

PROPERTY DISCLOSURE - RESIDENTIAL ONLY
New Hampshire Association of REALTORS® Standard Form



TO BE COMPLETED BY SELLER

The following answers and explanations are true and complete to the best of SELLER'S knowledge. This statement has been prepared to assist prospective BUYERS in evaluating SELLER'S property. This disclosure is not a warranty of any kind by the SELLER, or any real estate FIRM representing the SELLER, and is not a substitute for any inspection by the BUYER. SELLERS authorize FIRM in this transaction to disclose the information in this statement to other real estate agents and to prospective buyers of this property.

NOTICE TO SELLER(S): COMPLETE ALL INFORMATION AND STATE NOT APPLICABLE OR UNKNOWN AS APPROPRIATE. IF ANY OF THE INFORMATION IN THIS PROPERTY DISCLOSURE FORM CHANGES FROM THE DATE OF COMPLETION, YOU ARE TO NOTIFY THE LISTING FIRM PROMPTLY IN WRITING.

1. SELLER: Andrea Falkoff, Daniel Falkoff

2. PROPERTY LOCATION: 549 Barnard Hill Rd, Weare, NH 03281

3. CONDOMINIUM, CO-OP, PUD DISCLOSURE RIDER OR MULTIFAMILY DISCLOSURE RIDER ATTACHED? Yes No

4. SELLER: has has not occupied the property for 4 years.

5. WATER SUPPLY

Please answer all questions regardless of type of water supply.

a. TYPE OF SYSTEM: Public Private Seasonal Unknown Drilled Dug Other

b. INSTALLATION: Location: Front yard Installed By: Date of Installation: What is the source of your information?

c. USE: Number of persons currently using the system: 4 Does system supply water for more than one household? Yes No

d. MALFUNCTIONS: Are you aware of or have you experienced any malfunctions with the (public/private/other) water systems? Pump: Yes No N/A Quantity: Yes No Quality: Yes No Unknown If YES to any question, please explain in Comments below or with attachment.

e. WATER TEST: Have you had the water tested? Yes No Date of most recent test 12/16/2024 IF YES to any question, please explain in Comments below or with attachment. Are you aware of any test results reported as unsatisfactory or satisfactory with notations? Yes No IF YES, are test results available? Yes No What steps were taken to remedy the problem? COMMENTS:

6. SEWAGE DISPOSAL SYSTEM

a. TYPE OF SYSTEM: Public: Yes No Community/Shared: Yes No Private: Yes No Unknown Septic Design Available: Yes No

b. IF PUBLIC OR COMMUNITY/SHARED Have you experienced any problems such as line or other malfunctions? Yes No What steps were taken to remedy the problem?

c. IF PRIVATE: TANK: Septic Tank Holding Tank Cesspool Unknown Other Tank Size Gal. Unknown Other Tank Type Concrete Metal Unknown Other Location: Back Yard behind deck Location Unknown. Date of Installation: Date of Last Servicing: Name of Company Servicing Tank: Have you experienced any malfunctions? Yes No COMMENTS:

SELLER(S) INITIALS Af / DF BUYER(S) INITIALS /

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d. LEACH FIELD: [X]Yes ___No ___Other
IF YES, Location: Back Yard behind deck Size: [X]Unknown
Date of installation of leach field: Installed By:
Have you experienced any malfunctions? ___Yes [X]No
Comments:

e. IS SYSTEM LOCATED ON "DEVELOPED WATERFRONT" as described in RSA 485-A? ___Yes [X]No ___Unknown
IF YES, has a septic system evaluation been done within 180 days? ___Yes ___No ___Unknown
Date of Evaluation:
Comments:

FOR ADDITIONAL INFORMATION THE BUYER IS ENCOURAGED TO CONTACT THE NH DEPARTMENT OF ENVIRONMENTAL SERVICES SUBSURFACE SYSTEMS BUREAU, 603-271-3501

Table with 7 columns: LOCATION, Yes, No, Unknown, If YES, Type, Amount, Unknown. Rows include Attic or Cap, Crawl Space, Exterior Walls, Floors.

8. HAZARDOUS MATERIAL

a. UNDERGROUND STORAGE TANKS - Current or previously existing:
Are you aware of any past or present underground storage tanks on your property? ___Yes [X]No ___Unknown
IF YES: Are tanks currently in use? ___Yes ___No
IF NO: How long have tank(s) been out of service?
What materials are, or were, stored in the tank(s)?
Age of tank(s): Size of tank(s):
Location:
Are you aware of any past or present problems such as leakage, etc? ___Yes ___No
Comments:
If tanks are no longer in use, have the tanks been removed? ___Yes ___No ___Unknown
Comments:

b. ASBESTOS - Current or previously existing:
As insulation on the heating system pipes or ducts? ___Yes [X]No ___Unknown
In the siding? ___Yes [X]No ___Unknown In the roofing shingles? ___Yes [X]No ___Unknown
In flooring tiles? ___Yes [X]No ___Unknown Other ___Yes [X]No ___Unknown
If YES, Source of information:
Comments:

c. RADON/AIR - Current or previously existing:
Has the property been tested? ___Yes ___No [X]Unknown
If YES: Date: By:
Results: If applicable, what remedial steps were taken?
Has the property been tested since remedial steps? ___Yes ___No
Are test results available? ___Yes ___No
Comments:

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d. RADON/WATER - Current or previously existing:

Has the property been tested? [X] Yes ___ No ___ Unknown
If YES: Date: 12/16/2024 By: Granite State Analytical
Results: 866 pCi/L If applicable, what remedial steps were taken?
Has the property been tested since remedial steps? ___ Yes ___ No
Are test results available? [X] Yes ___ No Comments:

e. LEAD-BASED PAINT - Current or previously existing:

Are you aware of lead-based paint on this property? ___ Yes ___ No
If YES: Source of information:
Are you aware of any cracking, peeling, or flaking lead-based paint? ___ Yes ___ No
Comments:

f. Are you aware of any other hazardous materials? ___ Yes ___ No

If YES: Source of information:
Comments:

9. GENERAL INFORMATION

a. Is this property subject to liens, encroachments, easements, rights-of-way, leases, restrictive covenants, attachments, life estates, or right of first refusal?

___ Yes ___ No ___ Unknown If YES, Explain:
What is your source of information?

b. Is this property subject to special assessments, betterment fees, association fees, or any other transferable fees?

___ Yes ___ No ___ Unknown If YES, Explain:
What is your source of information?

c. Are you aware of any onsite landfills or any other factors, such as soil, flooding, drainage, etc?

___ Yes ___ No If YES, Explain:

d. Are you aware of any problems with other buildings on the property?

___ Yes ___ No If YES, Explain:

e. Are you receiving a tax exemption or reduction for this property for any reason including but not limited to current use, land conservation, etc.?

___ Yes ___ No ___ Unknown If YES, Explain:

f. Is this property located in a Federally Designated Flood Hazard Zone?

___ Yes ___ No ___ Unknown Comments:

g. Has the property been surveyed?

___ Yes ___ No ___ Unknown If YES, By:
If YES, is survey available? ___ Yes ___ No ___ Unknown

h. How is the property zoned?

i. Heating System Age: Type: Fuel: Tank Location:

Owner of Tank:
Annual Fuel Consumption: Price: Gallons:
Date system was last serviced and by whom?
Secondary Heat Systems:
Comments:

j. Roof Age: Type of Roof Covering:

Moisture or leakage:
Comments:

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k. Foundation/Basement Full Partial Other: Type:
Moisture or leakage:
Comments:

l. Chimney(s) How Many? 1 Lined? Last Cleaned: Problems?
Comments:

m. Plumbing Type: Age:
Comments:

n. Domestic Hot Water Age: Type: Gallons:

o. Electrical System # of Amps Circuit Breakers Fuses
Comments:
Solar Panels: Leased Owned If leased, explain terms of agreement:
Comments:

p. Modifications: Are you aware of any modifications or repairs made without the necessary permits? Yes No
If Yes, please explain:

q. Pest Infestation: Are you aware of any past or present pest infestations? Yes No Type:
Comments:

r. Methamphetamine Production Do you have knowledge of methamphetamine production ever occurring on the property?
(Per RSA 477:4-g) Yes No If YES, please explain:

s. Air Conditioning Type: Age: Date Last Serviced and by whom:
Comments:

t. Pool Age: Heated: Yes No Type: Last Date of Service:
By Whom:

u. Generator Portable: Yes No Whole House: Yes No Kw/Size: Last Date of Service:
If Portable: Included Negotiable
Comments:

v. Internet Type Currently Used at Property:

w. Other (e.g. Alarm System, Irrigation System, etc.)
Comments:

NOTICE TO PURCHASER(S): PRIOR TO SETTLEMENT YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM NECESSARY WITH RESPECT TO ADJACENT PARCELS IN ACCORDANCE WITH THE TERMS AND CONDITIONS AS MAY BE CONTAINED IN PURCHASE AND SALES AGREEMENT AND DEPOSIT RECEIPT. YOU SHOULD EXERCISE WHATEVER DUE DILIGENCE YOU DEEM NECESSARY WITH RESPECT TO INFORMATION ON ANY SEXUAL OFFENDERS REGISTERED UNDER NH RSA CHAPTER 651-B. SUCH INFORMATION MAY BE OBTAINED BY CONTACTING THE LOCAL POLICE DEPARTMENT.

SELLER(S) INITIALS Af IDf

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10. ADDITIONAL INFORMATION

a. ATTACHMENT EXPLAINING CURRENT PROBLEMS, PAST REPAIRS, OR ADDITIONAL INFORMATION?

Yes No

b. ADDITIONAL COMMENTS:

ACKNOWLEDGEMENTS:

SELLER ACKNOWLEDGES THAT HE/SHE HAS PROVIDED THE ABOVE INFORMATION AND THAT SUCH INFORMATION IS ACCURATE, TRUE AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE. SELLER AUTHORIZES THE LISTING BROKER TO DISCLOSE THE INFORMATION CONTAINED HEREIN TO OTHER BROKERS AND PROSPECTIVE PURCHASERS.

SELLER(S) MAY BE RESPONSIBLE AND LIABLE FOR ANY FAILURE TO PROVIDE KNOWN INFORMATION TO BUYER(S).

Andrea Falkoff
SELLER

05/27/2026
DATE

Daniel Falkoff
SELLER

05/27/2026
DATE

BUYER ACKNOWLEDGES RECEIPT OF THIS PROPERTY DISCLOSURE RIDER AND HEREBY UNDERSTANDS THE PRECEDING INFORMATION WAS PROVIDED BY SELLER AND IS NOT GUARANTEED BY BROKER/AGENT. THIS DISCLOSURE STATEMENT IS NOT A REPRESENTATION, WARRANTY OR GUARANTY AS TO THE CONDITION OF THE PROPERTY BY EITHER SELLER OR BROKER. BUYER IS ENCOURAGED TO UNDERTAKE HIS/HER OWN INSPECTIONS AND INVESTIGATIONS VIA LEGAL COUNSEL, HOME, STRUCTURAL OR OTHER PROFESSIONAL AND QUALIFIED ADVISORS AND TO INDEPENDENTLY VERIFY INFORMATION DIRECTLY WITH THE TOWN OR MUNICIPALITY.

BUYER

DATE

BUYER

DATE

SELLER(S) INITIALS Af IDF

BUYER(S) INITIALS _____



GRANITE STATE ANALYTICAL SERVICES, LLC.

22 Manchester Road, Unit 2, Derry, NH 03038
Phone (800) 699-9920 | (603) 432-3044 website www.granitestateanalytical.com

Laboratory Report

NH Tap
273A Union Sq
Milford, NH 03055

Date Printed: 12/16/2024
Work Order #: 2412-02439
Client Job #:
Date Received: 12/12/2024
Sample collected in: New Hampshire

Attached please find results for the analysis of the samples received on the date referenced above.

Unless otherwise noted in the attached report, the analyses performed met the requirements of the analyzing laboratory's Quality Assurance Plan, Standard Operating Procedures and State Accreditation. This certificate shall not be reproduced, except in full, without the written approval of the analyzing laboratory. The results presented in this report relate to the samples listed on the following pages in the condition in which they were received. Accreditation for each analyte is identified by the * symbol following the analyte name. Location of our analyzing laboratory is identified by the code in the Analyst Column.

A & L Laboratory:
Identified by ME in Analyst Column
155 Center Street, Auburn, Maine 04210
www.allaboratory.com

Granite State Analytical Services LLC:
Identified by NH in Analyst Column
22 Manchester Road, Derry, NH 03038
www.granitestateanalytical.com

Nashoba Analytical:
Identified by MA in the Analyst Column
31A Willow Road, Ayer, MA 01432
www.nashobaanalytical.com

ANALYSIS RELATED NOTES:

- RL: "Reporting limit" means the lowest level of an analyte that can be accurately recovered from the matrix of interest.
- DF: "Dilution factor" means the ratio of the volume of the sample to the volume of the final (dilute) solution.
- MDL: "Minimum Detection Limit" means the minimum result which can be reliably discriminated from a blank with a predetermined confidence level.
- ND: Non-detect. Results reported as Non-Detect (ND) have been evaluated down to the concentration listed in the MDL column.
- A & L Laboratory / Granite State Analytical Services LLC / Nashoba Analytical. accreditation lists can be found on our websites listed above.
- Subcontracted samples will be identified by the Accreditation number of the subcontract laboratory in the analyst field for each analyte and the appropriate laboratory will be listed here. **None**
- Data Qualifiers (DQ) Flags provide additional information in regards to the receipt, analysis or quality control of a sample. These are indicated under the DQ Flags Column on your report and listed here if necessary: **Data Qualifier (DQ) Flags: H = Hold time non-compliant.**

SAMPLE STATE SPECIFIC NOTES:

- The State of New Hampshire has set an Advisory Limit of 10,000 pCi/L for Radon in Water.

Additional Narrative or Comments: **None**

We appreciate the opportunity to provide you with laboratory services. If you have any questions regarding the enclosed report, please contact the laboratory and we will be happy to assist you.



Donald A. D'Anjou, Ph. D.
Laboratory Director

A & L Laboratory: Accreditations: Maine ME00021, New Hampshire 2501, Maine Radon Registration ID # SPC20
Granite State Analytical Services, LLC: Accreditations: New Hampshire 1015; Maine NH00003;
Massachusetts M-NH0003; Rhode Island 101513; Vermont VT-101507
Nashoba Analytical: Accreditations: Massachusetts M-MA1118



GRANITE STATE ANALYTICAL SERVICES, LLC.

22 Manchester Road, Unit 2, Derry, NH 03038
Phone (800) 699-9920 | (603) 432-3044 website www.granitestateanalytical.com

CERTIFICATE OF ANALYSIS FOR DRINKING WATER

DATE PRINTED: 12/16/2024
CLIENT NAME: NH Tap
CLIENT ADDRESS: 273A Union Sq
Milford, NH 03055
SAMPLE ID #: 2412-02439-001
SAMPLED BY: NH Tap
SAMPLE ADDRESS: 549 Barnard Hill
Weare NH 03281

Legend	
Passes	✓
Fails EPA Primary	⊗
Fails EPA Secondary	▽
Fails State Guideline	✕
Attention	⚠

DATE AND TIME COLLECTED: 12/12/2024 10:45AM
DATE AND TIME RECEIVED: 12/12/2024 03:26PM
ANALYSIS PACKAGE: Comprehensive-NH
RECEIPT TEMPERATURE: ON ICE 7.7° CELSIUS
CLIENT JOB #:

Test Description	Result	Test Units	Pass /Fail	DQ Flag	RL	Limit	Method	Analyst	Date - Time Analyzed
Arsenic*	<0.001	mg/L	✓		0.001	0.005 mg/L	EPA 200.8	JP-NH	12/13/2024 07:33PM
Calcium*	5.11	mg/L			0.1	No Limit	EPA 200.8	JP-NH	12/13/2024 07:33PM
Copper*	0.542	mg/L	✓		0.001	1.3 mg/L	EPA 200.8	JP-NH	12/13/2024 07:33PM
Hardness (calc.)*	14.2	mg CaCO3/L			0.25	No Limit	EPA 200.8	JP-NH	12/13/2024 07:33PM
Iron*	<0.1	mg/L	✓		0.1	0.3 mg/L	EPA 200.8	JP-NH	12/13/2024 07:33PM
Lead*	0.0018	mg/L	✓		0.001	0.015 mg/L	EPA 200.8	JP-NH	12/13/2024 07:33PM
Magnesium*	0.36	mg/L			0.1	No Limit	EPA 200.8	JP-NH	12/13/2024 07:33PM
Manganese*	0.0069	mg/L	✓		0.001	0.05 mg/L	EPA 200.8	JP-NH	12/13/2024 07:33PM
Sodium*	70.4	mg/L			0.1	No limit	EPA 200.8	JP-NH	12/13/2024 07:33PM
Chloride*	16	mg/L	✓		2	250 mg/L	EPA 300.0	NH-NH	12/12/2024 11:07PM
Fluoride*	0.99	mg/L	✓		0.2	4.0 mg/L	EPA 300.0	NH-NH	12/12/2024 11:07PM
Nitrate as N*	0.70	mg/L	✓		0.2	10 mg/L	EPA 300.0	NH-NH	12/12/2024 11:07PM
Nitrite as N*	<0.2	mg/L	✓		0.2	1 mg/L	EPA 300.0	NH-NH	12/12/2024 11:07PM
pH*	7.15	SU	✓	H	N/A	6.5 - 8.5 SU	SM 4500 H B	KR-NH	12/12/2024 03:50PM
Radon	866	pCi/L	✓		100	10000 pCi/L	SM 7500 Rn B	TT-ME	12/13/2024 10:29PM
Coliform Bacteria*	Absent	P-A/100mL	✓		Absent	No Limit	SM 9223B	NH-NH	12/13/2024 09:58AM
E. coli Bacteria*	Absent	P-A/100mL	✓		Absent	Absent	SM 9223B	NH-NH	12/13/2024 09:58AM
Total Coliform / E.coli Bacteria Preparation (Colilert®-18) 20th ED							SM 9223B	KR-NH	12/12/2024 03:45PM



Donald A. D'Anjou, Ph. D.
Laboratory Director



PROPERTY INCLUSIONS / EXCLUSIONS



Property Address: 549 Barnard Hill Rd Weare NH 03281

APPLIANCES	INCLUDED	EXCLUDED	N/A	COMMENTS
Air conditioner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Clothes dryer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Clothes washer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Dehumidifier	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Dishwasher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Garbage Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Garbage Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Hood for oven range	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Microwave	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Oven range	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Refrigerator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Add'l refrigerators/freezers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
INTERIOR ITEMS				
Alarm System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Blinds & shades	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Carbon monoxide detector(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Carpeting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ceiling fans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Coal/Wood Stoves	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Curtains/drapes/rods	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fireplace items	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Lighting fixtures incl. chandeliers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Smoke detector(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
EXTERIOR ITEMS				
Garage door opener(s) & Remotes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Gas grill	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Hot tub & equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other outbuildings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Play equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pool & pool equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Storage shed(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Storm door(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Storm windows	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Fence(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Satellite dish	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
MISCELLANEOUS ITEMS				
Firewood	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Generator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Shelving	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Trees & shrubs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Water Softener	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Workbenches	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
OTHER ITEMS				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

_____ *Andrea Falkoff* _____ 05/27/2026
 Buyer Date Seller Date
 _____ *Daniel Falkoff* _____ 05/27/2026
 Buyer Date Seller Date

UTILITY AND SERVICES

REALTYONEGROUP
NEST

PROPERTY ADDRESS 549 Barnard Hill Rd, Weare, NH 03281

CATEGORY	PROVIDER	AVERAGE MONTHLY COST
ELECTRIC	Eversource	175
GAS	n/a	
PROPANE	n/a	
OIL	Wenzel Oil	150
WATER	Private Well	
SEWER	Septic	
POOL MAINTENANCE	n/a	
INTERNET/CABLE	Verizon	125

GARBAGE PICK UP DAY	
RECYCLING PICK UP DAY	

**Mary Ann Crowell
Register of Deeds, Hillsborough County
LCHIP HIA662816 25.00
TRANS TAX HI143451 6,450.00**

WARRANTY DEED

KNOW ALL MEN BY THESE PRESENTS

That, ASHTON T. FLORENCE, of Raymond NH, and KRISTEN N. ROY, of Manchester NH, both being single

For consideration paid

Grant to DANIEL FALKOFF AND ANDREA FALKOFF, husband and wife as Joint Tenants with Rights of Survivorship, of 3 Ardsmoor Road, Melrose, MA 02176

With WARRANTY COVENANTS

A certain tract or parcel of land, with the buildings thereon, situated in the Town of Weare, County of Hillsborough, New Hampshire, and being shown as Lot No. 1 on Plan of Land entitled "Land Subdivision of Michael R. & Geraldine Comerford, Weare, N.H., May, 1985, Plan by Restron Associates", and said plan being recorded in the Hillsborough County Registry of Deeds as Plan No. 18079, reference to which plan may be made for a more particular description.

Subject to:

All notions, facts, easements, setback lines, right of ways, matters and issues as shown on the plan recorded in said Registry as Plan No. 18079.

All restrictions, reservations, easements and matters of record, if any there be, insofar as the same are in force and applicable.

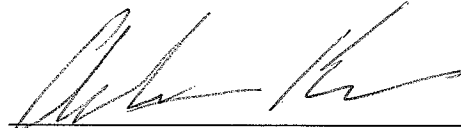
Subject to and with the benefit of any and all matters as shown or noted on plan recorded in said Registry as Plan No. 18079.

For title, see deed dated January 3, 2020 recorded in the Hillsborough County Registry of Deeds at Book 9249, Page 2564.

We, the said Grantors, hereby release to the Grantees all rights of homestead and other interests therein.

PROPERTY ADDRESS: 549 Barnard Hill Road, Weare, NH 03281

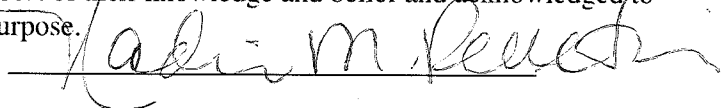
IN WITNESS WHEREOF, I, ASHTON T. FLORENCE set my hand and seal this ___ day of March, 2022.



ASHTON T. FLORENCE

STATE OF NEW HAMPSHIRE
COUNTY OF ROCKINGHAM

On this 2 day of March, 2022, before me, the undersigned notary public, personally appeared ASHTON T. FLORENCE, proved to me through satisfactory evidence of identification, which was photographic identification with signature issued by a federal or state governmental agency, oath or affirmation of a credible witness, personal knowledge of the undersigned, to be the person whose name is signed on the preceding or attached document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of their knowledge and belief and acknowledged to me that they signed it voluntarily for its stated purpose.



Notary Public

My Commission Expires:

NADINE M. PELLETIER
Notary Public - New Hampshire
My Commission Expires March 3, 2026

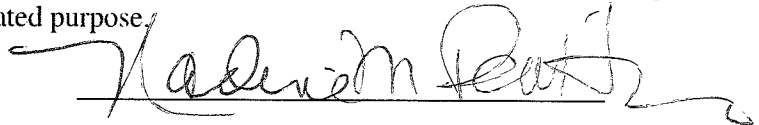
IN WITNESS WHEREOF, I, KRISTEN N. ROY set my hand and seal this ___ day of March, 2022.



KRISTEN N. ROY

STATE OF NEW HAMPSHIRE
COUNTY OF ROCKINGHAM

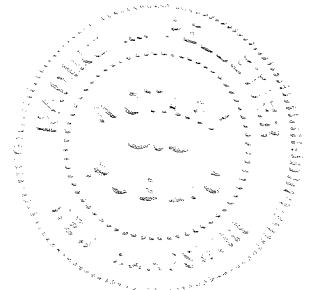
On this 2 day of March, 2022, before me, the undersigned notary public, personally appeared KRISTEN N. ROY, proved to me through satisfactory evidence of identification, which was photographic identification with signature issued by a federal or state governmental agency, oath or affirmation of a credible witness, personal knowledge of the undersigned, to be the person whose name is signed on the preceding or attached document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of their knowledge and belief and acknowledged to me that they signed it voluntarily for its stated purpose.



Notary Public

My Commission Expires:


NADINE M. PELLETIER
Notary Public - New Hampshire
My Commission Expires March 3, 2026

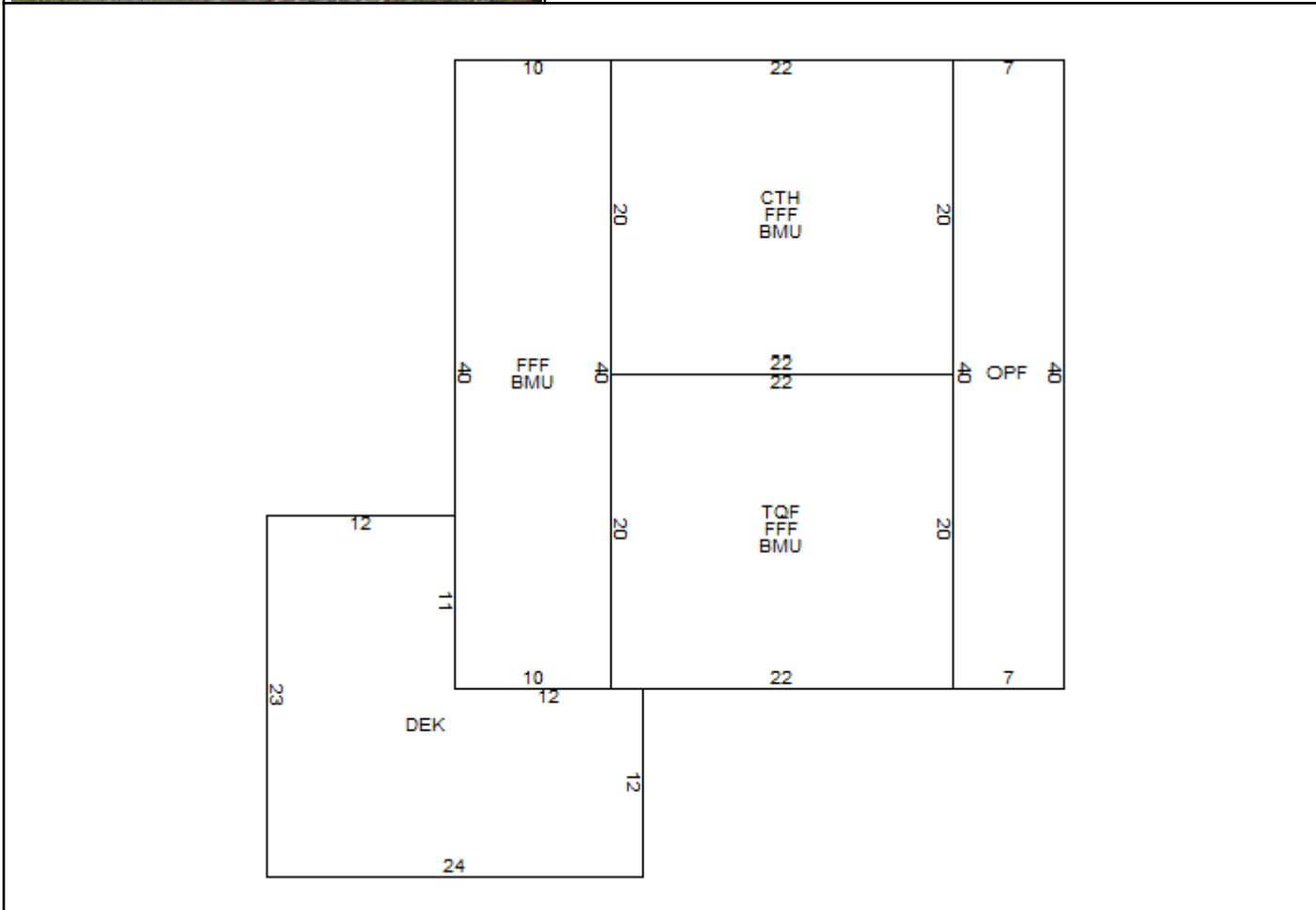


OWNER INFORMATION			SALES HISTORY				PICTURE
FALKOFF, DANIEL FALKOFF, ANDREA 3 ARDSMOOR ROAD MELROSE, MA 02176			Date	Book	Page	Type	Price Grantor
			03/04/2022	9594	1584	Q I	430,000 FLORENCE, ASHTON T
			01/03/2020	9249	2564	Q I	269,933 LABBE, DORIS B
			03/25/2019	9154	2309	U I 37	179,800 FREEDOM MORTGAGE CORP
			03/25/2019	9154	2306	U I 37	AURORA FINANCIAL GROUP
02/21/2019	9147	1128	U I 51	192,800 AURORA FINANCIAL GROUP			
LISTING HISTORY			NOTES				
01/01/26	INSP	MARKED FOR INSPECTION	BRN; PINE LOG; WD BACK UP HEAT; PIPING UPSTAIRS OF 2ND BTH IN MSTR BDRM; BSMT HIGH & LOW AREAS; BSMNT ACCESS FROM EXT ONLY; 8/13 REMODELED KIT IN '10; GRANITE CTOPS; PRESS CABINET IN KIT & BTH; '09 NEW ROOF; SUMP PUMP; 9/16 BR/BA UPDATED PER MLS; 1/20; NOH; WELL MAINT; VINYL WINDOWS; EXT=GD; CHNGD PAT TO SLB; NEW METER ON HSE=NVC;				
01/23/20	DMVM						
01/01/20	INSP	MARKED FOR INSPECTION					
08/06/13	DMVL						
01/09/13	INSP	MARKED FOR INSPECTION					
02/05/09	ERVM						
12/04/08	INSP	MARKED FOR INSPECTION					
01/19/06	DMCL						

EXTRA FEATURES VALUATION								MUNICIPAL SOFTWARE BY AVITAR			
Feature Type	Units	Lngth x Width	Size Adj	Rate	Cond	Market Value	Notes	WEARE ASSESSING OFFICE			
SHED-WOOD	360	20 x 18	104	10.00	80	2,995					
FIREPLACE 2-CUST	1		100	8,500.00	100	8,500	BACK TO BACK				
CONCRETE SLAB	240	20 x 12	127	5.00	25	381	ATT TO SHED				
11,900											
PARCEL TOTAL TAXABLE VALUE								Year	Building	Features	Land
								2023	\$ 198,500	\$ 11,900	\$ 123,800
								Parcel Total: \$ 334,200			
								2024	\$ 198,500	\$ 11,900	\$ 123,800
								Parcel Total: \$ 334,200			
								2025	\$ 198,500	\$ 11,900	\$ 123,800
								Parcel Total: \$ 334,200			

LAND VALUATION											LAST REVALUATION: 2021			
Zone: RESIDENTIAL Minimum Acreage: 1.93 Minimum Frontage: 200											Site: AVERAGE Driveway: DIRT/GRAVEL Road: PAVED			
Land Type	Units	Base Rate	NC	Adj	Site	Road	DWay	Topography	Cond	Ad Valorem	SPI	R	Tax Value	Notes
IF RES	1.930 ac	118,000	F	110	100	100	95	100 -- LEVEL	100	123,300	0	N	123,300	
IF RES	0.260 ac	x 2,000	X	100				95 -- MILD	100	500	0	N	500	
2.190 ac											123,800		123,800	

PICTURE	OWNER	TAXABLE DISTRICTS	BUILDING DETAILS												
	<p>FALKOFF, DANIEL FALKOFF, ANDREA 3 ARDSMOOR ROAD MELROSE, MA 02176 Account Number: 1,964</p>	<table border="1"> <thead> <tr> <th>District</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	District	Percentage			<p>Model: 1.75 STORY LOG HOME Roof: GABLE OR HIP/ASPHALT Ext: LOGS Int: WOOD/LOGS Floor: CARPET/HARD TILE Heat: OIL/FA DUCTED</p> <p>Bedrooms: 3 Baths: 2.0 Fixtures: Extra Kitchens: Fireplaces: A/C: No Generators:</p> <p>Quality: A2 AVG+20</p> <p>Com. Wall: Size Adj: 1.0064 Base Rate: RSA 106.00 Bldg. Rate: 1.1954 Sq. Foot Cost: \$ 126.71</p>								
District	Percentage														
PERMITS															
<table border="1"> <thead> <tr> <th>Date</th> <th>Permit ID</th> <th>Permit Type</th> <th>Notes</th> </tr> </thead> <tbody> <tr> <td>03/26/19</td> <td>EL-03-146-19</td> <td>ELECTRICAL METER</td> <td>RECONNECT METER</td> </tr> <tr> <td>06/27/03</td> <td>SR-06-311-03</td> <td>SEPTIC</td> <td>SEPTIC REVIEW</td> </tr> </tbody> </table>				Date	Permit ID	Permit Type	Notes	03/26/19	EL-03-146-19	ELECTRICAL METER	RECONNECT METER	06/27/03	SR-06-311-03	SEPTIC	SEPTIC REVIEW
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06/27/03	SR-06-311-03	SEPTIC	SEPTIC REVIEW												



BUILDING SUB AREA DETAILS				
ID	Description	Area	Adj.	Effect.
TQF	3/4 STRY FIN	440	0.75	330
FFF	FST FLR FIN	1280	1.00	1280
BMU	BSMNT	1280	0.15	192
CTH	CATHEDRAL	440	0.10	44
DEK	DECK/ENTRANCE	420	0.10	42
OPF	OPEN PORCH	280	0.25	70
GLA:	1,610	4,140		1,958

2021 BASE YEAR BUILDING VALUATION	
Market Cost New:	\$ 248,098
Year Built:	1980
Condition For Age:	AVERAGE 20 %
Physical:	
Functional:	
Economic:	
Temporary:	
Total Depreciation:	20 %
Building Value:	\$ 198,500



549 Barnard Hill Road, Weare, NH

Map/Lot: 000409000053000000



1 inch = 75 Feet

www.cai-tech.com

May 27, 2026



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