

## TEXAS ASSOCIATION OF REALTORS®

## **SELLER'S DISCLOSURE NOTICE**

©Texas Association of REALTORS®, Inc. 2014

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.

AMILTON, TX 76531

CONCERNING THE PROPERTY AT 3840 CR 622

| THIS NOTICE IS A DISC<br>DATE SIGNED BY SELI<br>MAY WISH TO OBTAIN<br>AGENT. | LEF<br>I. IT | R Al | ND<br>NC | IS NO           | TC                  | ARR   | SI                    | JBSTITUTE FOR A<br>NTY OF ANY KIND  | NY<br>BY | ' 5 | NSF  | LE       | CTIONS OF<br>R, SELLER | R WARRANTIES TI<br>'S AGENTS, OR A | HE E      | SUY<br>HTC | /ER      |
|--|--------------|------|----------|-----------------|---------------------|-------|-----------------------|-------------------------------------|----------|-----|------|----------|------------------------|------------------------------------|-----------|------------|----------|
| Seller ☑ is ☐ is not on  | ccup         | pyin | g th     | he Pro          | pe                  | erty. | If                    | unoccupied (by Sel                  | ler)     | , r | ow   | lo       | ng since Sel           | ler has occupied the               | e Pro     | per        | rty?     |
| Section 1. The Proper  | ty h         | as   | the      | items           | s n                 | nark  | (e                    |                                     | (Y       | ).  | No   | (N       | ), or Unkno            | wn (U).)                           | /ev       | P          |          |
| Item   |              | N    |          | 7 -             |                     | m     |                       |                                     | Y        | _   | N L  | _        | Item                   |                                    | Y         | N          | U        |
| Cable TV Wiring  | V            |      |          |                 | Liquid Propane Gas: |       | V                     | T                                   | 1        | 1   |      | ∃sump    | +                      | V                                  |           |            |          |
| Carbon Monoxide Det.   |              | 1    |          |                 | -L                  | P C   | on                    | munity (Captive)                    |          | 1   | 1    | 7        | Rain Gu                | 1                                  | 1         |            |          |
| Ceiling Fans   | V            |      |          |                 | -L                  | P or  | ıF                    | roperty                             | V        | T   |      | 1        | Range/                 |                                    | +         | 1          |          |
| Cooktop  | V            |      |          |                 | Ho                  | ot Tu | ıb                    |                                     | V        | T   | 1    | 1        |                        | tic Vents                          | 1         | $\vdash$   |          |
| Dishwasher   | V            |      |          |                 | Int                 | terco | om                    | System                              |          | 1   | 1    | 1        | Sauna                  | iio vointo                         | +         | V          |          |
| Disposal   | V            |      |          |                 | Mi                  | crov  | va                    | ve                                  | V        | 1   | 1    | 1        |                        | Detector                           | 1         |            |          |
| Emergency Escape   |              | 1    |          |                 | Οι                  | utdo  | or                    | Grill                               |          |     |      |          |                        | Detector - Hearing                 | 1         |            |          |
| Ladder(s)  |              | /    |          |                 |                     |       |                       |                                     | 1        |     |      |          | Impaire                | 0                                  |           | /          |          |
| Exhaust Fans   | V            |      |          |                 | Patio/Decking       |       |                       | V                                   | T        | T   | 1    | Spa      |                        |                                    | 1         |            |          |
| Fences   | 1            |      |          | Plumbing System |                     |       | V                     |                                     | T        | 1   | -    | ompactor |                        | 1                                  |           |            |          |
| Fire Detection Equip.  |              | ~    |          |                 | Pool                |       |                       |                                     | 1        | 1   | 1    | TV Ante  |                        |                                    | 1         |            |          |
| French Drain   |              |      | 1        |                 | Pool Equipment      |       |                       |                                     | V        | 1   | 1    | Washer   | /Dryer Hookup          | 1                                  |           |            |          |
| Gas Fixtures   |              | ~    |          |                 | Po                  | ol N  | lai                   | nt. Accessories                     |          | V   | 1    | 1        |                        | Screens                            | V         |            |          |
| Natural Gas Lines  |              | V    |          |                 | Po                  | ol H  | lea                   | ater                                |          | 1   | /    |          | Public S               | ewer System                        |           |            |          |
| Item   |              |      |          | Y               | ,                   | NU    | J                     |                                     |          |     | Add  | iti      | onal Inform            | ation                              |           |            | $\neg$   |
| Central A/C  |              |      | L        | 1               | 1                   | 1     | delectric □ gas       | nı                                  |          |     |      |          | 2                      |                                    |           |            |          |
| Evaporative Coolers  |              |      |          | T               | 1                   | 1     | number of units:      |                                     |          |     |      |          |                        |                                    |           | $\dashv$   |          |
| Wall/Window AC Units   |              |      |          |                 | 1                   | V     | 1                     | number of units:                    |          |     |      |          |                        |                                    |           |            | $\neg$   |
| Attic Fan(s)   |              |      |          |                 | 1                   | /     | 1                     | if yes, describe:                   |          |     |      |          |                        | $\dashv$                           |           |            |          |
| Central Heat   |              |      |          | V               | 1                   |       | 1                     | ☑ electric ☐ gas                    | nı       | un  | nbei | 0        | units:                 | 2                                  |           |            | $\dashv$ |
| Other Heat   |              |      |          |                 | T                   | /     | T                     | if yes, describe:                   |          |     |      |          |                        |                                    |           |            |          |
| Oven   |              |      |          | V               | 1                   |       | 1                     | number of ovens: 2                  |          |     |      |          |                        |                                    | $\exists$ |            |          |
| Fireplace & Chimney  |              |      |          | V               | 1                   |       | T                     | wood                                |          |     |      |          |                        |                                    |           | -          |          |
| Carport  |              |      |          | V               |                     |       |                       | ☑ attached ☐ not attached           |          |     |      |          |                        |                                    | $\exists$ |            |          |
| Garage   |              |      |          |                 | 0                   | 7     |                       | attached no                         | t at     | ta  | che  | d        |                        | ***                                |           |            | $\dashv$ |
| Garage Door Openers  |              |      |          |                 | 1                   |       |                       | number of units:                    |          |     |      |          | number o               | of remotes:                        |           |            | $\dashv$ |
| Satellite Dish & Controls  |              |      |          | 1               | /                   | T     | □ owned □ leased from |                                     |          |     |      | _        | $\dashv$               |                                    |           |            |          |
| Security System  |              |      |          |                 | 1                   | 1     | 1                     | □ owned □ lease                     | ed fr    | 10  | n _  |          |                        |                                    |           |            | $\dashv$ |
| Water Heater   |              |      |          | V               | T                   |       | T                     | ☑ electric ☐ gas                    |          | 0   | ther | :        |                        | number of units:                   | 1         |            | -        |
| Water Softener   |              |      |          | ,               | /                   |       | □ owned □ lease       | ed fr                               | or       | n   |      |          |                        |                                    |           | $\dashv$   |          |
| Underground Lawn Sprir   | nkle         | r    |          |                 | 1                   | /     | T                     | □ automatic □ manual areas covered: |          |     |      |          |                        | -                                  |           |            |          |
| Septic / On-Site Sewer F   | acil         | lity |          | V               | 1                   |       |                       | if yes, attach Inforn               |          |     |      |          |                        | wer Facility (TAR-1                | 407       | )          | -        |
| (TAR-1406) 01-01-14<br>COBB PROPERTIES, 10156 FM 219 Clifton, T              | X 766        | 34   | Init     | ialed I         | оу                  | : Bu  | ye                    | r:,                                 |          | ar  | nd S | ell      | er:                    |                                    | age       | 10         |          |

| Concerning the Property   | at 3      | 84        | D CR            | 6      | , 2:   | o F      | 1.    | Amı                        | LTON TX 76531                                       |       |      |
|---|-----------|-----------|-----------------|--------|--------|----------|-------|----------------------------|---|-------|------|
|   |           |           |                 |        |        |          |       |                            |   |       |      |
| Water supply provided by  |           |           |                 |        |        |          | ikn   | own                        | other:  |       |      |
| Was the Property built b  |           |           |                 |        |        |          |       |                            |   |       |      |
| (If yes, complete, si   | gn, and   | attach    | TAR-1906 c      | once   | erning | lead-ba  | sec   | paint                      | hazards).   |       |      |
| Roof Type: I'let  | al        |           |                 | A      | ge:    |          | 7     | Yr                         | S (appro  | oxim  | ate  |
| Is there an overlay roof of                                       | covering  | g on th   | e Property (sl  | hing   | les or | roof cov | /eri  | ng pla                     | ced over existing shingles or roof co               | verir | ng)  |
| ☐ yes ☑ no ☐ unkn   | own       |           |                 |        |        |          |       |                            |   |       | •    |
| A (O-II)  |           |           |                 |        |        |          |       |                            |   |       |      |
| Are you (Seller) aware of   | t any of  | the ite   | ems listed in t | his S  | Sectio | n 1 that | are   | not in                     | working condition, that have defects                | s, or | are  |
| need of repair?  yes  | □no       | If yes    | , describe (at  | tach   | addit  | ional sh | eet   | s if ned                   | cessary): hot tub, ice me                           | 3K    | er   |
| in Outdoor  | KIT       | -che      | ~               |        |        |          |       |                            |   |       |      |
| V   |           |           |                 |        |        |          | -     |                            |   |       |      |
|   |           |           |                 |        |        |          |       |                            |   |       |      |
| Section 2 Are you (S  | eller) a  | ware c    | of any defect   | e or   | malf   | ınction  | e ir  | any (                      | of the following?: (Mark Yes (Y) if                 |       | 011  |
| aware and No (N) if you   | are no    | ot awa    | re.)            | 3 01   | mam    | unction  | 3 11  | ally                       | of the following?. (Mark 165 (1) II                 | you   | are  |
|   |           |           | 0.,             |        |        |          |       |                            |   |       |      |
| Item  | Y         |           | Item            |        |        |          | Y     | N                          | Item  | Y     | N    |
| Basement  |           | 1         | Floors          |        |        |          |       | V                          | Sidewalks   |       | 6    |
| Ceilings  |           | V         | Foundation      | on / S | Slab(s | )        |       | V                          | Walls / Fences                                      |       | V    |
| Doors   |           | V         | Interior W      | alls   |        | •        |       |                            | Windows   |       | L    |
| Driveways   |           | 1         | Lighting F      |        | res    |          |       | V                          | Other Structural Components                         | +     | 2    |
| Electrical Systems  |           | 1         | Plumbing        |        |        |          |       |                            | Other Otroctural Components                         | +     | -    |
| Exterior Walls  |           | 1./       | Roof            | Cys    | toms   |          | -     |                            |   | +     | +    |
| Exterior vvaiis   |           |           | nooi            |        |        |          |       |                            |   |       |      |
| Section 3. Are you (So you are not aware.)                        | eller) a  | ware o    | of any of the   | foll   | owing  | condit   | ion   | s: (Ma                     | ark Yes (Y) if you are aware and N                  | lo (N | 1) i |
| Condition   |           |           | -               | Y      | N      | Cone     | diti  | on                         |   | V     | N    |
| Aluminum Wiring   |           |           |                 | +      | V      |          |       | Liver I have been a second | dation Repairs                                      | +     | V    |
| Asbestos Components   |           |           |                 |        | V      | _        |       |                            | Repairs   | 1     | -    |
| Diseased Trees: 🖸 oa  | k wilt    |           |                 | V      |        |          |       |                            | al Repairs  | +     | 1    |
| Endangered Species/H  | abitat o  | n Prop    | erty            |        | V      | Rado     |       |                            |   | 1     | V    |
| Fault Lines   |           |           |                 |        | V      | Settli   | ng    |                            |   | 1     | V    |
| Hazardous or Toxic Wa   | ste       |           |                 |        | V      | Soil I   | Mov   | /emen                      | t   |       | V    |
| Improper Drainage   |           |           |                 |        | V      |          |       |                            | ructure or Pits                                     |       | V    |
| Intermittent or Weather   | Springs   | 3         |                 | V      |        |          |       |                            | Storage Tanks                                       |       | V    |
| Landfill  |           |           |                 |        | ~      |          |       |                            | ements  |       | V    |
| Lead-Based Paint or Le  |           |           | Hazards         |        | V      | -        |       |                            | asements  |       | V    |
| Encroachments onto the  |           |           |                 |        | V      |          |       |                            | hyde Insulation                                     |       | V    |
| Improvements encroaching on others' property                      |           |           |                 |        | V      |          |       | enetra                     |   |       | V    |
| Located in 100-year Floodplain                                    |           |           |                 |        | ~      |          |       |                            | Property  |       | V    |
| Located in Floodway   |           |           |                 | -      | ~      | Wood     |       |                            |   | _     | ~    |
| Present Flood Ins. Cove   | -         |           |                 |        |        |          |       |                            | ion of termites or other wood                       |       | 1    |
| (If yes, attach TAR-141   |           |           |                 | -      | 1      |          |       |                            | ects (WDI)  |       |      |
| Previous Flooding into the Structures                             |           |           |                 |        | 1      |          |       |                            | ment for termites or WDI                            |       | ~    |
| Previous Flooding onto the Property  Located in Historic District |           |           |                 |        | 1      |          |       |                            | te or WDI damage repaired                           |       | V    |
| Historic Property Design  |           |           |                 | +      |        |          |       | s Fires                    |   | +     | V    |
| Previous Use of Premis  |           | /lanufa   | cture           |        |        |          |       |                            | I damage needing repair able Main Drain in Pool/Hot | +     | V    |
| of Methamphetamine  | JU IUI IV | - andidia | oluio           |        | 1      | Tub/S    |       |                            | DIGITI DIGITI III FUU/FIUL                          |       | V    |
|   |           |           |                 |        |        | . 00/    | - 100 | •                          |   |       |      |

(TAR-1406) 01-01-14

Initialed by: Buyer: \_\_\_

\_\_ and Seller:\_\_\_\_\_, \_\_\_\_

Page 2 of 5

| Concern         | ing the Property at 3840 CR 622 HAMILTONTX 7653/  |
|-----------------|---|
| If the an       | swer to any of the items in Section 3 is yes, explain (attach additional sheets if necessary):  |
| which h         | *A single blockable main drain may cause a suction entrapment hazard for an individual.  4. Are you (Seller) aware of any item, equipment, or system in or on the Property that is in need of repair, has not been previously disclosed in this notice? Tyes no If yes, explain (attach additional sheets if ry): ICE Maker in outdoor Kitchen  |
| Section not awa | 5. Are you (Seller) aware of any of the following (Mark Yes (Y) if you are aware. Mark No (N) if you are re.)   |
| Y N             | Room additions, structural modifications, or other alterations or repairs made without necessary permits or not in compliance with building codes in effect at the time.  |
| □ Q⁄            | 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 voluntary  Any unpaid fees or assessment for the Property? yes (\$) no  If the Property is in more than one association, provide information about the other associations below or attach information to this notice.   |
|                 | Any common area (facilities such as pools, tennis courts, walkways, or other) co-owned in undivided interest with others. If yes, complete the following:  Any optional user fees for common facilities charged?   yes  no If yes, describe:  |
| 0 0             | Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.   |
| 0 0             | Any lawsuits or other legal proceedings directly or indirectly affecting the Property. (Includes, but is not limited to: divorce, foreclosure, heirship, bankruptcy, and taxes.)  |
|                 | Any death on the Property except for those deaths caused by: natural causes, suicide, or accident unrelated to the condition of the Property.   |
|                 | Any condition on the Property which materially affects the health or safety of an individual.  Any repairs or treatments, other than routine maintenance, made to the Property to remediate environmental 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 (for example, certificate of mold remediation or other remediation). |
|                 | 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.   |
|                 | The Property is located in a propane gas system service area owned by a propane distribution system retailer.   |
| /TAD 14         | 06) 01-01-14 Initialed by: Buyer: and Seller: Page 3 of 5   |

| Concerning the Pro   | perty at <u>384</u>                      | O CR622   | 2 HAMILT   | on Tx 76                 | 531             |
|----------------------|--|---|--|--------------------------|-----------------|
| If the answer to any | of the items in S                        | Section 5 is yes, explain                         | n (attach additional sheet   | s if necessary):         |                 |
|                      |  |   |  |                          |                 |
|                      |  |   |  |                          |                 |
| Section 6. Seller    | ☑ has ☐ has                              | not attached a survey                             | of the Property.   |                          |                 |
| regularly provide    | inspections and                          |   | received any written in<br>sed as inspectors or of<br>omplete the following: |                          |                 |
| Inspection Date      | Туре                                     | Name of Inspect                                   | or   |                          | No. of Pages    |
|                      |  |   |  |                          |                 |
|                      |  |   |  |                          |                 |
|                      |  |   | -  |                          |                 |
| Ρ́ι                  | roperty. A buye                          | r should obtain inspec                            | d reports as a reflection<br>ctions from inspectors                          | chosen by the buye       |                 |
| Section 8. Check     | any tax exemp                            | tion(s) which you (Sel<br>☐ Senior Citizen        | ller) currently claim for<br>☐ Disable                                       |                          |                 |
|                      | agement                                  |   |  | ed Veteran               |                 |
| Other:               |  |   | Unknow   | wn                       |                 |
|                      |  | ever filed a clain                                | n for damage to  | the Property with        | any insurance   |
| provider? Tyes       |  | an received presents                              | for a claim for dame   | and to the Dremewiy      | //ax avample an |
| insurance claim o    | r a settlement o                         | or award in a legal pro                           | for a claim for dama<br>pceeding) and not used                               | the proceeds to ma       |                 |
| which the claim w    | ras made?                                | es <b>∑</b> no If yes, exp                        | olain:   |                          |                 |
|                      |  |   |  |                          |                 |
| 0 11 11 0            |  |   | 4.44   |                          |                 |
|                      |  |   | detectors installed in a<br>code?* □ unknown □                               |                          |                 |
| (Attach additional s | heets if necessar                        | ry):  |  |                          |                 |
|                      |  |   |  |                          |                 |
|                      |  |   | uires one-family or two-l<br>requirements of the build                       |                          |                 |
| which the d          | welling is located                       | d, including performance                          | e, location, and power so  | ource requirements. If   | f you do not    |
|                      | uilding code requ<br>g official for more |   | our area, you may check  | unknown above or o       | contact your    |
|                      |  |   | tors for the hearing impa  | ired if: (1) the buyer o | r a member      |
| of the buyer         | r's family who wil                       | ll reside in the dwelling                         | is hearing-impaired; (2)<br>physician; and (3) within                        | the buyer gives the s    | eller written   |
| the buyer n          | nakes a written                          | request for the seller                            | to install smoke detector  | ors for the hearing-im   | npaired and     |
|                      |  | stallation. The parties if smoke detectors to ins | may agree who will beal<br>stall.  | r the cost of installing | the smoke       |
|                      |  |   |  |                          |                 |
| (TAR-1406) 01-01-    | 14 Ini                                   | tialed by: Buver:                                 | . and Seller   | r: .                     | Page 4 of 5     |

| Conc           | erning the Property at 3840 CR 62  | 2 HAMILTON TX 76531   |
|----------------|--|---|
| broke<br>Signa | r acknowledges that the statements in this notice are true ar(s), has instructed or influenced Seller to provide inaccurate the statements in this notice are true ar(s), has instructed or influenced Seller to provide inaccurate the statements in this notice are true are tr | Signature of Seller Date  |
| ADD            | ITIONAL NOTICES TO BUYER:  |   |
| (1)            | registered sex offenders are located in certain zip code   | abase that the public may search, at no cost, to determine if areas. To search the database, visit <a href="www.txdps.state.tx.us">www.txdps.state.tx.us</a> . certain areas or neighborhoods, contact the local police   |
| (2)            | mean high tide bordering the Gulf of Mexico, the prop<br>Protection Act (Chapter 61 or 63, Natural Resources Co  | d of the Gulf Intracoastal Waterway or within 1,000 feet of the erty may be subject to the Open Beaches Act or the Dune ode, respectively) and a beachfront construction certificate or improvements. Contact the local government with ordinance r 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)            | as true and correct and have no reason to believe it to  | phone #: 254-386-3123  phone #: 254-386-3113  The as of the date signed. The brokers have relied on this notice be false or inaccurate. YOU ARE ENCOURAGED TO HAVE          |
| The            | AN INSPECTOR OF YOUR CHOICE INSPECT THE PF undersigned Buyer acknowledges receipt of the foregoing   | ROPERTY.  |
| -              | ature of Buyer Date ed Name:   | Signature of Buyer Date 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

| COI  | NCERNING THE PROPERTY AT 3840 CR622 HAMILTON  | Tx 7653/                        |  |  |  |  |  |  |
|------|---|---------------------------------|--|--|--|--|--|--|
| A.   | DESCRIPTION OF ON-SITE SEWER FACILITY ON PROPERTY:  |                                 |  |  |  |  |  |  |
|      | (1) Type of Treatment System: Septic Tank Aerobic Treatment  Conventional 1350 Gallon Tank  | Unknown                         |  |  |  |  |  |  |
|      | (2) Type of Distribution System: 1 ateral lines   | Unknown                         |  |  |  |  |  |  |
|      | (3) Approximate Location of Drain Field or Distribution System: <u>EAST SIDE</u>  | Unknown                         |  |  |  |  |  |  |
|      | (4) Installer: Keith Curry  |                                 |  |  |  |  |  |  |
|      | (5) Approximate Age: installed August 2007  | Unknown                         |  |  |  |  |  |  |
| B.   | MAINTENANCE INFORMATION:  |                                 |  |  |  |  |  |  |
|      | (1) Is Seller aware of any maintenance contract in effect for the on-site sewer facility?  If yes, name of maintenance contractor:  Phone: contract expiration date:  Maintenance contracts must be in effect to operate aerobic treatment and certain non-standard" on-site sewer facilities.) |                                 |  |  |  |  |  |  |
|      | (2) Approximate date any tanks were last pumped?  |                                 |  |  |  |  |  |  |
|      | (3) Is Seller aware of any defect or malfunction in the on-site sewer facility?  If yes, explain:   | Yes No                          |  |  |  |  |  |  |
|      | (4) Does Seller have manufacturer or warranty information available for review?   | ☐ Yes ☑ No                      |  |  |  |  |  |  |
| C.   | PLANNING MATERIALS, PERMITS, AND CONTRACTS:   |                                 |  |  |  |  |  |  |
|      | (1) The following items concerning the on-site sewer facility are attached:  planning materials permit for original installation final inspection when OS maintenance contract manufacturer information warranty information  | SF was installed                |  |  |  |  |  |  |
|      | (2) "Planning materials" are the supporting materials that describe the on-site sewer submitted to the permitting authority in order to obtain a permit to install the on-site sewer  | facility that are wer facility. |  |  |  |  |  |  |
|      | (3) It may be necessary for a buyer to have the permit to operate an on-site transferred to the buyer.  | e sewer facility                |  |  |  |  |  |  |
| (TAF | R-1407) 1-7-04 Initialed for Identification by Buyer, and Seller,   | Page 1 of 2                     |  |  |  |  |  |  |
| COBE | 3 PROPERTIES, 10156 FM 219 Clifton, TX 76634  |                                 |  |  |  |  |  |  |

Phone: 972-989-5220

Fax: 972-534-1732 Stefanie Cobb

Sellers Disclosure

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.

| Signature of Seller      | Date | Signature of Seller | Date |
|--------------------------|------|---------------------|------|
| Receipt acknowledged by: |      |                     |      |
| Signature of Buyer       | Date | Signature of Buyer  | Date |

(TAR-1407) 1-7-04

Page 2 of 2