# Welcome To

963 Devon Drive Devon













Super clean 4 bedroom, 3 full bath split level with park like fenced yard in sought after community of Devon within the 5 mile radius of Newark Charter and convenient to major routes, shopping, dining, the University of Delaware and easy access to the James Hall Trail! Foyer entry opens to expanded family room with custom concrete flooring, ground level bedroom and remodeled full bathroom. Gleaming hardwood floors throughout the main level including a gorgeous kitchen with custom cabinets, granite countertops and tile backslash, living room with bay window and dining room with sliding glass door leading to private deck overlooking the patio with hot tub and beautiful yard with shed. Luxury Vinyl Plank flooring throughout the upper level with primary bedroom and en-suite bathroom plus 2 additional spacious bedrooms with shared hall bathroom. Additional features and recent updates include: custom blinds, newer washer and dryer, updated roof and updated AC unit. Hurry to schedule your private tour today, you won't be disappointed!

Patterson-Schwartz Real Estate
Team Landon
302-218-8473 direct
302-733-7000 office
davelandon@gmail.com
landon.psre.com











#### PROPERTY DESCRIPTION

**Coming Soon** 



\$395,000

No

#### 963 Devon Drive, Newark, DE, 19711

MLS #: DENC2060448 4 Reds: 3/0 Residential Baths: Type:

Detached 1971 / Estimated Struct Type: YearBuilt:

NewConstr: Style: Split Level, Traditional Lvls/Stories: 3 Basement: Yes Ownership: Fee Simple Central Air: Yes

Garage: No

#### LOCATION

**NEW CASTLE** School District: County: Christina High School: Newark MLS Area: Newark/Glasgow (30905) Shue-Medill Subdiv/Neigh: Middle School: Devon West Park Place In City Limits: Υ Elementary School:

#### ASSOCIATION / COMMUNITY INFO

Senior Community: No HOA: No Condo/Coop: No

#### TAXES AND ASSESSMENT

Tax ID#: 18-034.00-042 Tax Annual/Year: \$2,994 / 2023 City/Town Tax: \$532 School Tax: \$2,274 County Tax: \$188 Tax Assessment:

\$68,800

**ROOMS BED BATH** 3 Living Room: 2 full Main 16 x 13 Flooring - HardWood Upper 1: Kitchen: Main 12 x 11 Countertop(s) - Granite, Flooring -Lower 1: 1 1 full HardWood Dining Room: Main 12 x 10 Flooring - HardWood 20 x 22 Flooring - Concrete Family Room: Lower 1 Bedroom 4: Lower 1 9 x 11 Flooring - Concrete Primary Bedroom: Upper 1 14 x 11 Ceiling Fan(s), Flooring - Luxury Vinyl Plank Bedroom 2: Upper 1 13 x 11 Ceiling Fan(s), Flooring - Luxury Vinyl Plank Bedroom 3: Upper 1 12 x 11 Flooring - Luxury Vinyl Plank

#### **BUILDING INFORMATION**

AboveGrFinSF: 1,950 / Assessor Total Finished SF: 1,950 / Total SF: 1,950 / Foundation: Concrete Perimeter Basement: Unfinished

Constr Materials: Brick, Vinyl Siding

#### LOT AND PARKING

Lot Acres/SQFT: 0.26a / 11,326sf / Estimated Zoning: 18RS Federal Flood Zone: No Fencing: Privacy, Rear Ground Rent: No Parking: Driveway | Paved Parking | Driveway Spaces: 2

#### INTERIOR FEATURES

Entry Level Bedroom, Formal/Separate Dining Room, Upgraded Countertops, Wood Floors | No fireplace | Built-In Microwave, Dishwasher, Disposal, Dryer, Oven/Range - Electric, Refrigerator, Washer, Water Heater | Accessibility Features: None

#### **EXTERIOR FEATURES**

**Exterior Lighting** 

#### UTILITIES

Cooling: Central A/C, Electric | Heating: Forced Air, Natural Gas | Electric: 150 Amps, Circuit Breakers | Hot Water: Natural Gas | Water

Source: Public | Sewer: Public Sewer

#### **REMARKS**

Expected On Market Date: May 2, 2024

Public: Super clean 4 bedroom, 3 full bath split level with park like fenced yard in sought after community of Devon within the 5 mile radius of Newark Charter and convenient to major routes, shopping, dining, the University of Delaware and easy access to the James Hall Trail! Foyer entry opens to expanded family room with custom concrete flooring, ground level bedroom and remodeled full bathroom. Gleaming hardwood floors throughout the main level including a gorgeous kitchen with custom cabinets, granite countertops and tile backslash, living room with bay window and dining room with sliding glass door leading to private deck overlooking the patio with hot tub and beautiful yard with shed. Luxury Vinyl Plank flooring throughout the upper level with primary bedroom and en-suite bathroom plus 2 additional spacious bedrooms with shared hall bathroom. Additional features and recent updates include: custom blinds, newer washer and dryer, updated roof and updated AC unit. Hurry to schedule your private tour today, you won't be disappointed!

Inclusions: Refrigerator, Washer and Dryer

For More Information Contact:

#### **Dave Landon**

 Direct:
 302-218-8473
 Fax:
 302-733-7046

 Office:
 302-733-7000
 e-mail:
 d/andon@psre.com

Toll-free: 800-220-7028

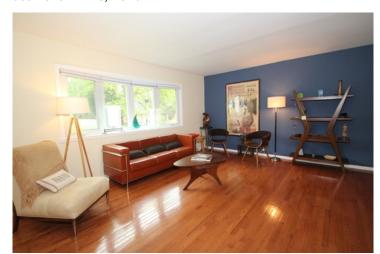
Information set forth is deemed reliable, but there is no guarantee as to its accuracy and no warranties are made.

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#### MLS#: DENC2060448

963 Devon Drive

#### 963 Devon Drive, Newark



Living Room



Kitchen



Kitchen



Dining Room



**Expanded Family Room** 

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#### MLS#: DENC2060448

Expanded Family Room



963 Devon Drive, Newark

Primary Bedroom



Primary Bath



Bedroom



Bedroom



Full Bath

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#### MLS#: DENC2060448

#### 963 Devon Drive, Newark



Bedroom



Ground Level Full Bath



Rear of home



Deck



Patio with hot tub



Fenced Yard

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Printed on 4/29/2024 by Dave Landon

Seller(s) Name: MARK J CASAGRANDE AND ALEXANDER K B TUNNELL



### SELLER'S DISCLOSURE OF REAL PROPERTY CONDITION REPORT

#### **State of Delaware**

Approved by the Delaware Real Estate Commission (Effective Date: July 1, 2023)

Property Address: 963 DEVON DRIVE, NEWARK, DE 19711							
Appro	xim	ate A	Age of Building(s):	52 years old	Date Purchased: _2	/26/18	
property property must be for any the time This Re the Sell- warrant material was ma- material Coordin dnrec.al Registry	made mater the E port is er or a defect that defect action pha.d	are kins and are k	nown at the time the propy interest in a property of his Report, which has be tanges occurring in the parakes an offer to purch od faith effort by the Segents or Sub-Agents rep Seller or Buyer may wis the property disclosed to losed in an update of this hich occur after settlements. Stateplanning. delaware are.gov, Delaware Divisi	perty is offered for sale or manufactured housing en approved by the Dela roperty before final settles. This Report, signed ller to make the disclosuresenting Seller or Buyer to the Buyer prior to the Buyer prior to settlement. Government websites agov, Delaware Department on of Public Health www.	or that are known prior to the lot, improved by dwelling user Real Estate Commission ement. This Report shall be by Buyer and Seller, shall be reserquired by Delaware large in the transfer and is not a mass no cause of action against Buyer making an offer; materially making an offer; making an of	e in writing all material defects of the e time of final settlement. Residential mits for 1-4 families. The disclosure on and shall be updated as necessary given to all prospective Buyers prior to become a part of the Agreement of Sale. We and is not a warranty of any kind by substitute for any inspections or set the Seller or Real Estate Agent for erial defects developed after the offer aplied with the Agreement of Sale; or ation include: Office of State Planning de Environmental Control ph, Delaware State Police Sex Offender a.gov/portal/home, and other agencies	
	S	eller	shall answer the fo	ollowing questions l	oased on Seller's know	vledge of the property.	
Yes	No	*	requested, place a check further explanation in S	mark next to each corrected		es or No column. Where selections are answer. Certain answers require a property.	
	<i>V</i>	NA NA NA	4. If the property is a rental/lease, is the property subject to a rental/lease management agreement?  5. If #4 is yes, is the agreement hinding upon the purchaser? If yes, describe in XVI. Seller agrees to provide a				
Page <b>1</b>	of <b>9</b>	Prop	ertysAddress: 963 DEV	/ON D <b>RIVE</b> \$ NEWARK, I	DE 19711		
Seller's		- 1	My Seller's In		yer's Initials	Buyer's Initials	
Seller's	eller's Initials Buyer's Initials Buyer's Initials						

Yes	No	*	* Write in <i>U</i> if Unknown or <i>NA</i> if Not Applicable, otherwise mark either the Yes or No column. Where selections are requested, place a check mark next to each correct answer or fill in the correct answer. Certain answers require a further explanation in Section XVI.  Seller shall answer the following questions based on Seller's knowledge of the property.							
			8. If #6 is yes, Seller warrants that the property ( is) or ( is not) exempt from providing the Buyer with a <b>Public Offering Statement</b> as described in §81-401 or §81-403(b) of Chapter 81, Title 25 of the Delaware Code The Delaware Uniform Common Interest Ownership Act. If exempt from providing the Public Offering Statement or Resale Certificate, in compliance with §317A of Chapter 3, Title 25, Seller has attached a copy of all documents in the chain of title that create any financial obligation for the buyer, and a written summary of all financial obligations created by documents in the chain of title. As evidenced by signature below, Buyer has received a copy of these documents.							
			I. DEED RESTRICTIONS, HOMEOWNERS ASSOCIATIONS / CONDOMINIUMS AND CO-OPS							
	/		9. Is the property subject to any deed restrictions? (e.g., rental restrictions, pet restrictions, fence requirements, etc.) If yes, describe in XVI.							
	<b>V</b>		<ul><li>10. Are you in violation of any deed restrictions at this time? If yes, describe in XVI.</li><li>11. Is the property subject to any agreements concerning affordable housing or workforce/inclusionary housing?</li></ul>							
	~		If ves, describe in XVI.							
	~		12. Is the property subject to any private, public, or historic architectural review control other than building							
			codes? If yes, describe in XVI.							
	/		13. Is the property part of a condominium or cooperative (Co-op) ownership?							
	~		14. Is there a (Homeowners Association), (Condominium Association), (Cooperative (Co-op), (Civic Association), or (Maintenance Corporation)?							
		NΑ	15. If #14 is yes, are there any ( Fees), ( Dues), or ( Assessments) involved?							
			If yes, how much?; Frequency of payments: (Monthly), (Quarterly), (Yearly), (Other:); Are they (Mandatory) or (Voluntary)?							
	N		16. Is there a capital contribution fee due by a new owner to the Association? If yes, how much							
			17. Are there any unpaid assessments including but not limited to deferred water and sewer charges for your							
		NA	property? If yes, how much? If yes, describe in XVI.							
		NA	18. Has there been a special assessment in the past 12 months? <b>If yes, describe in XVI.</b>							
		NA	19. Have you received written notice of any new, proposed, or board discussed increases in fees, dues,							
			assessments, or capital contributions? If yes, describe in XVI.							
		NA	20. Management Company Name:							
		NA	21. Representative Name: Phone #							
		NA	22. Representative E-mail Address:							
			III. TITLE / ZONING INFORMATION							
	/		23. Does the amount owed on your mortgage(s) and any other lien(s) exceed the estimated value of the property? If yes, are additional funds available from Seller for settlement?							
		272	24. Is your property owned (✓ In fee simple) or ( Leasehold/Ground Lease) or ( Cooperative)?  25. If a Leasehold/Ground Lease, what is the current lease amount? \$ ;							
		NA	Frequency of payments: (Weekly), (Monthly), (Quarterly), (Yearly), (Other:)							
			Note to Buyer: May be subject to change.							
		NΑ	26. If a Leasehold/Ground Lease, when does it expire?							
	1		27. Are there any rights-of-way, easements, or similar matters that affect the property? If yes, describe in XVI.							
	1		28. Are there any shared maintenance agreements affecting the property? If yes, describe in XVI.							
	/		29. Are there any variance, zoning, conditional use, non-conforming use, or setback violations? <b>If yes, describe</b>							
			in XVI.							
		NΑ	30. If #29 is yes, has the variance, conditional use, or non-conforming use expired or has otherwise become non-transferable? <b>If yes, describe in XVI.</b>							
~			31. Is your property currently covered by a title insurance policy?							
			32. Did you participate in any mortgage/closing cost assistance program that must be paid back at the time of the							
	/		transfer of the property? If yes, describe in XVI.							
	~		33. Did you participate in any mortgage forbearance programs such as the CARES Act from COVID-19? <b>If yes, describe in XVI.</b>							
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age <b>2</b>	of <b>9</b>	Pro	eres Address: 963 DEVON DRIVESNEWARK, DE 19711							
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Yes	No	*	* Write in <i>U</i> if Unknown or <i>NA</i> if Not Applicable, otherwise mark either the Yes or No column. Where selections are requested, place a check mark next to each correct answer or fill in the correct answer. Certain answers require a further explanation in Section XVI.  Seller shall answer the following questions based on Seller's knowledge of the property.
			IV. ADDITIONAL INFORMATION
	~		34. Have you received notice from any local, state, or federal agency requiring repairs, alterations, or corrections of any existing conditions? If yes, describe in XVI.
	~		35. Is there any existing legal action affecting this property? If yes, describe in XVI.
	~		36. Are there any violations of local, state or federal laws or regulations relating to this property? <b>If yes, describ</b> in XVI.
	~		37. Does your current real estate tax amount reflect any non-transferrable exemptions or discounts? <b>If yes, describe in XVI.</b>
	~		38. Have you received formal notice of any changes that may materially or adversely affect the property? e.g., zoning changes, road changes, proposed utility changes, etc. <b>If yes to any, describe in XVI.</b>
	<b>'</b>		39. Are all the exterior door locks in the house in working condition? If no, describe in XVI.
	/		40. Will keys be provided for each lock?
			41. During your ownership, are there now or have there been animals (pets) living in the house? If yes, what type cat and two dogs
			42. Is there now or has there ever been a (✓ Swimming pool), (✓ Hot tub), (Spa), or (Whirlpool) on th property? If yes and there are any defects, describe in XVI.
		NA	43. If there is a pool, does it conform to all local ordinances? If no, describe in XVI.
			44. What is the type of trash disposal? (Private), ( Municipal), ( County), ( Community) or ( Other City of Newark).
			45. The cost of repairing and repaving the streets adjacent to the property is paid for by:
			The property owner(s), estimated fees: \$  Delaware Department of Transportation or the State of Delaware
			Municipal  Municipal
			Community/HOA
			Other
			Unknown
			Note to Buyer: Repairing and repaving of the streets can be very costly. (6 Delaware Code§ 2578)  Note to Buyer: Please check HOA/local requirements concerning responsibility for sidewalk installation,
	ı	T	replacement, repair, and snow removal.
~			46. Is off street parking available for this property? If yes, number of spaces available: 2 in double driveway
	Ι 4	Т	V. ENVIRONMENTAL CONCERNS
	/		47. Are there now or have there been any underground storage tanks on the property? ( Heating fuel),
			( Propane), ( Septic), or ( Other:). If yes, describe locations in XVI.  48. If the tank was abandoned, was it done with all necessary permits and properly abandoned?
	~		49. Are asbestos-containing materials present? <b>If yes, describe in XVI.</b>
	~		50. Are there any lead hazards? (e.g., lead paint, lead pipes, lead in soil.) If yes, describe in XVI.
	1		51. Has the property been tested for toxic or hazardous substances? If yes, describe in XVI and provide the test
	Ť		results.
	/		52. Has the property ever been tested for mold? If yes, provide the test results.
	~		53. Has the illegal manufacture, storage, or use of methamphetamines occurred in the property? If yes, describe
			in XVI.
	~		54. Is there a wastewater spray irrigation system (human or agricultural) installed on or adjacent to the property?
		_	VI. <u>LAND (SOILS, DRAINAGE, AND BOUNDARIES)</u>
<b>/</b>			55. Is there fill soil or other fill material on the property?
	~		56. Are there sliding, settling, earth movement, upheaval, earth stability, or methane gas release problems that
	<b>V</b>		have occurred on the property or in the immediate neighborhood? <b>If yes, describe in XVI.</b> 57. Is any part of the property located in ( a flood zone) and/or ( a wetlands area)?
	V		58. Are there drainage or flood problems affecting the property? <b>If yes, describe in XVI.</b>
-	~	+	59. Do you carry flood insurance? Agent: Policy #
		NA	60. If #59 is yes, what is the annual cost of this policy?
			Note to Buyer: Public and/or private flood insurance options exist for most properties regardless if property is
			located in a flood zone. Inquire about options with a qualified insurance agent.
Page 3	of <b>9</b>	Prop	eris Address: 963 DEVON DRIVEPNEWARK, DE 19711
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Yes	No	*	* Write in <i>U</i> if Unknown or <i>NA</i> if Not Appli requested, place a check mark next to each of further explanation in Section XVI. Seller shall answer the following questions b	correct answer or fill in the correct	answer. Certain answers require a
	~		61. Have you made any insurance claims of	on the property in the past 5 years	3? If ves. describe in XVI.
	~		62. Does the property have standing water		
	Ů		describe in XVI.	•	
	/		63. Are there encroachments or boundary		
	<b>/</b>		64. Are there any ditches crossing or border		
	~		65. Are there any swales crossing the prop	erty that are under the control of	a Soil and Conservation District? <b>If</b>
			yes, describe in XVI.	10	
			66. Have you ever had the property survey 67. Are the boundaries of the property may		: VVI
	<i>\</i>		VII. STRUCTURAL ITEMS	iked in any way? If yes, describe	e III AVI.
		I	·	l abana and If was allocatibe in	VVI
	~	NA	68. Have you made any additions or struct 69. If #68 is yes, was all work done with a		
		NA	70. If #69 is yes, are the permits closed?	if necessary permits and approva	is in compnance with building codes?
	1	1412	71. Is there now or has there ever been any	movement shifting or other pro	oblems with walls or foundations? If
			yes, describe in XVI.	movement, smrting, or other pro	or ioundations. If
	~		72. Has the property, or any improvement	s thereon, ever been damaged by	(Fire), (Smoke), (Wind), or
			(Flood)? If yes, describe in XVI.		
	~		73. Was the structure moved to this site? (		
	/		74. Is there now or has there ever been any		
	~		75. Are there any problems with (Exte	erior walls), (Driveways), (	_Walkways), ( Patios),
			( Decks), ( Porches) or ( Retain	ining walls) on the property? If yo	es, describe in XVI.
/			76. Are there any problems with ( Inter	ior walls), (Ceilings), ( <u>\blacktriangler</u> Flo	pors), or ( <u>V</u> Windows) on the
	<b>V</b>		property? <b>If yes, describe in XVI.</b> 77. Have there been any repairs or other at	tampts to control the cause or aff	Fact of problems described in questions
	•		74, 75, and 76? <b>If yes, describe in XVI.</b>	tempts to control the cause of en	ect of problems described in questions
			78. Is there insulation in the: ( Ceiling)	attic). ( 🗸 Exterior walls). (	Crawlspace/basement), or
			(Other:		orani ispano di cancentono, er
			What type(s) of insulation does your propo	erty have? unknown	
			VIII. TERMITES, INSECTS, AND WI	<u>LDLIFE</u>	
	<b>/</b>		79. Is there now or has there ever been any	infestation by termites or other	wood destroying insects? If yes,
	Ť		describe in XVI.	•	
	~		80. During your ownership, have there been	en any termite or other wood dest	roying insect inspections made on the
			property? If yes, describe in XVI.		
	~		81. Is there now or has there ever been any	damage to the property caused by	by ( Termites),
			Other wood destroying insects), or (		
	-		82. Have there ever been any termite or win XVI.	ood destroying insect treatments	made on the property? If yes, describ
	<b>/</b>		83. Is there or has there ever been an infes	tation of insects? If was describe	ain VVI
	~		84. During your ownership, have there bed		
			in XVI.	and misect control mispections is	induce on the property. If yes, describe
	/		85. Are you aware of any insect control tro	eatments made on the property?	If yes, describe in XVI.
	1		86. Are there now or have there ever been		
	~		87. Is your property currently under warra	nty, or other coverage, by a profe	essional pest control company?
			If yes, name of exterminating company: _		
			IX. BASEMENT AND CRAWL SPACE		
/			88. Does the property have a sump pump?		
~			89. Is there now or has there ever been any		
	_		crawlspace, or other interior areas of the s	•	
	~		90. Have there been any repairs or other at		
	~		crawlspace, or other interior areas of the s		
	<i>'</i>	1	91. Are there any cracks or bulges in the f	toors of foundation walls? If yes,	uescribe iii AVI.
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age <b>4</b>	or <b>9</b>	rror	perty <sup>s</sup> Address: 963 DEVON DRAVE, NEWA	NN, DE 19/11	
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eller's	Initia	ls	Seller's Initials	Buyer's Initials	Buyer's Initials

Yes	No	*	* Write in <i>U</i> if Unknown or <i>NA</i> if Not Applicable, otherwise mark either the Yes or No column. Where selections are requested, place a check mark next to each correct answer or fill in the correct answer. Certain answers require a further explanation in Section XVI.  Seller shall answer the following questions based on Seller's knowledge of the property.		
			X. <u>ROOF</u>		
			92. Date last roof surface installed: 2020 . If all roof surfaces not the same age,		
			explain in XVI.		
		U	93. How many layers of roof material are there (e.g., new shingles over old shingles)?		
	~		94. Are there any problems with the roof, flashing, rain gutters, or skylights? If yes or repaired under your		
			ownership, explain in XVI.		
<u> </u>			95. If under warranty, is warranty transferable?		
			96. Where do your gutters drain? ( 🖊 Surface), ( Drywell), ( Storm Sewers), ( Other:)		
			XI. <u>PLUMBING-RELATED ITEMS</u>		
			97. What is the drinking water source? ( ✓ Municipal), ( County), ( Public Utility),		
			( Private Well), ( Other: City of Newark		
			98. If drinking water is supplied by public utility, name of utility:		
	<b>/</b>		99. Is there a water treatment system? If yes, ( Leased) or ( Owned)?		
		NΑ			
Depth of well? . If more than one well, describe in XVI.					
101. What type of plumbing is used for the Water Supply? ( Copper), ( Lead), ( Cast Iron), ( PEX), ( Polybutylene), ( Galvanized), ( Other/Unknown: )					
( PEX), ( Polybutylene), ( Galvanized), ( Other/Unknown:)					
			102. What type of plumbing is used for Drainage? ( Copper), ( Lead), ( Cast Iron), ( PVC),		
			(Galvanized), (Other/Unknown:mixed)		
			103. Age of Water Heater? Unknown Water heater type: ( Tank), ( Tankless), ( Other:)		
			104. Water Heater Fuel: ( Electric), ( Oil), ( Propane Gas), ( 🖊 Natural Gas)		
			or ( Other:)		
<b>'</b>			105. Are there now or have there ever been any leaks, backups, or other problems relating to any of the plumbing,		
			water, and sewage related items? If yes, describe in XVI.		
<b>/</b>			106. Are there any additions and/or upgrades to the original service? <b>If yes, describe in XVI.</b>		
<b>/</b>			107. If #106 is yes, was the work done by a licensed contractor?		
<i>V</i>			108. If #106 is yes, were the required permits obtained?		
~			109. If #108 is yes, are the permits closed?		
		NA	110. If your drinking water is from a well, when was your water last tested and what were the results of the test?		
			Tested on: Results:		
			111. What is the type of sewage system? ( Public Sewer), ( Community Sewer), ( Septic System),		
			( Cesspool), ( Other) 112. If a septic system, type: ( Gravity Fed), ( Capping Fill), ( LPP), ( Mound),		
		NA	112. If a septic system, type: ( Gravity Fed), ( Capping Fill), ( LPP), ( Mound),		
		377	(Holding Tank), (Other:)		
			113. If a septic system, when was it last pumped?		
		NA	114. If a septic system, has it been inspected by a Class H inspector within the last 36 months, as required by		
		NT N	DNREC regulations? If yes, describe in XVI and provide the test results.		
		MA	115. If a septic system, how many bedrooms is the septic permitted to service?		
	~		116. Are there any shut off, disconnected, or abandoned wells, underground water or sewer tanks on the property?		
		NT 7A	If yes, describe locations in XVI.		
		1144	117. If #116 is yes, were they abandoned with all necessary permits and properly abandoned?		
			XII. <u>HEATING AND AIR CONDITIONING</u>		
			118. How many heating and/or air conditioning systems are on the property? 2 If more than 2, explain		
			in XVI.		
			119. Type of heating system for system #1 ( Forced air), ( Heat pump), ( Mini-Split), ( Baseboard),		
			(Radiator), ( Other:)		
			Type of heating system for system #2 ( Forced air), (Heat pump), (Mini-Split), (Baseboard),		
			(Radiator), ( Other:)		
			120. Type of heating fuel for system #1 (Oil), (Propane Gas), (_PNatural Gas), (Electric),		
			(Solar), (Other:)		
			Type of heating fuel for system #2 (Oil), ( Propane Gas), (Natural Gas), (Electric),		
			( Solar), ( Other:)		
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Seller's					
Seller's	Initia	ls	Seller's Initials Buyer's Initials Buyer's Initials		

Yes	No	*	* Write in <i>U</i> if Unknown or <i>NA</i> if Not Applicable, otherwise mark either the Yes or No column. Where selections are requested, place a check mark next to each correct answer or fill in the correct answer. Certain answers require a further explanation in Section XVI.  Seller shall answer the following questions based on Seller's knowledge of the property.							
			121. Fuel provider for: Heating system #1 Gas Heating System #2:							
			121. Fuel provider for: Heating system #1 Gas Heating System #2:							
			Age of furnace #2: Date of last service:  123. Are there any contractual obligations affecting the fuel supply, tanks, or system(s)? If yes, describe in XVI.							
	V		123. Are there any contractual obligations affecting the fuel supply, tanks, or system(s)? <b>If yes, describe in XVI.</b> 124. Type of air conditioning for system #1 ( Central), ( Window Units), ( Mini-Split), ( Other: )							
			Type of air conditioning for system #2 ( Central), ( Window Units), ( Mini-Split), ( Other:)							
	~		125. Are there any contractual obligations affecting the heating/air conditioning system(s)? <b>If yes, describe in XVI.</b>							
			126. Age of air conditioning system #1: 4 years old Age of air conditioning system #2: Date of last service: unknown Date of last service:							
			Age of air conditioning system #2: Date of last service:							
<b>/</b>			127. Have there been any additions and/or upgrades to the original heating or air conditioning? <b>If yes, describe in XVI.</b>							
			128. If #127 is yes, was the work done by a licensed contractor?							
1			129. If #127 is yes, were the required permits obtained?							
1			130. If #129 is yes, are the permits closed?							
	~		131. Are there any problems with the heating or air conditioning systems? If yes, describe in XVI.							
			XIII. <u>ELECTRICAL SYSTEM</u>							
			132. Who is the electric provider for the property? City of Newark							
		_	133. What type of wiring is in the house? (copper, aluminum, other, etc.) Copper and aluminum							
			134. What is the amp service? (60), (100), (150), (200), (_✓ Other: 220)							
			135. Does the property have ( Circuit Breakers) or ( Fuses)? If more than one electrical panel, describe							
•/			in XVI.							
<u> </u>	~		136. Are there any 220/240 volt circuits? (Other:)							
	•		137. Do fuses blow or circuit breakers trip when two or more appliances are being used at the same time? If describe in XVI.							
	~		138. Are there wall switches, light fixtures, or electrical outlets in need of repair? If yes, explain in XVI.							
	~		139. Is there a permanently affixed generator on the property? What is the fuel source?							
<u> </u>			140. Have there been any additions to the original service?							
•	~		141. Have any (solar) and/or (wind powered) enhancements been made to supplement service? If yes,							
			<b>describe in XVI.</b> Name of solar company? ; If leased, what is the term?							
			Note to Buyer: Transfer of lease is subject to approval by: Buyer must register with the							
			Public Service Commission.							
<u>/</u>			142. If #139, #140, or #141 is yes, was work done by a licensed electrician?							
<u> </u>			143. If #139, #140, or #141 is yes, were the required permits obtained?							
<u> </u>			144. If #143 is yes, is the permit closed?							
			XIV. <u>FIREPLACE OR HEATING STOVE</u>							
		NA	145. How many fireplaces and/or heating stoves are on the property? 0 If more than 2, explain in XV							
			146. Type of fuel for fireplace 1: ( Wood Burning), ( Propane Gas), ( Natural Gas),							
			(Other:)? Type of fuel for fireplace 2: ( Wood Burning), ( Propane Gas), ( Natural Gas),							
			Type of fuel for fireplace 2: ( Wood Burning), ( Propane Gas), ( Natural Gas),							
		NΙΔ	(Other:)? 147. Type of fuel for heating stove 1: (Wood Burning), (Pellet), (Other:)?							
		IIA	Type of fuel for heating stove 2: (Wood Burning), (Pellet), (Other:)?							
		NΔ	148. Was the fireplace or heating stove part of the original house design?							
			149. Was the fireplace or heating stove installed by a professional contractor or manufacturer's representative?							
			150. Are there any problems? If yes, explain in XVI.							
			151. When were the flues/chimneys last cleaned, serviced, or repaired? Explain							
			nature of service or repair in XVI.							
	•		<del>.</del>							
ige <b>6</b>	of <b>9</b>	Pror	Der 199 Address: 963 DEVON DRIVE, PNEWARK, DE 19711							
	Initia		Seller's Initials  Buyer's Initials  Buyer's Initials							
	Initia	_	Seller's Initials Buyer's Initials Buyer's Initials							
11C1 9	1111111	110	benefit a finalis buyer a finalis buyer a finalis							

#### XV. MAJOR APPLIANCES AND OTHER ITEMS

Are	Are the following items in working order? Note: The Agreement of Sale will specify and govern what is included or						
excl	uded. If an item does not exist, leave th	e yes	/no fields blank.				
YES NO			YES NO		YES NO		
Ø	☐ Range with oven		☐ Draperies/Curtains		☐ Wall Mounted Flat Screen TV #		
Ø	☐ Range Hood-exhaust fan		☐ Drapery/Curtain rods		☐ Wall brackets for TV #		
	☐ Cooktop-stand alone	Ø	☐ Shades/Blinds		☐ Surround sound system & controls		
	☐ Wall Oven(s) #		☐ Cornices/Valances		☐ Attached Antenna/Rotor		
Ø	☐ Kitchen Refrigerator		☐ Furnace Humidifier		☐ Garage Opener(s) #		
Ø	□ with icemaker		☐ Smoke Detectors		□ with remote(s) #		
	☐ Refrigerator(s)-additional #		☐ Carbon Monoxide Detectors		☐ Electronic/Smart Door Locks		
<b>∠</b>	☐ Freezer –free standing		☐ Wood Stove		☐ Smart Cameras/Doorbells		
	☐ Ice Maker-free standing		☐ Fireplace Equipment		☐ Smart Thermostat		
Ø	☐ Dishwasher		☐ Fireplace Screen/Doors		☐ Pool Equipment		
	☐ Disposal		☐ Electronic Air Filter		□ Pool cover		
Ø	☐ Microwave		☐ Window A/C Units #		☐ Hot Tub, Equipment		
Ø	□ Washer		☐ Attic fan		□ with cover		
Ø	□ Dryer		☐ Whole house fan	<b>₽</b>	☐ Sheds/Outbuildings #_1		
	☐ Trash Compactor		☐ Bathroom Vents/Fans		☐ Playground Equipment		
	☐ Water Filter		☐ Window Fan(s) #		☐ Irrigation System		
	☐ Water Heater		$\square$ Ceiling Fan(s) # 3		☐ Backup Generator		
<b>☑</b>	□ Sump Pump		☐ Central Vacuum		☐ Water Conditioner (owned)		
<b>₽</b>	☐ Storm Windows/Doors		□ with attachments		☐ Water Conditioner (leased)		
Ø	☐ Screens		☐ Intercoms		☐ Fuel Storage Tank(s) (owned)		
			☐ Satellite Dish		☐ Fuel Storage Tank(s) (leased)		
			□ with controls & Remote(s)		☐ Security/Monitoring Systems (owned)		
					☐ Security/Monitoring Systems (leased)		
					☐ Solar Equipment (owned)		
					☐ Solar Equipment (leased)		

Page 7 of 9 Pro	perty Addres	s: 963 DEVON DR	₩ <b>E</b> PNEWAR	K, DE 19711	
Seller's Initials	MIC	Seller's Initials_	$l \uparrow$	Buyer's Initials	Buyer's Initials
Seller's Initials		Seller's Initials		Buyer's Initials	Buyer's Initials

#### XVI. ADDITIONAL INFORMATION

If you were directed to this section to clarify an answer, or if you indicated there is a problem with any of the items in sections I through XV, provide an explanation of your recollection using common language. Attach additional sheets if needed.

Question	Additional Information			
Number 76		er level; 2 windows with failed balancers, 1 cra	ank not functional on bay window in LR	
Condensate line from HVAC empties into the gap between floor and foundation- area holds moisture  Sewer backed up twice in 2021 when clogged by flushing large quantities of sanitary napkins				
105	Sewer backed up twice in 2021 when	clogged by flushing large quantities of sanitar	y napkins	
106	New air conditioner installed 2020; ga	vanized pipes replaced with PVC piping exce	ept for a 4 foot segment	
	pool was filled in by previous owner in	2003		
	several deck boards need repair and/o	or replacement		
additional				
info	luxury vinyl flooring installed upstairs	hallway and bedrooms 2023		
	washer and dryer purchased in Janua	ry 2022		
	remodeled bathroom on lower level in	2023		
	hot tub purchased/installed in Februa	ry 2021; dedicated electrical line installed for	hot tub in February 2021	
	ditional problem, clarification, or theets Attached 0	r document sheets attached? 🗹 No	Yes.	
Page <b>8</b> of <b>9</b>	Proper® Address: 963 DEVON DI	RIVESNEWARK, DE 19711		
Seller's Initial	M. A.	Buyer's Initials	Buyer's Initials	
Seller's Initial		Buyer's Initials	Buyer's Initials	

DocuSigned by:

#### ACKNOWLEDGMENT OF SELLER

Seller has provided the information contained in this report. This information is, to the best of Seller's knowledge, and belief, complete, true, and accurate. Seller has no knowledge, information, or other reason to believe that any defects or problems with the property have been disclosed to, or discussed with, any Real Estate Agent or Broker involved in the sale of this property, other than those set forth in this report. Seller does hereby indemnify and hold harmless any Real Estate Agent involved in the sale of this property from any liability incurred as a result of any third-party reliance on the disclosures contained herein, or on any subsequent amendment hereto. Seller's Broker and/or Cooperating Broker, if any, is/are hereby authorized to furnish this report to any prospective Buyer. This is a legally binding document. If not understood, an attorney should be consulted.

SELLER Mark J. Casagra	<u>nde</u> Date 4/29/2	024   <u>12:12:5</u> 5 PM EDT	Date
SELLER Docusigned by:  SELLER CESF5BE84DA14E2  Date the contents of this Republic	Date_4/29/2	2024   12:47:37 PM EDT SELLER	
	<u>ACKNOW</u>	LEDGMENT OF BUYER	
condition of the property, and inspected the property and Bu defects in property. Buyer acl property. Buyer understands does not encompass those are being sold in its present cond received and read a signed coadvice and/or inspections of tundertaken by the State, Couknowledge. Buyer further undetermine whether any such project(s) on the property bei signing an Agreement of Sale the County and/or appropriate	It is not relying upon a liver acknowledges the knowledges Seller hat there may be areas of eas. Unless stated oth ition, without warranty of this report. But the property. Buyer unity, or Local Municipal derstands that it is But projects are planned on gurchased, Buyer et, Buyer may review to ease City or Town Plans osed parks and other property and the property of the control	any other information about that Agents are not experts at discompleted this form based us the property of which Seller erwise in my contract with Seties or guarantees of any kind yer may negotiate in the Agred aderstands there may be projected by the property of the property of the property of the property of the projected by the property of the property of the property of the projected by the	apon their knowledge of the has no knowledge and this report eller, the property is real estate by Seller or any Agent. Buyer has element of Sale for other professional exts either planned or being roperty of which the Seller has no
BUYER	Date	BUYER	Date
BUYER	Date	BUYER	Date

# Disclosure of Information on Lead-Based Paint and Lead-Based Paint Hazards Sale of Residential Property

Property:963 DEVON DRIVE, N	NEWARK, DE 19711	MARK J CASAGRANDE AND Seller's Name: ALEXANDER K B TUNNELL				
Seller Instructions: Check the the age of your property and ini checked either box 1 or 3, conti complete the <i>Seller's Disclosur</i> , and sign this form at the bottom checked box 2, sign below to co form.	tial. If you nue to e section below . If you	boxes to 2. was constructed after	to January 1, 1978 January 1, 1978			
that such property may present ex- poisoning in very young children behavioral problems, and impaire real property is required to provid	posure to lead from lead-based paint that may produce permanent neurological dath memory. Lead poisoning also poses a the Purchaser with any information on Purchaser of any known lead-based pain	I property on which a residential dwelling was at may place young children at risk of developing amage, including learning disabilities, reduced a particular risk to pregnant women. The Seller of a lead-based paint hazards from risk assessment in thazards. A risk assessment or inspection for	ng lead poisoning. Lead intelligence quotient, of any interest in residential s or inspections in the			
initialing in each of these two sections (if more than one ow	ner, all owners must select and initial) sed paint and/or lead-based paint hazard	red to complete sections (a and b) by selecting s (CHECK ONE BOX BELOW AND INITIAL ad-based paint hazards are present in the housing				
Becords and reports  My  Select answer and initial	available to the Seller. (CHECK ONE I  Seller has provided the Purchaser based paint and/or lead-based paint has	ased paint and/or lead-based paint hazards in the BOX AND INITIAL):  with all available records and reports pertainin azards in the housing. (list documents below):  rtaining to lead-based paint and/or lead-based p	g to lead-			
Purchaser's Acknowledgement (c) (d) (e) (f)	Purchaser(s) has (check one below):  Received a 10-day opportunity (or or inspection for the presence of lead-	ng Statement above. Il information listed above. et Protect Your Family From Lead In Your Hor mutually agreed upon period) to conduct a risk based paint and/or lead-based paint hazards. t a risk assessment or inspection for the presence	cassessment			
Agent's Acknowledgement – Ini		seller of the Seller's obligation under 42 U.S.C. nsure compliance.	4852(d), and the Seller			
Into Docusigned by ided by the signed		ormation above and certify, to the best of their processing by:    Live Turnell 4/29,   Sellet   F5BE84DA14E2	knowledge, that the /2024   1:10:03 PM EDT Date			
Pulleflisigned by:  Paul Landon  Agontosco5930498	Date Date Date Date	Purchaser  Agent	Date			



#### **RADON DISCLOSURE**

## Required by Chapter 25, Title 6, Section 2572A of the Delaware Code

AND	INDEPEND					
Propert	y Address:	963 DEVON DRIVE,	NEWARK, DE 1	19711		
Delawai dwelling	must provi	res that the seller	any information	in residential real p n about any known i ller's possession.		
The sell	er(s) must a	enswer the followir	ng questions a	nd provide the requi	red information:	
1.	Are you av	vare of the presen	ce of radon in	the property identific	ed above? □Yes ⊠No	
2.	Are you avidentified a	-	tests or inspec	ctions that have bee	n performed on th ⊠Yes □No	ne property
3.		•		e, have you provided your possession?	• • •	h copies of
4.	Identify ea	ch report referred	to in Question	3, including the dat	e of each report:	
Ra	don tested	and passed in 20	018			
By signi	ng this form	, the seller(s) ackr	nowledge(s) th	ne following:		
(	comply with		arding radon o	n and am/are aware disclosure, as provid		•
DocuSig	ned by:			DocuSigned by:		
Mark	<u>J. Casagrau</u>	$\int_{1}^{4/29/2024}   1:$		Alex Tunnell	4/29/2024   1	L:10:03 PM EDT
Selle PBE8	360AC4EF		Date	Sel 197 F5BE84DA14E2		Date
Delawai	re law requi			est in residential rea sent the potential for		
By signi	ng this form	, the buyer(s) ack	nowledge(s) th	ne following:		
1.			•	cs and Remedy for F re to radon, testing for	•	•
2.	I/we have	the option to have	the property is	dentified above teste	ed for radon.	
3.		received copies of s Disclosure above		s and/or inspection เ	eports identified i	n Item 4 of
Buyer			 Date	Buyer		 Date



#### CERTIFIED RADON REPORT

Test performed for:

57.0

60.9

64.0

January 15, 2018

Test Number:

Mark Casagrande and Alex

1249-348

**Property Inspected:** 

963 Devon Dr, Newark, DE 19711

Licensed Radalink Radon Inspector:

D.B.A. A-Pro Home Inspection Service

**Todd Tuvell** 

206 Bohemia Mill Pond Drive

Middletown, DE 19709

Phone:

302-507-3794

Fax:

302-213-0046

Placed By:

Thomas Solarino (+)

Temp. Pressure R.H.

Calibrated:

07/10/2017 - 07/10/2018

4:12 PM

Retrieved By:

Thomas Solarino (+) Unfinished Basement

Min: Avg: 30.0 23

Test Started:

01/12/2018

Test Site:

30.8 31.2

32

Test Ended:

01/15/2018

12:36 PM

Test Duration: 68 hours

Max:

53

(+)State license or certification number unavailable

0.7 pCi/l

**AVERAGE RADON CONCENTRATION:** Test has met minimum EPA sampling duration.

Uncertainty: ± 2.86%

	01/12/2018	01/13/2018	01/14/2018	01/15/2018
<u>Time</u>	pCi/l Flags	pCi/l Flags	pCi/l Flags	pCi/l Flags
00:12 am		Eq.	0.7	0.6
01:12		1.4	0.6	1.3
02:12		1.5	0.6	0.3
03:12		1.2	0.5	0.6
04:12		2.6	0.4	0.5
05:12		1.8	0.4	0.7
06:12		1.7	0.6	1.5
07:12		1.5	0.6	0.9
08:12		1.1	0.7	0.4
09:12		0.9	0.5	1.0
10:12		0.7	0.3	0.8
11:12		0.7	0.3	0.5
12:12 pm		0.3	0.7	0.4
01:12		0.3	0.2	
02:12		1.8	0.4	
03:12		0.4	0.8	
04:12		0.5	0.7	
05:12	Eq.	1.2	0.6	
06:12	Eq.	0.2	0.8	
07:12	Eq.	0.6	0.4	
08:12	Eq.	0.3	0.8	
09:12	Eq.	0.3	0.4	
10:12	Eq.	0.4	0.5	
11:12	Eq.	0.6	0.4	
		- AC Power Disruption; T= uilization Period		

While every effort was made to maintain optimum quality control and EPA Protocol during the testing period, neither Radalink, Inc. or its licensed agents provide any warranty, expressed or implied, for the consequences of erroneous test results. There can be some uncertainty with any measurement due to statistical variations, extreme weather changes, operation of the building, and other factors, Radalink, Inc. and its licensed operators shall not be liable under any charge or claim for losses, claims, charges, fees, demands, expenses, or damages resulting from a radon test. This report is subject to the terms on the last page of the document.

Radalink, Inc. NRPP Cert.: 101381AL1

**RADON MONITORS** Page 1 of 4

# **ENVIRONMENTAL DATA**

1249-348

MONITOR-TEST NUMBER:

Property Inspected:

963 Devon Dr Newark, DE 19711

															ŝ.										
_	품	23	23	23	23	23	23	23	23	23	23	23	23	23											
01/15/2018	InHg	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.0	31.0											
01/7	Temp	59.0	59.0	59.0	59.0	0.09	62.0	62.0	62.0	62.0	0.09	59.0	59.0	59.0											4
<b>~</b>	품	30	56	56	56	27	27	27	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23
01/14/2018	InHg	31.0	31.0	31.0	31.0	31.0	31.0	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.1	31.2	31.1	31.1
01/1	Temp	0.09	59.0	59.0	0.09	0.09	0.09	62.0	62.0	62.0	0.09	59.0	57.0	59.0	59.0	59.0	59.0	59.0	0.09	62.0	62.0	62.0	62.0	62.0	0.09
	된	53	53	53	53	53	20	46	43	44	40	40	40	37	37	37	37	33	33	34	30	30	30	30	30
01/13/2018	윌	30.1	30.1	30.1	30.0	30.1	30.2	30.3	30.4	30.5	30.5	30.5	30.6	9.08	9.08	30.6	30.7	30.7	30.8	30.8	30.8	30.8	30.9	30.9	31.0
01/13	Gmb	62.0	62.0			62.0		0.49				0.09											62.0	62.0	90.09
	- 1																								
	된																		_	(C)	20	0	20	8	<b>м</b>
2018	In Hg																		.3 4	30.3 46					
	Temp In																			-					
_	<u>=</u>																		62	62.0	62	62	62	62	62
	<b>a</b> . t	Æ												m											
	Lime	00:12 s	01:12	02:12	03:12	04:12	05:12	06:12	07:12	08:12	09:12	10:12	11:12	12:12 р	01:12	02:12	03:12	04:12	05:12	06:12	07:12	08:12	09:12	10:12	11:12
						•				_	_				_	_	_	-	_	_	_	_	_		

# **AVERAGE RADON CONCENTRATION:**

0.7 pCi/l

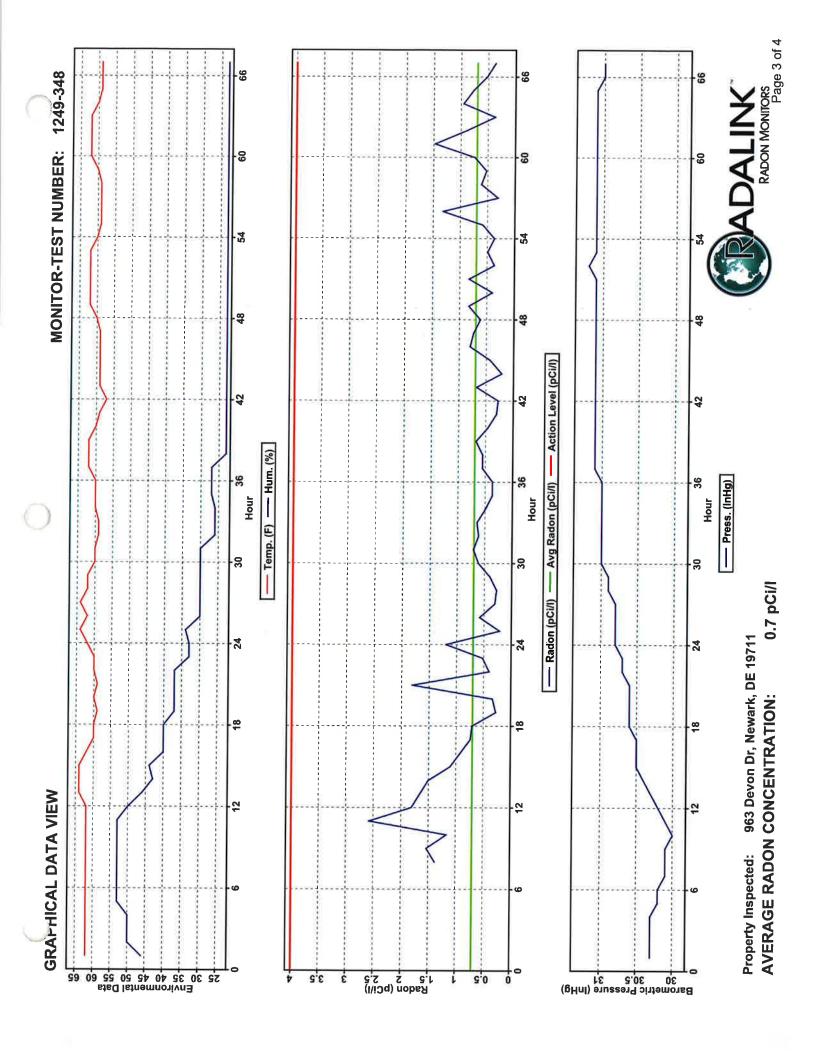


Terry Howell, Quality Assurance Mgr. Radalink, Inc. NRPP 135791T

	Minimum	Average	Maximum	Variance
Temperature:	57.0	6.09	64.0	2.57
Barometric Pressure:	30.0	30.8	31.2	0.13
Relative Humidity:	23	32	53	119.03

NOTE: The first hour's environmental data is excluded from the table above.

Radalink, Inc. 5599 Peachtree Road Atlanta, GA 30341 Phone: (800)295-4655



#### HOW TO INTERPRET YOUR TEST RESULTS

THIS REPORT RELATES ONLY TO THE ITEMS TESTED FOR AND DURING THE MEASUREMENT PERIOD SHOWN.

These results should be interpreted in accordance with the EPA's guidance as published in EPA Publication No. 402-K-008 "Home Buyer's and Seller's Guide to Radon" and EPA Publication No. 402-K92-001, "Citizen's Guide to Radon".

Because radon is the second leading cause of lung cancer, the Surgeon General and the US Environmental Protection Agency (EPA) recommend testing all homes for radon and mitigating those with an average concentration of 4 picoCuries per Liter (4 pCi/lL) or higher. Even if your test result is below 4 pCi/L, EPA suggests testing again sometime in the future.

The Radalink Radon TeleMonitor (NRPP Device # 00472) or The Radalink AirCat® Monitor (NRPP Device # 00477) used to perform this test is EPA and/or NRPP approved and meets the Single Test Option requirements (EPA 402-R-93-003, Section 3.2.3) for conducting radon measurements in the context of a real estate transaction and may be used for determining the necessity for radon mitigation.

Radon reduction systems work! Professionally installed radon mitigation systems can reduce the radon levels in your home by up to 99%. Thousands of people have reduced radon levels in their homes. Maintaining a radon reduction system takes little effort to keep the system working properly and the radon levels low. EPA recommends that you have a qualified contractor (NRPP certified or state licensed) fix your home if radon levels are confirmed to be 4 pCi/L or higher. For more information on how to reduce your radon health risk, contact your state radon office:

ALABAMA 800-582-1866
CALIFORNIA 916-449-5674
WASH. D.C. 202-535-2999
IDAHO 800-445-8647
KANSAS 800-693-5343
MARYLAND 215-814-2090
MISSISSIPPI 800-626-7739
NEVADA 888-723-6610
NEW YORK 800-458-1158
OKLAHOMA 405-702-5162
S. CAROLINA 800-768-0362
UTAH 800-458-0145
W.V. 800-922-1255

ALASKA 800-478-8324
COLORADO 800-846-3986
FLORIDA 800-543-8279
ILLINOIS 217-782-1325
KENTUCKY 502-564-4856
MASS. 800-723-6695
MISSOURI 573-751-6160
N.H. 800-852-3345
N.C. 919-571-4141
OREGON 971-673-0490
S.D.800-438-3367
VERMONT 800-439-8550
WISCONSIN 888-569-7236

ARIZONA 602-255-4845
CONNECTICUT 860-509-7367
GEORGIA 800-745-0037
INDIANA 800-272-9723
LOUISIANA 866-896-5337
MICHIGAN 517-335-8037
MONTANA 800-546-0483
NEW JERSEY 800-648-0394
N. DAKOTA 800-252-6325
PENN. 800-237-2366
TENNESSEE 800-232-1139
VIRGINIA 800-468-0138
WYOMING 800-458-5847

ARKANSAS 501-661-2301 DELAWARE 800-464-4357 HAWAII 808-586-4700 IOWA 800-383-5992 MAINE 207-287-5698 MINNESOTA 800-798-9050 NEBRASKA 800-334-9491 NEW MEXICO 800-219-6157 OHIO 800-523-4439 RHODE ISLAND 401-222-2438 TEXAS 800-293-0753 WASHINGTON 360-236-3253

#### National Safety Council Radon Hotline: 800-644-6999

SURGEON GENERAL HEALTH ADVISORY: "Indoor radon is the second-leading cause of lung cancer in the U.S. and breathing it over prolonged periods can present a significant health risk to families all over the country. More than 20,000 Americans die of radon-related lung cancer every year. It's important to know that this threat is completely preventable. Radon can be detected with a simple test and fixed through well-established venting techniques."

**CONSUMER FEDERATION OF AMERICA**: "Consumers need to know about the health of a house they are considering purchasing, including whether there is a radon problem, and if so, how to fix it." The EPA Home Buyer's and Sellers Guide to Radon provides practical consumer information that every homebuyer needs to know.

**FLORIDA NOTICE TO CLIENTS:** An organization or individual certified by the Florida Dept. of Health to perform radon or radon progeny measurements or radon mitigation services provides this Notice to you. Any questions, comments, or complaints regarding the persons performing these measurement or mitigation services may be directed to the Florida Dept. of Health, Bureau of Facility Programs, Radon Indoor Air Quality, 4052 Bald Cypress Way, Bin #A08, Tallahassee, Florida 32399-1710, (800-543-8279).

MAINE NOTICE TO CLIENTS: As per 22 MRSA, Sec. 771, results of this test will be reported to the Maine Dept. of Health and Human Services. Any questions, comments, or complaints concerning individuals or firms providing radon related services in Maine should be directed to: Radiation Control Program 11 State House Station Augusta, ME 04333-0010 (207-287-5698).

**PENNSYLVANIA NOTICE TO CLIENTS:** The Radon Certification Act requires that anyone who provides radon-related service or product to the general public must be certified by the Pennsylvania Department of Environmental Protection. You are entitled to evidence of certification from any person who provides such services or products. You are also entitled to a price list for services or products offered. All radon measurement data will be sent to the Department as required in the Act and will be kept confidential. If you have any questions, comments or complaints concerning persons who provide radon-related services, please contact the Department at the Bureau of Radiation Protection, Dept. Of Environmental Protection, P.O. Box 8469, Harrisburg, PA 17105-8469, (717-783-3594).

RHODE ISLAND NOTICE TO CLIENTS: This notice is provided to you by an organization or individual licenses and/or certified by the Rhode Island Dept. of Health to perform radon measurements. Any questions, comments, or complaints regarding the person performing these measurements may be directed to the RI Dept. of Health, Office of Occupational and Radiological Health, 3 Capitol Hill Room 206, Providence RI 0908-5097, (401-222-2438).

Rev: March 2016

#### **SCHOOL FEEDER PATTERN**

# **Christina School District 2023-2024 School Year**

West Park Place Elementary School Grades: KN-05 Address: 193 West Park Place City: Newark Zip Code: 19711

> Shue-Medill Middle School Grades: 06-08 Address: 1500 Capitol Trail City: Newark Zip Code: 19711

Newark High School
Grades: 09-12
Address: 750 East Delaware Avenue
City: Newark
Zip Code: 19711