



24-28 Vermont Street Methuen, MA 01844

2 Bed
2.5 Bath

2,424
Sq. Ft.

2
Car Garage

\$6,251
Taxes

Exclusively Listed By:



Nancy Dowling
REALTOR®

📞 978.314.4003

✉️ NancyDowlingRE@gmail.com



**FOUNDATION
BROKERAGE GROUP**

📍 23 Stiles Rd Ste 108
Salem, NH 03079

📞 800.983.1945



Offered At: \$599,000

Welcome to Vermont Street!! This wonderful two unit is your chance to build some equity! On both floors you'll find two bedrooms, one bathroom, an eat in kitchen, dining room and living room. A bonus den completes the second floor. Both units offer sunny enclosed porches, great for extra storage space or a great spot to enjoy a cup of coffee. The first floor has an open covered porch and is a great spot to enjoy the outdoors. The walk up attic is perfect for extra storage or future expansion. The basement is super clean and even has a bathroom. Situated on a double lot, this home has an oversized two car garage, plenty of off-street parking and a large partially fenced in back yard. Close to shopping, public transportation, all the commuting routes and close to tax free NH shopping.

[Listing Package](#)



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**MLS # 73307602 - New
Multi Family - 2 Family**



**24-28 Vermont Street
Methuen, MA 01844-5323
Essex County**

List Price: **\$599,000**

Color: **Blue**

Total Floors: **2**

Total Units: **2**

Total Rent: **\$0**

Grade School: **Timony**

Middle School: **Timony**

High School: **MHS**

Approx. Acres: **0 (0.19 SqFt)**

Directions: **East Street to Vermont Street**

Total Rooms: **9**

Total Bedrooms: **4**

Total Bathrooms: **2f 1h**

Total Fireplaces: **0**

Approx. Street Frontage:

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Property Information

Approx. Living Area Total: **2,424 SqFt**

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

Living Area Source: **Public Record**

Approx. Above Grade: **2,424 SqFt**

Approx. Below Grade:

Living Area Disclosures:

Heat/Cool Units: **2 /0**

Heat/Cool Zones: **2**

Parking Spaces: **6 Off-Street, Paved Driveway**

Garage Spaces: **2**

Disclosures: **Fireplace, upstairs hutch and some cabinets to remain.**

Annual Expenses

Heating:

Repair & Maintenance:

Management:

Gross Income:

Gas:

Trash Removal:

Miscellaneous:

Gross Expenses:

Electricity:

Sewer:

Ann. Prop. Oper. Data: **No**

Net Income:

Water:

Insurance:

Annual Expense Source:

Unit Descriptions

Unit #1

Rooms: **5** Bedrooms: **2** Bathrooms: **1f 0h** Fireplaces: **0** Levels: **1** Floor: **1** Rent: **0** Lease: **No**

Rooms: **Living Room, Dining Room, Kitchen**

Interior Features: **Ceiling Fans, Cable TV Available, Pantry, Bathroom With Tub & Shower, Wall to Wall Carpet**

Heating: **Hot Water Radiators, Gas**

Unit #2

Rooms: **6** Bedrooms: **2** Bathrooms: **1f 0h** Fireplaces: **0** Levels: **1** Floor: **2** Rent: **0** Lease: **No**

Rooms: **Living Room, Dining Room, Kitchen, Office/Den**

Interior Features: **Walk-Up Attic, Cable TV Available, Pantry, Bathroom With Tub & Shower, Wall to Wall Carpet**

Heating: **Hot Water Radiators, Gas**

Features

Area Amenities: **Public Transportation, Shopping, Medical Facility, Highway Access**

Basement: **Yes Full, Unfinished Basement**

Beach: **No**

Construction: **Frame**

Electric: **Circuit Breakers**

Other Property Info

Disclosure Declaration: **Yes**

Exclusions:

Lead Paint: **Unknown**

UFFI: Warranty Features:

Year Built: **1920** Source: **Public Record**





Exterior: **Asbestos**
Exterior Features: **Porch, Porch - Enclosed**
Flooring: **Wood, Vinyl, Wall to Wall Carpet**
Foundation Size:
Foundation Description: **Fieldstone**
Hot Water: **Natural Gas**
Lot Description: **Paved Drive**
Road Type: **Public, Paved**
Roof Material: **Asphalt/Fiberglass Shingles**
Sewer Utilities: **City/Town Sewer**
Water Utilities: **City/Town Water**
Waterfront: **No**

Year Built Description: **Actual**
Year Round:
Short Sale w/Lndr. App. Req: **No**
Lender Owned: **No**

Tax Information

Pin #:
Assessed: **\$575,600**
Tax: **\$6,251** Tax Year: **2024**
Book: **17831** Page: **171**
Cert:
Zoning Code: **MB**
Map: **914** Block: **195** Lot: **64**

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: **Call List Agent,**  **Schedule with ShowingTime or Call 888-627-2775**
Showing: Facilitator: **Call List Agent, Lock Box,**  **Schedule with ShowingTime or Call 888-627-2775**
Special Showing Instructions: **Use Showing time or call/text Nancy 978-314-4003. No showings at night. Try to attend Open Houses**

Firm Remarks

Offers if any are due Monday Nov 4 at 3 pm. Please send offers in one PDF to nancydowlingre@gmail.com. Please allow 24 hours for a response. Property is sold as-is, will not pass FHA or VA due to peeling paint on home and garage.

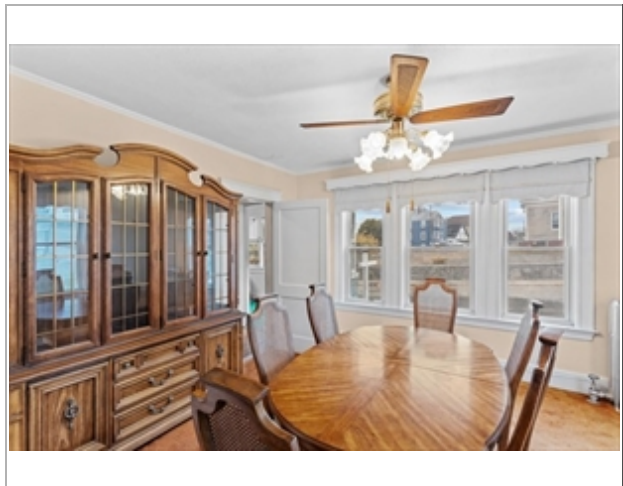
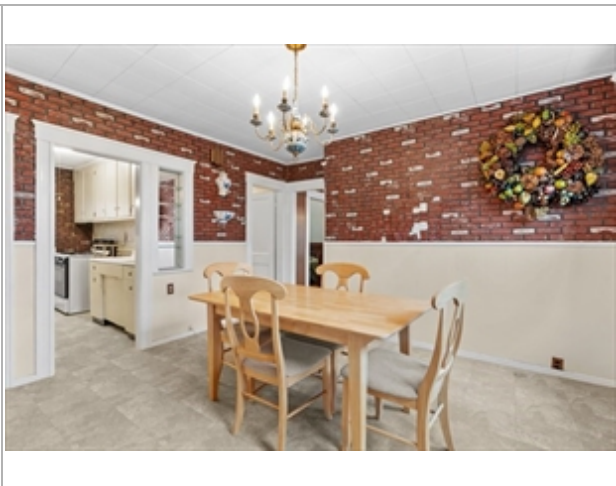
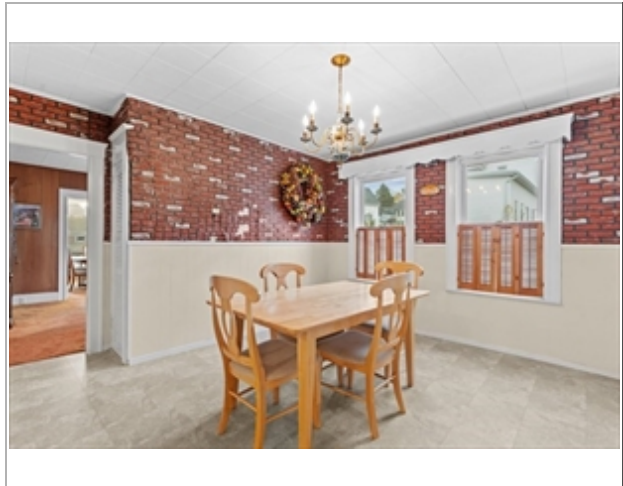
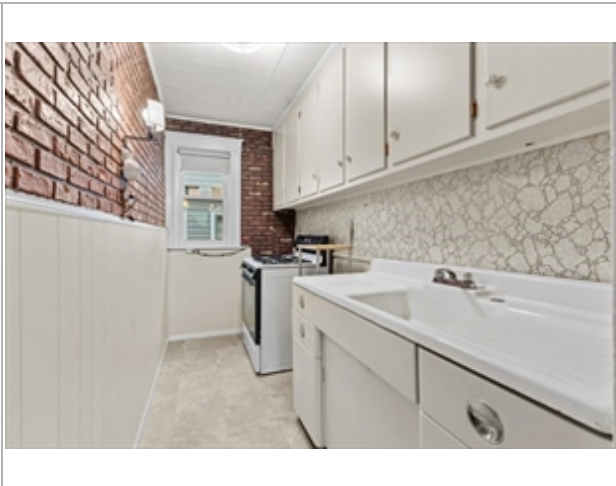
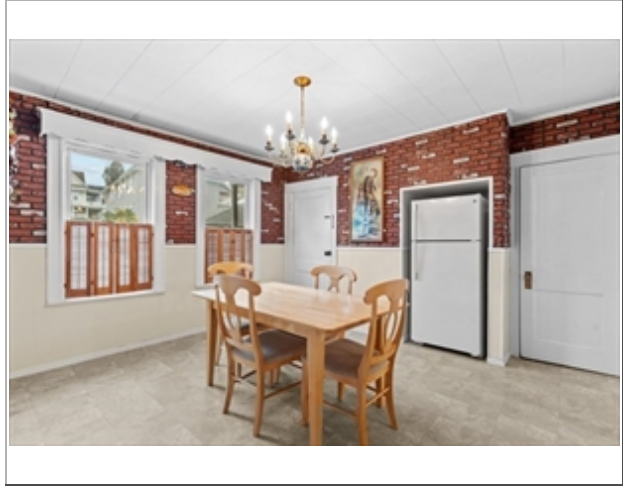
Market Information

Listing Date: **10/30/2024**
Days on Market: Property has been on the market for a total of **0** day(s)
Expiration Date: **4/30/2025**
Original Price: **\$599,000**
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:

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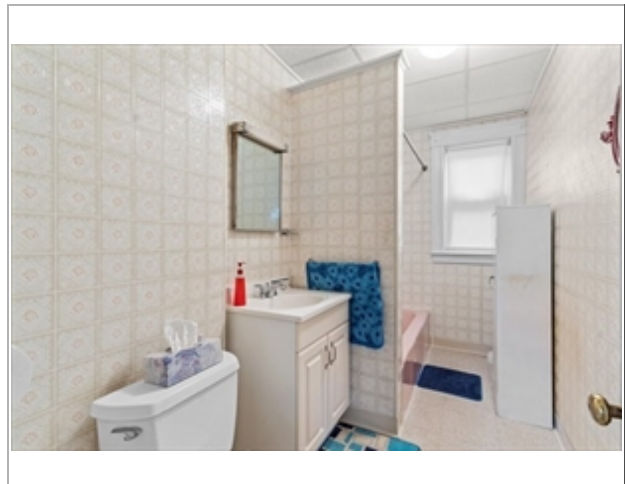
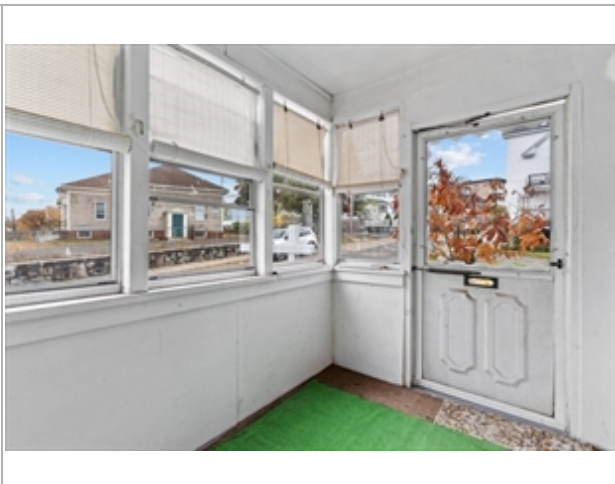
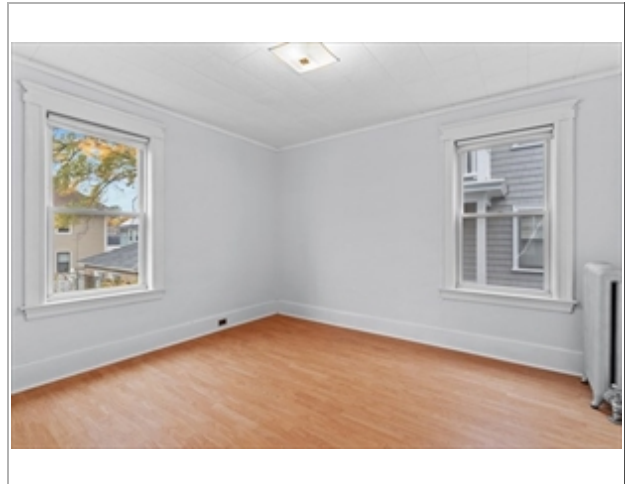
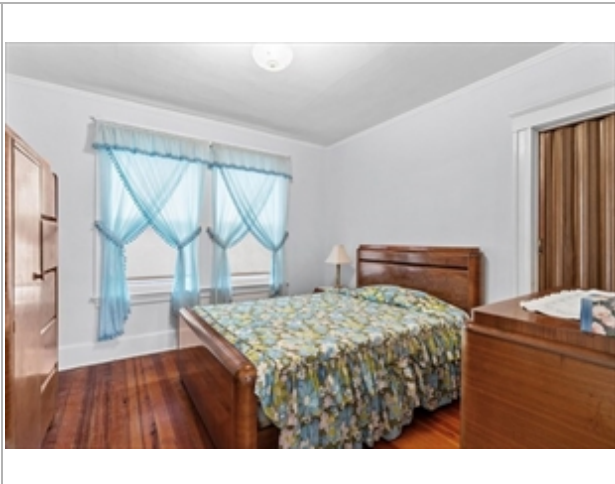
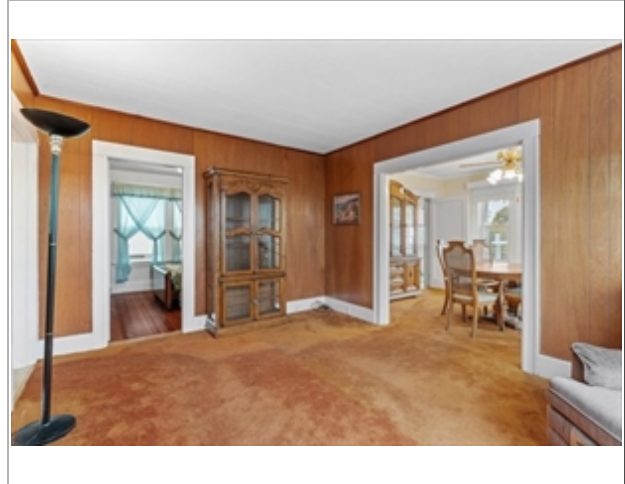
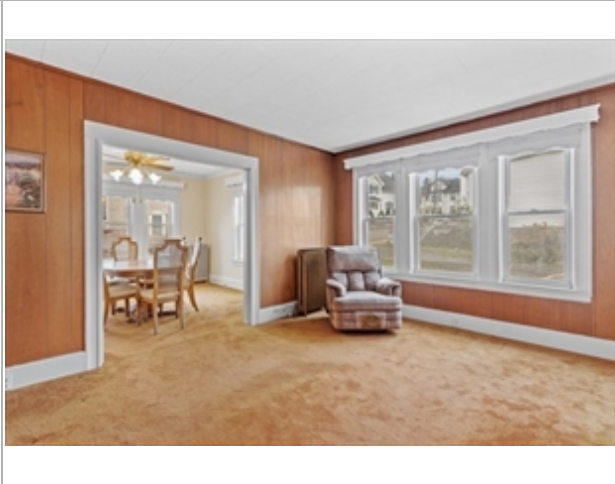
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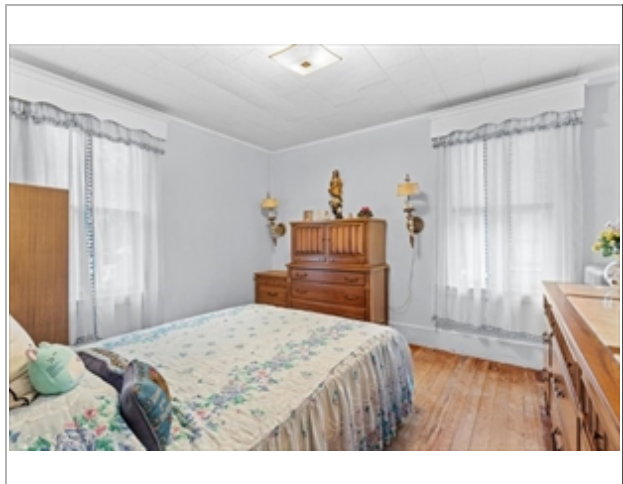
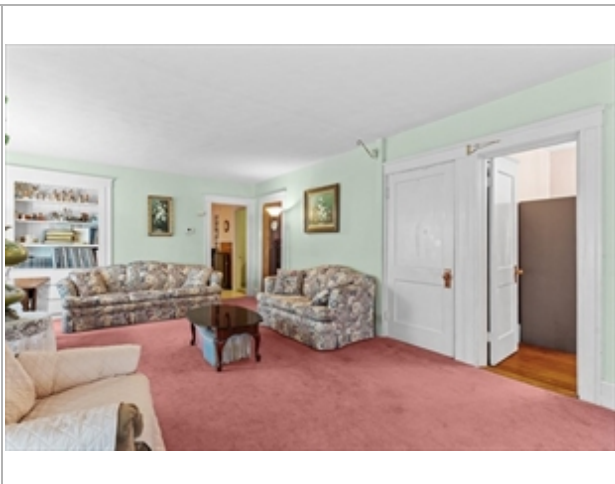
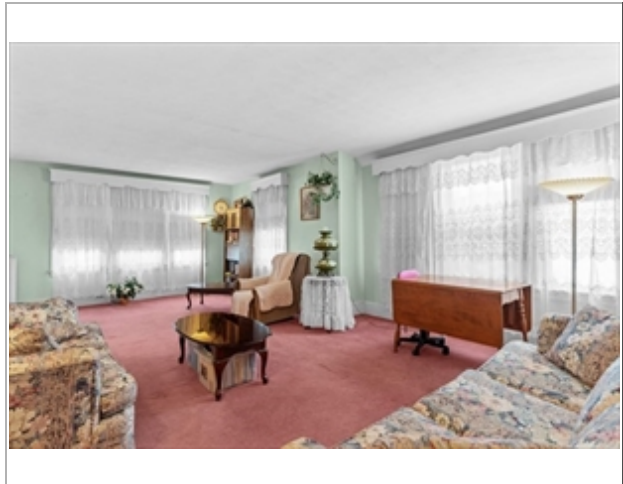
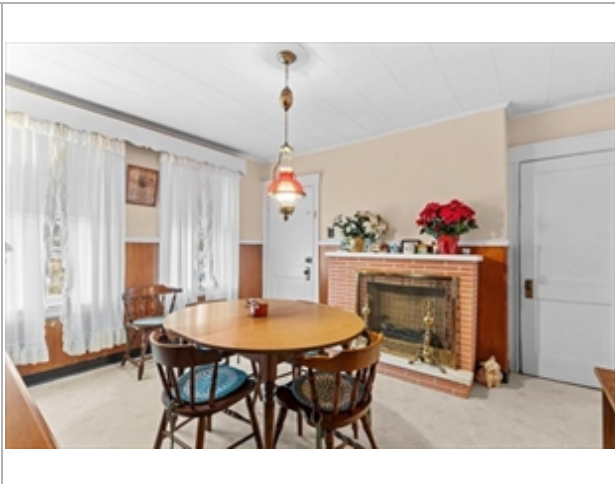
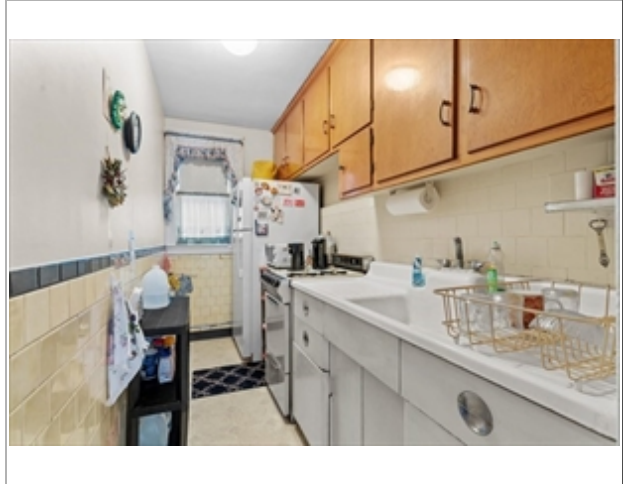
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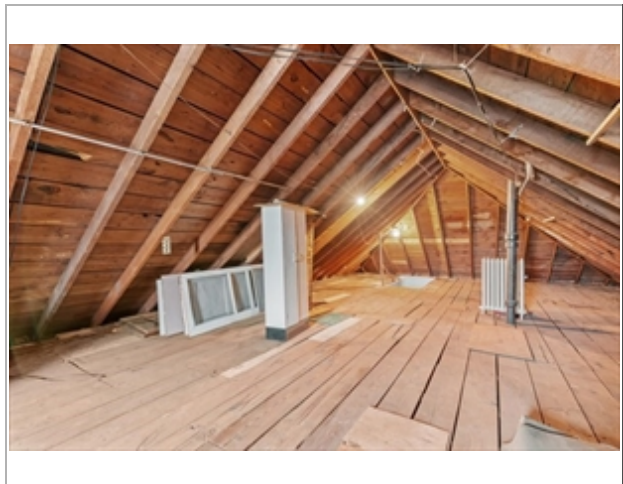
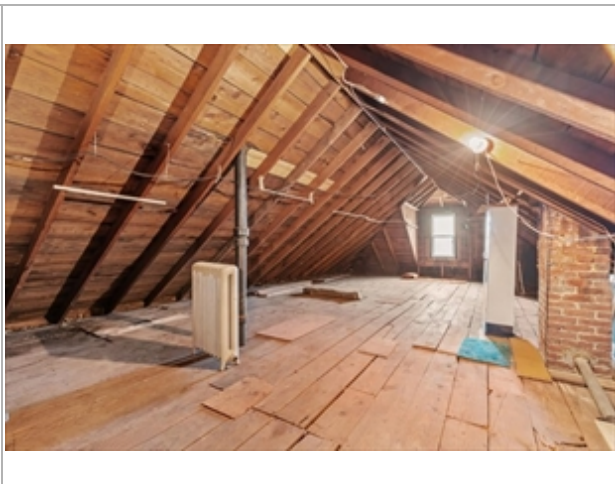
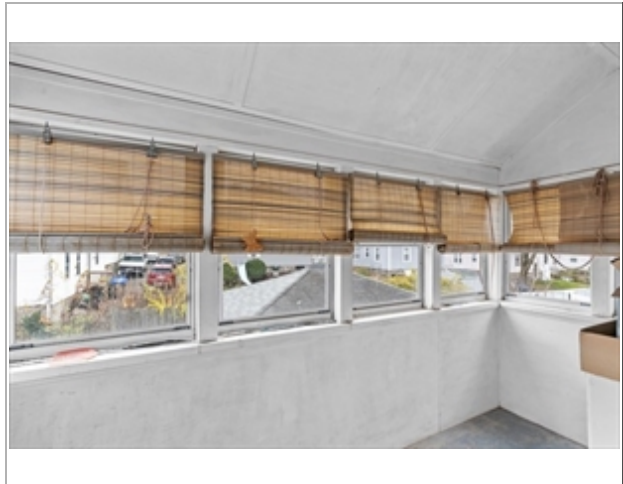
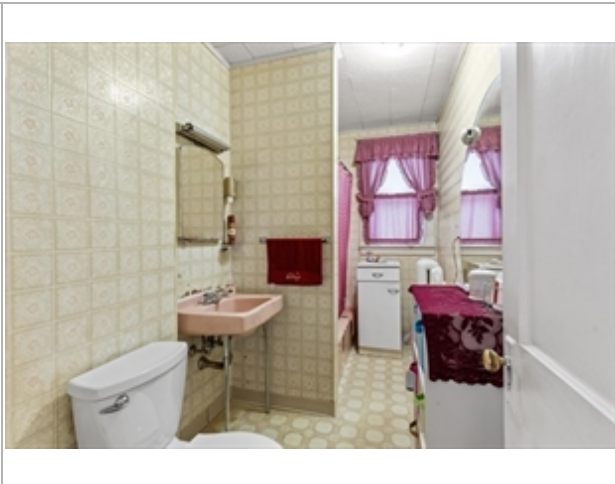
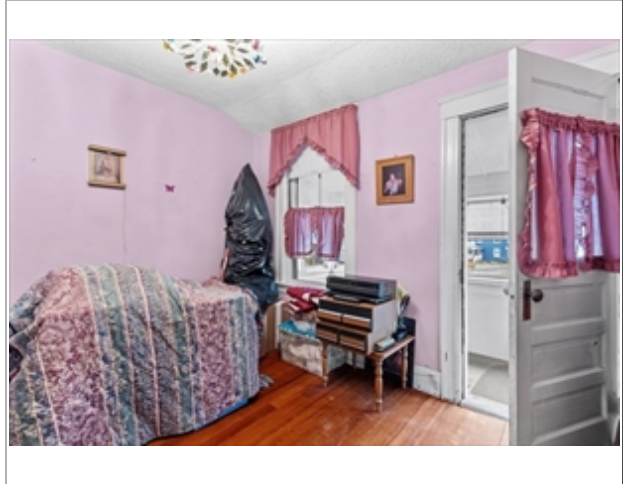
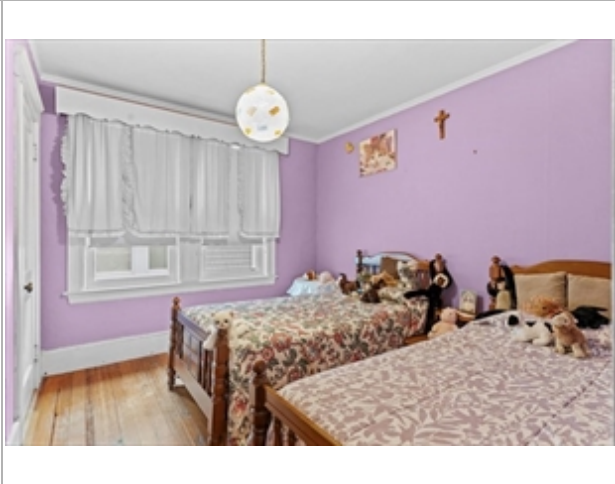
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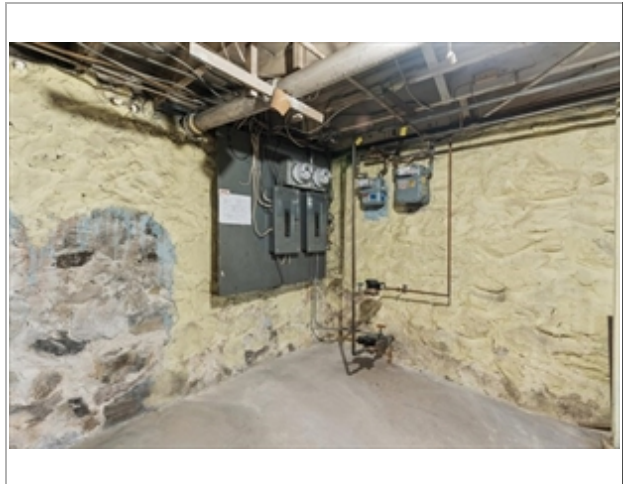
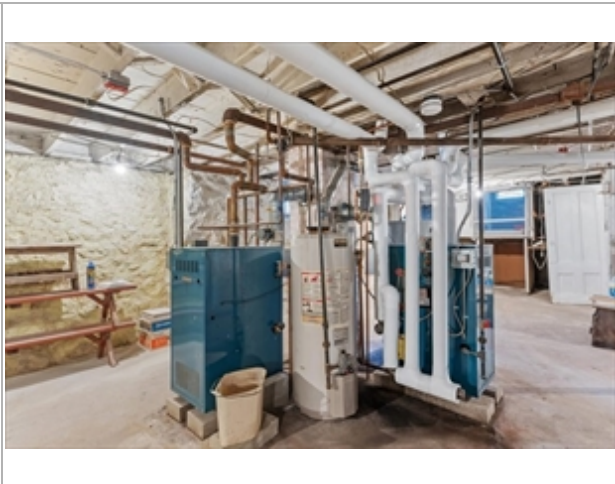
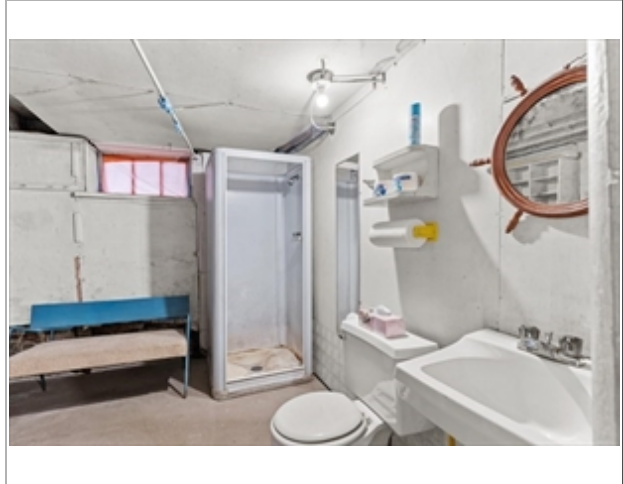
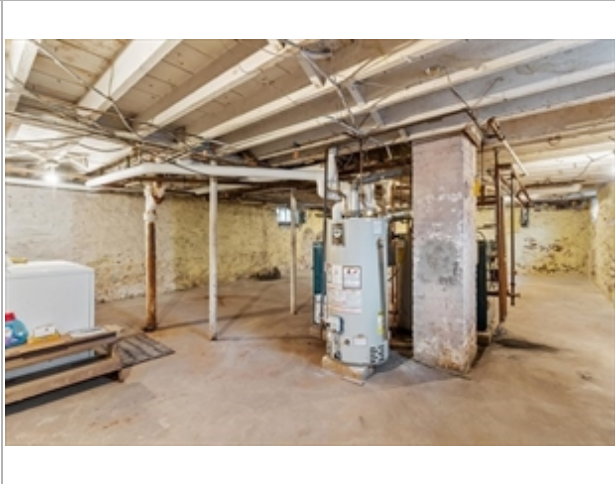
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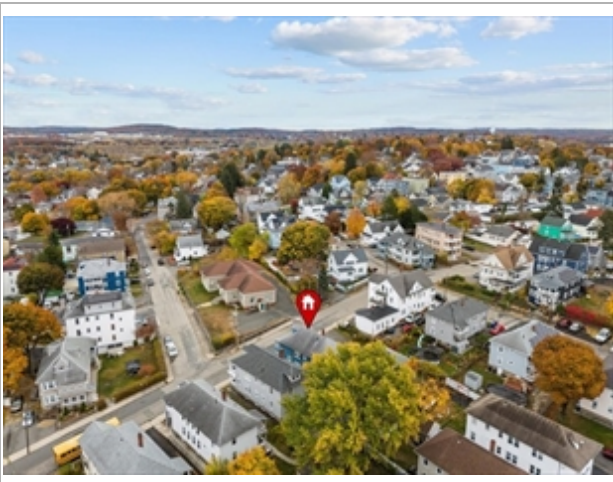
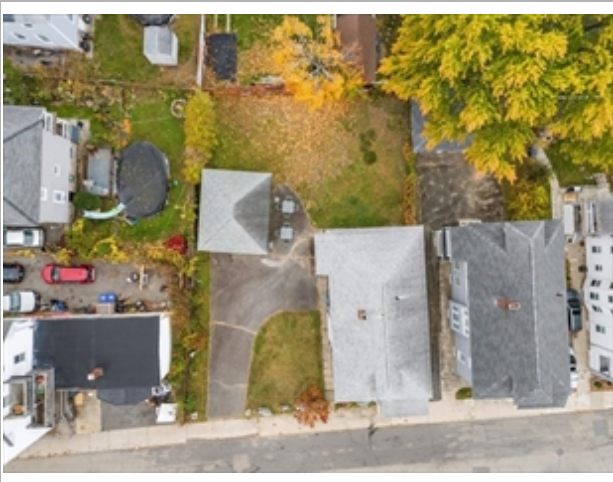
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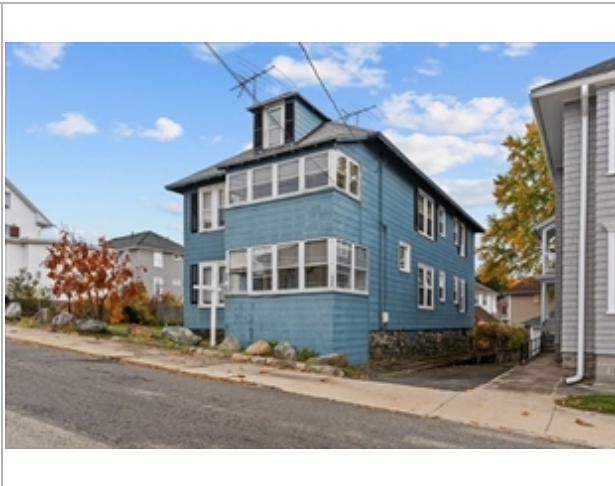
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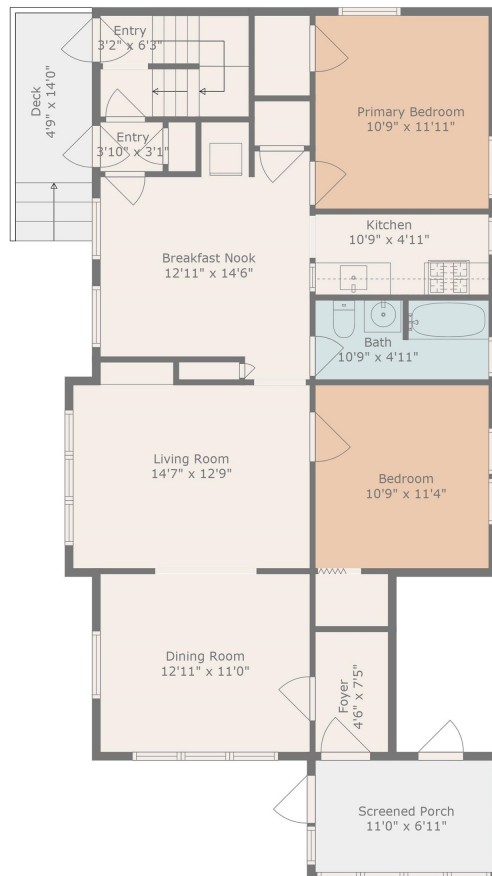


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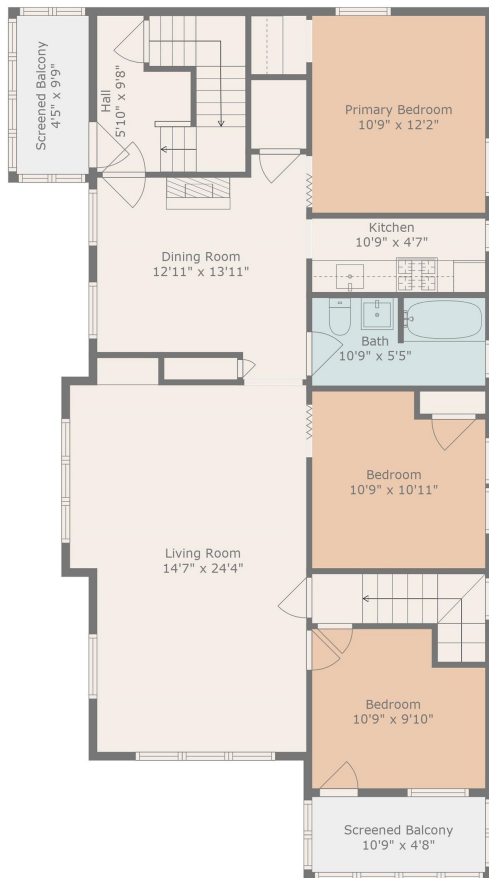


TOTAL: 2371 sq. ft

BELOW GROUND: 196 sq. ft, FLOOR 2: 1040 sq. ft, FLOOR 3: 1135 sq. ft, FLOOR 4: 0 sq. ft
 EXCLUDED AREAS: BASEMENT: 837 sq. ft, SCREENED PORCH: 76 sq. ft, DECK: 67 sq. ft,
 SCREENED BALCONY: 94 sq. ft, LOW CEILING: 823 sq. ft, ATTIC: 267 sq. ft

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



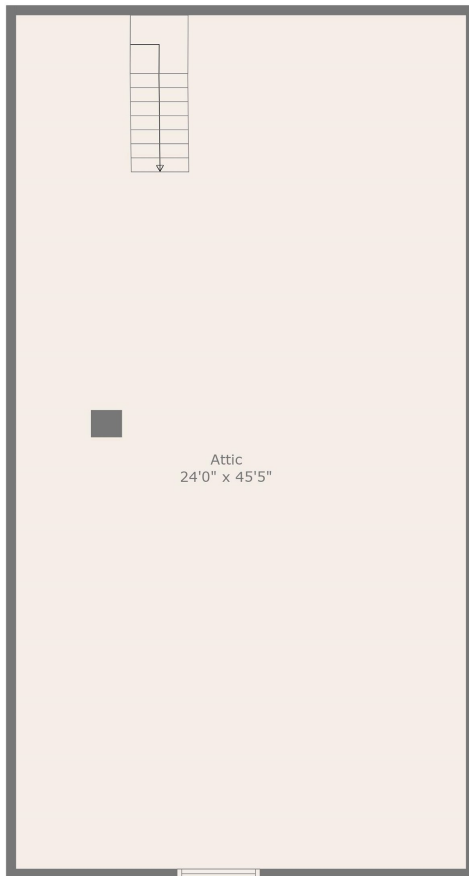


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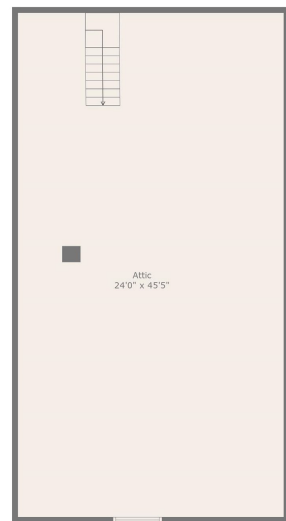
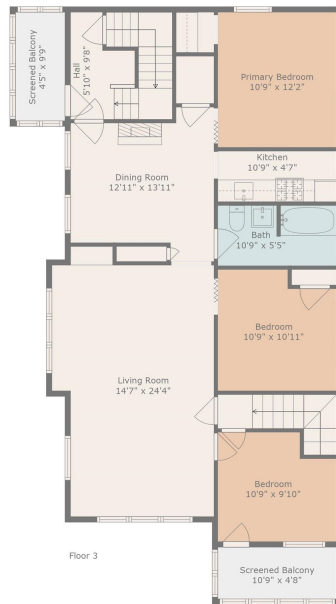
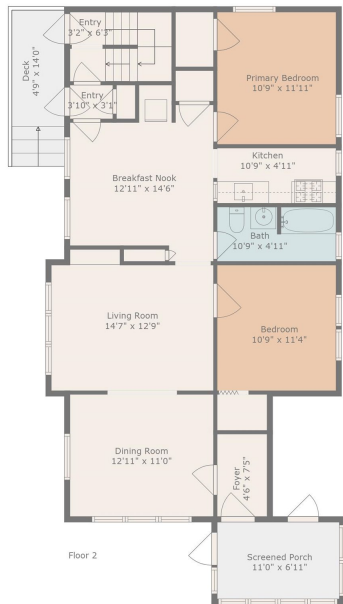
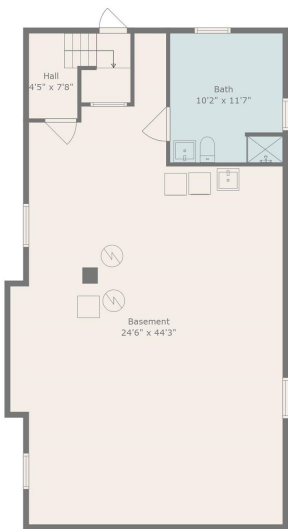


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THIS FORM IS TO BE COMPLETED BY THE SELLER. THE SELLER(S) AUTHORIZES THE BROKER OR SALESPERSON(S) TO PROVIDE THE FOLLOWING INFORMATION TO PROSPECTIVE BUYER(S). THIS INFORMATION IS BASED UPON THE SELLER'S KNOWLEDGE, BUT IS NOT INTENDED AS A GUARANTEE 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 24-28 Vermont St, Methuen MA 01844
 Seller(s)/Owner(s) June Arcidiacono
 How long owned 1970 How long occupied 1970 Approximate Year Built 1920

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1986 front porch roof, boiler windows, REMOVE ASBESTOS
7a.	Were permits obtained?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	METHUEN CITY HALL
7b.	Was the work approved by an inspector?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7c.	Was a licensed contractor hired? (If yes, provide name of contractor)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DE FELICE, WOOSTER ROOFING, MATFIELD SYLVAN, A-TEST
7d.	Is there an outstanding notice of any building code violation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ALL-DAY
8.	Have you been informed that any part of the property is in a designated flood zone or wetland?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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"/>	

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"/>	2 OIL TANKS REMOVED BY ALL DAY FROM BASEMENT 2004
10b.	If yes, type of tank			<input type="checkbox"/>	<input type="checkbox"/>	
10c.	If yes, is it still in use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10d.	If not still in use, was it removed?	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

SELLER'S INITIALS ja BUYER'S INITIALS



II. SYSTEM AND UTILITIES INFORMATION (Continued)						
		Yes	No	Unknown	N/A	Description/Explanation
11.	HEATING SYSTEM					
11a.	Type: Radiators gas					
11b.	Age: 2nd fl. 2004 →					1st approx 20 yrs.
11c.	Are there any known problems with the heating system? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CALLAHAN HEATING 2004
11d.	Identify any unheated room or area:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11e.	Provide approximate date of last service:	<input type="checkbox"/>	<input 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: gas			<input type="checkbox"/>	<input type="checkbox"/>	2nd fl rented \$22/mo PIVOTAL HOME SOLUTIONS
12b.	Age: 1 yr.			<input type="checkbox"/>	<input type="checkbox"/>	2ND FLOOR - 1 YEAR
12c.	Are there any known problems with the hot water? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1st floor age unknown.
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:			<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 go BUYER'S INITIALS _____





III. WATER, SEWER & OTHER UTILITIES (Continued)					
	Yes	No	Unknown	N/A	Description/Explanation
15. WATER SOURCE					
15a. <input 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 checked="" 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					NATIONAL GRID
16a. Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. APPLIANCES					
17a. List appliances that are included: 1ST FL. GAS STOVE CELLAR: ELECTRICAL WASHER & DRYER			<input type="checkbox"/>	<input type="checkbox"/>	2ND FL. GAS STOVE ELECTRIC REFRIGERATOR FIREPLACE FREEZER (electric 2nd fl)
17b. Problems? Explain.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. SECURITY SYSTEM					
18a. Type: _____			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
18b. Age: _____			<input type="checkbox"/>	<input type="checkbox"/>	
18c. Provide Name of Service Company			<input type="checkbox"/>	<input type="checkbox"/>	
18d. Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	
19b. Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. SOLAR PANELS					
20a. <input type="checkbox"/> Leased <input type="checkbox"/> Owned	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
20b. If leased, explain terms of agreement.			<input 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 BUYER'S INITIALS





V. BUILDING/STRUCTURAL INFORMATION (Continued)

		Yes	No	Unknown	N/A	Description/Explanation
22.	BASEMENT →					ADDITIONAL BATHROOM
22a.	Problems (select any that apply): <input type="checkbox"/> Water <input checked="" type="checkbox"/> Seepage <input type="checkbox"/> Dampness <input type="checkbox"/> Other. Explain.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	back side during heavy storms. AFTER SNOWSTORM IF MELTING.
22b.	Explain amount, frequency, and location of the problems selected in 22a.			<input type="checkbox"/>	<input type="checkbox"/>	JUST WET, NOT DEEP
23.	SUMP PUMP					
23a.	If yes to 23, provide age and location.			<input type="checkbox"/>	<input checked="" type="checkbox"/>	
23b.	Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24.	ROOF					
24a.	Age: 12 years			<input type="checkbox"/>	<input type="checkbox"/>	WOOSTER ROOFING
24b.	Problems? Explain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RESOLVED
24c.	Location of leaks/repairs:			<input type="checkbox"/>	<input type="checkbox"/>	AROUND CHIMNEY + WINDOW
25.	CHIMNEY/FIREPLACE					
25a.	Date last cleaned:			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Month Day Year
25b.	Problems? Explain.	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/> Gas Stove	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EVERSOURCE
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26.	FLOORS					
26a.	Type of floors under carpet/linoleum:			<input checked="" 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. NEW ATTIC WINDOW / SCREENS RICHARD BOX / TORN	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	REPLACED BY WINDOWS SYLVAIN SALEM, NH
29.	INSULATION					
29a.	Does house have insulation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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SELLER'S INITIALS *jae*

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? <i>2004</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>BOILERS REMOVED BY A-DEST ASBESTOS REMOVED FROM PIPE</i>
30b.	Has a fiber count been performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
30c.	If yes to 30b., is copy attached? (See Asbestos Disclosure Page 8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	
31c.	If yes to 31a., describe abatement plan/ interim controls, if any:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31d.	Has paint been encapsulated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31e.	If yes to 31d. provide date of encapsulation and by whom.			<input type="checkbox"/>	<input type="checkbox"/>	Month Day Year
31f.	Is Lead Paint Disclosure Form available? If yes attach copy. If no, Explain.	<input 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	<i>GREATER LAWRENCE COMMUNITY ACTION COUNCIL 2016</i>

VII. OUTDOOR AMENITIES & STRUCTURES						
		Yes	No	Unknown	N/A	Description/Explanation
36.	SWIMMING POOL/JACUZZI					
36a.	Problems? Explain. <i>COLLAPSED 2006</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>DUG OUT & FILLED IN BY DUNA LANDSCAPING</i>
36b.	Name of Service Company:			<input type="checkbox"/>	<input type="checkbox"/>	

SELLER'S INITIALS *[Signature]* BUYER'S INITIALS





VII. OUTDOOR AMENITIES & STRUCTURES (Continued)						
		Yes	No	Unknown	N/A	Description/Explanation
37.	GARAGE/SHED/OR OTHER STRUCTURE					INSTALLED BY EASTERN GARAGE DOOR CO. 2003
37a.	Problems? Explain.	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	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"/>	<u>2</u> Units
42b.	Has a unit been added/subdivided since original construction?	<input type="checkbox"/>	<input checked="" 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 go BUYER'S INITIALS _____





IX. RENTAL PROPERTY INFORMATION						
		Yes	No	Unknown	N/A	Description/Explanation
43.	RENT	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SLIGHT CRACKS IN STONE WALL BACK SIDE

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 jo 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 OCT. 5, 2024 Seller Jane G. Arcidiacono Seller

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 BUYER'S INITIALS





QUITCLAIM DEED

I, **June G. Arcidiacono**, an unmarried person, of Methuen, Massachusetts for nominal consideration of One Dollar and Zero Cents (\$1.00) grants to **June G. Arcidiacono, Trustee of June G. Arcidiacono Family Revocable Trust u/d/t dated September 11, 2023** as evidence of certificate of trust recorded herewith, of 24-28 Vermont Street, Methuen, Massachusetts,

With QUITCLAIM COVENANTS,

The land in said Methuen, with all the buildings thereon, being lots numbered 27A and 28A on plan of Hillside recorded with North Essex Deeds, as Plan # 56, bounded as follows:

Northerly one hundred six and 7/10 feet by lot numbered 26A on said plan;

Easterly eighty feet by Vermont Street;

Southerly one hundred nine and 6/10 feet by lots numbered 29 and 30 on said plan; and

Westerly by lots numbered 16A and 17A on said plan.

EXPRESSLY RESERVING A LIFE ESTATE IN THE NAME OF THE GRANTOR, JUNE G. ARCIDIACONO, FOR AND DURING HER NATURAL LIFE.

For title to Grantors, see deeds dated March 17, 1970, January 3, 1977, and April 14, 1980 and recorded with Essex North County Registry of Deeds at Book 1149, Page 796, Book 1299, Page 623, and Book 1430, Page 192 respectively.

Property Address: 24-28 Vermont Street, Methuen, MA 01844



MASSACHUSETTS STATE EXCISE TAX
Essex North Registry
Date: 09-12-2023 @ 10:06am
Ctl#: 34 Doc#: 14977
Fee: \$.00 Cons: \$1.00

This deed was prepared by Zanni & Pesce Law Office, from information supplied by the Grantor and at the request of the Grantor. No independent examination was undertaken nor did the preparer otherwise verify the accuracy of the representations contained herein.

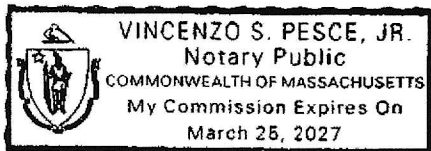
Executed as a sealed instrument this 11th day of September, 2023.

June G. Arcidiacono
June G. Arcidiacono

COMMONWEALTH OF MASSACHUSETTS

Essex, ss.

On this 11th day of September, 2023, before me, the undersigned notary public, personally appeared June G. Arcidiacono proved to me though satisfactory evidence of identification, which was/were Mass. Driver's license(s) or _____, to be the person(s) whose name(s) is/are signed on the proceeding or attached document, and acknowledged to me that he/she/they signed it voluntarily for its stated purpose and that the foregoing instrument is his/her/their free act and deed.



V. S. Pesce Jr.

Notary Public
My commission expires 3-25-2027

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) *NAD* 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.

June A. Arredondo 10/5/24
Seller Date

Seller Date

Purchaser Date

Purchaser Date

[Signature] 10/5/24
Agent Date

Agent Date

Address of Property 24-28 Vermont St. Methuen MA

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.

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LET'S CONNECT

Nancy Dowling, REALTOR®



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NancyDowlingRE@gmail.com



www.TheNancyDowlingTeam.com



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