

TEXAS ASSOCIATION OF REALTORS®

SELLER'S DISCLOSURE NOTICE

®Texas Association of REALTORS®, Inc. 2011

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.

				1	809	9 1	Fal	con Lane	
CONCERNING THE PROPERTY AT								TX 78641	_
DATE SIGNED BY SELLER AND IS N MAY WISH TO OBTAIN. IT IS NOT A AGENT.	TOI W	A ARF	SU RAN	BSTITUTE FOR AI TY OF ANY KIND	NY BY	SE	SPE	NDITION OF THE PROPERTY AS OF THE ECTIONS OR WARRANTIES THE BUYER ER, SELLER'S AGENTS, OR ANY OTHER	R
	or		1eve	er occupied the Prop	oerl	ty		ong since Seller has occupied the Property	?
Section 1. The Property has the item This notice does not establish the it	is r tem	nar s to	ked be d	i below: (Mark Yes conveyed. The contrac	ct w	ill c	io (i letei	mine which items will & will not convey.	_
Item Y N U	Ite	em			Y		U	Item Y N U	1
Cable TV Wiring	Li	qui	d Pr	opane Gas:		X		Pump: ☐ sump ☐ grinder X	
Carbon Monoxide Det. X	-L	PC	om	munity (Captive)		X		Rain Gutters X	
Ceiling Fans X	-L	P c	n P	roperty		X		Range/Stove X	
Cooktop	Н	ot T	ub			X		Roof/Attic Vents X	
Dishwasher X	In	ter	com	System		X		Sauna X	
Disposal X	М	icro	way	ve	X'			Smoke Detector X	
Emergency Escape Ladder(s)	0	utd	oor	Grill		X		Smoke Detector – Hearing Impaired	
Exhaust Fans X	Р	atio	/De	cking	X			Spa X	
Fences X	Р	lum	bing	g System				Trash Compactor X	
Fire Detection Equip. X	P	ool				X		TV Antenna X	
French Drain	P	ool	Equ	uipment		X		Washer/Dryer Hookup X	
Gas Fixtures X	P	ool	Mai	int. Accessories		X		Window Screens X	_
Natural Gas Lines	P	ool	Hea	ater		X		Public Sewer System X	
ltem	Υ	N	U			A	۸dd	itional Information	
Gentral A/C	X			🛛 electric 🔲 gas	n	ium	ıber	of units:	_
Evaporative Coolers		X		number of units: _					
Wall/Window AC Units		X		number of units: _					
Attic Fan(s)				if yes, describe:					
Central Heat	X			☐ electric ☐ gas	r	ıum	nber	of units:	
Other Heat		X		if yes, describe:					
Oven	X			number of ovens:				electric gas other:	
Fireplace & Chimney	X								<u>.</u>
Carport		X		☐ attached ☐ no					_
Garage	X			☑ attached ☐ no	ot a	itta	che	^	_
Garage Door Openers	X			number of units: _			<u>l</u>	number of remotes: 2	_
Satellite Dish & Controls		X		□owned □leas					_
Security System	X								-
Water Heater	X			🛽 electric 🗌 gas			the	: number of units:	_
Water Softener		X		□owned □leas	ed	fro	m _	2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	_
Underground Lawn Sprinkler	X			🛮 automatic 🔲 n	nar	nua	l a	areas covered: FRON + BACK YARD	_
Septic / On-Site Sewer Facility				if yes, attach Infor	ma	tior	n Ak	out On-Site Sewer Facility (TAR-1407)	_

Initialed by: Seller: _ (TAR-1406) 9-01-11 RE/MAX Town & Country PO Box 1087 Liberty Hill, TX 78642 Michelle Cearley

and Buyer: _

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Concerning the Property a	at			:	Leander				
Water supply provided by						ן איזענ	other.		
Was the Property built be		-					to a manufal		
(If yes, complete, sig									
Roof Type: SHING	L6		_ Aç	je:	T	364	/CS (approx		
-	_	e Property (sh	ingle	es or	roof coveri	ng pla	ced over existing shingles or roof cover	erin	g)?
🗌 yes 🔞 no 🔲 unkno	wn								
Are you (Seller) aware of need of repair? ☐ yes	any of the ite	ems listed in the describe (att	nis S ach	ectior additi	n 1 that are onal sheet	not in	n working condition, that have defects, cessary):	, or :	are
Section 2. Are you (Se aware and No (N) if you	ller) aware o	of any defects	s or	malfu	ınctions ir	n any o	of the following?: (Mark Yes (Y) if y	ou/	are
Item	YN	ltem			Υ	N	Item	V	N
	X	Floors				X	Sidewalks	+-	Χ
Basement		Foundatio	n / S	lah(c)		X	Walls / Fences	+	X
Ceilings	X	Interior Wa		nau(s)	<u>' </u>	X	Windows	+	X
Doors	X	Lighting F		00		X	Other Structural Components	+	X
Driveways		Plumbing				x	Other Ondottalal Components		^
Electrical Systems	X	Roof	Gysi	GIIIS		X		+-	
Exterior Walls		11001							
Section 3. Are you (Se you are not aware.)	eller) aware (of any of the	folio	owing	conditio	ns: (M	ark Yes (Y) if you are aware and No	o (N	I) if
Condition			Y	N	Condit	ion		Υ	N
Aluminum Wiring			Ť	X			ndation Repairs	Ť	X
Asbestos Components			+	X			f Repairs	X	
Diseased Trees: a	k wilt □			X			ral Repairs	1	X
Endangered Species/Ha		perty		X	Radon				X
Fault Lines				X	Settling				×
Hazardous or Toxic Waste				X	Soil Mo		nt		X
Improper Drainage				X	Subsur	face S	tructure or Pits		X
Intermittent or Weather	Springs			X	Underg	round	Storage Tanks		X
Landfill	, ,			X	Unplatt	ed Eas	sements		X
Lead-Based Paint or Le	ad-Based Pt.	. Hazards		χ	Unreco	rded E	asements		X
Encroachments onto the	e Property			X	Urea-fo	rmalde	ehyde Insulation		X
Improvements encroaching on others' property				X	Water I	Penetr	ation		X
Located in 100-year Flo	odplain			X	Wetlan	ds on	Property	\perp	×
Located in Floodway				X	Wood F				X
Present Flood Ins. Cove	erage			30			tion of termites or other wood		1.
(If yes, attach TAR-141-	4)			X	destroy	ing ins	sects (WDI)		X
Previous Flooding into t	he Structures	5		X	Previou	ıs trea	tment for termites or WDI		X
Previous Flooding onto	the Property			X		The state of the s	nite or WDI damage repaired		X
Previous Fires				X			DI damage needing repair	_	X
Previous Use of Premis	es for Manuf	acture		1.	Single	Blocka	able Main Drain in Pool/Hot Tub/Spa*		

of Methamphetamine

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809 Falcon Lane Leander, TX 78641

Co	ncernin	g the Property at Leander, TX 78641
If ti	MI	ver to any of the items in Section 3 is yes, explain (attach additional sheets if necessary):
	OF	FEW SHINGLES
		*A single blockable main drain may cause a suction entrapment hazard for an individual.
wh	ich ha	Are you (Seller) aware of any item, equipment, or system in or on the Property that is in need of repair, s not been previously disclosed in this notice? yes no If yes, explain (attach additional sheets if yes):
	aware	Are you (Seller) aware of any of the following (Mark Yes (Y) if you are aware. Mark No (N) if you are
<u>Y</u>	_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.
X		Homeowners' associations or maintenance fees or assessments. If yes, complete the following: Name of association: Summer Thoresty Where Hassociation: Manager's name: Phone: 866-473-2573 Fees or assessments are: \$
		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:
	N	Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.
	¥	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.
	区	Any condition on the Property which materially affects the health or safety of an individual.
	X	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).
	X	Any rainwater harvesting system connected to the property's public water supply that is able to be used for indoor potable purposes.
If th	ne ansv	ver to any of the items in Section 5 is yes, explain (attach additional sheets if necessary):
(T <i>A</i>	NR-140	6) 9-01-11 Initialed by: Seller:, Page 3 of 5

Section 6. Seller	☐ has ☐ ha	s not attached a survey of th	ne Property.	
regularly provide	inspections ar		ved any written inspection rous inspectors or otherwise peate the following:	
Inspection Date	Туре	Name of Inspector		No. of Pag
Note: A buy Pi	er should not a coperty. A buye	rely on the above-cited repo er should obtain inspections	orts as a reflection of the cur s from inspectors chosen by t	rent condition of the the buyer.
Section 8. Check		ption(s) which you (Seller) c ☐ Senior Citizen	urrently claim for the Propert ☐ Disabled	y:
☐ Wildlife Man	agement	☐ Agricultural	☐ Disabled Veteran	
☐ Other:			☐ Unknown	
insurance claim o which the claim w	ras made? 🗍	or award in a legal proceed yes 図 no If yes, explain:		
insurance claim o which the claim was section 10. Does requirements of C	r a settlement ras made? the property hapter 766 of t	or award in a legal proceed yes 図 no If yes, explain: have working smoke detect the Health and Safety Code?	tors installed in accordance * □ unknown □ no ☑ yes.	with the smoke det
Section 10. Does requirements of C	r a settlement ras made? the property labeled and the heets if necessions.	or award in a legal proceed yes IX no If yes, explain: have working smoke detect the Health and Safety Code? ary):	tors installed in accordance * □ unknown □ no ☑ yes.	with the smoke det
Section 10. Does requirements of C (Attach additional s *Chapter 76 smoke dete which the d know the be	the property I hapter 766 of the Health ctors installed is welling is located.	or award in a legal proceed yes no If yes, explain: have working smoke detectine Health and Safety Code? ary): h and Safety Code requires of accordance with the required, including performance, local puirements in effect in your area.	tors installed in accordance * □ unknown □ no ☑ yes.	with the smoke det If no or unknown, exp ags to have working effect in the area in ements. If you do not
Section 10. Does requirements of C (Attach additional s which the d know the bulocal buildin A buyer may of the buyer respecifies the	the property I hapter 766 of the Health ctors installed in welling is located in difference of the Health ctors installed in welling is located in the hearing improved in the hearing in the hearing in the hearing improved in the hearing in the he	or award in a legal proceed yes no If yes, explain: have working smoke detection the Health and Safety Code? ary): In accordance with the requires of including performance, local including is help a licensed physical request for the seller to install smoke detectors for t	tors installed in accordance *	with the smoke det If no or unknown, exp ags to have working effect in the area in ements. If you do not bove or contact your buyer or a member wes the seller written er the effective date, wearing-impaired and
Section 10. Does requirements of C (Attach additional s which the d know the bullocal building A buyer may of the buyer respecifies the detectors at Seller acknowledge.	the property I hapter 766 of the Health ctors installed is welling is located welling code reag official for more y require a selled in the hearing improved in the hearing	thave working smoke detection the Health and Safety Code requires of accordance with the required, including performance, local puirements in effect in your and re information. The detectors for the dwelling is health and safety code in accordance with the required, including performance, local puirements in effect in your and re information. The dwelling is health and safety code in the dwelling is health and in the seller to install are to install attion. The parties may a sof smoke detectors to install. The ments in this notice are true to the seller to install.	tors installed in accordance " unknown no ves. one-family or two-family dwelling ements of the building code in ation, and power source require ea, you may check unknown al or the hearing impaired if: (1) the aring-impaired; (2) the buyer give ician; and (3) within 10 days after stall smoke detectors for the he	with the smoke det If no or unknown, exp angs to have working effect in the area in ements. If you do not bove or contact your be buyer or a member wes the seller written er the effective date, rearing-impaired and installing the smoke that no person, includir