"/> Conventional Disposal Area <input type="checkbox"/> Mound System Disposal Area <input type="checkbox"/> At Grade <input type="checkbox"/> Other <input type="checkbox"/> DON'T KNOW If other, please explain: _____
(b)	What is the annual cost of municipal sewer? \$ <u>1000</u> Date Range: <u>2024</u>

### CONDITION OF SYSTEM If other than public or municipal sewer/wastewater system, answer the following:

(c)	Date system installed: _____			
(d)	Is the system entirely on your Property? If "No," where is it? _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(e)	Has the system been repaired since you have owned the Property? If "Yes," when? _____ What was done? _____ By whom? _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(f)	Type of septic tank: <input type="checkbox"/> Concrete <input type="checkbox"/> Metal <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other (describe): _____ <input type="checkbox"/> DON'T KNOW			
(g)	Septic tank capacity (in gallons) _____	<input type="checkbox"/> DON'T KNOW		
(h)	Date septic tank last inspected? _____ By whom? _____	<input type="checkbox"/> DON'T KNOW		
(i)	Date septic tank last pumped? _____ By whom? _____	<input type="checkbox"/> DON'T KNOW		
(j)	Reports of last inspection/pumping attached?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
(k)	If required by a State of Vermont wastewater permit, have required periodic maintenance/inspections been completed? If so, date of most recent service: _____ Cost: \$ _____      By whom: _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

Seller's Initials

 <small>10/08/25 12:03 AM EDT</small>			
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Buyer's Initials


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(l)	To your knowledge, is any portion of the system in need of repair or replacement? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If "Yes," describe in detail: _____ _____	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
(m)	Has the Property been occupied as a primary residence for at least 181 days during any one calendar year between December 31, 1986 and December 31, 2006?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW

**8. ADDITIONAL INFORMATION CONCERNING THE PROPERTY**

(a)	Are you currently occupying the Property? If "No," how long has it been since Seller occupied? 2 years	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(b)	Are there any property or development rights (e.g. conservation easements to Land Trusts, etc.) owned by others? If "Yes," by whom?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(c)	Is Property enrolled in Vermont's Current Use program?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(d)	Have you received written notice of any violations of local, state or federal laws, building codes and/or zoning ordinances affecting the Property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(e)	Are there any property tax abatements, land use value appraisal, land use tax stabilization agreements or other special property tax arrangements applicable to the Property? If "Yes," explain:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(f)	Was the house built after December 31, 1997? If "Yes," is a Residential Building Energy Standard (RBES) certification available? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> DON'T KNOW	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
(g)	Have you received notice that the Property will be reassessed by any taxing authority during the next 12 months?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(h)	Does the Property have urea-formaldehyde foam insulation?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(i)	Does the Property have asbestos and/or asbestos materials in the siding, walls, plaster, flooring, insulation, heating system?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(j)	Has the Property been tested for radon gas? If "Yes," when? _____ By whom? _____ Results: Record of Radon mitigation by previous owner on 8/14/2018	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(k)	Has paint containing lead been used on the Property?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> DON'T KNOW
(l)	Does the Property have evidence of mold? If "Yes," what has been done about the mold? _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW

Seller's Initials

			
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Buyer's Initials

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(m)	Are you aware of any off-site conditions in your neighborhood/community that could affect the value or desirability of the Property such as noise, proposed major new development, relocation or major construction of road or highways, proposed zoning changes, etc? If "Yes," explain in detail: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(n)	Is there any infestation by pests that affect the Property? If "Yes," explain: _____	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(o)	Do you have any knowledge of any damage to the Property caused by pests?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(p)	Is the Property currently under warranty or other coverage by a pest control company?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(q)	Do you know of any termite/pest control reports or treatments for the Property in the last five years?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(r)	Does the Property have any audio and/or surveillance or recording equipment? If "Yes," will said equipment be active during showings? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
<b>Further explanation of any of the above:</b>				

**9. CONDOMINIUMS/SUBDIVISIONS/HOMEOWNERS' ASSOCIATIONS**

(a)	Is the Property part of a condominium or other common interest ownership association or is it subject to covenants, conditions and restrictions (CC&R's)? If "Yes," Condo docs or CC&R's attached?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
(b)	Is there any defect, damage, or problem with any common elements or common areas? If "Yes," describe below.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(c)	Is there any condition or claim which may result in an increase in assessment or fees? If "Yes," describe below.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(d)	Are pets allowed? If "Yes," what is allowed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(e)	Are there any rental restrictions? If "Yes", what is the rule?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
(f)	Are there any homeowners' association dues associated with the Property? If "Yes," amount \$ _____ <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

Seller's Initials



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Buyer's Initials

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(g)	Are there any special assessments on the Property? If "Yes," amount \$ _____ <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly Purpose of special assessment: <hr/> Years of term remaining on any outstanding special assessments:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
(h)	Are there any current actions, disputes or lawsuits pending between the homeowners/condominium owners' association and any other parties? If "Yes," describe below.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(i)	Do you know of any violations of local, state, or federal laws or regulations, condominium rules or CC&R's relating to the Property? If "Yes," describe below.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> DON'T KNOW
(j)	Contact person/manager for condominium/homeowner association: Name: _____ Phone number/email: _____			
<b>Further explanation of any of the above:</b> _____				

IS THERE ANYTHING ELSE THAT SHOULD BE DISCLOSED ABOUT THE CONDITION OF THE PROPERTY? (In answering this question, you should be guided by what you would want to know about the condition of the Property if you were buying it.)

YES  NO  DON'T KNOW OF ANYTHING ELSE If "Yes," explain:

**Seller's Statement:** Seller is providing the information in this report to reduce the likelihood of disputes or legal action concerning the sale of the Property. The information provided herein does not constitute any warranty, express or implied, by Seller about the Property or any feature of the Property. Seller hereby authorizes any real estate agent to provide a copy of this report to any prospective buyer. **In delivering this report to a buyer or prospective buyer, no representation is made by any real estate agent that they have any independent or personal knowledge about the condition of the Property, that they have made any inquiry or investigation about the condition of the Property, or any of the information provided in this report by the Seller or that they have verified the information provided in this report by the Seller.** Seller acknowledges that the information provided in this report is correct to the best of Seller's knowledge as of the date signed by the Seller.

Seller's Initials

			
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Buyer's Initials

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**Buyer/prospective buyer acknowledges receipt of a copy of this report on the dates set forth below. Buyer/prospective buyer understands that this report provides information about the Property made by the Seller as of the above date. It is not a warranty of any kind by Seller or any real estate agent. This report is not a substitute for any property inspection. Buyer/prospective buyer may obtain a property inspection. However, any such inspection must be by written agreement with Seller. Buyer/prospective buyer understands that there may be matters relating to the Property which are not addressed in this report.**

Seller: 

<i>CMR Enterprises LLC</i>	dotloop verified 10/08/25 12:03 AM EDT RMYM-Z962-WQJG-YANV
----------------------------	--

 Buyer: 

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(Signature) (Date) (Signature) (Date)

Seller: 

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 Buyer: 

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(Signature) (Date) (Signature) (Date)

Seller: 

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 Buyer: 

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(Signature) (Date) (Signature) (Date)

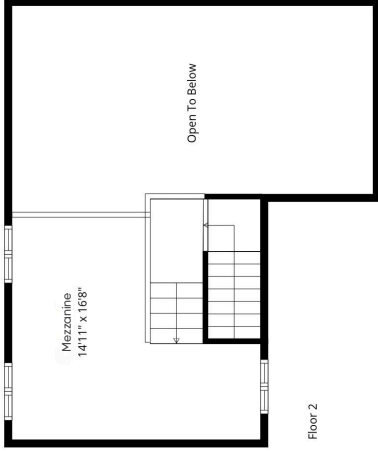
Seller: 

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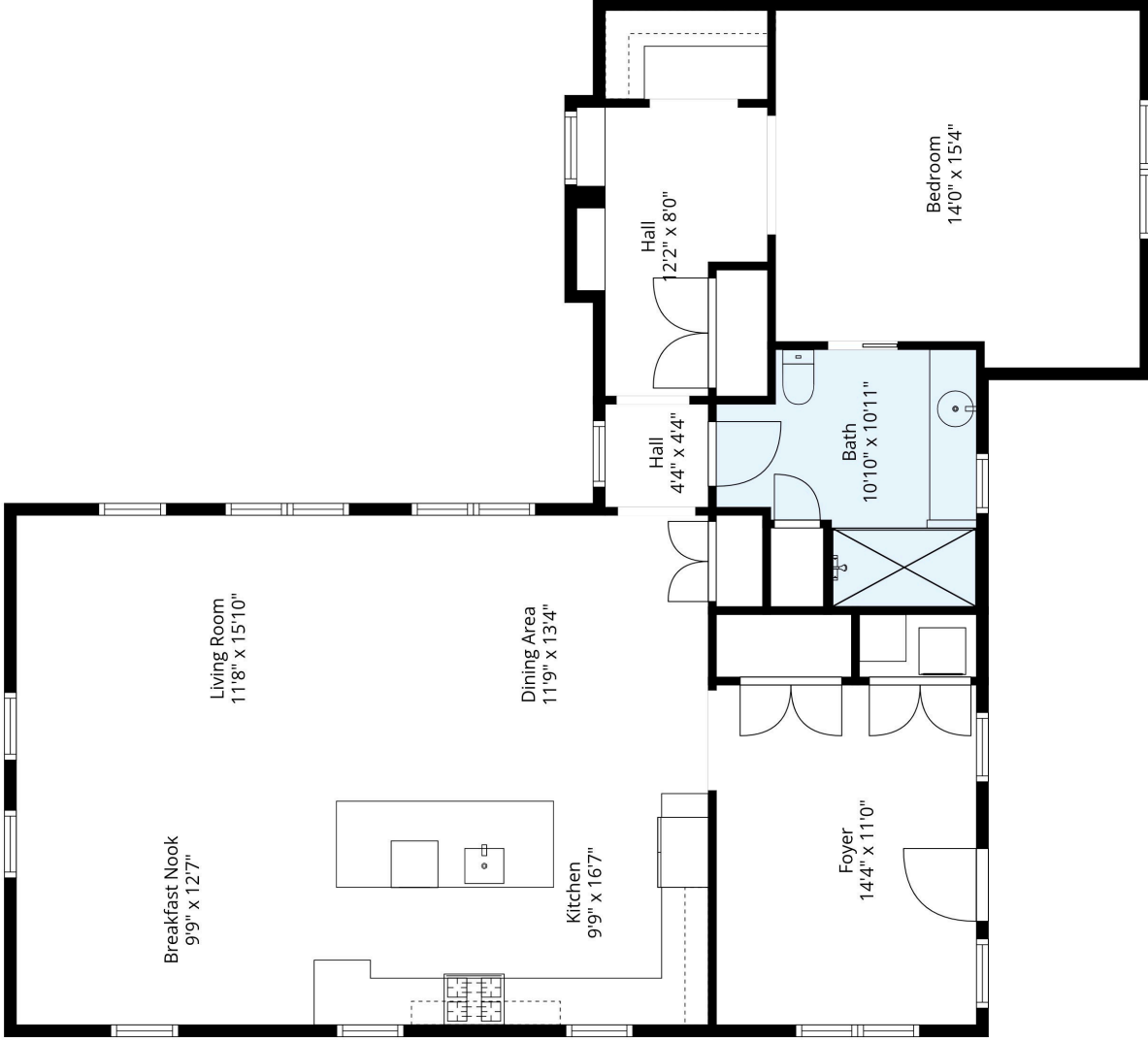
 Buyer: 

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(Signature) (Date) (Signature) (Date)



**TOTAL: 2357 sq. ft**  
**FLOOR 1: 2093 sq. ft, FLOOR 2: 264 sq. ft**  
**EXCLUDED AREAS: OPEN TO BELOW: 317 sq. ft, WALLS: 182 sq. ft**



**TOTAL: 1240 sq. ft**  
**FLOOR 1: 1240 sq. ft**  
**EXCLUDED AREAS: LOW CEILING: 76 sq. ft, WALLS: 93 sq. ft**

Floor Plan Created By Cubicasa App. Measurements Deemed Highly Reliable But Not Guaranteed.






# 299 Mountain Road

Stowe, VT

## Base Plan Orthophotograph Abutters

### LEGEND

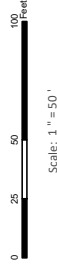
-  Subject Property - 0.4 ±Ac
-  Adjacent Properties
-  Contours (4 ft)



Notes:  
Credits: 2023 imagery from  
ESRI "World Imagery"  
map service.

Date: 10/10/25

Project Number: VT1605



Scale: 1" = 50'

This plan is conceptual only and is not  
represented as an engineered plan.

# LandVest







**299 Mountain Road**

Stowe, VT

**Base Plan**

**LEGEND**

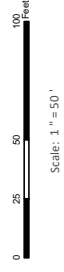
-  Subject Property - 0.4 ±Ac
-  Adjacent Properties
-  Building Footprints
-  Contours (4 ft)



Notes:  
Credits: Background from  
ESRI | Terrain Base map  
service

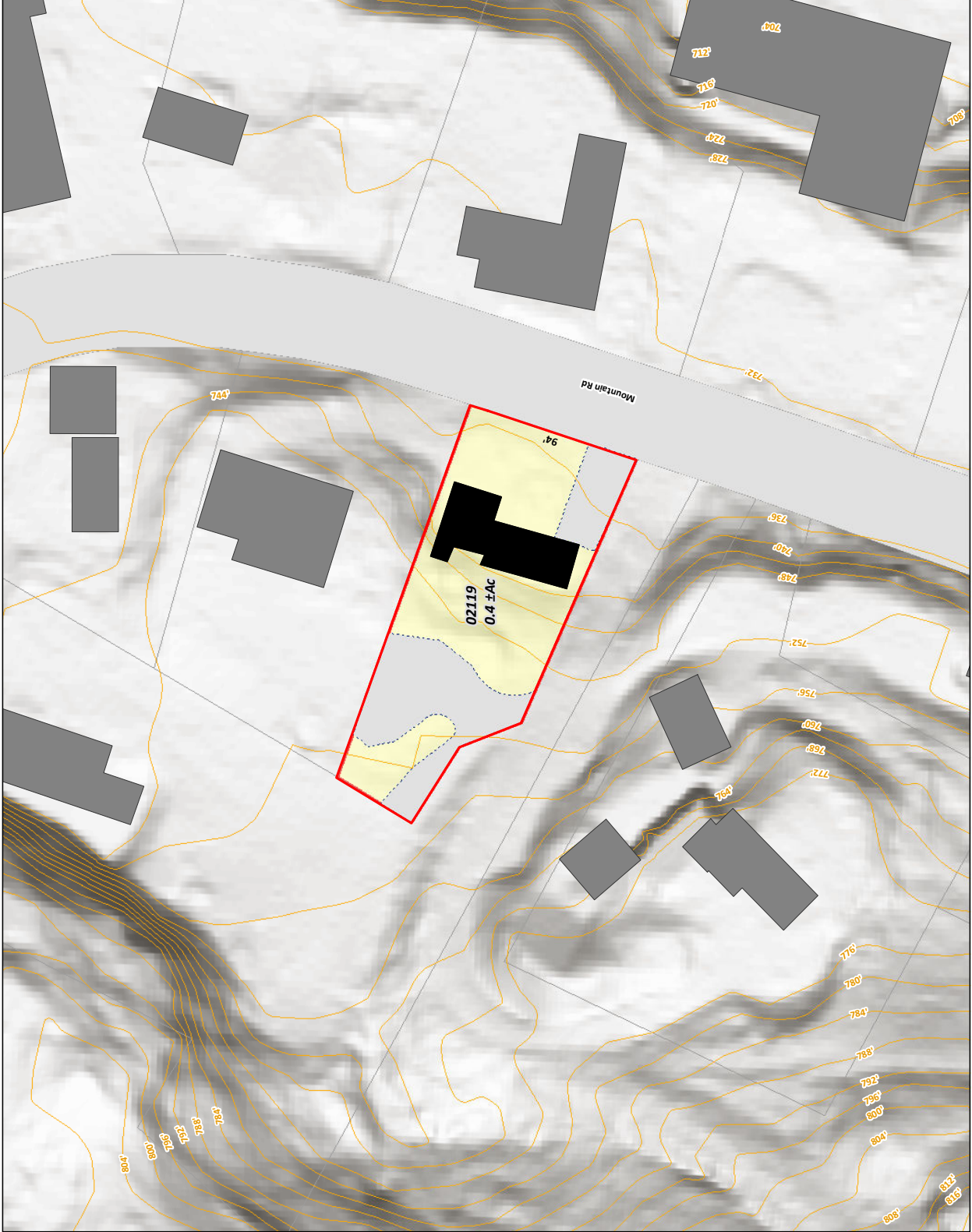
Date: 10/10/25

Project Number: VT1605



This plan is conceptual only and is not  
represented as an engineered plan.

**LandVest**






# 299 Mountain Road

Stowe, VT

## Base Plan Orthophotograph

### LEGEND

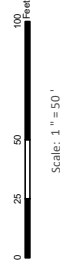
-  Subject Property - 0.4 ±Ac
-  Adjacent Properties
-  Contours (4 ft)



Notes:  
Credits: 2023 imagery from  
ESRI | "World Imagery"  
map service.

Date: 10/10/25

Project Number: VT1605



This plan is conceptual only and is not  
represented as an engineered plan.

# LandVest





**299 Mountain Road**  
Stowe, VT

**Town Locus**

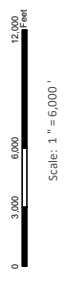
**LEGEND**

- ★ Subject Property - 0.4 ±AC
- Adjacent Properties
- Protected Land
- ~ Open Water
- ~ Wetlands
- ~ Perennial Streams
- ~ Intermittent Streams



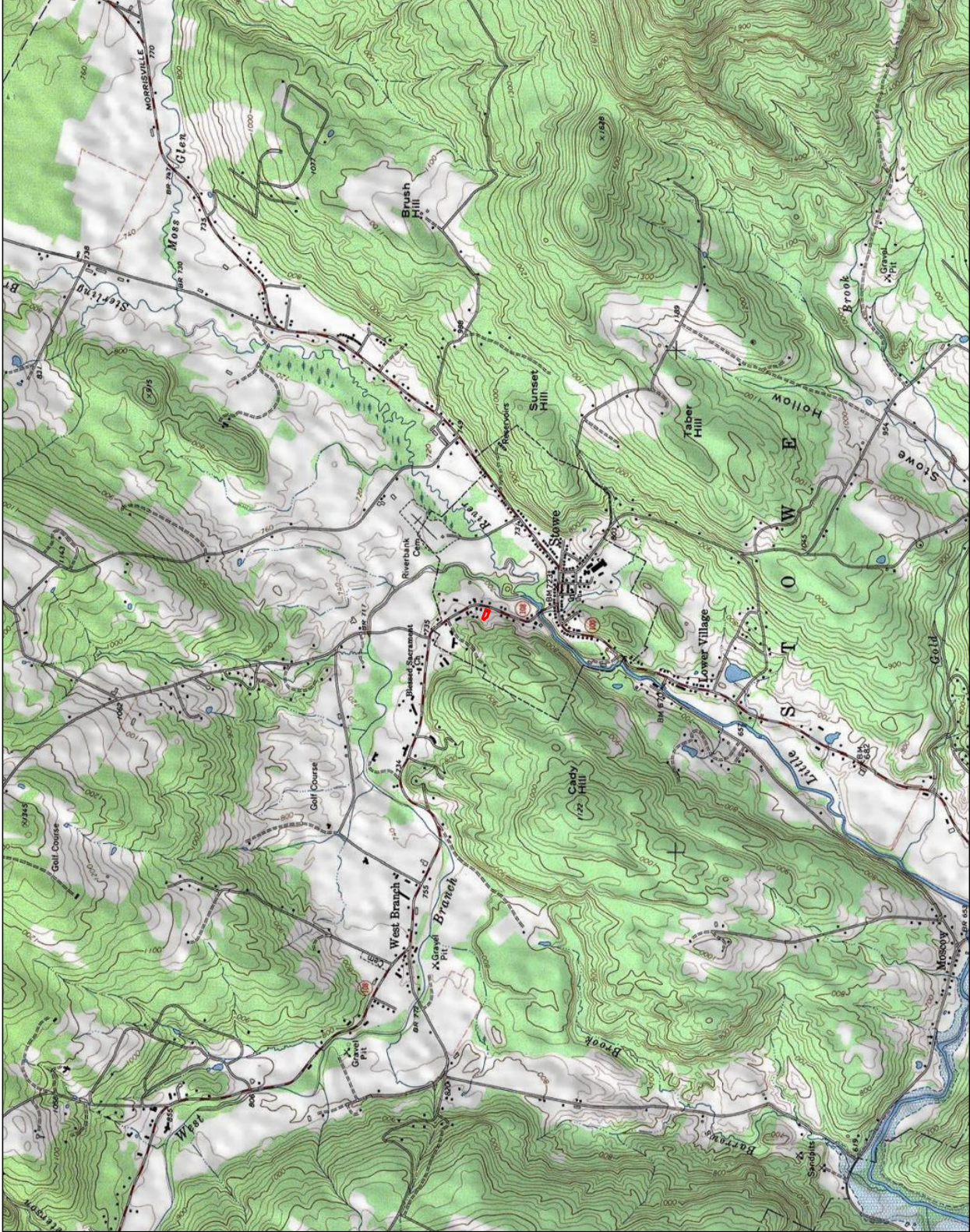
Notes:  
Credits: Background from  
ESRI | Terrain Base map  
service

Date: 10/10/25  
Project Number: VT1605



This plan is conceptual only and is not  
represented as an engineered plan.

**LandVest**

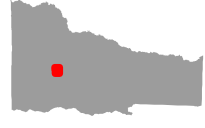


**299 Mountain Road**  
Stowe, VT

**USGS Topographic Map**

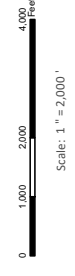
**LEGEND**

Subject Property - 0.4 ±Ac



Notes:  
Credits: USGS Topo  
background from ESRI  
'USA Topo Map' map  
service.

Date: 10/10/25  
Project Number: VT1605



This plan is conceptual only and is not represented as an engineered plan.

**LandVest**

PAYABLE TO:

MAIL TO:

# Town of Stowe

Town of Stowe

PO Box 730

Stowe, VT 05672

802-253-6133

## TAX BILL

PARCEL ID	BILL DATE	TAX YEAR
02119.	07/14/2025	25-26

Description: 0.4 AC & COMM BLDG/ APT  
Location: 299 MOUNTAIN RD

OWNER **CMR ENTERPRISES LLC**  
299 MOUNTAIN ROAD  
STOWE VT 05672

SPAN # 621-195-12577 SCL CODE: 195  
TOTAL PARCEL ACRES 0.40

FOR INCOME TAX PURPOSES

ASSESSED VALUE		NONHOMESTEAD
REAL	1,374,200	1,374,200
<b>TOTAL TAXABLE VALUE</b>	<b>1,374,200</b>	<b>1,374,200</b>
<b>GRAND LIST VALUES</b>	<b>13,742.00</b>	<b>13,742.00</b>

MUNICIPAL TAXES				EDUCATION TAXES				
TAX RATE NAME	TAX RATE	x GRAND LIST =	TAXES	TAX RATE NAME	TAX RATE	x GRAND LIST =	TAXES	
Town	0.2275	x13,742.00=	3,126.29	NON HOMESTEAD EDUCATION	1.1651	x13,742.00=	16,010.80	
Voter Approved Exemp	0.0022	x13,742.00=	30.23	1.7030 (state rate) / 146.17% (CLA + SA) = 1.1651				
<b>Revised Bill</b>				<b>Payments</b>				
				1	08/15/2025	<b>TOTAL EDUCATION TAX</b>		16,010.80
				2	11/17/2025	<b>EDUCATION STATE PAYMENT</b>		
				3	02/17/2026	<b>EDUCATION NET TAX DUE</b>		
<b>TOTAL MUNICIPAL TAX</b>				<b>TOTAL TAX</b>		19,167.32		
3,156.52				TOTAL STATE PAYMENT				
<b>MUNICIPAL STATE PAYMENT</b>				<b>TOTAL NET TAX DUE</b>				
<b>MUNICIPAL NET TAX DUE</b>								

**DETACH THE STUBS BELOW AND RETURN WITH YOUR PAYMENT**

Town of Stowe  
TAX YEAR 25-26

Town of Stowe  
TAX YEAR 25-26

Town of Stowe  
TAX YEAR 25-26

Town of Stowe  
TAX YEAR 25-26

<b>1ST PAYMENT DUE</b>	
08/15/2025	
<b>OWNER NAME</b>	
CMR ENTERPRISES LLC	
<b>PARCEL ID</b>	
02119-	
<b>AMOUNT DUE</b>	
<b>AMOUNT PAID</b>	Revised Bill

<b>2ND PAYMENT DUE</b>	
11/17/2025	
<b>OWNER NAME</b>	
CMR ENTERPRISES LLC	
<b>PARCEL ID</b>	
02119-	
<b>AMOUNT DUE</b>	
<b>AMOUNT PAID</b>	Revised Bill

<b>3RD PAYMENT DUE</b>	
02/17/2026	
<b>OWNER NAME</b>	
CMR ENTERPRISES LLC	
<b>PARCEL ID</b>	
02119-	
<b>AMOUNT DUE</b>	
<b>AMOUNT PAID</b>	Revised Bill

<b>4TH PAYMENT DUE</b>	
05/15/2026	
<b>OWNER NAME</b>	
CMR ENTERPRISES LLC	
<b>PARCEL ID</b>	
02119-	
<b>AMOUNT DUE</b>	
<b>AMOUNT PAID</b>	Revised Bill