

# SELLER'S DISCLOSURE NOTICE

CONCERNING THE PROPERTY AT

(Street Address and City)

THIS NOTICE IS A DISCLOSURE OF SELLER'S KNOWLEDGE OF THE CONDITION OF THE PROPERTY AS OF THE DATE SIGNED BY SELLER AND IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE PURCHASER MAY WISH TO OBTAIN. IT IS NOT A WARRANTY OF ANY KIND BY SELLER OR SELLER'S AGENTS.

Seller ☒ is ☐ is not occupying the property.

If unoccupied, how long since Seller has occupied the property? N/A

1. The property has the items checked below:

Write Yes (Y), No (N), or Unknown (U).

|                                                                          |                                                                     |                                                                                   |
|--------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Range                                | <input checked="" type="checkbox"/> Oven                            | <input checked="" type="checkbox"/> Microwave                                     |
| <input checked="" type="checkbox"/> Dishwasher                           | <input checked="" type="checkbox"/> Trash Compactor                 | <input checked="" type="checkbox"/> Disposal                                      |
| <input checked="" type="checkbox"/> Washer/Dryer Hookups                 | <input checked="" type="checkbox"/> Window Screens                  | <input checked="" type="checkbox"/> Rain Gutters                                  |
| <input checked="" type="checkbox"/> Security System                      | <input checked="" type="checkbox"/> Fire Detection System           | <input checked="" type="checkbox"/> Intercom System                               |
| <input checked="" type="checkbox"/> Smoke Detector                       | <input checked="" type="checkbox"/> Smoke Detector Hearing Impaired | <input checked="" type="checkbox"/> Carbon Monoxide Alarm                         |
| <input checked="" type="checkbox"/> Emergency Escape                     | <input checked="" type="checkbox"/> Ladder(s)                       | <input checked="" type="checkbox"/> TV Antenna                                    |
| <input checked="" type="checkbox"/> Cable TV Wiring                      | <input checked="" type="checkbox"/> Satellite Dish                  | <input checked="" type="checkbox"/> Ceiling Fan(s)                                |
| <input checked="" type="checkbox"/> Attic Fan(s)                         | <input checked="" type="checkbox"/> Exhaust Fan(s)                  | <input checked="" type="checkbox"/> Central A/C                                   |
| <input checked="" type="checkbox"/> Central Heating                      | <input checked="" type="checkbox"/> Wall/Window Air Conditioning    | <input checked="" type="checkbox"/> Plumbing System                               |
| <input checked="" type="checkbox"/> Septic System                        | <input checked="" type="checkbox"/> Public Sewer System             | <input checked="" type="checkbox"/> Patio/Decking                                 |
| <input checked="" type="checkbox"/> Outdoor Grill                        | <input checked="" type="checkbox"/> Fences                          | <input checked="" type="checkbox"/> Pool                                          |
| <input checked="" type="checkbox"/> Sauna                                | <input checked="" type="checkbox"/> Spa                             | <input checked="" type="checkbox"/> Hot Tub                                       |
| <input checked="" type="checkbox"/> Pool Equipment                       | <input checked="" type="checkbox"/> Pool Heater                     | <input checked="" type="checkbox"/> Automatic Lawn Sprinkler System               |
| <input checked="" type="checkbox"/> Fireplace(s) & Chimney (Woodburning) | <input checked="" type="checkbox"/> Fireplace(s) & Chimney (Mock)   | <input checked="" type="checkbox"/> Natural Gas Lines                             |
| <input checked="" type="checkbox"/> Gas Fixtures                         |                                                                     |                                                                                   |
| <input checked="" type="checkbox"/> Liquid Propane Gas:                  | <input checked="" type="checkbox"/> LP on Property (Captive)        | <input checked="" type="checkbox"/> LP Community (Captive)                        |
| Garage: <input checked="" type="checkbox"/> Attached                     | <input checked="" type="checkbox"/> Not Attached                    | <input checked="" type="checkbox"/> Carport                                       |
| Garage Door Opener(s):                                                   | <input checked="" type="checkbox"/> Electronic                      | <input checked="" type="checkbox"/> Control(s)                                    |
| Water Heater: <input checked="" type="checkbox"/> Gas                    | <input checked="" type="checkbox"/> Electric                        |                                                                                   |
| Water Supply: <input checked="" type="checkbox"/> City                   | <input checked="" type="checkbox"/> Well                            | <input checked="" type="checkbox"/> MUD <input checked="" type="checkbox"/> Co-op |
| Roof Type: <u>Asphalt Shingle</u>                                        | Age: <u>2 years</u>                                                 | (approx)                                                                          |

Are you (Seller) aware of any of the above items that are not in working condition, that have known defects, or that are in need of repair? ☐ Yes ☒ No ☐ Unknown.

If yes, then describe. (Attach additional sheets if necessary):

2. Does the property have working smoke detectors installed in accordance with the smoke detector requirements of Chapter 766, Health and Safety Code? ☒ Yes ☐ No ☐ Unknown.

If the answer to the question above is no or unknown, explain. (Attach additional sheets if necessary):

\*Chapter 766 of the Health and Safety Code requires one-family or two-family dwellings to have working smoke detectors installed in accordance with the requirements of the building code in effect in the area in which the dwelling is located, including performance, location, and power source requirements. If you do not know the building code requirements in effect in your area, you may check unknown above or contact your local building official for more information. A buyer may require a seller to install smoke detectors for the hearing impaired if: (1) the buyer or a member of the buyer's family who will reside in the dwelling is hearing impaired; (2) the buyer gives the seller written evidence of the hearing impairment from a licensed physician; and (3) within 10 days after the effective date, the buyer makes a written request for the seller to install smoke detectors for the hearing impaired and specifies the locations for installation. The parties may agree who will bear the cost of installing the smoke detectors and which brand of smoke detectors to install.

3. Are you (Seller) aware of any known defects/malfunctions in any of the following?  
Write Yes (Y) if you are aware, write No (N) if you are not aware.

|                                                             |                                                        |                                                       |
|-------------------------------------------------------------|--------------------------------------------------------|-------------------------------------------------------|
| <input checked="" type="checkbox"/> Interior Walls          | <input checked="" type="checkbox"/> Ceilings           | <input checked="" type="checkbox"/> Floors            |
| <input checked="" type="checkbox"/> Exterior Walls          | <input checked="" type="checkbox"/> Doors              | <input checked="" type="checkbox"/> Windows           |
| <input checked="" type="checkbox"/> Roof                    | <input checked="" type="checkbox"/> Foundation/Slab(s) | <input checked="" type="checkbox"/> Basement          |
| <input checked="" type="checkbox"/> Walls/Fences            | <input checked="" type="checkbox"/> Driveways          | <input checked="" type="checkbox"/> Sidewalks         |
| <input checked="" type="checkbox"/> Plumbing/Sewers/Septics | <input checked="" type="checkbox"/> Electrical Systems | <input checked="" type="checkbox"/> Lighting Fixtures |

☒ Other Structural Components (Describe):

If the answer to any of the above is yes, explain. (Attach additional sheets if necessary):

4. Are you (Seller) aware of any of the following conditions?  
Write Yes (Y) if you are aware, write No (N) if you are not aware.

- |                                                                             |                                                                                      |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> Active Termites (includes wood destroying insects) | <input type="checkbox"/> Previous Structural or Roof Repair                          |
| <input type="checkbox"/> Termite or Wood Rot Damage Needing Repair          | <input type="checkbox"/> Hazardous or Toxic Waste                                    |
| <input type="checkbox"/> Previous Termite Damage                            | <input type="checkbox"/> Asbestos Components                                         |
| <input type="checkbox"/> Previous Termite Treatment                         | <input type="checkbox"/> Urea formaldehyde Insulation                                |
| <input type="checkbox"/> Previous Flooding                                  | <input type="checkbox"/> Radon Gas                                                   |
| <input type="checkbox"/> Improper Drainage                                  | <input type="checkbox"/> Lead Based Paint                                            |
| <input type="checkbox"/> Water Penetration                                  | <input type="checkbox"/> Aluminum Wiring                                             |
| <input type="checkbox"/> Located in 100-Year Floodplain                     | <input type="checkbox"/> Previous Fires                                              |
| <input type="checkbox"/> Present Flood Insurance Coverage                   | <input type="checkbox"/> Unplatted Easements                                         |
| <input type="checkbox"/> Landfill, Settling, Soil Movement, Fault Lines     | <input type="checkbox"/> Subsurface Structure or Pits                                |
| <input type="checkbox"/> Single Blockable Main Drain in Pool/Hot Tub/Spa*   | <input type="checkbox"/> Previous Use of Premises for Manufacture of Methamphetamine |

If the answer to any of the above is yes, explain. (Attach additional sheets if necessary):

\*A single blockable main drain may cause a suction entrapment hazard for an individual.

5. Are you (Seller) aware of any item, equipment, or system in or on the property that is in need of repair? ☐ Yes (if you are aware) ☒ No (if you are not aware). If yes, explain (Attach additional sheets if necessary):

6. Are you (Seller) aware of any of the following?

Write Yes (Y) if you are aware, write No (N) if you are not aware.

- ☐ Room additions, structural modifications, or other alterations or repairs made without necessary permits or not in compliance with building codes in effect at that time.
- ☒ Homeowners' Association or maintenance fees or assessments.
- ☐ Any "common area" (facilities such as pools, tennis courts, walkways, or other areas) co-owned in undivided interest with others.
- ☐ Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the property.
- ☐ Any lawsuits directly or indirectly affecting the property.
- ☐ Any condition on the property which materially affects the physical health or safety of an individual.
- ☐ Any rainwater harvesting system located on the property that is larger than 500 gallons and that uses a public water supply as an auxiliary water source.
- ☐ Any portion of the property that is located in a groundwater conservation district or a subsidence district.

If the answer to any of the above is yes, explain. (Attach additional sheets if necessary):

7. If the property is located in a coastal area that is seaward of the Gulf Intracoastal Waterway or within 1,000 feet of the mean high tide bordering the Gulf of Mexico, the property may be subject to the Open Beaches Act or the Dune Protection Act (Chapter 61 or 63, Natural Resources Code, respectively) and a beachfront construction certificate or dune protection permit may be required for repairs or improvements. Contact the local government with ordinance authority over construction adjacent to public beaches for more information.

  
Date

  
Signature of Seller

The undersigned purchaser hereby acknowledges receipt of the foregoing notice.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Purchaser/Buyer