



**MLS # 73328778 - New
Single Family - Detached**

**37 Hobson Street
Methuen, MA 01844
Essex County**

List Price: **\$449,000**

Style: **Colonial, Garrison**
Color: **Dark Gray**
Grade School: **TGS**
Middle School: **TGS**
High School: **MHS**
Approx. Acres: **0.11 (5,009 SqFt)**
Handicap Access/Features:
Directions: **Haverhill or Lowell Street to Hobson**

Total Rooms: **6**
Bedrooms: **3**
Bathrooms: **2f 0h**
Main Bath:
Fireplaces: **0**
Approx. Street Frontage:

Welcome to 37 Hobson Street! This home is available for the first time in over 77 years! This 3 bedroom, 2 bath home is the perfect opportunity to stop renting and own your own home. On the first floor you'll find an eat-in kitchen, a large living room and family room that can easily be used as a first floor primary bedroom/4th bedroom. On the second floor you'll find three large bedrooms, one with a double closet. The full basement offers plenty of storage. Updates are needed but it's well worth the effort. Outside you will find 2 driveways providing plenty of off street parking, a nice storage shed and a fenced in yard. Centrally located to Route 93, area schools, Riverside Park and just steps to shopping, transportation and so much more.

Property Information

Approx. Living Area Total: **1,470 SqFt**

Living Area Includes Below-Grade SqFt: **No**

Living Area Source: **Public Record**

Approx. Above Grade: **1,470 SqFt**

Approx. Below Grade:

Living Area Disclosures:

Heat Zones: **Electric Baseboard**

Cool Zones: **0 None**

Parking Spaces: **2 Off-Street**

Garage Spaces: **0**

Disclosures: **Seller states there are hot air vents in the walls. Property sold as-is. Property was build in approximately 1947 but a second floor was added in 1964 as per assessors card.**

Room Levels, Dimensions and Features

Room	Level	Size	Features
Living Room:	1	23X14	Flooring - Wall to Wall Carpet
Dining Room:	1	14X10	Flooring - Wall to Wall Carpet
Kitchen:	1	14X12	Flooring - Vinyl, Dining Area
Main Bedroom:	2	14X11	Flooring - Wall to Wall Carpet
Bedroom 2:	2	14X12	Flooring - Wall to Wall Carpet
Bedroom 3:	2	15X9	Flooring - Wall to Wall Carpet
Bath 1:	1	9X5	Bathroom - Full, Flooring - Vinyl
Bath 2:	2	9X5	Bathroom - Full, Flooring - Vinyl
Laundry:	1	-	-
Mud Room:	1	8X4	-

Features

Appliances: **Range, Refrigerator, Washer, Dryer**

Area Amenities: **Public Transportation, Shopping, Park, Walk/Jog Trails, Medical Facility, Laundromat, Bike Path, Highway Access, House of Worship, Public School**

Basement: **Yes**

Beach: **No**

Construction: **Frame**

Electric: **Circuit Breakers**

Exterior: **Wood**

Exterior Features: **Porch - Enclosed, Storage Shed, Fenced Yard**

Flooring: **Vinyl, Wall to Wall Carpet**

Foundation Size:

Foundation Description: **Fieldstone**

Hot Water: **Electric**

Other Property Info

Disclosure Declaration: **Yes**

Exclusions:

Home Own Assn:

Lead Paint: **Unknown**

UFFI: **Unknown** Warranty Features:

Year Built: **1947** Source: **Owner**

Year Built Description: **Renovated Since**

Year Round:

Short Sale w/Lndr. App. Req: **No**

Lender Owned: **No**

Tax Information

Insulation: **Unknown**
Lot Description: **Wooded, Paved Drive, Fenced/Enclosed**
Road Type: **Public**
Roof Material: **Asphalt/Fiberglass Shingles**
Sewer Utilities: **City/Town Sewer**
Utility Connections: **for Electric Oven, for Electric Dryer**
Water Utilities: **City/Town Water**
Waterfront: **No**
Water View: **No**

Pin #:
Assessed: **\$394,100**
Tax: **\$4,280** Tax Year: **2024**
Book: **5509** Page: **40**
Cert:
Zoning Code: **RD**
Map: Block: Lot:

Office/Agent Information

Listing Office: **Foundation Brokerage Group**  (800) 983-1945
Listing Agent: **The Nancy Dowling Team (978) 314-4003**
Team Member(s): **Nancy A. Dowling**  (978) 314-4003
Sale Office:
Sale Agent:
Listing Agreement Type: **Exclusive Right to Sell**
Entry Only: **No**
Showing: Sub-Agency:
Showing: Buyer's Broker: **Lock Box, Sign,**  **Schedule with ShowingTime or Call 888-627-2775**
Showing: Facilitator: **Lock Box, Sign,**  **Schedule with ShowingTime or Call 888-627-2775**
Special Showing Instructions:

Firm Remarks

Please submit offers in one PDF not Dotloop to nancydowlingre@gmail.com. Offer deadline Monday 1/27 at 4 pm, please allow 24 hours for a response. Sold as-is.

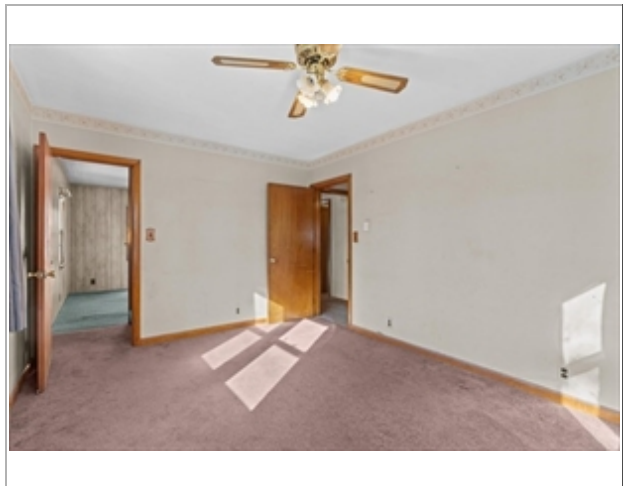
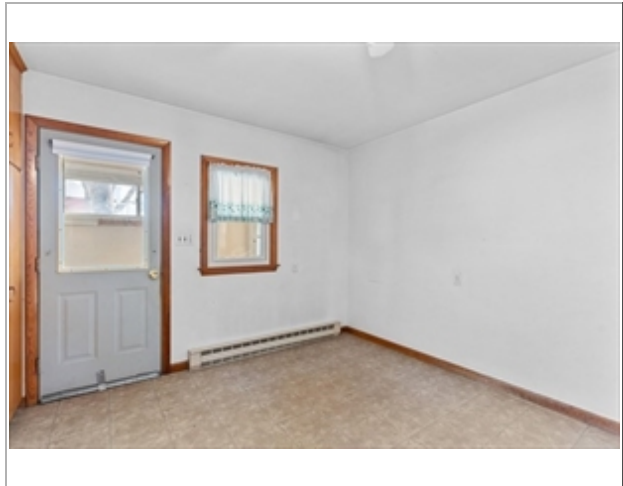
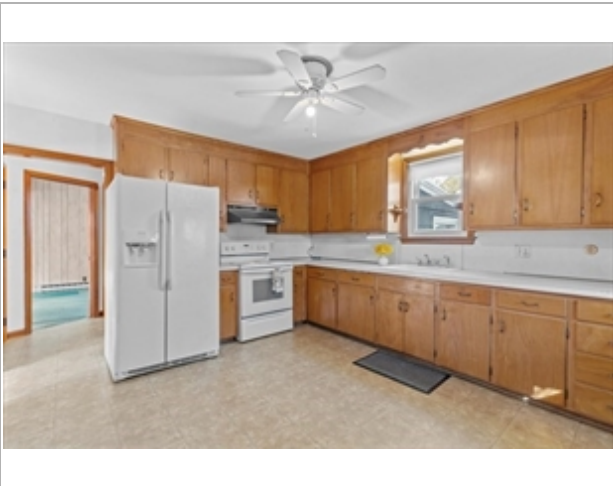
Market Information

Listing Date: **1/23/2025**
Days on Market: Property has been on the market for a total of **0** day(s)
Expiration Date: **7/29/2025**
Original Price: **\$449,000**
Off Market Date:
Sale Date:
Listing Market Time: MLS# has been on for **0** day(s)
Office Market Time: Office has listed this property for **0** day(s)
Cash Paid for Upgrades:
Seller Concessions at Closing:

The information in this listing was gathered from third-party sources including the seller and public records. MLS Property Information Network, Inc., and its subscribers disclaim any and all representations or warranties as to the accuracy of this information. Content ©2025 MLS Property Information Network, Inc.

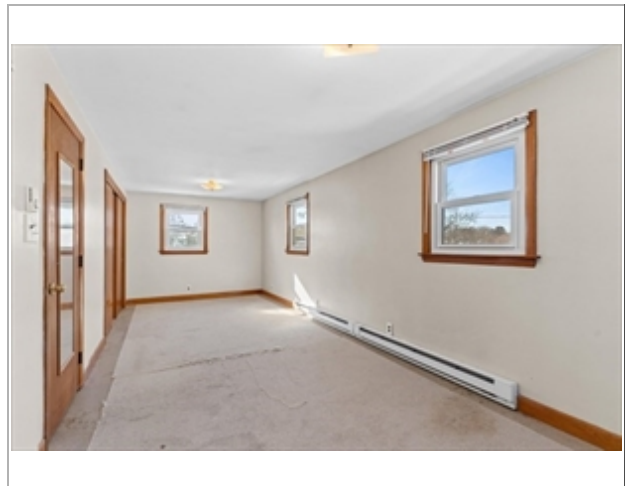
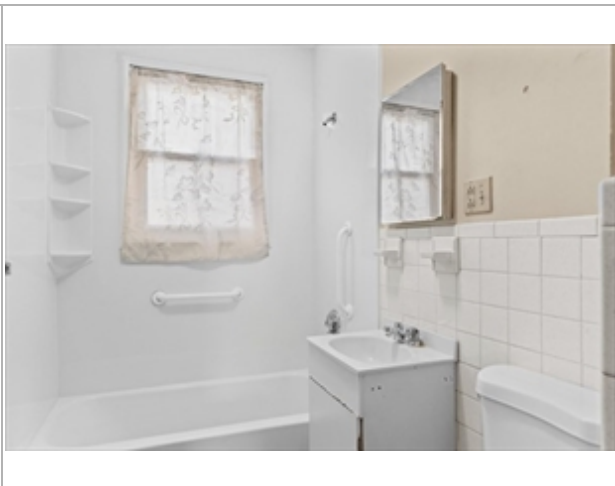
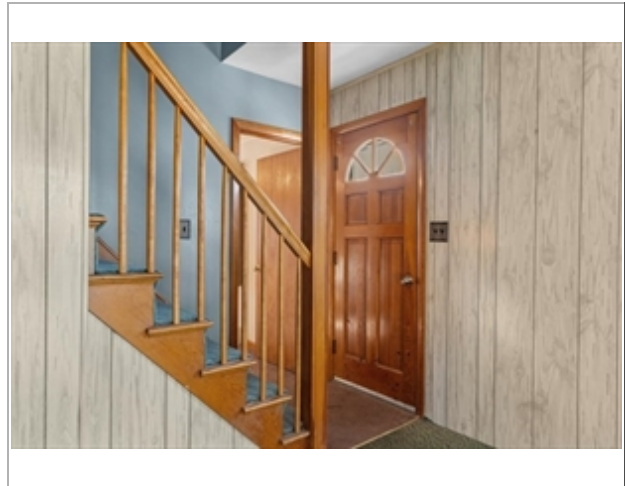
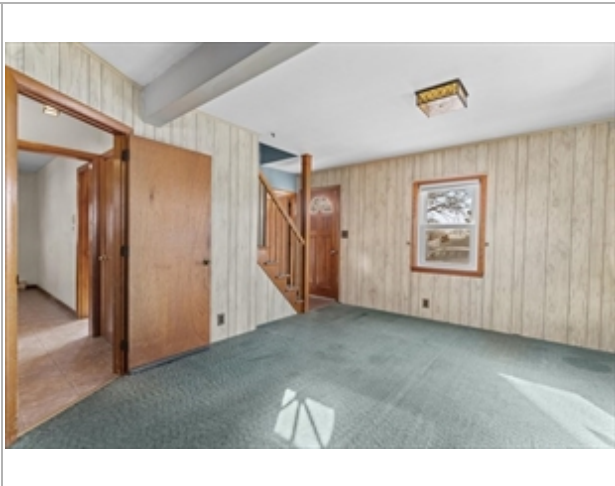
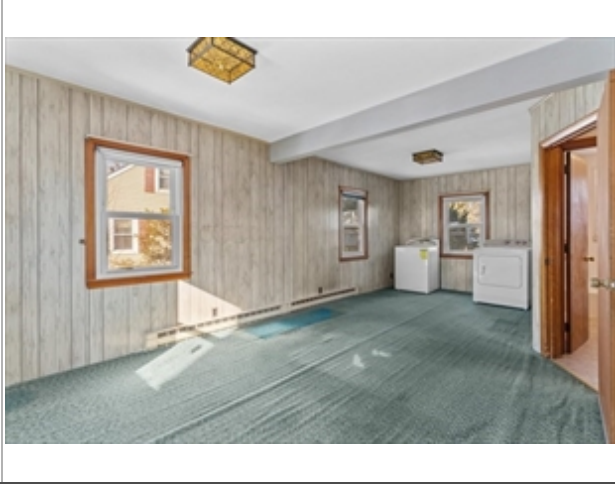
MLS # 73328778 - New
37 Hobson Street, Methuen, MA 01844

Single Family - Detached
List Price: \$449,000



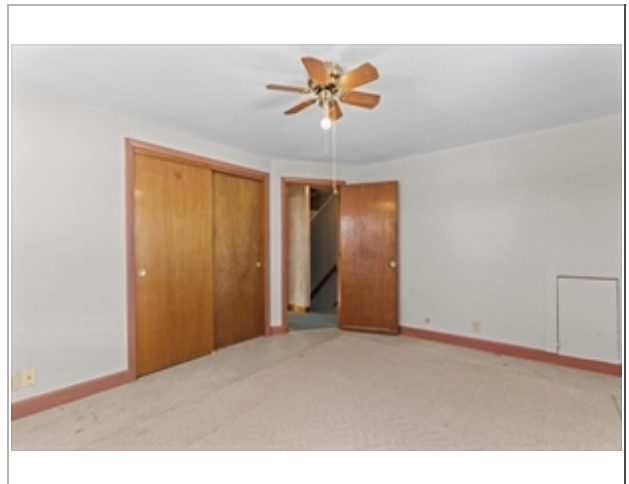
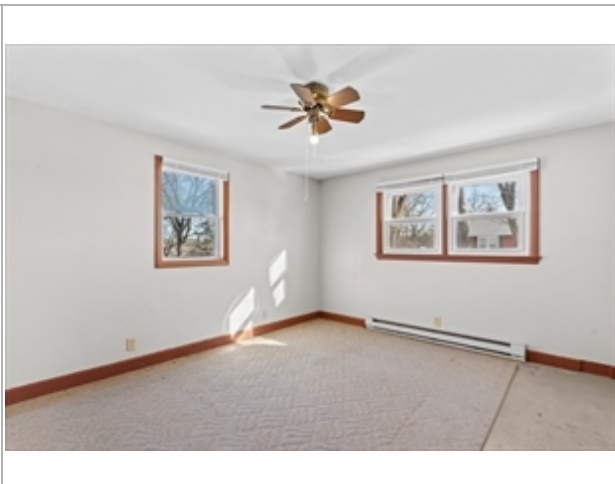
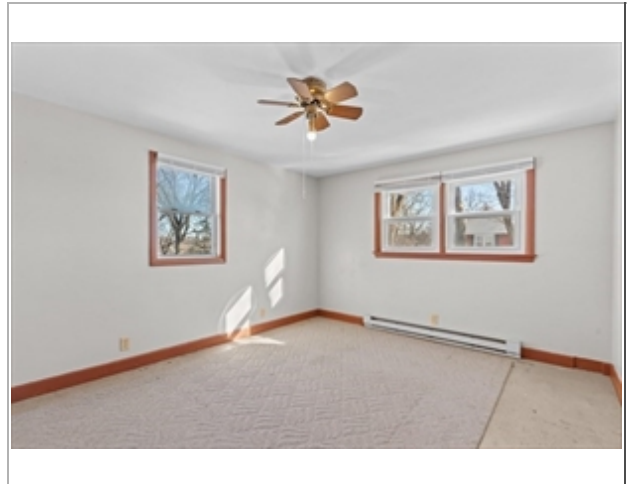
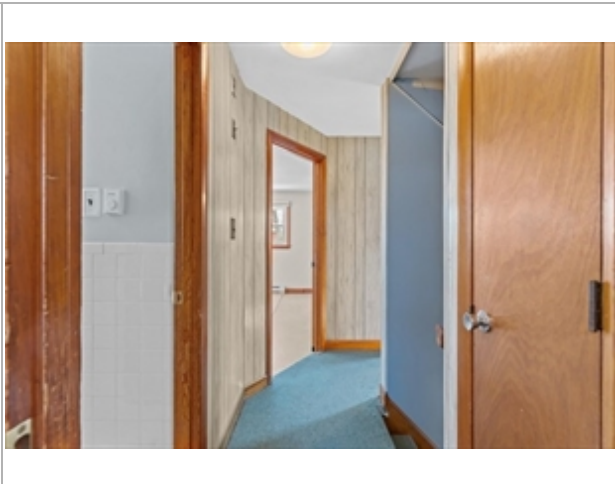
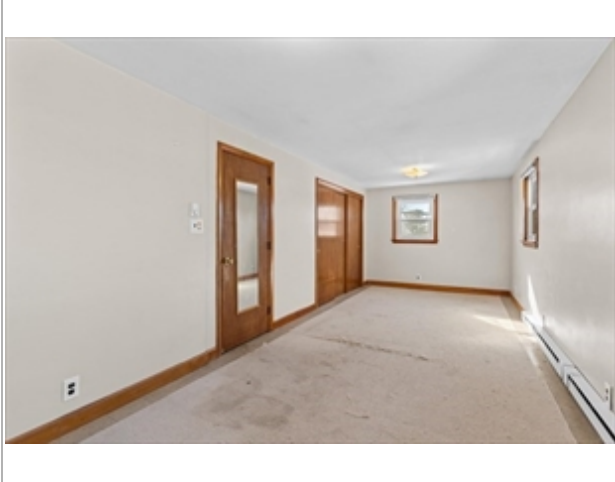
MLS # 73328778 - New
37 Hobson Street, Methuen, MA 01844

Single Family - Detached
List Price: \$449,000



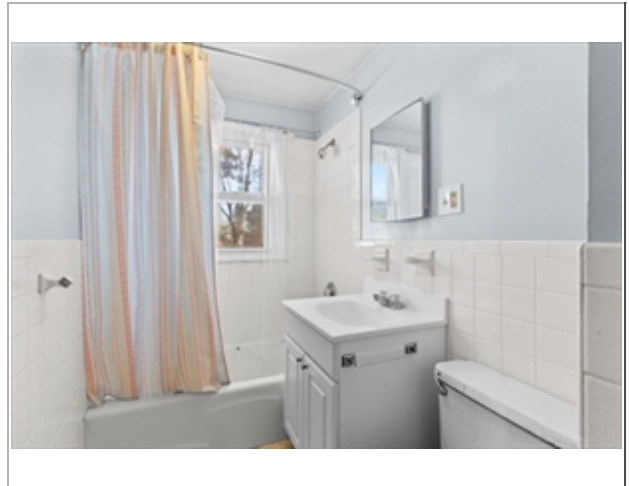
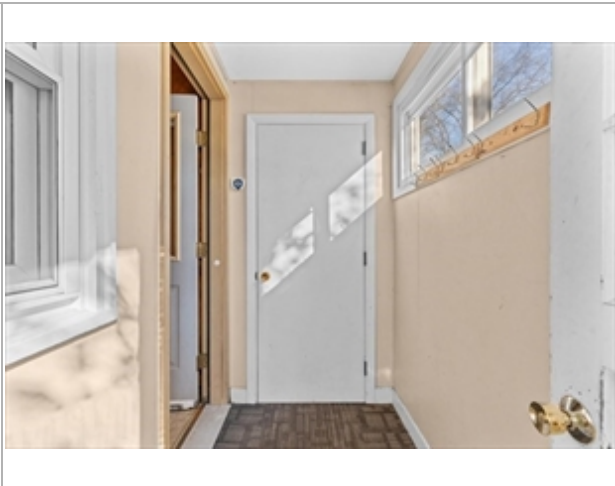
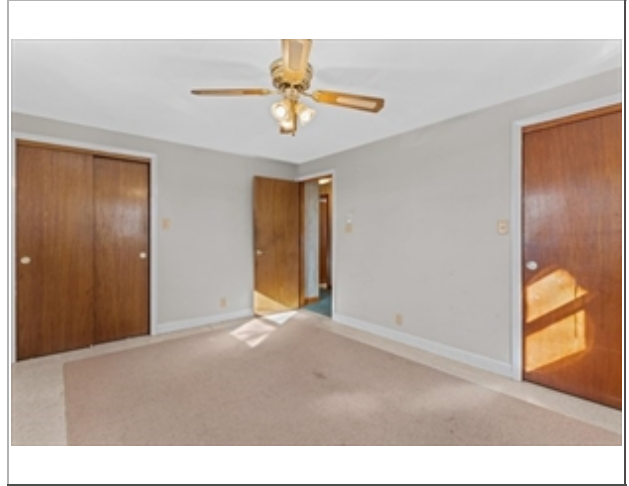
MLS # 73328778 - New
37 Hobson Street, Methuen, MA 01844

Single Family - Detached
List Price: \$449,000



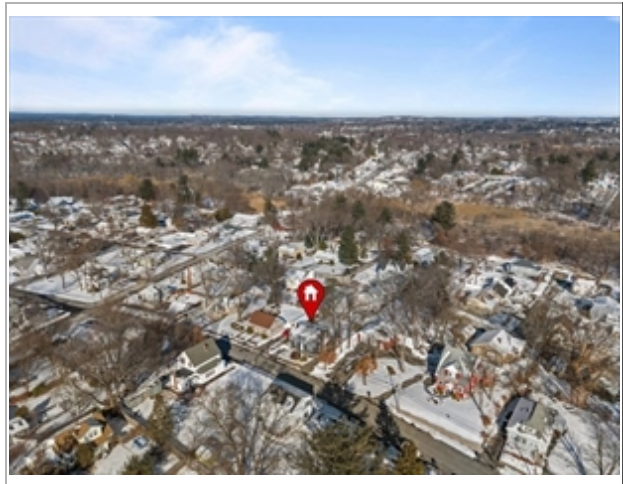
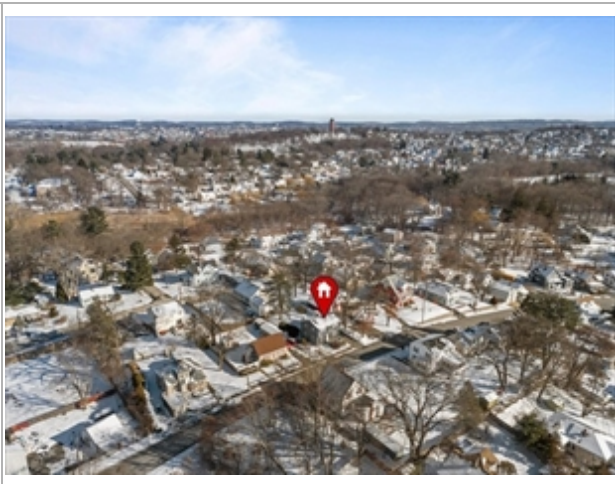
MLS # 73328778 - New
37 Hobson Street, Methuen, MA 01844

Single Family - Detached
List Price: \$449,000



MLS # 73328778 - New
37 Hobson Street, Methuen, MA 01844

Single Family - Detached
List Price: \$449,000

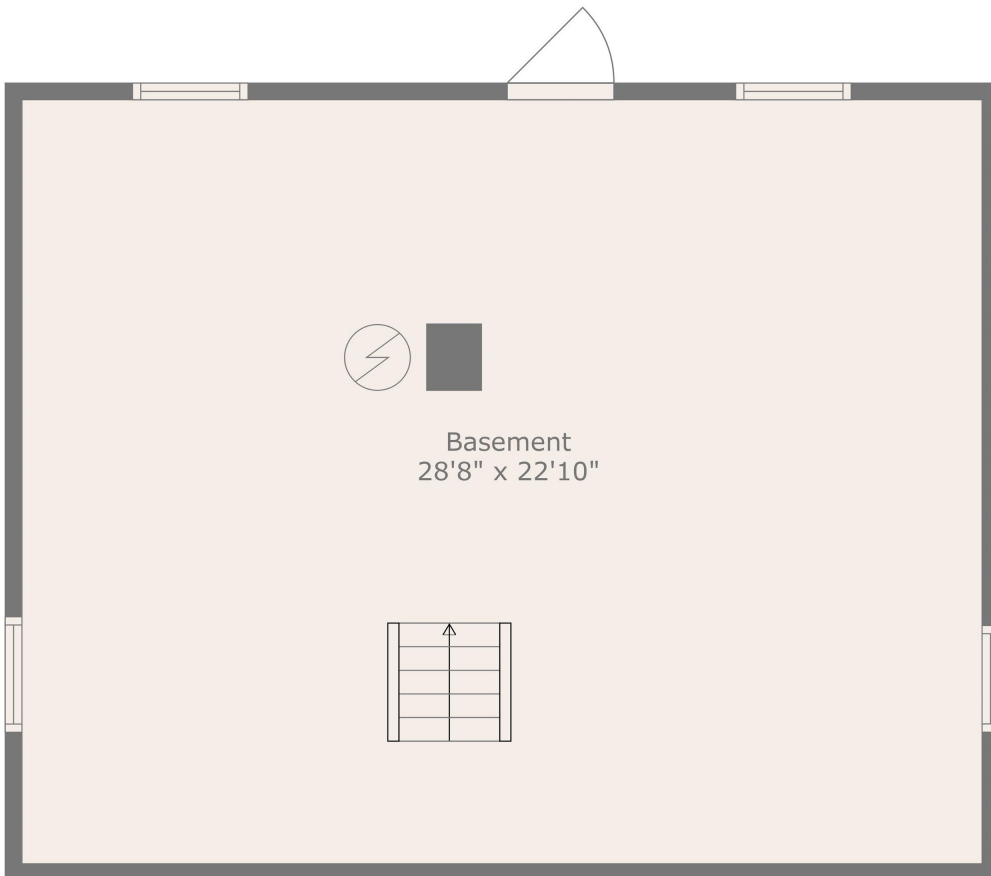


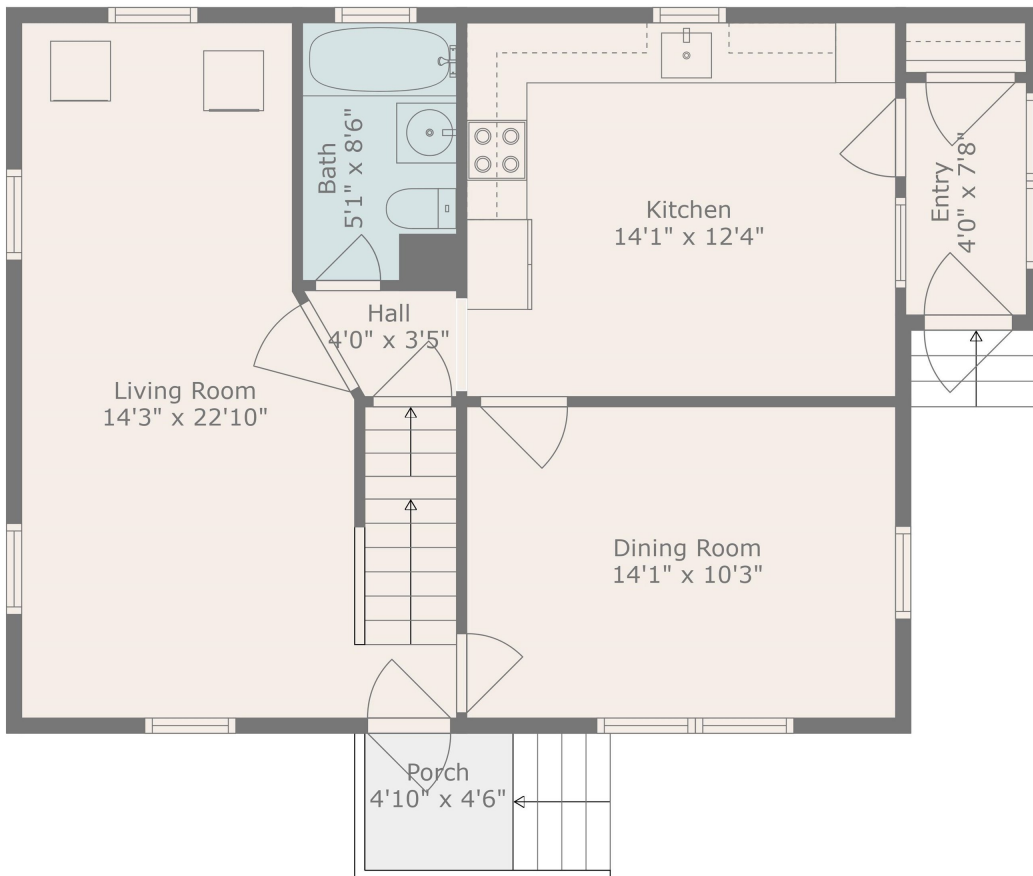
MLS # 73328778 - New
37 Hobson Street, Methuen, MA 01844

Single Family - Detached
List Price: \$449,000



The information in this listing was gathered from third-party sources including the seller and public records. MLS Property Information Network, Inc., and its subscribers disclaim any and all representations or warranties as to the accuracy of this information. Content ©2025 MLS Property Information Network, Inc.

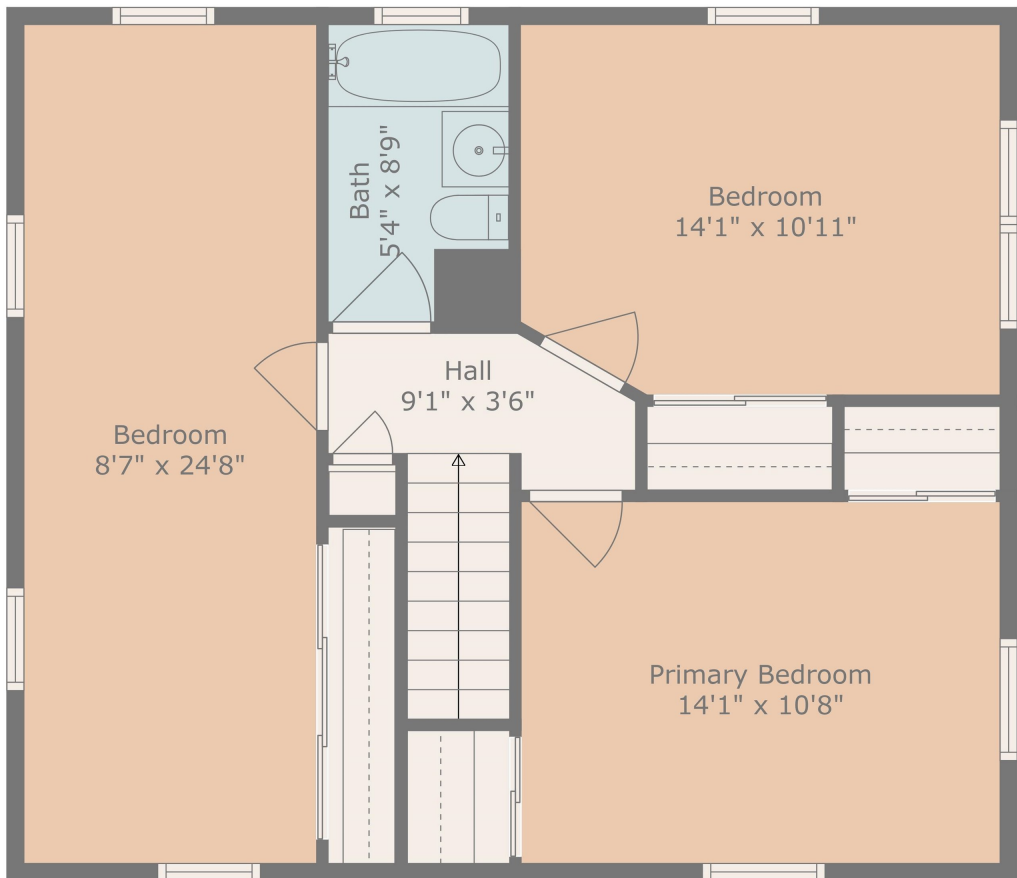




TOTAL: 1410 sq. ft
 BELOW GROUND: 0 sq. ft, FLOOR 2: 699 sq. ft, FLOOR 3: 711 sq. ft
 EXCLUDED AREAS: BASEMENT: 657 sq. ft, PORCH: 22 sq. ft

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

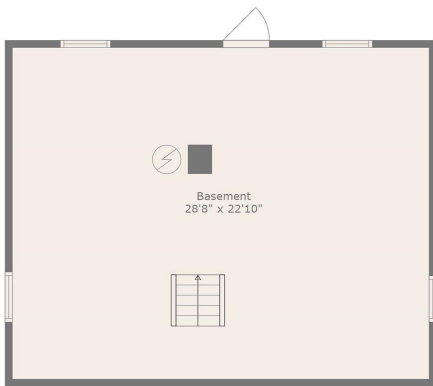
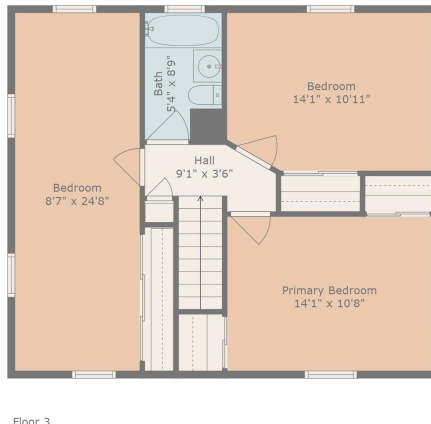
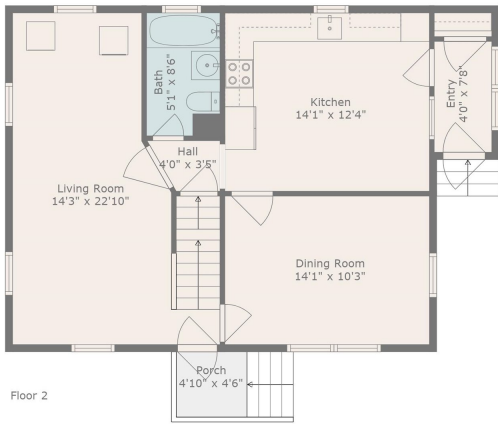




TOTAL: 1410 sq. ft
 BELOW GROUND: 0 sq. ft, FLOOR 2: 699 sq. ft, FLOOR 3: 711 sq. ft
 EXCLUDED AREAS: BASEMENT: 657 sq. ft, PORCH: 22 sq. ft

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





Floor 1

TOTAL: 1410 sq. ft
 BELOW GROUND: 0 sq. ft, FLOOR 2: 699 sq. ft, FLOOR 3: 711 sq. ft
 EXCLUDED AREAS: BASEMENT: 657 sq. ft, PORCH: 22 sq. ft

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





THIS FORM IS TO BE COMPLETED BY THE SELLER. THE SELLER(S) AUTHORIZES THE BROKER OR SALESPERSON(S) TO PROVIDE THE FOLLOWING INFORMATION TO PROSPECTIVE BUYER(S). THIS INFORMATION IS BASED UPON THE SELLER'S KNOWLEDGE, BUT IS NOT INTENDED AS A GUARANTEE OF THE CONDITION OF THE PROPERTY OR THE CONTINUED SATISFACTORY OPERATION OF ANY SYSTEM. THE BUYER(S) SHOULD INDEPENDENTLY VERIFY ALL INFORMATION BEFORE PURCHASE.

Property Address 37 Hobson St Methuen MA 01844
 Seller(s)/Owner(s) M.B. Lambert, Hobson St. Trust.
 How long owned 77 How long occupied 77 Approximate Year Built 1964 - rebuilt 1947 - built

I. TITLE/ZONING/BUILDING INFORMATION						
		Yes	No	Unknown	N/A	Description/Explanation
1.	Title Problems or Limitations (for example, deed restriction, lot line dispute, order of conditions):	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Easement, Common Driveway, or Right of Way	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Zoning Classification(s) of property:			<input type="checkbox"/>	<input type="checkbox"/>	res
4.	Has the City/Town issued notice of outstanding violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Have you been advised that current use is nonconforming in any way?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Do you know of any variances or special permits?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	During Seller's ownership, has work been done for which a permit was required? If yes, explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7a.	Were permits obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7b.	Was the work approved by an inspector?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7c.	Was a licensed contractor hired? (If yes, provide name of contractor)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7d.	Is there an outstanding notice of any building code violation?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8.	Have you been informed that any part of the property is in a designated flood zone or wetland?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9.	Are there any known water drainage problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	added skirt on E side for drainage.

II. SYSTEM AND UTILITIES INFORMATION						
		Yes	No	Unknown	N/A	Description/Explanation
10.	STORAGE TANK					
10a.	Is or Has there ever been an underground storage tank?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10b.	If yes, type of tank			<input type="checkbox"/>	<input type="checkbox"/>	
10c.	If yes, is it still in use?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10d.	If not still in use, was it removed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10e.	Storage Tank: <input type="checkbox"/> Leased <input type="checkbox"/> Owned (See Hazardous Materials Disclosure Page 8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SELLER'S INITIALS MB ET BUYER'S INITIALS





II. SYSTEM AND UTILITIES INFORMATION (Continued)						
		Yes	No	Unknown	N/A	Description/Explanation
11.	HEATING SYSTEM					
11a.	Type: <u>electric</u>					
11b.	Age: _____					
11c.	Are there any known problems with the heating system? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11d.	Identify any unheated room or area:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11e.	Provide approximate date of last service:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11f.	Provide reason for service:			<input type="checkbox"/>	<input type="checkbox"/>	

III. WATER, SEWER & OTHER UTILITIES						
		Yes	No	Unknown	N/A	Description/Explanation
12.	DOMESTIC HOT WATER					
12a.	Type: <u>Rheem electric</u>			<input type="checkbox"/>	<input type="checkbox"/>	
12b.	Age: <u>15 yrs approx.</u>			<input type="checkbox"/>	<input type="checkbox"/>	
12c.	Are there any known problems with the hot water? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13.	SEWAGE SYSTEM					
13a.	<input checked="" type="checkbox"/> Municipal <input type="checkbox"/> Private Sewer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13b.	If Private Sewer, describe type of system:			<input type="checkbox"/>	<input type="checkbox"/>	
13c.	Provide Name of Service Company			<input type="checkbox"/>	<input type="checkbox"/>	
13d.	Date it was last pumped:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Month Day Year
13e.	Frequency of Pumps:			<input type="checkbox"/>	<input type="checkbox"/>	
13f.	During your ownership has sewage backed up into house or onto yard? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13g.	Is system shared with other homes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13h.	Was a Title 5 Inspection performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13i.	Date of Inspection:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Month Day Year
13j.	Is a copy of Inspection attached?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14.	PLUMBING SYSTEM					
14a.	Type: <u>unknown</u>			<input type="checkbox"/>	<input type="checkbox"/>	
14b.	Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14c.	Bathroom ventilation problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SELLER'S INITIALS ET BUYER'S INITIALS _____





III. WATER, SEWER & OTHER UTILITIES (Continued)						
		Yes	No	Unknown	N/A	Description/Explanation
15.	WATER SOURCE					
15a.	<input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15b.	Location _____			<input type="checkbox"/>	<input type="checkbox"/>	
15c.	Date Last tested:			<input type="checkbox"/>	<input type="checkbox"/>	Month _____ Day _____ Year _____
15d.	Report Attached?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15e.	Water Quality problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15f.	Flow rate: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(gal. /min.)
15g.	Age of Pump:			<input type="checkbox"/>	<input type="checkbox"/>	
15h.	Is there a filtration system? If yes, indicate age and type of filtration system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Age: _____ Type: _____

IV. ELECTRICAL SYSTEMS & UTILITIES						
		Yes	No	Unknown	N/A	Description/Explanation
16.	ELECTRICAL SYSTEM					
16a.	Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17.	APPLIANCES					
17a.	List appliances that are included: <i>fridge w/d stove</i>			<input type="checkbox"/>	<input type="checkbox"/>	
17b.	Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
18.	SECURITY SYSTEM					
18a.	Type: _____			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
18b.	Age: _____			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
18c.	Provide Name of Service Company			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
18d.	Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
19.	AIR CONDITIONING					
19a.	<input type="checkbox"/> Central <input type="checkbox"/> Window <input type="checkbox"/> Other. Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
19b.	Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
20.	SOLAR PANELS					
20a.	<input type="checkbox"/> Leased <input type="checkbox"/> Owned	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
20b.	If leased, explain terms of agreement.			<input checked="" type="checkbox"/>	<input type="checkbox"/>	

V. BUILDING/STRUCTURAL INFORMATION						
		Yes	No	Unknown	N/A	Description/Explanation
21.	FOUNDATION/SLAB					
21a.	Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SELLER'S INITIALS PH ET BUYER'S INITIALS _____





V. BUILDING/STRUCTURAL INFORMATION (Continued)						
		Yes	No	Unknown	N/A	Description/Explanation
22.	BASEMENT					
22a.	Problems (select any that apply): <input type="checkbox"/> Water <input type="checkbox"/> Seepage <input checked="" type="checkbox"/> Dampness <input type="checkbox"/> Other. Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	need to add root killer once a year for drain pipes.
22b.	Explain amount, frequency, and location of the problems selected in 22a.			<input type="checkbox"/>	<input type="checkbox"/>	
23.	SUMP PUMP					
23a.	If yes to 23, provide age and location.			<input type="checkbox"/>	<input type="checkbox"/>	
23b.	Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24.	ROOF					
24a.	Age: approx 15 yrs.			<input type="checkbox"/>	<input type="checkbox"/>	
24b.	Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24c.	Location of leaks/repairs:			<input type="checkbox"/>	<input type="checkbox"/>	
25.	CHIMNEY/FIREPLACE					
25a.	Date last cleaned:			<input type="checkbox"/>	<input type="checkbox"/>	Month Day Year
25b.	Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25c.	Presence of: <input type="checkbox"/> Wood Stove <input type="checkbox"/> Coal Stove <input type="checkbox"/> Pellet Stove <input type="checkbox"/> Gas Stove	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25d.	If yes to 25c, in compliance with installation regulations/code/bylaws?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25e.	If no to 25d, Explain.			<input type="checkbox"/>	<input type="checkbox"/>	
25f.	Is there any history of smoke/fire damage to structure? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
26.	FLOORS					
26a.	Type of floors under carpet/linoleum:			<input type="checkbox"/>	<input type="checkbox"/>	
26b.	Are there any known problems with floors (buckling, sagging, etc.)? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27.	WALLS					
27a.	Interior Walls: Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27b.	Exterior Walls: Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28.	WINDOW/SLIDING DOORS/DOORS					
28a.	Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	one seal is popped
29.	INSULATION					
29a.	Does house have insulation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	MASS SAVE 10 years ago

SELLER'S INITIALS OM ET BUYER'S INITIALS _____





V. BUILDING/STRUCTURAL INFORMATION (Continued)						
		Yes	No	Unknown	N/A	Description/Explanation
29b.	If yes, type:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29c.	Date Installed:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Month Day Year
29d.	Location:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VI. ENVIRONMENTAL ISSUES						
		Yes	No	Unknown	N/A	Description/Explanation
30.	ASBESTOS					
30a.	Is asbestos present in exterior shingles, pipe covering or boiler insulation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30b.	Has a fiber count been performed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30c.	If yes to 30b., is copy attached? (See Asbestos Disclosure Page 8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31.	LEAD PAINT					
31a.	Is lead paint present?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
31b.	If yes to 31a., locations present: (Attach copy of Inspection Reports)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
31c.	If yes to 31a., describe abatement plan/ interim controls, if any:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
31d.	Has paint been encapsulated?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
31e.	If yes to 31d. provide date of encapsulation and by whom.			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Month Day Year
31f.	Is Lead Paint Disclosure Form available? If yes attach copy. If no, Explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32.	RADON					
32a.	Has test for Radon been performed? If yes, attach copy. (See Radon Disclosure Page 7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33.	MOLD					
33a.	Have you been advised of elevated levels of mold at the Property? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34.	INSECTS					
34a.	History of Termites/Wood Destroying Insect or Rodent Problems?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	mice in the past
34b.	If yes to 34a., explain treatment and dates: (See Chlordane Disclosure Page 8)			<input type="checkbox"/>	<input type="checkbox"/>	Month Day Year
35.	ENERGY AUDIT					
35a.	Has an Energy Audit been performed? If yes, attach a copy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	about 10 years, no report

VII. OUTDOOR AMENITIES & STRUCTURES						
		Yes	No	Unknown	N/A	Description/Explanation
36.	SWIMMING POOL/JACUZZI					
36a.	Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36b.	Name of Service Company:			<input type="checkbox"/>	<input type="checkbox"/>	

SELLER'S INITIALS SM ET BUYER'S INITIALS _____



VII. OUTDOOR AMENITIES & STRUCTURES (Continued)						
		Yes	No	Unknown	N/A	Description/Explanation
37.	GARAGE/SHED/OR OTHER STRUCTURE					
37a.	Problems? Explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

VIII. CONDOMINIUM INFORMATION						
		Yes	No	Unknown	N/A	Description/Explanation
38.	PARKING					
38a.	Number of Spaces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>2</u> Spaces
38b.	Of those spaces, identify the number that are: <input type="checkbox"/> Deeded <input type="checkbox"/> Exclusive Easements <input type="checkbox"/> Assigned <input type="checkbox"/> Unassigned or <input type="checkbox"/> In Common area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Number of Spaces: Deeded _____ Exclusive Easements _____ Assigned _____ Unassigned _____ In Common area _____
39.	CONDO FEES					
39a.	Current monthly fees for Unit are: Are any of the following (39b.-39g.) included in the monthly fees:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39b.	Heat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39c.	Electricity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39d.	Hot Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39e.	Trash Removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39f.	Landscaping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39g.	Snow Removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40.	RESERVE FUND					
40a.	Has advance payment been made to a condo reserve fund?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40b.	If yes to 40a, how much?			<input type="checkbox"/>	<input type="checkbox"/>	
41.	CONDO ASSOCIATION FUND					
41a.	Is owners' association currently involved in any litigation? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41b.	Have you been advised of any matter which is likely to result in a special assessment or substantially increase condominium fees? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IX. RENTAL PROPERTY INFORMATION						
		Yes	No	Unknown	N/A	Description/Explanation
42.	UNITS					
42a.	Number of Units:			<input type="checkbox"/>	<input type="checkbox"/>	_____ Units
42b.	Has a unit been added/subdivided since original construction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42c.	If yes to 42b., was a permit for new/added unit obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SELLER'S INITIALS MP BUYER'S INITIALS ET





IX. RENTAL PROPERTY INFORMATION						
		Yes	No	Unknown	N/A	Description/Explanation
43.	RENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rent \$ _____ /month _____
43a.	Expiration date of each lease:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Month Day Year
43b.	Any tenants without leases?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43c.	Is owner holding last month's rent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43d.	Is owner holding security deposit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43e.	If yes to 43c. and/or 43de., has interest been paid?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43f.	If security deposit held, attach a copy of Statement(s) of Conditions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43g.	Is there any outstanding notice of sanitary code violation? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

X. MISCELLANEOUS INFORMATION						
		Yes	No	Unknown	N/A	Description/Explanation
44.	Do you know of any other problem which may affect the value or use of the property which may not be obvious to a prospective buyer? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

XI. DESCRIPTION/EXPLANATION					

XII. EXPLANATORY MATERIAL

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

A. Flood Hazard Insurance Disclosure Clause (Question #8)
 The lender may require Flood Hazard Insurance as a condition of the mortgage loan if the lender determines that the property is in a flood hazard zone.

E. Radon Disclosure Clause (Question #32)
 Radon is an odorless, colorless, tasteless gas produced naturally in the ground by the normal decay of uranium and radium. Radon can lead to the development of radioactive particles which can be inhaled. Studies indicate the result of extended exposure to high levels of radon may increase the risk of developing lung cancer.

SELLER'S INITIALS *ET* *ET* BUYER'S INITIALS



B. Hazardous Materials Disclosure Clause (Question #10)

In certain circumstances Massachusetts law can hold an owner of real estate liable to pay for the cost of removing hazardous or toxic materials from real estate and for damages resulting from the release of such materials, according to the Massachusetts Oil and Hazardous Material Release and Response Act, General Laws, Chapter 21E. The buyer acknowledges that he may have the property professionally inspected for the presence of, or the substantial likelihood of release of oil or hazardous material and such proof of inspection may be required as a prerequisite for financing the property.

C. Asbestos Disclosure Clause (Question #30)

The United States Consumer Produce Safety Commission has maintained that asbestos materials are hazardous if they release separate fibers which can be inhaled. Asbestos is a common insulation material on heating pipes, boilers, and furnaces. It may also be present in certain types of floor and ceiling materials, shingles, plaster products, cements and other building materials. The buyer may have the property professionally inspected for the presence of asbestos and if repair or removal of asbestos is desired, proper safety guidelines must be observed.

D. Lead Paint Disclosure (Question #31)

Whenever a child under six years of age resides in any residential premises in which any paint, plaster or other accessible material contains dangerous levels of lead, the owner is required by law to remove all said paint, plaster or cover with appropriate materials so as to make it inaccessible to a child under six years of age. Consumption of lead is poisonous and may cause serious personal injury. Whenever such residential premises containing dangerous levels of lead undergoes a change of ownership, and as a result a child under six years of age will become a resident, the new owner is required by law to remove said paint, plaster cover or encapsulate it with appropriate materials so as to make it inaccessible to such child. Buyer should receive information pamphlet from Department of Public Health.

F. Chlordane Disclosure Clause (Question #34b.)

Pesticide products containing chlordane were banned in Massachusetts on June 11, 1985, following a determination by the Department of Food and Agriculture that the use of chlordane may cause unreasonable adverse effects on the environment including risk of cancer. Although existing data do not conclusively prove that significant health effects have occurred as a direct result of chlordane use, the long-term potential health risks are such that it is prudent public health policy, according to the Department, to eliminate the further introduction of chlordane into the environment.

G. Mold Information (Question #33)

Molds are naturally occurring organisms that exist both indoors and outdoors. More than 1000 different kinds of mold have been found in homes in the United States. Molds are fungi that reproduce by making spores. Spores are small and lightweight and able to travel through the air. Molds need moisture and food to grow and their growth is stimulated by warm, damp and humid conditions. Molds can use materials such as wood, paper, drywall and carpet as food sources. Reducing dampness indoors is often key to reducing the growth of mold. Depending on the level of mold, allergies, respiratory problems and other health consequences can be triggered in sensitive individuals. However, exposure to mold does not always result in health problems. As of July 2002, U.S. governmental agencies reported that a determination had not been made what quantity of mold was acceptable in an indoor environment. For more information on mold, contact an engineer or other qualified mold inspector. Information may also be found at the web site for the U.S. Environmental Protection Agency, www.epa.gov.

H. Fair Housing Notice

It is unlawful to discriminate on the basis of race, color, religious creed, national origin, age, gender, sex, ancestry, marital status, veteran status, sexual orientation, disability, presence of a child, receipt of public assistance or other protected classification in the sale or rental of covered housing.

XIII. Acknowledgment

Seller(s) hereby acknowledges that the information set forth above is true and accurate to the best of his or her knowledge. Seller(s) agrees to defend and indemnify the broker(s) and any subagents for disclosure of any information contained herein. Seller(s) acknowledges receipt of a copy of the Seller's Statement of Property Condition.

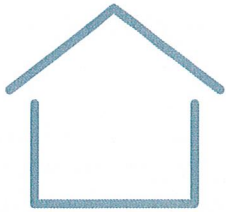
Date 11/18/05 Seller Patricia Warent Seller Elizabeth Jene

Buyer(s)/Prospective Buyer(s) acknowledges receipt of Seller's Statement of Property Condition prior to purchase. Buyer(s) acknowledges that Broker has not verified the information herein and Buyer(s) has been advised to verify information independently. Buyer(s) is not relying upon any representation, verbal or written, from any real estate broker or licensee concerning legal use. Any reference to the category (single family, multi-family, residential, commercial) or the use of this property in any advertisement or listing sheet, including the number of units, number of rooms or other classification is not a representation concerning legal use or compliance with zoning by-laws, building code, sanitary code or other public or private restrictions by the broker. The BUYER understands that if this information is important to BUYER, it is the duty of the BUYER to seek advice from an attorney or written confirmation from the municipality.

Date Buyer Buyer

SELLER'S INITIALS [PW] [ET] BUYER'S INITIALS [] []





Inclusion/Exclusion Information

Property Address: 37 Hobson St, Methuen MA

Item	Included	Excluded	N/A
Range	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Refrigerator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Washing Machine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drying Machine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trash Compactor	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Portable Air Conditioner Units	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Window Treatments	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Window Treatment Hardware	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Central Vacuum Attachments	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Pool Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Television Wall Brackets	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Video Door Bell	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Video Cameras	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Smart Thermostats	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Swingset	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Shed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surround Sound Speakers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Portable Generator	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Existing Paint Cans for current wall colors	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Left over flooring for current floor coverings	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Elyabeth Jane 11/18/25
Seller Date

Patricia Parent 11/18/25
Seller Date

Buyer Date

Buyer Date

Utility Information

Property Address: 37 Hobson St, Metairie

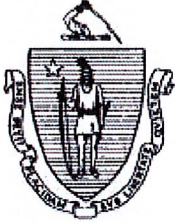
Utility	Supplier	Avg. Monthly Cost
Electricity	<u>Nat-Grid.</u>	<u>avg \$150/month - 1 person just 1st floor</u>
Water/Sewer	<u>\$15 quarter (1 person)</u>	
Heating Oil: <input type="checkbox"/> Gas: <input type="checkbox"/> Propane: <input type="checkbox"/>	<u>electric</u>	
Cable/Internet	<u>-</u>	
Security System	<u>-</u>	
Other	<u>-</u>	

Seller _____ Date 11/18/25

Seller _____ Date 11/18/25

Buyer _____ Date _____

Buyer _____ Date _____



ET
GAB

The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

Bureau of Environmental Health

250 Washington Street, 7th Floor

Boston, MA 02108

(800) 532-9571 / (617) 624-5757

CHILDHOOD LEAD POISONING PREVENTION PROGRAM (CLPPP) PROPERTY TRANSFER LEAD PAINT NOTIFICATION

Under Massachusetts and federal law, this notification package must be given to prospective purchasers of homes built before 1978. This package must be given in full to meet state and federal requirements. It may be copied, as long as the type size is not made smaller. Every seller and any real estate agent involved in the sale must give this package before the signing of a purchase and sale agreement, a lease with an option to purchase, or, under state law, a memorandum of agreement used in foreclosure sales. Sellers and agents must also tell the prospective purchaser any information they know about lead in the home. They must also give a copy of any lead inspection report, risk assessment report, Letter of Compliance or Letter of Interim Control. **This package is for compliance with both state and federal lead notification requirements.**

Real estate agents must also tell prospective purchasers that under the state Lead Law, a new owner of a home built before 1978 in which a child under six will live or continue to live must have it either delead or brought under interim control within 90 days of taking title. This package includes a check list to certify that the prospective purchaser has been fully notified by the real estate agent. This certification should be filled out and signed by the prospective purchaser before the signing of a purchase and sale agreement, a lease with an option to purchase or a memorandum of agreement used in a foreclosure sale. It should be kept in the real estate agent's files. After getting notice, the prospective purchaser has at least 10 days, or longer if agreed to by the seller and buyer, to have a lead inspection or risk assessment if he or she chooses to have one, except in cases of foreclosure sales. There is no requirement for a lead inspection or risk assessment before a sale. A list of private lead inspectors and risk assessors licensed by the Department of Public Health is attached and can also be found on the Childhood Lead Poisoning Prevention Program's website at www.mass.gov/dph/clppp.

Sellers and real estate agents who do not meet these requirements can face a civil penalty of up to \$1,000 under state law; a civil penalty of up to \$10,000 and possible criminal sanctions under federal law, as well as liability for resulting damages. In addition, a real estate agent who fails to meet these requirements may be liable under the Massachusetts Consumer Protection Act.

The property transfer notification program began in 1988 and has been very successful. It provides information you need to protect your child, or your tenants' child, from lead poisoning. Massachusetts has a tax credit of up to \$1,500 for each unit delead. There are also a number of grants and no-interest or low-interest loans available for deleading. It's up to you to do your part toward ending lead poisoning.

PLEASE TAKE THE TIME TO READ THIS DOCUMENT. LEAD POISONING IS THE NATION'S LEADING ENVIRONMENTAL HAZARD AFFECTING CHILDREN. DON'T GAMBLE WITH YOUR CHILD'S FUTURE.

PROPERTY TRANSFER NOTIFICATION CERTIFICATION

This form is to be signed by the prospective purchaser before signing a purchase and sale agreement or a memorandum of agreement, or by the lessee-prospective purchaser before signing a lease with an option to purchase for residential property built before 1978, for compliance with federal and Massachusetts lead-based paint disclosure requirements.

Required Federal Lead Warning Statement:

Every purchaser of any interest in residential property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

Seller's Disclosure

- (a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):
 - (i) Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).
 - (ii) Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.
- (b) Records and reports available to the seller (check (i) or (ii) below):
 - (i) Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (check documents below).
 - Lead Inspection Report; Risk Assessment Report; Letter of Interim Control; Letter of Compliance
 - (ii) Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Purchaser's or Lessee Purchaser's Acknowledgment (initial)

- (c) Purchaser or lessee purchaser has received copies of all documents checked above.
- (d) Purchaser or lessee purchaser has received no documents.
- (e) Purchaser or lessee purchaser has received the Property Transfer Lead Paint Notification.
- (f) Purchaser or lessee purchaser has (check (i) or (ii) below):
 - (i) received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or
 - (ii) waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

Agent's Acknowledgment (initial)

- (g) Agent has informed the seller of the seller's obligations under federal and state law for lead-based paint disclosure and notification, and is aware of his/her responsibility to ensure compliance.
- (h) Agent has verbally informed purchaser or lessee-purchaser of the possible presence of dangerous levels of lead in paint, plaster, putty or other structural materials and his or her obligation to bring a property into compliance with the Massachusetts Lead Law -- either through full deleading or interim control -- if it was built before 1978 and a child under six years old resides or will reside in the property.

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

Beth Ann Grant 1-18-2025
Seller Date

Elizabeth Jue 1-18-2025
Seller Date

Purchaser Date

Purchaser Date

M. J. [Signature] 1/18/25
Agent Date

Agent Date

Address of Property 37 Hobson St. Methuen MA 01844

nice to meet you



Foundation Brokerage Group is an award-winning team of real estate professionals providing home sellers and buyers throughout Massachusetts, New Hampshire And Maine with extraordinary real estate experience for over 23 years.

With our in-depth market knowledge, time-saving technology, extensive marketing strategies, progressive & forward thinking you can count on Foundation Brokerage Group to guide you through one of life's most important decisions.

LET'S CONNECT

Nancy Dowling, REALTOR®



978.314.4003



NancyDowlingRE@gmail.com



www.TheNancyDowlingTeam.com



<https://www.facebook.com/TheNancyDowlingTeam>



<https://www.instagram.com/NancyDowlingRE>



<https://www.linkedin.com//in/nancy-dowling-6ba4a229/>