



SELLER'S PROPERTY INFORMATION REPORT

TO BE COMPLETED BY SELLER

Date Prepared: 06/23/2026

Seller's Name(s): Vincent Beaver

Holly Beaver

(aka Holly Counter Beaver)

Physical Property Address: 722 Bubbling Brook Lane, Bakersfield, VT 05450

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: farm

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.

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THE STATEMENTS IN THIS REPORT ARE MADE BY THE SELLER.

THEY ARE NOT STATEMENTS OR REPRESENTATIONS MADE BY ANY REAL ESTATE AGENT(S).

1. SOILS, DRAINAGE, BOUNDARIES AND EASEMENTS)

(a)	Has any fill or off-site material been placed on the Property?	☐ YES	☒ NO	☐ DON'T KNOW
(b)	Do you know of any sliding, settling, subsidence, earth movement, upheaval or earth stability problems that have affected the Property?	☐ YES	☒ NO	☐ 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?	☐ YES	☒ NO	☐ DON'T KNOW
(d)	Do you know of any past or present drainage, high water table, or flood problems affecting the Property?	☐ YES	☐ NO	☒ 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? ☐ Road Maintenance Agreement ☐ Homeowners/Road Assoc. ☐ Shared Driveway ☐ Other (explain): _____ Annual Cost(s): _____	☐ YES	☒ NO	☐ DON'T KNOW
(f)	Are there public or private landfills or dumps (compacted or otherwise) on the Property or on any abutting property?	☐ YES	☒ NO	☐ DON'T KNOW
(g)	Are there currently any underground fuel storage tanks on the Property? If "Yes," Fuel Type: _____	☒ YES	☐ NO	☐ 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? _____	☐ YES	☒ NO	☐ DON'T KNOW
(i)	Do you know the location of the boundary lines of the Property?	☒ YES	☐ NO	☐ DON'T KNOW
(j)	Are the boundary lines of the Property marked in any way? If "Yes," how are they marked?	☒ YES	☐ NO	☐ DON'T KNOW
(k)	Has the Property been surveyed? If "Yes," when? _____ By whom? _____	☐ YES	☐ NO	☒ DON'T KNOW
(l)	Are copies of any of the following available? ☐ Site Plan ☐ Survey ☐ Tax Map ☐ Subdivision Plan/Sketch	☐ YES	☐ NO	☒ DON'T KNOW
(m)	Are there any easements or rights of way affecting the Property?	☒ YES	☐ NO	☐ DON'T KNOW
(n)	Are there any boundary line disputes, claims of adverse possession, encroachments, or zoning set back violations affecting the Property?	☐ YES	☒ NO	☐ DON'T KNOW

Further explanation of any of the above: _____

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2. MECHANICAL, ELECTRICAL, AND OTHER SYSTEMS

(a)	Primary Heating System (check all that apply): ☐ Base Board ☐ Hot Air ☐ Radiant ☐ Direct ☐ Heat Pump ☐ Vent ☐ Steam ☒ Other (please explain):	
(b)	Age of Heating System: <u>House, main</u> ☒ DON'T KNOW <u>See spreadsheet</u>	
(c)	Primary Fuel Type: ☐ Oil ☐ Natural Gas ☐ Propane ☐ Electric ☐ Wood ☐ Wood Pellet ☐ Coal ☐ Solar ☐ Geothermal ☒ Other (please explain):	
	If propane, who owns the propane tank? ☒ Owner ☐ Propane Supplier ☐ Association If oil, when was the tank last inspected? _____ By whom? _____	
(d)	When was the primary heating system last serviced? <u>See spreadsheet</u> By whom? _____	
(e)	Primary heating service and/or inspection reports attached? ☐ YES ☒ NO	
(f)	Primary Annual Fuel Usage: _____ Gallons (or other measure) Date Range: <u>See spreadsheet</u> <i>Fuel consumption may vary by user, number of occupants and weather conditions.</i>	
(g)	Primary fuel provider: <u>Blowin Brothers, Enosburg</u>	
(h)	Secondary Heating System (check all that apply): ☐ Base Board ☐ Hot Air ☐ Radiant ☐ Direct ☐ Heat Pump ☐ Vent ☐ Steam ☒ Other (please explain): <u>See spreadsheet</u>	
(i)	Secondary Fuel Type: ☐ Oil ☐ Natural Gas ☐ Propane ☐ Electric ☐ Wood ☐ Wood Pellet ☐ Coal ☐ Solar ☐ Geothermal ☒ Other (please explain):	
	If propane, who owns the propane tank? ☒ Owner ☐ Propane Supplier ☐ Association If oil, when was the tank last inspected? _____ By whom? _____	
(j)	When was the secondary heating system last serviced? <u>See spreadsheet</u> By whom? _____	
(k)	Secondary heating service and/or inspection reports attached? ☐ YES ☒ NO	
(l)	Secondary Annual Fuel Usage: _____ Gallons (or other measure) Date Range: <u>See spreadsheet</u> <i>Fuel consumption may vary by user, number of occupants and weather conditions.</i>	
(m)	Secondary fuel provider: <u>Blowin Brothers, Enosburg</u>	
(n)	Property used: ☒ Full Time ☐ Seasonally	
(o)	Is there air conditioning? ☒ YES ☐ NO If "Yes," describe type and number of units (central, heat pump, window, etc.): _____	
(p)	Hot Water System (check all that apply): ☒ Hot Water Tank ☐ Domestic/Off Boiler ☐ On Demand ☐ Heat Pump Water Heater	
(q)	Age of Hot Water System: <u>2025</u> ☐ DON'T KNOW	
(r)	Hot Water Tank is: ☒ Owned ☐ Rented If rented, from whom: _____ Monthly rental fee: \$ _____	
(s)	Alternative Energy System(s) (check all that apply): ☒ Solar ☐ Wind ☐ Hydroelectric ☐ Geothermal ☐ Unknown Energy returned to grid?: ☒ YES ☐ NO Owned or Leased?: <u>OWNED</u>	
(t)	Electrical System: Electrical service panel has: ☐ Fuses ☒ Circuit Breakers ☐ Knob and Tube ☐ Other (please explain): Main Breaker Amperes: <u>220/220</u> Amps ☐ DON'T KNOW	

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(u)	Annual electricity usage: \$ _____ Date Range: <u>See Spreadsheet</u> <i>Electricity consumption may vary by user, number of occupants, appliances and weather conditions.</i>		
(v)	Electric Utility Provider: <u>Village of Enosburg Falls</u>		
(w)	Has a Vermont Home Energy Profile been created? If "Yes," when? _____ By whom? _____	☐ YES	☐ NO ☒ DON'T KNOW
(x)	Are you aware of any problems or conditions that affect any of the above systems? If "Yes," explain in detail: _____ _____	☐ YES ☒ NO	

3. OTHER EQUIPMENT, APPLIANCES, AND FIXTURES

(a)	Check the items that will be included in the sale of the Property:		
	☐ Beverage Cooler ☒ Central Air ☐ Central Vacuum ☒ Ceiling Fans ☒ CO Detectors - # _____ ☐ Compost Bin ☒ Cooktop Stove ☐ Dehumidifier ☒ Dishwasher ☐ Disposal ☒ Dryer ☒ Electric Garage Door Opener - Number of transmitters _____ ☐ Energy Recovery Ventilator Unit	☒ Freezer ☐ Hot Tub ☐ Humidifier ☐ Irrigation System ☒ Microwave ☐ Mini-Fridge ☒ Mini split ☐ Pool - above-ground ☒ Pool - in-ground ☒ Pool Equipment ☐ Portable Generator ☐ Radon Mitigation ☒ Range-Electric ☐ Range-Gas ☒ Range Hood	☒ Refrigerator ☒ Satellite Dish ☐ Security System: ☐ Owned ☐ Leased ☒ Smoke Detectors - # _____ ☐ Sprinkler System ☒ Standby Generator ☒ Stove: ☐ Gas ☒ Wood ☐ Pellet ☐ Sump Pump ☐ Wall Oven ☒ Washer ☒ Window AC ☐ OTHER: _____ _____
(b)	Are any of the items that will be included in the sale of the Property in need of repair or replacement? If "Yes," explain in detail: _____	☐ YES ☒ NO	
(c)	List equipment and appliances that will be excluded from the sale of the Property: _____ _____		

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4. TELEPHONE/INTERNET/TELEVISION

(a)	Is landline telephone service present at the Property? If "Yes," current provider:	☒ YES	☐ NO
(b)	Is cellular telephone service available at the Property? If "Yes," list available providers:	☐ YES	☒ NO
(c)	Is internet service available at the Property? If "Yes," current provider:	☒ YES	☐ NO
(d)	What type of internet service is available: ☐ Dial Up ☐ Broadband ☐ Cable ☐ Satellite ☐ DSL ☒ Fiber Optic ☐ None		
(e)	Is television service available at the Property? If "Yes," current provider:	☐ YES	☒ NO
(f)	What type of television service is available: ☐ Antenna ☐ Cable ☐ Satellite ☐ DSL ☐ Fiber Optic ☒ None		

5. STRUCTURAL COMPONENTS

(a)	Type of construction (check all that apply): ☐ Manufactured ☐ Modular ☒ Wood Frame ☐ Other (describe):		
(b)	Year Building(s) Constructed: Main Building <u>2001</u> Additions to Main Building: Additional Building(s): (a) <u>Sm House '21</u> (b) <u>Greenhouse '14</u> (c) <u>Barn '23</u> (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:	☒ YES	☐ NO
	If required, did you obtain all permits and approvals for such work? ☐ YES ☐ NO ☐ DON'T KNOW		
(d)	Check any of the following items that have defects or malfunctions that need repair: ☐ Foundation ☐ Slab ☒ Chimney ☐ Fireplace ☐ Interior Walls ☐ Ceilings ☐ Floors ☐ Windows ☐ Doors ☐ Storms/Screens ☐ Exterior Walls ☐ Driveway ☐ Sidewalks ☐ Pool ☐ Roof ☐ Outside Retaining Walls ☐ Other Structures/Components: If any of the above items are checked, describe the defect, malfunction or item(s) that need repair:		
(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:	☐ YES	☒ NO ☐ DON'T KNOW

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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:	☐ YES	☒ NO	

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:	☐ YES	☒ 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:	☐ YES	☒ NO	☐ DON'T KNOW
(i)	Are any of the above recurring problems? If "Yes," what are the problems and how often have they recurred?	☐ YES	☒ NO	

ROOF

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

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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): ☐ Public or Municipal ☐ Community ☐ Private ☐ Shared ☐ Driven Point Well ☐ On-site ☐ Off-site ☒ Drilled Well ☒ Spring ☐ Lake/Pond ☐ None ☐ DON'T KNOW ☐ 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: <u>Unknown</u>
(d)	Water System Features: ☐ Cistern/Reservoir/Holding Tank ☒ Water Softener/Conditioner ☐ Reverse Osmosis ☐ Infrared Light ☒ Ultraviolet ☒ Sediment Filter ☐ Other: _____ ☐ None ☐ DON'T KNOW
(e)	What is the annual cost for municipal water? \$ _____ Date Range: _____ Metered ☐ YES ☒ NO

CONDITION OF WATER AND WATER SYSTEM

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

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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): ☐ Public or Municipal ☐ Community ☐ Private ☐ Shared ☒ On-site septic/wastewater system ☐ Off-site septic/wastewater system ☐ Septic Tank ☒ New or Alternate Technology (explain technology): ☒ Holding Tanks ☐ Cesspool ☐ Sewage Pump ☒ Dry Well ☐ Conventional Disposal Area ☐ Mound System Disposal Area ☐ At Grade ☐ Other ☐ DON'T KNOW If other, please explain: _____
(b)	What is the annual cost of municipal sewer? \$ _____ Date Range: _____

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? _____	☒ YES	☐ NO	☐ DON'T KNOW
(e)	Has the system been repaired since you have owned the Property? If "Yes," when? _____ What was done? _____ By whom? _____	☐ YES	☒ NO	☐ DON'T KNOW
(f)	Type of septic tank: ☐ Concrete ☐ Metal ☐ Fiberglass ☐ Other (describe): _____ ☒ DON'T KNOW			
(g)	Septic tank capacity (in gallons) _____ ☒ DON'T KNOW			
(h)	Date septic tank last inspected? _____ ☒ DON'T KNOW			
(i)	Date septic tank last pumped? <u>June, 2024 (both)</u> ☐ DON'T KNOW By whom? <u>Working Dog Septic Service</u>			
(j)	Reports of last inspection/pumping attached?	☐ YES	☒ 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: _____	☐ YES	☒ NO	

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(l)	To your knowledge, is any portion of the system in need of repair or replacement? ☐ YES ☐ NO If "Yes," describe in detail: _____	☐ YES	☒ 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?	☒ YES	☐ NO	☐ 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?	☒ YES	☐ NO	
(b)	Are there any property or development rights (e.g. conservation easements to Land Trusts, etc.) owned by others? If "Yes," by whom?	☐ YES	☒ NO	
(c)	Is Property enrolled in Vermont's Current Use program?	☒ YES	☐ 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?	☐ YES	☒ 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: _____	☐ YES	☒ NO	☐ DON'T KNOW
(f)	Was the house built after December 31, 1997? If "Yes," is a Residential Building Energy Standard (RBES) certification available? ☐ YES ☐ NO ☐ DON'T KNOW	☒ YES	☐ NO	
(g)	Have you received notice that the Property will be reassessed by any taxing authority during the next 12 months?	☒ YES	☐ NO	
(h)	Does the Property have urea-formaldehyde foam insulation?	☐ YES	☒ NO	☐ DON'T KNOW
(i)	Does the Property have asbestos and/or asbestos materials in the siding, walls, plaster, flooring, insulation, heating system?	☐ YES	☒ NO	☐ DON'T KNOW
(j)	Has the Property been tested for radon gas? If "Yes," when? _____ By whom? _____ Results: _____	☐ YES	☐ NO	☒ DON'T KNOW
(k)	Has paint containing lead been used on the Property?	☐ YES	☒ NO	☐ DON'T KNOW
(l)	Does the Property have evidence of mold? If "Yes," what has been done about the mold? _____	☐ YES	☒ NO	☐ DON'T KNOW

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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: _____	☐ YES	☒ NO	
(n)	Is there any infestation by pests that affect the Property? If "Yes," explain: _____	☐ YES	☒ NO	☐ DON'T KNOW
(o)	Do you have any knowledge of any damage to the Property caused by pests?	☐ YES	☒ NO	☐ DON'T KNOW
(p)	Is the Property currently under warranty or other coverage by a pest control company?	☐ YES	☒ NO	☐ DON'T KNOW
(q)	Do you know of any termite/pest control reports or treatments for the Property in the last five years?	☐ YES	☒ NO	☐ 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? ☐ YES ☒ NO	☒ YES	☐ NO	☐ DON'T KNOW
Further explanation of any of the above: <i>Ring doorbell</i>				

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?	☐ YES	☒ NO	
(b)	Is there any defect, damage, or problem with any common elements or common areas? If "Yes," describe below.	☐ YES	☒ NO	☐ DON'T KNOW
(c)	Is there any condition or claim which may result in an increase in assessment or fees? If "Yes," describe below.	☐ YES	☒ NO	☐ DON'T KNOW
(d)	Are pets allowed? If "Yes," what is allowed?	☐ YES	☒ NO	☐ DON'T KNOW
(e)	Are there any rental restrictions? If "Yes," what is the rule?	☐ YES	☒ NO	
(f)	Are there any homeowners' association dues associated with the Property? If "Yes," amount \$ ☐ Monthly ☐ Quarterly ☐ Yearly	☐ YES	☒ NO	

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(g)	Are there any special assessments on the Property? If "Yes," amount \$ _____ ☐ Monthly ☐ Quarterly ☐ Yearly Purpose of special assessment: _____ Years of term remaining on any outstanding special assessments: _____	☐ YES	☒ 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.	☐ YES	☒ NO	☐ 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.	☐ YES	☒ NO	☐ DON'T KNOW
(j)	Contact person/manager for condominium/homeowner association: Name: _____ Phone number/email: _____			
Further explanation of any of the above: _____				

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.

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