

## **SELLER'S DISCLOSURE NOTICE**

TO BE COMPLETED BY SELLER(S)

| CONCERNING THE PROPERTY AT   | 206 VZCR 4107  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Canton   | Van Zandt  |  |  |  |  |  |
| NOTE: Effective January 1, 1994, Section 5.008 of the Texas Property one dwelling unit to deliver a copy of the Seller's Disclosure Notice, considered the effective date of a contract for the sale of the Property. If a terminate the contract for any reason within seven (7) days after received.   | ADDRESS AND CITY) (COUNTY)  Code (the "Code") requires a seller of residential real property of not more that ompleted to the best of the seller's belief and knowledge, to a purchaser on a contract is entered into without the seller providing the notice, the buyer maing the notice. If information required by the notice is unknown to the seller, the requirements of Section 5.008 of the Code. This form complies with an sures required by the Code. |  |  |  |  |  |
| SIGNATURE INDICATED BELOW. THIS STATEMENT IS NOT A WARR. SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE BU INSPECTION OF THE PROPERTY BY A QUALIFIED, LICENSED INSPECTION OF THE PROPERTY BY A QUALIFIED OF THE PROPER | THE CONDITION OF THE PROPERTY AS OF THE DATE OF THE SELLER'S IANTY OF ANY KIND BY THE SELLER OR LISTING BROKER AND IS NOT A IYER(S) MAY WISH TO OBTAIN. A BUYER IS URGED TO OBTAIN AN ECTOR. THE FOLLOWING STATEMENTS ARE REPRESENTATIONS MADERE NOT REPRESENTATIONS OF THE LISTING BROKER OR ANY OTHER X ASSOCIATION OF REALTORS®, INC., THE GREATER METRO MULTIPLE LISTING BROKER HAVE RELIED UPON THE FOLLOWING INFORMATION IN OPERTY.                        |  |  |  |  |  |
| CENERAL  | INFORMATION  |  |  |  |  |  |
| 1. The Property is currently:  Owner occupied  | 6. Except for manufacturer warranties, if any, on appliances, does there exist any other warranties for the Property?  ☐ Yes ☑ No ☐ Unknown  - If "Yes", identify the warranties:  7. Are there any pending or threatened condemnation   |  |  |  |  |  |
| Expiration Date  | - If "Yes", explain:  8. Has the Property (or the homeowners' association of which the Property is a part) been the subject of any pending or  |  |  |  |  |  |
| <ul> <li>3. Is Seller a United States citizen?</li> <li>Yes ☐ No</li> <li>- If "No", is the seller a "foreign person" as defined in the Internal Revenue Code?</li> </ul>  |  |  |  |  |  |  |
| <ul> <li>Yes ☐ No</li> <li>4. Check any of the following tax exemptions which Selle claims for the Property:</li> <li>☑ Homestead ☐ Senior Citizen</li> <li>☐ Disabled ☐ Disabled Veteran</li> <li>☐ Agricultural ☐ Other</li></ul>  | 9. Has the Seller asserted any claim under any insurance policy or against any person for any physical condition of the Property:  |  |  |  |  |  |
| <ul> <li>5. Is there currently in force for the Property a written Builder's Warranty?</li> <li>☐ Yes ☐ No ☐ Unknown</li> <li>- If "Yes", identify the warranty by stating: Name of Company issuing warranty:</li> </ul>   | 10. A. Seller has not received any notices, either oral or written regarding the need for repair or replacement of any portion of the Property from any governmental agency, appraiser inspector, mortgage lender, repair service, or other except:  |  |  |  |  |  |
| Warranty Number:   |  |  |  |  |  |  |

PROPERTY ADDRESS: Canton, TX 75103

Buyer Initials: Fax: 9036420065

Buyer Initials:

SELLER'S DISCLOSURE NOTICE - PAGE 1 OF 8

VZCR 4107 206

| <u>.</u>                      | Date of Inspection                                | Type of In     | spec      | <u>tion</u><br>          | Name of Inspector/Company                        |   |              |   | # Pages                                 | Attached(Y/                             |
|-------------------------------|---|----------------|-----------|--------------------------|--|---|--------------|---|---|---|
| ) <u> </u>                    |   |                |           |                          |  |   |              |   |   |   |
| xplanator                     | y comments by Seller,                             | if any:        |           |                          |  |   |              | *************************************** | *************************************** | *************************************** |
|                               |   |                |           |                          |  |   |              |   |   |   |
| ΑŁ                            | puyer should not rely on the above                |                |           |                          |  |   |              |   | rs of the buyer's                       | own choice                              |
|                               |   |                |           |                          |  | MENT AND                                |              |   |   |   |
| Norking C                     | ems listed below in Se<br>Condition" and there ar | e no known de  | efects    | s. Please cl             | heck if item                                     | has been re                             | olaced (ne   | ote date of rep                         | placement)                              | or explain if t                         |
| em is rep                     | aired or in need of rep<br>OOES NOT ESTABLIS      | air. Check "N/ | A" foi    | r items that             | t do not app                                     | oly to the Pro                          | perty or a   | re not include                          | d in the sa                             | le. NOTE: TH                            |
|                               | T OF SALE WILL DE                                 |                |           |                          |  |   | J, LLL 0.    |   |   |   |
|                               |   |                |           | WORKING                  | HAS BEEN   | DATE                                    | IN NEED      | DATE/DES                                | COIDTION OF                             | COMPLETED                               |
|                               | EQUIPMENT & SYSTE                                 | M              | N/A<br>/  |                          | REPLACED   | REPLACED<br>Month/Year                  | OF<br>REPAIR | CANCO WERE SECTIONS FROM                | NEEDED REI                              |   |
| Attic Fan                     |   |                | V         |                          |  |   |              |   |   |   |
| Automatic<br>(Front           | : Lawn Sprinkle/ Syste<br>, Back , Le             | m<br>ft Side V |           | Ø                        |  |   |              |   |   |   |
| Right S                       | lide 🏒 , Fully                                    | )<br>)         |           | EST                      | } Ll   |   | <u> </u>     |   |   |   |
|                               | d-CAT5 Wiring                                     |                | $\square$ |                          |  |   |              |   |   |   |
| Cable TV<br>Ceiling Fa        |   |                | H         | Z,                       |  |   | ┞╫           |   |   |   |
| Cooktop (                     | Gas / Electric 🗹                                  | _) /           |           | Ø                        |  |   |              |   |   |   |
| Cooling (C                    | Central Gas / Ele                                 | ctric 🗸 )      |           | Ø                        |  |   |              |   |   |   |
|                               | Window 🗸 / Wall                                   | /              |           | u/                       | <u> </u>   |   |              |   |   |   |
| Evapor                        | ative Coolers)                                    |                |           |                          |  |   |              |   |   |   |
| Dishwash<br>Disposal          | er  |                | ┝╫╌       | <u> </u>                 |  |   | 片            |   |   |   |
| Electrical                    | System  |                |           | Z                        |  |   |              |   |   |   |
|                               | cy Escape Ladder(s)                               |                | 17/       | Щ                        |  |   |              |   |   |   |
| Exhaust F                     | an(s)<br>ction Equipment                          | ·              | <u> </u>  | <u> </u>                 | <u> </u>   |   |              |   |   |   |
| (Electri                      | c / Battery Opera                                 | ated 🗸 )       |           | Ø                        |  |   |              |   |   |   |
| Garage D                      | oor Opener(s) & Conti                             | rols           |           | 4                        |  |   |              |   |   |   |
| (Autom                        | iatic <u>V</u> / Manual<br>rols <u>Z</u>          | )              |           | Ø                        |  |   |              |   |   |   |
| 3as Fixtu                     |   |                | \d        |                          |  |   |              |   |   |   |
| as Lines                      | }   | <i></i>        |           | Q/                       |  |   |              |   |   |   |
| (Natura)<br>(Natura)          | al / Liquid Propa<br>Central Gas / Ele            | ne 🛂 /)        |           |                          | ļ  |   | <u> </u>     |   |   |   |
| # Units                       |   | CIRC           |           | Ø                        |  |   |              |   |   |   |
|                               | Window / Wall                                     | )              | Q.        |                          |  |   |              |   |   |   |
| lot Tub<br>ce Maker           | -   |                | 夕,        |                          | <u> </u>   |   |              |   |   |   |
| ntercom                       |   |                | d         | <u> </u>                 |  |   | 十古一          |   |   |   |
| ighting F                     | ixtures   |                |           | <b>Ø</b> .               |  | *************************************** |              |   |   |   |
| <u>/ledia Wi</u><br>/licrowav | ring & Equipment                                  |                |           | <u> </u>                 | <u> </u>   |   | <u> </u>     | [                                       |   |   |
|                               | e<br>Cooking Equipment /                          |                | Ø         |                          | <del>                                     </del> |   | ┝╫╴          |   |   |   |
| Oven (Ga                      | ıs / Electric_ <u>V_</u>                          | <u> </u>       |           | 团团                       |  |   |              |   |   |   |
|                               | onvection   |                | Ø         |                          |  |   |              |   |   |   |
| Plumbing<br>Public Se         | System<br>wer & Water System                      | ·····          | ╟╂        |                          |  |   |              |   |   |   |
| ange (G                       | as/ Electric                                      |                |           | $\overline{\mathcal{Q}}$ |  |   |              |   |   |   |
| 11190                         |   |                |           |                          |  |   |              |   |   |   |

| EQUIPMENT & SYSTEM                       | N/A        | WORKING<br>CONDITION | HAS BEEN<br>REPLACED | DATE<br>REPLACED<br>Month/Year | IN NEED<br>OF<br>REPAIR                          | DATE / DESCRIPTION OF COMPLETED<br>OR NEEDED REPAIRS |
|--|------------|----------------------|----------------------|--------------------------------|--|--|
| Refrigerator (Built-In)                  |            | ₫,                   |                      |                                |  |  |
| Satellite Dish and Receiver              |            | M                    |                      |                                |  |  |
| auna                                     | Ø          |                      |                      |                                |  |  |
| Security System(s)                       | *****      |                      |                      |                                |  |  |
| (In Use / Abandoned)                     |            |                      |                      |                                |  |  |
| Septic or other On-Site Sewer System     | <u></u>    | Ø                    |                      |                                |  |  |
| Shower Enclosure & Pan                   | 図          |                      |                      |                                |  |  |
| Smoke Detector-Hearing Impaired          | W,         |                      |                      |                                |  |  |
| Spa                                      | Ø,         |                      |                      |                                |  |  |
| Stove (Free Standing) For Heating (Free) | Ø,         |                      |                      |                                |  |  |
| Swimming Pool & Equipment                | Ø,         |                      |                      |                                |  |  |
| Swimming Pool Built-In Cleaning Equip    | Ø,         |                      |                      |                                |  |  |
| Swimming Pool Heater                     | Ø          |                      |                      |                                |  |  |
| Trash Compactor                          |            | Ø                    |                      |                                |  |  |
| TV Antenna                               | V          |                      |                      |                                |  |  |
| Water Heater (Gas / Electric )           |            | Ø                    |                      |                                |  |  |
| Water Softener                           | Ø,         |                      |                      |                                |  |  |
| Wells                                    | Ø          |                      |                      |                                |  |  |
| INFO                                     | MAC        | ATION A              | BOUTST               | RUCTURE/                       | OTHER  |  |
|  |            |                      | HAS BEEN             | DATE                           | IN NEED  | DATE / DESCRIPTION OF COMPLETED                      |
| STRUCTURE / OTHER                        | N/A        | CONDITION            | REPLACED             | REPLACED                       | OF   | OR NEEDED REPAIRS                                    |
| Basement                                 | Ø,         |                      |                      |                                |  |  |
| Carport (Attached / Not Attached)        | Ø          |                      |                      |                                |  |  |
| Ceilings                                 |            | 团                    |                      |                                |  |  |
| Doors                                    | L Q        | Ø                    |                      |                                |  |  |
| Drains (French / Other )                 | 包          | Ц.,                  |                      |                                |  |  |
| Driveway                                 |            | Ø,                   | П                    |                                |  |  |
| ectrical Wiring                          |            | 4                    |                      |                                |  |  |
| ences                                    |            | Ø                    |                      |                                | <u> </u>   |  |
| Fireplace(s)/Chimney (mock)              | Ø          | 4                    |                      |                                |  |  |
| Fireplace(s)/Chimney (wood burning)      | Q          |                      | <u> </u>             |                                |  |  |
| Fireplace(s)/with gas logs               | ᆜ          | Q,                   |                      |                                |  |  |
| Floor                                    | ᆜ          | <b>2</b> ,           | <u> </u>             |                                | <u> </u>   |  |
| Foundation                               | Ц          | <u> </u>             |                      |                                | <u> </u>   |  |
| Garage                                   | 14         |                      | <u> </u>             |                                |  |  |
| Lighting (Outdoor)                       | <u>1</u>   | <u> </u>             |                      |                                | <u> </u>   |  |
| Patio/Decking                            |            | Ø                    |                      |                                | <u> </u>   |  |
| Retaining Wall                           |            | <del>    </del>      |                      | <u> </u>                       |  |  |
| Rain Gutters and Down Spouts             |            | <u> </u>             | <del>├</del>         |                                | 1 4  |  |
| Roof Sidewalks                           |            |                      | 1                    | <u> </u>                       | + = -  |  |
|  | <u>U</u> , |                      |                      |                                | $+$ $\stackrel{\vdash}{\vdash}$                  |  |
| Skylight(s) Sump or Grinder Pump         | N N        | , <u>U</u>           |                      | <b></b>                        | +==  |  |
| Walls (Exterior/Interior)                |            |                      | 1 0                  | ļ                              |  |  |
| Washer/Dryer Hookups                     | <u> </u>   | 1                    |                      |                                | <del>                                     </del> |  |
| (Gas / Electric )                        |            | <u> </u>             |                      |                                |  |  |
| Windows                                  |            |                      |                      |                                |  |  |
| Window Screens                           |            | 2                    |                      |                                |  |  |
| Other:                                   |            |                      |                      |                                |  |  |
| Other:                                   |            |                      |                      |                                |  |  |
| Other:                                   |            |                      |                      | <u> </u>                       |  |  |
| Other:                                   |            |                      |                      |                                |  |  |
| Other:                                   |            |                      |                      |                                |  |  |

| 206 | VZCR | 410 |
|-----|------|-----|

PROPERTY ADDRESS: Canton, TX 75103

MetroTex Association of REALTORS® 7167 (Oct 2011) Seller Initials:

Seller Initials:

SELLER'S DISCLOSURE NOTICE - PAGE 3 OF 8

Buyer Initials: Buyer Initials:

VZCR 4107 206

| 12. If stucco, what is the type of stucco?  13. The shingles or roof covering is constructed of:  15. Wood Composition Tile Other  16. Is there an overlay covering?  17. Yes No Unknown  18. The age of the shingles or roof covering:  19. Years Unknown  10. The electrical wiring of the Property is:  10. Copper Aluminum Unknown  11. Other (specify)  12. MISCELLANEOUS INFOR |     |          | 16. Is there an alarm system? ☑ Yes ☐ No - If "Yes", system is: ☐ Owned by Seller ☐ Leased by Seller - If leased, is lease transferable? ☐ Yes ☐ No  Monitor Charge: ☐ Mth ☐ Qtr ☐ Yr. \$  Lease Charge: ☐ Mth ☐ Qtr ☐ Yr. \$  17. Please identify other systems, if any, of the Property which ar leased and not owned by Seller: ☐ Per Owner ☐ Tax Rolls (If before 1978-complete, sign and attach TAR-1906 concerning lead-based paint hazards.) |                   |  |  |  |  |
|--|-----|----------|---|-------------------|--|--|--|--|
| 13. Is the Seller aware of any of the following conditions   | YES |          | UNKNOWN   | IF "YES", EXPLAIN |  |  |  |  |
| ASBESTOS Components  |     | Ø        |   |                   |  |  |  |  |
| Any personal or business BANKRUPTCY pending which would affect the sale of the Property?   |     | Ø        |   |                   |  |  |  |  |
| CARPET Stains/Damage   | ·Ø  |          |   | Minor stoins      |  |  |  |  |
| Located on or near CORP OF ENGINEERS Property?   |     | Ø        |   |                   |  |  |  |  |
| Any <b>DEATH</b> on the Property (except for those deaths caused by natural causes, suicide, or accident unrelated to the condition of the Property)?  |     | Ą        |   |                   |  |  |  |  |
| Unplatted EASEMENTS  |     | Q/       |   |                   |  |  |  |  |
| AULT Lines   |     | 'nZ,     |   |                   |  |  |  |  |
| revious FIRES  |     | Q        |   |                   |  |  |  |  |
| Any FORECLOSURES pending or threatened with respect to the Property  |     | ď,       |   |                   |  |  |  |  |
| Urea formaldehyde INSULATION   |     | Ω,       |   |                   |  |  |  |  |
| LANDFILL   |     | <u> </u> |   |                   |  |  |  |  |
| Any NOTICES of violation of deed restrictions or governmental ordinances affecting the condition or use of the Property  |     | Ø        |   |                   |  |  |  |  |
| Lead-based PAINT   |     | Ą        |   |                   |  |  |  |  |
| Room additions, structural modification, or other alterations or repairs made without necessary PERMITS or not in compliance with building codes in effect at that time  |     | ū        |   |                   |  |  |  |  |
| Above-ground impediment to swimming POOL   |     | 0/       |   |                   |  |  |  |  |
| Underground impediment to swimming POOL  |     | Ø        |   |                   |  |  |  |  |
| Any PROPERTY CONDITION which materially affects the physical health or safety of an individual   |     | ď        |   |                   |  |  |  |  |
| RADON gas  |     | Ø,       |   |                   |  |  |  |  |
| House SETTLING   |     | <u> </u> |   |                   |  |  |  |  |
| SOIL Movement  |     | Ø,       |   |                   |  |  |  |  |
| Subsurface STRUCTURES, Tanks, or Pits  |     | 12/      |   |                   |  |  |  |  |
| Hazardous or TOXIC WASTE affecting the Property  |     |          |   |                   |  |  |  |  |
| Holes in WALLS   |     |          |   |                   |  |  |  |  |

S® 7167 (Oct 2011) Seller Initials: Seller Initials: Seller Initials: Buyer Initials: Buyer Initials: Produced with zipForm® by zipLogix 18070 Fifteen Mile Road, Fraser, Michigan 48028 www.zipLogix.com VZCR 4107 206

|  | YES       |                   | / UN | IKNOW                                   | IF "YES", EXPLAIN   |
|--|-----------|-------------------|------|---|---|
| WOOD ROT Damage Needing Repair   |           | A                 |      |   |   |
| Property covered by flood insurance? (If "Yes", attach "Information About Special  |           | Ø                 |      |   |   |
| Flood Hazard Areas," TAR No. 1414.)  | <u> </u>  |                   |      |   |   |
| Located in 100 year FLOOD PLAIN  |           | Q                 |      |   | 10,044  |
| Located in a Floodway?   |           | <u> </u>          |      |   |   |
| Located in a city flood plain?   |           |                   |      |   |   |
| Tax or judgment liens?   |           | Q                 |      |   |   |
| In an ETJ district? (Extra Territorial Jurisdiction)   |           |                   |      |   |   |
| Diseased TREES?  |           |                   |      |   |   |
| Liquid Propane Gas   | M         |                   |      |   |   |
| LP Community (Captive)   |           | - <del>.</del>    |      |   |   |
| LP on Property Single Blockable Main Drain in Pool/Hot Tub/Spa*  |           | 2                 |      | <u>l</u>                                |   |
| *A Single Blockable Main Drain may cause a suction entrapment hazard for an individual.                                      |           | Q'                |      |   |   |
| 20. If the Property is part of a regime creating a h association, state the following information:                           | omeo      | wner's            |      |   | NFORMATION ABOUT FOUNDATION   |
| - Association Name:  |           |                   | 27   |   | ne Seller ever obtained a written report about the                        |
| - Association Management Company   |           |                   |      | inspect                                 | tor, or expert?<br>es ☑No ☐ Unknown                                       |
| - Association Email:   |           |                   |      |   | s", identify the report by stating the date of the report                 |
| - Association Phone Number:  |           |                   |      |   | son or company who made the report, and its content:                      |
| - Amount of dues or assessments: \$  |           |                   |      | *************************************** |   |
| - Assessment amount is:  |           |                   |      | -                                       |   |
| Monthly \$ Quarterly \$ Annually   | \$        |                   |      |   |   |
| - Payment of dues/assessments is:  |           |                   | 28   |   | repairs been made to the foundation of the Property                       |
| ☐ Mandatory ☐ Voluntary  |           |                   |      |   | s original construction?<br>es ☑No ☐ Unknown                              |
| - Amount of Unpaid Dues or Assessments,  |           |                   |      |   | es", explain what repairs you know or believe to have                     |
| if any: \$<br>- Optional Membership: \$  |           |                   |      | been n                                  | · · ·   |
|  | . 5.1.2   |                   |      |   |   |
| <ol> <li>Is the Property in an overlay, proposed overlay<br/>conservation district that may have special restrict</li> </ol> |           |                   |      | *************************************** |   |
| ☐ Yes No ☐ Unknown   |           |                   |      |   |   |
| - If "Yes", explain:   |           |                   |      |   | INFORMATION ABOUT DRAINAGE  |
|  |           |                   | 29   | . Has th                                | ne Seller ever obtained a written report about any                        |
| 22. The Property is currently serviced by the following  | ig util   | ities or          |      | improp                                  | er drainage condition from any engineer, contractor                       |
| systems (check as applicable):   |           |                   |      | -                                       | tor, or expert? ☐ Yes ☐ No ☐ Unknown                                      |
| ✓ Water ☐ Sewer ☐ Septic   |           |                   |      |   | es", identify the report by stating the date of the report                |
| ☑ Electricity ☐ Gas ☐ Cable TV   |           | 0.15              |      | the per                                 | son or company who made the report, and its content:                      |
| High Speed Internet Availability: ☑ Cable ☑ DSI ☐ Unknown  | - LJ (    | Jiner             |      |   |   |
|  | /ab       |                   | 20   | Havar                                   | anaira hang mada ta tha dyainana af tha Dyanayty ainas                    |
| 23. The water service to the Property is provided be applicable): ☐ City ☐ Well ☑ MUD ☐ C                                    |           | eck as            | 30   |   | epairs been made to the drainage of the Property since inal construction? |
| 24. Has the Seller ever collected any insurance  |           | monte             |      |   | rial consystation:  |
| pursuant to a claim you have made for dan  |           |                   |      |   | es", explain what repairs you know or believe to have                     |
| Property and then not used the proceeds to make  |           |                   | Ì    |   | nade:   |
| for which the claim was submitted: 🔲 Yes 🍾   | Z′No      | •                 |      | <del> </del>                            |   |
| - If "Yes", explain:   |           |                   | 31   | Does t                                  | he Seller know of any currently defective condition to                    |
| 25. Are there any outstanding mechanics and materia  | almen     | 's liens          | "    | the dra                                 | linage of the Property?   |
| or lis pendens against the Property? ☐ Yes  ☑ No  ☐ Unknown  |           |                   |      |   | es ☑No ☐ Unknown  |
| רבי ויין אינט און אינט און די פאר מארט און אינט אינט אינט אינט אינט אינט אינט אינט   | acted     | to the            |      |   | s", explain:  |
| property's public water supply that is able to indoor potable purposes?  |           |                   |      |   |   |
| ☐ Yes ☐ No ☐ Unknown   |           |                   |      |   |   |
| 206 VZCR 4107  |           |                   |      |   |   |
| PROPERTY ADDRESS: Canton, TX 75103   |           |                   | }    |   | SELLER'S DISCLOSURE NOTICE - PAGE 5 OF 8                                  |
| MetroTex Association of REALTORS® 7167 (Oct 2011) Se   | eller Ini | itials: <u>そで</u> | Х    | Seller Ini                              | itials Buyer Initials: Buyer Initials:                                    |

| 32.          | Have there been any previous incidents of flooding or other   |   | FORMATION ABOUT ENVIRONMENTAL CONDITIONS  |
|--------------|---|---|---|
|              | water penetration into the house, garage, or accessory buildings of the Property?  Yes No Unknown  If "Yes", when did the incident(s) occur and describe the extent of flooding or water penetration: | 39.   | Is the Seller aware of any repairs or treatment, other than routine maintenance, for the following environmental conditions?  The presence or removal of asbestos Yes No The presence of radon gas              |
|              |   |   | The presence or treatment of mold   |
|              | INFORMATION ABOUT TERMITES/WOOD DESTROYING INSECTS  |   | The presence of lead based paint ☐ Yes ☑ No Other: ☐ Yes ☐ No - If "Yes", explain: ☐ Yes ☐ No   |
| 33.          | Has the Seller ever obtained a written report about active termites or other wood destroying insects?  ☐ Yes ☑ No   | 4.0   |   |
|              | - If "Yes", identify the report by stating the date of the report, the person or company who made the report, and its content:  | 40.   | If the answer to any part of Question #39 is "Yes," has the Seller ever obtained a written report for addressing such environmental hazards?  — Yes — No  — If "Yes", explain:                                  |
| 34.          | Has the Property been treated for termites or other wood destroying insects?  |   | (Identify any reports by stating the date of the report, the person or company who made the report, and its content.)   |
|              | ☐ Yes ☐ No ☑ Unknown  - If "Yes", please state the date of treatment:   | 41.   | Is Seller aware of previous use of premises for manufacture of Methamphetamine?   |
| 35.          | Have there been any repairs made to damage caused by termites or other wood destroying insects?  ☐ Yes ☑ No ☐ Unknown  - If "Yes", explain what repairs you know or believe to have been made:        | 42.   | Is the Seller aware of any condition not previously addressed in this Disclosure Statement which, in Seller's opinion, is a defective condition or adversely affects the Property?  Yes No - If "Yes", explain: |
|              |   |   | - II Tes , explain.   |
| <b>ු</b> ත්. | Do active termites or other wood destroying insects currently infest the Property?  |   |   |
|              | ☐ Yes ☑ No ☐ Unknown  |   | ACKNOWLEDGMENT BY SELLER  |
|              | - If "Yes", explain:  | 43.   | I, the Seller, state that the information in this disclosure is complete and accurate to the best of my knowledge and belief.   |
| 37.          | Is there any existing termite damage in need of repair?  ☐ Yes ☐ No ☐ Unknown  - If "Yes", explain:   |   | Seller(s) Initials  Seller(s) Initials  Seller(s) Initials  |
|              |   | 44.   | I, the Seller, understand the information in this statement will<br>be disseminated by Listing Broker to prospective buyers and   |
| 38.          | Is the Property currently covered by a termite policy?  Yes No  |   | Seller(s) Initials Seller(s) Initials   |
|              | - If "Yes", identify the policy by stating: Name of Company issuing policy:   | 45.   | The listing agent has not instructed Seller how to answer any question in this disclosure or suggested any answer to Seller   |
|              | Policy Number:  |   | or in any way sought to influence Seller to provide any information or answers which are not absolutely true so far as  |
|              | Date of policy renewal:   |   | the Seller knows.   |
|              | Phone Number:   |   | Seller(s) Initials Seller(s) Initials   |
|              |   | A THE CASE OF THE |   |
|              |   | -   |   |

206 VZCR 4107

PROPERTY ADDRESS: Canton, TX 75103

MetroTex Association of REALTORS® 7167 (Oct 2011) Seller Initials:

SELLER'S DISCLOSURE NOTICE - PAGE 6 OF 8

Buyer Initials: Buyer Initials:

| DISCLOSURES   |
|---|
| Municipal Utility District Disclosures  Check All That Apply:   |
| [Attach additional MUD Disclosure Notice provided by Chapter 49, Texas Water Code]  |
| ☐ The Property is located in a Municipal Utility District (MUD) which is either: ☐ Located in whole or in part within the corporate boundaries of a municipality (MUD Disclosure Form #1)   |
| Not located in whole or in part within the corporate boundaries of a municipality (MUD Disclosure Form #2)  |
| Located in whole or in part within the extraterritorial jurisdiction of the corporate boundaries of a municipality.  (MUD Disclosure Form #3)   |
| On-Site Sewer Facility  |
| If the Property has a septic or other on-site sewer facility:   |
| ☐ Attached is Information About On-Site Sewer Facility (TAR #1407)  |
| ☐ Property is located in a Public Improvement District (PID)  |
| SMOKE DETECTION EQUIPMENT   |
| Does the property have working smoke detectors installed in accordance with the smoke detector requirements of Chapter 766 of the Health and Safety Code?*   Unknown  No Yes. If no, or unknown, explain. (Attach additional sheets if necessary):  |
| * Chapter 766 of the Health and Safety Code requires one-family or two family dwellings to have working smoke detectors installed cordance with the requirements of the building code in effect in the area in which the dwelling is located, including performance ation, and power source requirements. If you do not know the building code requirements in effect in your area, you may check unknown above or contact your local building official for more information.   |
| A buyer may require a seller to install smoke detectors for the hearing impaired if: (1) the buyer or a member of the buyer's family whe will reside in the dwelling is hearing-impaired; (2) the buyer gives the seller written evidence of the hearing impairment from a license physician; and (3) within 10 days after the effective date, the buyer makes a written request for the seller to install smoke detectors for the hearing-impaired and specifies the locations for the installation. The parties may agree who will bear the cost of installing the smoke detectors and which brand of smoke detectors to install. |

## **INDEMNIFICATION**

SELLER(S) HEREBY AGREE(S) TO INDEMNIFY LISTING BROKER AND ALL OTHER BROKERS PARTICIPATING IN ANY SALE OF THE PROPERTY OF AND FROM ANY CLAIM, LOSS, OR DAMAGE ARISING FROM ANY FALSE REPRESENTATION CONTAINED IN THIS DISCLOSURE STATEMENT.

SELLER (SIGN AS NAME APPEARS ON TITLE)

Rickey D. Dodson

SELLER (SIGN AS NAME APPEARS ON TITLE)

Gina Dodson

206 VZCR 4107

PROPERTY ADDRESS: Canton, TX 75103

MetroTex Association of REALTORS® 7167 (Oct 2011) Seller Initials:

Seller Initials:

SELLER'S DISCLOSURE NOTICE - PAGE 7 OF 8

Buyer Initials: \_\_\_\_\_ Buyer Initials: \_\_\_

## NOTIGES TO BUYER

- The Texas Department of Public Safety maintains a database that consumers may search, at no cost, to determine if registered sex offenders are located in certain zip code areas. To search the database, visit www.txdps.state.tx.us. For information concerning past criminal activity in certain areas or neighborhoods, contact the local police department.
- Such written information in this Seller's Disclosure Notice for the Property does not constitute the representations of the Listing Broker and other Broker participating in a sale transaction or their sales associates, employees or agents who are relying upon the written information provided by the Seller in this disclosure notice. Buyer is not relying upon any statement or representation by the Listing Broker and any other broker and their sales associates, employees, and agents concerning the condition of the Property. THIS IS NOT A WARRANTY. YOU ARE ENCOURAGED TO HAVE AN INSPECTOR OF YOUR CHOICE INSPECT THE PROPERTY PRIOR TO CLOSING.
- Buyer may be provided information about the size of the property, either of the real property or the improvements. All such information has been obtained by Broker or Seller from third parties, including information obtained from official tax records. Such information is not always accurate.
- If the Buyer bases an offer on square footage, measurements or boundaries, Buyer should have those items independently measured to verify any reported information which is often unreliable.
- If the property is located in a coastal area that is seaward of the Gulf Intracoastal Waterway or within 1000 feet of the mean high tide bordering the Gulf of Mexico, the property may be subject to the Open Beaches Act or the Dune Protection Act (Chapter 61 or 63), Natural Resources Code, respectively and a beachfront construction certificate or dune protection permit may be required for repairs or improvements. Contact the local government with ordinance authority over construction adjacent to public beaches for more information.

BUYER DATE BUYER DATE

Printed Name:

The undersigned Buyer(s) hereby acknowledge(s) receipt of this Seller's Disclosure Notice for the Property:

| 206 VZCR 4107                      |     | and the second |
|------------------------------------|-----|----------------|
| PROPERTY ADDRESS: Canton, TX 75103 | Λ A | SELLER'S DIS   |

SCLOSURE NOTICE - PAGE 8 OF 8

Buyer Initials: \_\_\_\_\_\_ Buyer Initials: \_\_\_\_\_ Seller Initials: 🖂

VZCR 4107 206

Printed Name: \_\_\_