

## TEXAS ASSOCIATION OF REALTORS®

SELLER'S DISCLOSURE NOTICE

©Texas Association of REALTORS®, Inc. 2018

Section 5.008, Property Code requires a seller of residential property of not more than one dwelling unit to deliver a Seller's Disclosure Notice to a buyer on or before the effective date of a contract. This form complies with and contains additional disclosures which exceed the minimum disclosures required by the Code.

CONCERNING THE PROPERTY AT \_

5218 N FM 1047

Star, TX 76880

| DATE SIGNED BY SELI                                                                | _EF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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| Со       | ncernin            | 5218 N FM 1047 ning the Property at Star, TX 76880                                                                                                                                                                                                                                                                                                                                         |                |
|----------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| If t     | he ansv            | nswer to any of the items in Section 3 is yes, explain (attach additional sheets if necessary).                                                                                                                                                                                                                                                                                            |                |
| wh       | ich ha             | *A single blockable main drain may cause a suction entrapment hazard for an individual.  1. Are you (Seller) aware of any item, equipment, or system in or on the Property that is in ne has not been previously disclosed in this notice?     yes   no   If yes, explain (attach additionary):                                                                                            | onal sheets if |
| Second Y | ction 5<br>t aware | 15. Are you (Seller) aware of any of the following (Mark Yes (Y) if you are aware. Mark No (                                                                                                                                                                                                                                                                                               | N) if you are  |
|          | o d                | Homeowners' associations or maintenance fees or assessments. If yes, complete the following:  Name of association:  Manager's name:  Fees or assessments are: \$ per and are: mandatory  Any unpaid fees or assessment for the Property? yes (\$ ) no  If the Property is in more than one association, provide information about the other association attach information to this notice. |                |
|          | d                  | Any common area (facilities such as pools, tennis courts, walkways, or other) co-owned in undiversely under the following:  Any optional user fees for common facilities charged?   yes  no If yes, describe:                                                                                                                                                                              |                |
|          | d                  | Any notices of violations of deed restrictions or governmental ordinances affecting the condition Property.                                                                                                                                                                                                                                                                                | or use of the  |
|          | o o                | Any lawsuits or other legal proceedings directly or indirectly affecting the Property. (Includes, but to: divorce, foreclosure, heirship, bankruptcy, and taxes.)                                                                                                                                                                                                                          | is not limited |
|          | Q/                 | Any death on the Property except for those deaths caused by: natural causes, suicide, or accident the condition of the Property.                                                                                                                                                                                                                                                           | t unrelated to |
|          | O'                 | Any condition on the Property which materially affects the health or safety of an individual.                                                                                                                                                                                                                                                                                              |                |
|          | 0                  | Any repairs or treatments, other than routine maintenance, made to the Property to remediate e hazards such as asbestos, radon, lead-based paint, urea-formaldehyde, or mold.  If yes, attach any certificates or other documentation identifying the extent of the remediation certificate of mold remediation or other remediation).                                                     |                |
|          | 0/                 | Any rainwater harvesting system located on the Property that is larger than 500 gallons and public water supply as an auxiliary water source.                                                                                                                                                                                                                                              | that uses a    |
|          | Q'                 | The Property is located in a propane gas system service area owned by a propane distrib retailer.                                                                                                                                                                                                                                                                                          | ution system   |
| П        | M                  | Any portion of the Property that is located in a groupdwater conservation district or a subsidence dis                                                                                                                                                                                                                                                                                     | etriot         |

(TAR-1406) 01-01-16

Initialed by: Buyer: \_\_\_\_\_,

and Sallar B

Page 3 of 5

| Concerning the Pro                                        | perty at                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 5218 N FM 104<br>Star, TX 768                                                                       |                                                               |                                                   |
|-----------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------------|
| If the answer to any                                      | of the items in S                                                                 | ection 5 is yes, explain (at                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ttach additional sheets                                                                             | s if necessary):                                              |                                                   |
| Section 7. Within regularly provide                       | the last 4 year                                                                   | not attached a survey of<br>rs, have you (Seller) rec<br>who are either licensed<br>es, attach copies and comp                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | eived any written in<br>as inspectors or of                                                         |                                                               |                                                   |
| Inspection Date                                           | Туре                                                                              | Name of Inspector                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                     |                                                               | No. of Pages                                      |
|                                                           |                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                     |                                                               |                                                   |
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| Section 8. Check  Homestead  Wildlife Mana                | operty. A buyer<br>any tax exemp<br>agement                                       | ely on the above-cited re<br>should obtain inspection<br>tion(s) which you (Seller<br>Senior Citizen<br>Agricultural                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ns from inspectors currently claim for Disable                                                      | chosen by the buy the Property: ed ed Veteran                 |                                                   |
| provider?  yes                                            | ☑ no                                                                              | ever filed a claim er received proceeds for                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                     |                                                               |                                                   |
| insurance claim o                                         | r a settlement o                                                                  | r award in a legal processs of the second of | eding) and not used                                                                                 | the proceeds to m                                             | nake the repairs for                              |
|                                                           |                                                                                   | ang gara-atawa kata apa da maga apa inta ang katara kana kata apa apa atawa atawa atawa atawa atawa apa apa ata atawa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                     |                                                               |                                                   |
| requirements of C                                         | hapter 766 of th                                                                  | ave working smoke detree Health and Safety Cod                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | e?* Junknown                                                                                        |                                                               |                                                   |
| smoke dete<br>which the d<br>know the b                   | ectors installed in<br>welling is located                                         | and Safety Code require<br>accordance with the requirent, including performance, lifements in effect in your                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | uirements of the build<br>ocation, and power so                                                     | ding code in effect i<br>ource requirements.                  | in the area in<br>If you do not                   |
| of the buye<br>evidence of<br>the buyer i<br>specifies th | r's family who wi<br>f the hearing impo<br>makes a written<br>ne locations for ir | to install smoke detectors<br>Il reside in the dwelling is<br>airment from a licensed ph<br>request for the seller to<br>stallation. The parties ma<br>f smoke detectors to insta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | hearing-impaired; (2)<br>lysician; and (3) withir<br>install smoke detecto<br>y agree who will beal | the buyer gives the n 10 days after the eors for the hearing- | seller written<br>effective date,<br>impaired and |
| (TAR-1406) 01-01-                                         | -16 In                                                                            | tialed by: Buyer:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ., and Selle                                                                                        | r: 8/V , AV                                                   | Page 4 of 5                                       |

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210 acres Brent &

| Concerning the Property at                                                                                                                                           | 5218 N FM 1047<br>Star, TX 76880                                                                                                                                                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| broker(s), has instructed or influenced Seller to provide inaccu                                                                                                     |                                                                                                                                                                                                                                                                            |
| Ecent Vol 6-11-12                                                                                                                                                    | Signature of Seller The Land Date                                                                                                                                                                                                                                          |
| Signature of Seller  Printed Name: SIMM Date                                                                                                                         | Signature of Seller  Printed Name:  Augustudeur-Uth  Date                                                                                                                                                                                                                  |
| Printed Name: PICNT VIII                                                                                                                                             | Printed Name: Wall Value Voth                                                                                                                                                                                                                                              |
| ADDITIONAL NOTICES TO BUYER:                                                                                                                                         |                                                                                                                                                                                                                                                                            |
| registered sex offenders are located in certain zip code                                                                                                             | tabase that the public may search, at no cost, to determine if areas. To search the database, visit <a href="https://www.txdps.state.tx.us">www.txdps.state.tx.us</a> . certain areas or neighborhoods, contact the local police                                           |
| mean high tide bordering the Gulf of Mexico, the prop<br>Protection Act (Chapter 61 or 63, Natural Resources Co                                                      | ord of the Gulf Intracoastal Waterway or within 1,000 feet of the perty may be subject to the Open Beaches Act or the Dune code, respectively) and a beachfront construction certificate or improvements. Contact the local government with ordinance or more information. |
| (3) If you are basing your offers on square footage, me independently measured to verify any reported information                                                    | easurements, or boundaries, you should have those items on.                                                                                                                                                                                                                |
| (4) The following providers currently provide service to the p                                                                                                       | property:                                                                                                                                                                                                                                                                  |
| Electric:                                                                                                                                                            | phone #:                                                                                                                                                                                                                                                                   |
| Sewer:                                                                                                                                                               |                                                                                                                                                                                                                                                                            |
| Water:                                                                                                                                                               |                                                                                                                                                                                                                                                                            |
| Cable:                                                                                                                                                               |                                                                                                                                                                                                                                                                            |
| Trash:                                                                                                                                                               |                                                                                                                                                                                                                                                                            |
| Natural Gas:                                                                                                                                                         | phone #:                                                                                                                                                                                                                                                                   |
| Phone Company:                                                                                                                                                       |                                                                                                                                                                                                                                                                            |
| Propane:                                                                                                                                                             |                                                                                                                                                                                                                                                                            |
| (5) This Seller's Disclosure Notice was completed by Seller<br>as true and correct and have no reason to believe it to<br>AN INSPECTOR OF YOUR CHOICE INSPECT THE PR | as of the date signed. The brokers have relied on this notice be false or inaccurate. YOU ARE ENCOURAGED TO HAVE ROPERTY.                                                                                                                                                  |
| The undersigned Buyer acknowledges receipt of the foregoing                                                                                                          | notice,                                                                                                                                                                                                                                                                    |
|                                                                                                                                                                      |                                                                                                                                                                                                                                                                            |
|                                                                                                                                                                      | Signature of Buyer Date                                                                                                                                                                                                                                                    |
| Printed Name:                                                                                                                                                        | Printed Name:                                                                                                                                                                                                                                                              |



## TEXAS ASSOCIATION OF REALTORS®

## **INFORMATION ABOUT ON-SITE SEWER FACILITY**

USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF THE TEXAS ASSOCIATION OF REALTORS® IS NOT AUTHORIZED. ©Texas Association of REALTORS®, Inc., 2004

| COL  | NCERNING THE                                | PROPERTY AT                                 |                          | 5218 N FM 1047<br>Star, TX 76880                                                                               |                              |
|------|---------------------------------------------|---------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------|------------------------------|
| A.   | DESCRIPTION                                 | OF ON-SITE SEV                              | WER FACILITY ON          | PROPERTY:                                                                                                      |                              |
|      | (1) Type of Trea                            | -                                           | Septic Tank              |                                                                                                                | Unknown                      |
|      | (2) Type of Dist                            | ribution System:_                           | infiltrator              | panels                                                                                                         | Unknown                      |
|      | (3) Approximate                             | e Location of Drain                         | n Field or Distribution  | on System:                                                                                                     | Unknown                      |
|      | (4) Installer:                              | Horton:                                     | s buckh                  | ve (Roger HoA)<br>2008                                                                                         | Unknown                      |
| B.   | MAINTENANC                                  | E INFORMATION:                              | •                        |                                                                                                                |                              |
|      | If yes, name<br>Phone:                      | e of maintenance of contracts must be       | contractor: contract exp | fect for the on-site sewer fa<br>iration date:<br>ate aerobic treatment and ce                                 |                              |
|      | (2) Approximate                             | e date any tanks w                          | vere last pumped?        | останали применения применения в |                              |
|      |                                             |                                             |                          | e on-site sewer facility?                                                                                      | ☐ Yes ☐ No                   |
|      | (4) Does Seller                             | have manufacture                            | er or warranty infor     | mation available for review?                                                                                   | ☐ Yes ☑ No                   |
| C.   | PLANNING MA                                 | TERIALS, PERM                               | ITS, AND CONTRA          | ACTS:                                                                                                          |                              |
|      | planning                                    | materials  per                              | rmit for original ins    | r facility are attached:<br>tallation  final inspection<br>mation  warranty informa                            | when OSSF was installed tion |
|      |                                             |                                             |                          | ials that describe the on-s                                                                                    |                              |
|      |                                             | necessary for l to the buyer.               | a buyer to have          | the permit to operate                                                                                          | an on-site sewer facility    |
| (TAF | R-1407) 1-7-04                              | Initialed for Ide                           | entification by Buyer    | and Seller                                                                                                     | Page 1 of 2                  |
|      | Real Estate, 715 E US 8<br>e: (254)471-5738 | 4 Hwy Evant, TX 76525<br>Fax: (254)471-5978 | Calvin Burks             | V                                                                                                              | 210 acres Brent &            |

D. INFORMATION FROM GOVERNMENTAL AGENCIES: Pamphlets describing on-site sewer facilities are available from the Texas Agricultural Extension Service. Information in the following table was obtained from Texas Commission on Environmental Quality (TCEQ) on 10/24/2002. The table estimates daily wastewater usage rates. Actual water usage data or other methods for calculating may be used if accurate and acceptable to TCEQ.

| <u>Facility</u>                                           | Usage (gal/day)<br>without water-<br>saving devices | Usage (gal/day)<br>with water-<br>saving devices |
|-----------------------------------------------------------|-----------------------------------------------------|--------------------------------------------------|
| Single family dwelling (1-2 bedrooms; less than 1,500 sf) | 225                                                 | 180                                              |
| Single family dwelling (3 bedrooms; less than 2,500 sf)   | 300                                                 | 240                                              |
| Single family dwelling (4 bedrooms; less than 3,500 sf)   | 375                                                 | 300                                              |
| Single family dwelling (5 bedrooms; less than 4,500 sf)   | 450                                                 | 360                                              |
| Single family dwelling (6 bedrooms; less than 5,500 sf)   | 525                                                 | 420                                              |
| Mobile home, condo, or townhouse (1-2 bedroom)            | 225                                                 | 180                                              |
| Mobile home, condo, or townhouse (each add'l bedroom)     | 75                                                  | 60                                               |

This document is not a substitute for any inspections or warranties. This document was completed to the best of Seller's knowledge and belief on the date signed. Seller and real estate agents are not experts about on-site sewer facilities. Buyer is encouraged to have the on-site sewer facility inspected by an inspector of Buyer's choice.

| Funt by Signature of Seller Brent Voth | 6-11-XIL<br>Date | Signature of Seller Lana Voth | <i>le-12-</i> 7<br>Date |
|----------------------------------------|------------------|-------------------------------|-------------------------|
| Receipt acknowledged by:               |                  |                               |                         |
| Signature of Buyer                     | Date             | Signature of Buyer            | Date                    |