



TEXAS ASSOCIATION OF REALTORS® SELLER'S DISCLOSURE NOTICE

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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 84 Lois Kay St.
Harper, TX 78631

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

Seller ☒ is ☐ is not occupying the Property. If unoccupied (by Seller), how long since Seller has occupied the Property?
☐ _____ or ☐ never occupied the Property

Section 1. The Property has the items marked below: (Mark Yes (Y), No (N), or Unknown (U).)

This notice does not establish the items to be conveyed. The contract will determine which items will & will not convey.

Item	Y	N	U
Cable TV Wiring	<input checked="" type="checkbox"/>		
Carbon Monoxide Det.		<input checked="" type="checkbox"/>	
Ceiling Fans	<input checked="" type="checkbox"/>		
Cooktop		<input checked="" type="checkbox"/>	
Dishwasher	<input checked="" type="checkbox"/>		
Disposal		<input checked="" type="checkbox"/>	
Emergency Escape Ladder(s)		<input checked="" type="checkbox"/>	
Exhaust Fans	<input checked="" type="checkbox"/>		
Fences	<input checked="" type="checkbox"/>		
Fire Detection Equip.	<input checked="" type="checkbox"/>		
French Drain			<input checked="" type="checkbox"/>
Gas Fixtures		<input checked="" type="checkbox"/>	
Natural Gas Lines		<input checked="" type="checkbox"/>	

Item	Y	N	U
Liquid Propane Gas:		<input checked="" type="checkbox"/>	
-LP Community (Captive)		<input checked="" type="checkbox"/>	
-LP on Property		<input checked="" type="checkbox"/>	
Hot Tub		<input checked="" type="checkbox"/>	
Intercom System		<input checked="" type="checkbox"/>	
Microwave		<input checked="" type="checkbox"/>	
Outdoor Grill	<input checked="" type="checkbox"/>		
Patio/Decking	<input checked="" type="checkbox"/>		
Plumbing System	<input checked="" type="checkbox"/>		
Pool	<input checked="" type="checkbox"/>		
Pool Equipment	<input checked="" type="checkbox"/>		
Pool Maint. Accessories	<input checked="" type="checkbox"/>		
Pool Heater		<input checked="" type="checkbox"/>	

Item	Y	N	U
Pump: <input type="checkbox"/> sump <input type="checkbox"/> grinder		<input checked="" type="checkbox"/>	
Rain Gutters		<input checked="" type="checkbox"/>	
Range/Stove	<input checked="" type="checkbox"/>		
Roof/Attic Vents	<input checked="" type="checkbox"/>		
Sauna		<input checked="" type="checkbox"/>	
Smoke Detector	<input checked="" type="checkbox"/>		
Smoke Detector - Hearing Impaired		<input checked="" type="checkbox"/>	
Spa		<input checked="" type="checkbox"/>	
Trash Compactor		<input checked="" type="checkbox"/>	
TV Antenna		<input checked="" type="checkbox"/>	
Washer/Dryer Hookup	<input checked="" type="checkbox"/>		
Window Screens	<input checked="" type="checkbox"/>		
Public Sewer System		<input checked="" type="checkbox"/>	

Item	Y	N	U	Additional Information
Central A/C	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> electric <input type="checkbox"/> gas number of units: <u>1</u>
Evaporative Coolers		<input checked="" type="checkbox"/>		number of units: _____
Wall/Window AC Units		<input checked="" type="checkbox"/>		number of units: _____
Attic Fan(s)			<input checked="" type="checkbox"/>	if yes, describe: _____
Central Heat	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> electric <input type="checkbox"/> gas number of units: <u>1</u>
Other Heat		<input checked="" type="checkbox"/>		if yes, describe: _____
Oven	<input checked="" type="checkbox"/>			number of ovens: <u>1</u> <input checked="" type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> other: _____
Fireplace & Chimney		<input checked="" type="checkbox"/>		<input type="checkbox"/> wood <input type="checkbox"/> gas logs <input type="checkbox"/> mock <input type="checkbox"/> other: _____
Carport	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> attached <input type="checkbox"/> not attached
Garage		<input checked="" type="checkbox"/>		<input type="checkbox"/> attached <input type="checkbox"/> not attached
Garage Door Openers		<input checked="" type="checkbox"/>		number of units: _____ number of remotes: _____
Satellite Dish & Controls	<input checked="" type="checkbox"/>			<input type="checkbox"/> owned <input type="checkbox"/> leased from _____
Security System		<input checked="" type="checkbox"/>		<input type="checkbox"/> owned <input type="checkbox"/> leased from _____
Water Heater	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> other: _____ number of units: <u>1</u>
Water Softener		<input checked="" type="checkbox"/>		<input type="checkbox"/> owned <input type="checkbox"/> leased from _____
Underground Lawn Sprinkler		<input checked="" type="checkbox"/>		<input type="checkbox"/> automatic <input type="checkbox"/> manual areas covered: _____
Septic / On-Site Sewer Facility	<input checked="" type="checkbox"/>			if yes, attach Information About On-Site Sewer Facility (TAR-1407)

(TAR-1406) 9-01-11

Initialed by: Seller: lye, RR and Buyer: _____

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84 Lois Kay St.
Harper, TX 78631

Concerning the Property at _____

Water supply provided by: ☒ city ☐ well ☐ MUD ☐ co-op ☐ unknown ☒ other: Aqua Texas

Was the Property built before 1978? ☐ yes ☒ no ☐ unknown

(If yes, complete, sign, and attach TAR-1906 concerning lead-based paint hazards).

Roof Type: composition Age: _____ (approximate)

Is there an overlay roof covering on the Property (shingles or roof covering placed over existing shingles or roof covering)?

☐ yes ☐ no ☒ unknown

Are you (Seller) aware of any of the items listed in this Section 1 that are not in working condition, that have defects, or are need of repair? ☐ yes ☒ no If yes, describe (attach additional sheets if necessary): _____

Section 2. Are you (Seller) aware of any defects or malfunctions in any of the following?: (Mark Yes (Y) if you are aware and No (N) if you are not aware.)

Item	Y	N
Basement		<input checked="" type="checkbox"/>
Ceilings		<input checked="" type="checkbox"/>
Doors		<input checked="" type="checkbox"/>
Driveways		<input checked="" type="checkbox"/>
Electrical Systems		<input checked="" type="checkbox"/>
Exterior Walls		<input checked="" type="checkbox"/>

Item	Y	N
Floors		<input checked="" type="checkbox"/>
Foundation / Slab(s)		<input checked="" type="checkbox"/>
Interior Walls		<input checked="" type="checkbox"/>
Lighting Fixtures		<input checked="" type="checkbox"/>
Plumbing Systems		<input checked="" type="checkbox"/>
Roof		<input checked="" type="checkbox"/>

Item	Y	N
Sidewalks		<input checked="" type="checkbox"/>
Walls / Fences		<input checked="" type="checkbox"/>
Windows		<input checked="" type="checkbox"/>
Other Structural Components		<input checked="" type="checkbox"/>

If the answer to any of the items in Section 2 is yes, explain (attach additional sheets if necessary): _____

Section 3. Are you (Seller) aware of any of the following conditions: (Mark Yes (Y) if you are aware and No (N) if you are not aware.)

Condition	Y	N
Aluminum Wiring		<input checked="" type="checkbox"/>
Asbestos Components		<input checked="" type="checkbox"/>
Diseased Trees: <input checked="" type="checkbox"/> oak wilt <input type="checkbox"/> _____		<input checked="" type="checkbox"/>
Endangered Species/Habitat on Property		<input checked="" type="checkbox"/>
Fault Lines		<input checked="" type="checkbox"/>
Hazardous or Toxic Waste		<input checked="" type="checkbox"/>
Improper Drainage		<input checked="" type="checkbox"/>
Intermittent or Weather Springs		<input checked="" type="checkbox"/>
Landfill		<input checked="" type="checkbox"/>
Lead-Based Paint or Lead-Based Pt. Hazards		<input checked="" type="checkbox"/>
Encroachments onto the Property		<input checked="" type="checkbox"/>
Improvements encroaching on others' property		<input checked="" type="checkbox"/>
Located in 100-year Floodplain		<input checked="" type="checkbox"/>
Located in Floodway		<input checked="" type="checkbox"/>
Present Flood Ins. Coverage (If yes, attach TAR-1414)		<input checked="" type="checkbox"/>
Previous Flooding into the Structures		<input checked="" type="checkbox"/>
Previous Flooding onto the Property		<input checked="" type="checkbox"/>
Previous Fires		<input checked="" type="checkbox"/>
Previous Use of Premises for Manufacture of Methamphetamine		<input checked="" type="checkbox"/>

Condition	Y	N
Previous Foundation Repairs		<input checked="" type="checkbox"/>
Previous Roof Repairs		<input checked="" type="checkbox"/>
Other Structural Repairs		<input checked="" type="checkbox"/>
Radon Gas		<input checked="" type="checkbox"/>
Settling		<input checked="" type="checkbox"/>
Soil Movement		<input checked="" type="checkbox"/>
Subsurface Structure or Pits		<input checked="" type="checkbox"/>
Underground Storage Tanks		<input checked="" type="checkbox"/>
Unplatted Easements		<input checked="" type="checkbox"/>
Unrecorded Easements		<input checked="" type="checkbox"/>
Urea-formaldehyde Insulation		<input checked="" type="checkbox"/>
Water Penetration		<input checked="" type="checkbox"/>
Wetlands on Property		<input checked="" type="checkbox"/>
Wood Rot		<input checked="" type="checkbox"/>
Active infestation of termites or other wood destroying insects (WDI)		<input checked="" type="checkbox"/>
Previous treatment for termites or WDI		<input checked="" type="checkbox"/>
Previous termite or WDI damage repaired		<input checked="" type="checkbox"/>
Termite or WDI damage needing repair		<input checked="" type="checkbox"/>
Single Blockable Main Drain in Pool/Hot Tub/Spa*		<input checked="" type="checkbox"/>

Concerning the Property at _____

If the answer to any of the items in Section 3 is yes, explain (attach additional sheets if necessary): _____

one tree is presumed to have oak wilt

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

Section 4. Are you (Seller) aware of any item, equipment, or system in or on the Property that is in need of repair, which has not been previously disclosed in this notice? ☐ yes ☒ no If yes, explain (attach additional sheets if necessary): _____

Section 5. Are you (Seller) aware of any of the following (Mark Yes (Y) if you are aware. Mark No (N) if you are not aware.)

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.

☐ ☒ Homeowners' associations or maintenance fees or assessments. If yes, complete the following:
Name of association: _____
Manager's name: _____ Phone: _____
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: _____

☐ ☒ 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.

☐ ☒ 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 connected to the property's public water supply that is able to be used for indoor potable purposes.

If the answer to any of the items in Section 5 is yes, explain (attach additional sheets if necessary): _____

Concerning the Property at _____

Section 6. Seller ☐ has ☒ has not attached a survey of the Property.

Section 7. Within the last 4 years, have you (Seller) received any written inspection reports from persons who regularly provide inspections and who are either licensed as inspectors or otherwise permitted by law to perform inspections? ☒ yes ☐ no If yes, attach copies and complete the following:

Inspection Date	Type	Name of Inspector	No. of Pages
2-26-09	Property	Lynn Hahn	8

Note: A buyer should not rely on the above-cited reports as a reflection of the current condition of the Property. A buyer should obtain inspections from inspectors chosen by the buyer.

Section 8. Check any tax exemption(s) which you (Seller) currently claim for the Property:

- ☒ Homestead ☐ Senior Citizen ☐ Disabled
☐ Wildlife Management ☐ Agricultural ☐ Disabled Veteran
☐ Other: _____ ☐ Unknown

Section 9. Have you (Seller) ever received proceeds for a claim for damage to the Property (for example, an insurance claim or a settlement or award in a legal proceeding) and not used the proceeds to make the repairs for which the claim was made? ☐ yes ☒ no If yes, explain: _____

Section 10. 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 in accordance with the requirements of the building code in effect in the area in which the dwelling is located, including performance, location, and power source requirements. If you do not know the building code requirements in effect in your area, you may check unknown above or contact your local building official for more information.*

A buyer may require a seller to install smoke detectors for the hearing impaired if: (1) the buyer or a member of the buyer's family who will reside in the dwelling is hearing-impaired; (2) the buyer gives the seller written evidence of the hearing impairment from a licensed physician; and (3) within 10 days after the effective date, the buyer makes a written request for the seller to install smoke detectors for the hearing-impaired and specifies the locations for installation. The parties may agree who will bear the cost of installing the smoke detectors and which brand of smoke detectors to install.

Seller acknowledges that the statements in this notice are true to the best of Seller's belief and that no person, including the broker(s), has instructed or influenced Seller to provide inaccurate information or to omit any material information.

Signature of Seller: Robin A. Reid by Lisa J. Reid PDA Date: 6-26-12
 Signature of Seller: Lisa J. Reid Date: 6-26-12
 Printed Name: Robin A. Reid Printed Name: Lisa J. Reid

Concerning the Property at _____

ADDITIONAL NOTICES TO BUYER:

- (1) The Texas Department of Public Safety maintains a database that the public 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.
- (2) If the property is located in a coastal area that is seaward of the Gulf Intracoastal Waterway or within 1,000 feet of the mean high tide bordering the Gulf of Mexico, the property may be subject to the Open Beaches Act or the Dune Protection Act (Chapter 61 or 63, Natural Resources Code, respectively) and a beachfront construction certificate or dune protection permit may be required for repairs or improvements. Contact the local government with ordinance authority over construction adjacent to public beaches for more information.
- (3) If you are basing your offers on square footage, measurements, or boundaries, you should have those items independently measured to verify any reported information.
- (4) The following providers currently provide service to the property:

Electric: <u>Central TX Electric Co-op</u>	phone #: _____
Sewer: <u>NA</u>	phone #: _____
Water: <u>Agua Texas</u>	phone #: _____
Cable: <u>DISH</u>	phone #: _____
Trash: <u>Bill Holmes</u>	phone #: _____
Natural Gas: <u>NA</u>	phone #: _____
Phone Company: <u>Windstream</u>	phone #: _____
Propane: <u>NA</u>	phone #: _____

- (5) This Seller's Disclosure Notice was completed by Seller as of the date signed. The brokers have relied on this notice as true and correct and have no reason to believe it to be false or inaccurate. YOU ARE ENCOURAGED TO HAVE AN INSPECTOR OF YOUR CHOICE INSPECT THE PROPERTY.

The undersigned Buyer acknowledges receipt of the foregoing notice.

Signature of Buyer _____	Date _____	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.
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CONCERNING THE PROPERTY AT

84 Lois Kay St.
Harper, TX 78631

A. DESCRIPTION OF ON-SITE SEWER FACILITY ON PROPERTY:

- (1) Type of Treatment System: ☐ Septic Tank ☐ Aerobic Treatment ☒ Unknown
- (2) Type of Distribution System: ☒ Unknown
- (3) Approximate Location of Drain Field or Distribution System: ☐ Unknown
sw of house
- (4) Installer: Zinsmeister ☐ Unknown
- (5) Approximate Age: 1999 ☐ Unknown

B. MAINTENANCE INFORMATION:

- (1) Is Seller aware of any maintenance contract in effect for the on-site sewer facility? ☐ Yes ☒ No
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? ☐ Yes ☒ No
If yes, explain: _____
- (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 OSSF was installed
☐ maintenance contract ☐ manufacturer information ☐ warranty information ☐ _____
- (2) "Planning materials" are the supporting materials that describe the on-site sewer facility that are submitted to the permitting authority in order to obtain a permit to install the on-site sewer facility.
- (3) It may be necessary for a buyer to have the permit to operate an on-site sewer facility transferred to the buyer.

- 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>	<u>Usage (gal/day) without water- saving devices</u>	<u>Usage (gal/day) with water- saving devices</u>
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.

Robin A. Reid 6-26-12
Signature of Seller Date
Robin A. Reid by Lisa J. Reid POA

Lisa J. Reid 6-26-12
Signature of Seller Date
Lisa J. Reid

Receipt acknowledged by:

Signature of Buyer Date

Signature of Buyer Date

Date: 2/24/99

Site Evaluation Number: _____

Applicant Information:

Name: MIKE WOODWARD
 Address: _____
 City: _____ State: _____
 Zip Code: _____ Phone: _____ Fax: _____

Site Evaluator Information:

Name: BRUCE CHASPEL
 Company: BPC & SONS ENGINEERING INC.
 Address: PO BOX 363
 City: CHANDLER State: TX
 Zip Code: 76832 Phone: 915 Fax: 915
622-4491 622-4260

Property Location:

Lot: 110 Block: _____ Subdivision: HARPER RD
 Street/Road Address: LOIS RAY
 County: GILLESPIE Unincorporated Area: Rt 11
 City: HARPER RD Zip Code: 78631
 Additional Information: _____

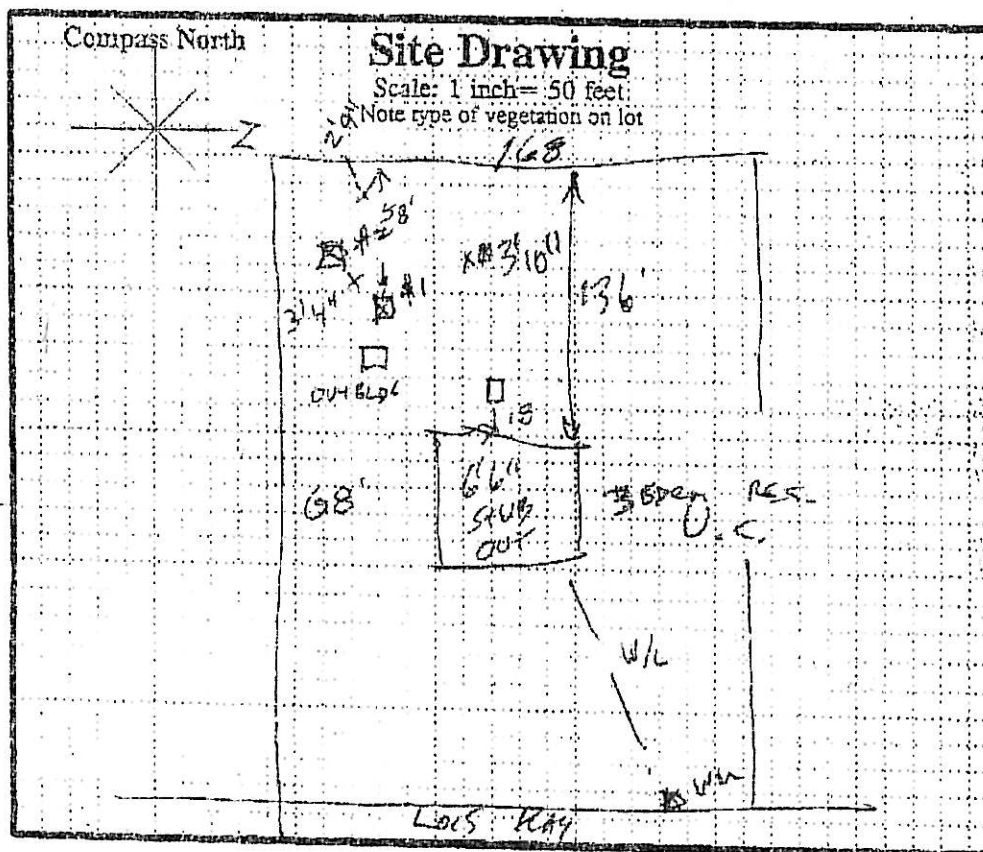
Installer Information:

Name: PAUL EINSWARTER
 Company: _____
 Address: _____
 City: _____ State: _____
 Zip Code: _____ Phone: _____ Fax: _____

Schematic of Lot or Tract

Show:

Compass North, adjacent streets, property lines, property dimensions, location of buildings, easements, swimming pools, water lines, and other surface improvements where known (drainage, patios, sidewalks).
 Location of existing or proposed water wells within 150 feet of property.
 Indicate slope or provide contour lines from the structure to the farthest location of the proposed soil absorption or irrigation area.
 Location of soil borings or dug pits (show location with respect to a known reference point).
 Location of natural, constructed, or proposed drainage ways, (streams, ponds, lakes, rivers, high tide of salt water bodies) water impoundment areas, cut or fill bank, sharp slopes and breaks.

Lot Size: 1.0 acres

Features of Site Area

Presence of 100 year flood zone
 Presence of adjacent ponds, streams, water impoundments
 Existing or proposed water well in nearby area
 Organized sewage service available to lot or tract

Yes _____ No /
 Yes _____ No /
 Yes _____ No /
 Yes _____ No /

Site Evaluator:

Name: BRUCE CHASPEL
 (Circle one: RS, PE DR, Installer: E)

Signature: Br R ChaspeLicense No: 057107

TX PE 42905

Date: 16 Aug 99

Number: _____

Applicant Information:

Name: Mike WARD
 Address: 11 Turner Dr
 City: Harpers State: Tx
 Zip Code: 78631 Phone: 364-4765 Fax: _____

Site Evaluator Information:

Name: Paul Zinsmeister
 Company: Paul Zinsmeister Corp Inc
 Address: 4043 Box 53B
 City: Harpers State: Tx
 Zip Code: 78631 Phone: 364-4457 Fax: _____

Property Location:

Lot: 110 Block: _____ Subdivision: Harpers Pk Estates
 Street/Road Address: Lois Kay Dr
 County: Gillespie Unincorporated Area: Box N
 City: Harpers Zip Code: 78631
 Additional Information: Survey # 220
Abstract # 273

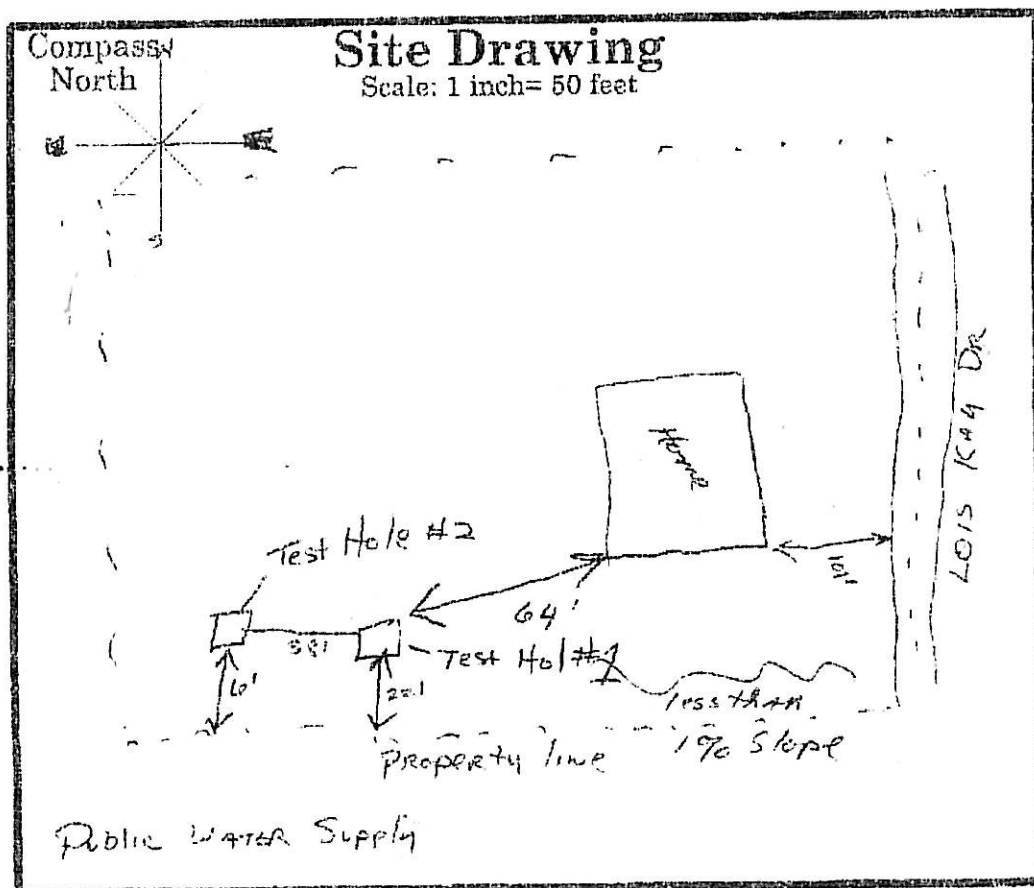
Installer Information:

Name: Paul Zinsmeister
 Company: Paul Zinsmeister Corp Inc
 Address: 4043 Box 53B
 City: Harpers State: Tx
 Zip Code: 78631 Phone: 364-4457 Fax: _____

Schematic of Lot or Tract

Show:

- Compass North, adjacent streets, property lines, property dimensions, location of buildings, easements, swimming pools, water lines, and other structures where known.
- Location of existing or proposed water wells within 150 feet of property.
- Indicate slope or provide contour lines from the structure to the farthest location of the proposed soil absorption or irrigation area.
- Location of soil borings or dug pits (show location with respect to a known reference point).
- Location of natural, constructed, or proposed drainage ways, (streams, ponds, lakes, rivers, high tide of salt water bodies) water impoundment areas, cut or fill bank, sharp slopes and breaks.

Lot Size: 2 acres**Features of Site Area**

Presence of 100 year flood zone	Yes _____	No <input checked="" type="checkbox"/>
Presence of upper water shed	Yes _____	No <input checked="" type="checkbox"/>
Presence of adjacent ponds, streams, water impoundments	Yes _____	No <input checked="" type="checkbox"/>
Existing or proposed water well in nearby area	Yes _____	No <input checked="" type="checkbox"/>
Organized sewage service available to lot or tract	Yes _____	No <input checked="" type="checkbox"/>

Site Evaluator Name: Paul Zinsmeister Signature: [Signature] License No: 5020

APPLICATION FOR PRIVATE SEWAGE SYSTEM
CONSTRUCTION PERMIT AND LICENSEDATE 7-17-99 PERMIT NO. 8533 FEE 150.00

I, hereby make an application for a license to construct and operate a private sewage disposal system in Gillespie County, Texas.

OWNER Michael & Pamela Woodward PHONE NO. 830-564-4768MAILING ADDRESS 4610 Hwy 17, P.O. Box 7808, Austin, TX 78761HOUSE NO. AND STREET ADDRESS 4610 Hwy 17

SUBDIVISION, DESCRIBED LOCATION OR ATTACH A MAP/SKETCH

NAME James C. WoodSIZE ACREAGE OR TRACT 1.00 SECTION 1 BLOCK 1 LOT 10

DESCRIPTION OF STRUCTURE TO BE SERVED

House (☒) Mobile Home () Other ()

Commercial (Type of Business)

Living Area () Bathrooms () Disposal (☒)Washing Machine () Dishwasher (☒) Water Softener () Other ()

Water Supply By: Public System () Community () Individual ()

DATE 7-19-99 INSPECTOR-SANITARIAN [Signature]

Authorization is hereby given to the Private Sewage Facility, Gillespie County, Texas, Texas Department of Water Resources, the Texas State Department of Health Resources, or their agents or designees, singly or jointly, to enter upon the above described property for the purpose of making soil percolation tests, inspecting sewage systems, or for any reason consistent with the water quality program of the Texas Department of Water Resources, the Texas State Department of Health Resources and the Private Sewage Facility, Gillespie County, Texas.

(If signed by Owner, Authorized Agent, Contractor, provide name, address and phone #)

DATE 7/19/99 [Signature]
Signature of Owner or Authorized Agent

Authorization to proceed with construction will be provided after a joint (Owner or installer and Inspector for the Private Sewage Facility, Gillespie County, Texas) survey of the proposed site for the facility and analysis of percolation test data (if required).

THIS PERMIT TO CONSTRUCT IS VALID FOR 180 DAYS.
OFFICIAL USE ONLY

SOIL INSPECTION OR PERCOLATION TEST

DATE 7/19/99 PERMIT NO. 8533 FEE 150.00

TYPE SOIL - Rocky () Gravel () Sand () Other ()

SLOPE - Flat () Sloping () Other ()

PERCOLATION TEST RESULTS INCHES FALL/20 MINUTES

HOLES (1) (2) (3) (4) (5) (6)

(7) (8) PERC. TEST AVERAGE

DATE 7/19/99 INSPECTOR-SANITARIAN [Signature]

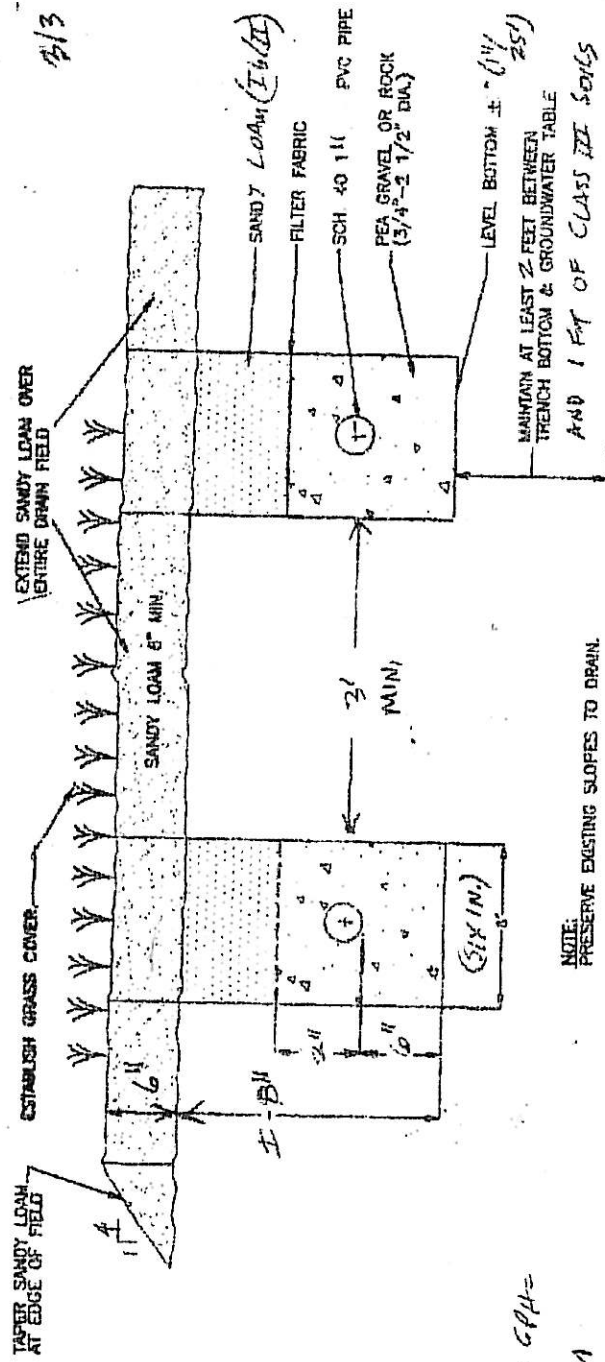
COMMENTS:

180 gal / day = 144 lbs / day

$144 \times .8 = 115.2 \div 6.25 = 18.43 \text{ pounds} \approx 19 \text{ pounds}$



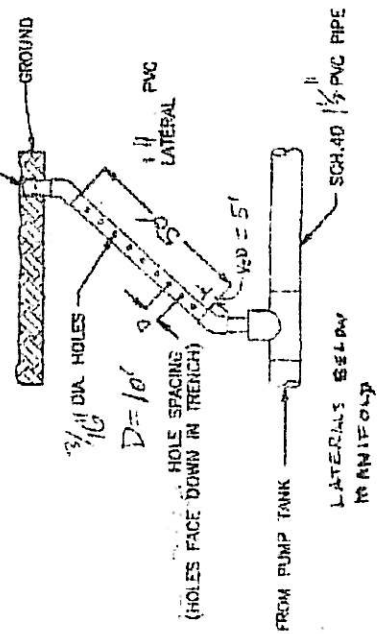
50 ft.



FLOW CALC:
 $400 \text{ LF} \times 1.10 \times 0.59 \text{ GPM} =$
 $23,6 \text{ GPM}$
 OH Pump produces 225 GPM

NOTE:
 PRESERVE EXISTING SLOPES TO DRAIN

TYPICAL TRENCH DETAIL
 N.T.S.



PUMPING DETAIL
 N.T.S.

DRAWN BY		CHECKED BY	
SCALE		DATE	
1" = 10' TRENCH 0.5" F		APPROVED BY	
BRUCE P. CEREPIKA, P.E. 09151022-4691		DRAWING NUMBER	
PE 1804-103 CHEROKEE, TX 76832			

MIKE WOODWARD (DESIGNER) - HARPER

8/26/99

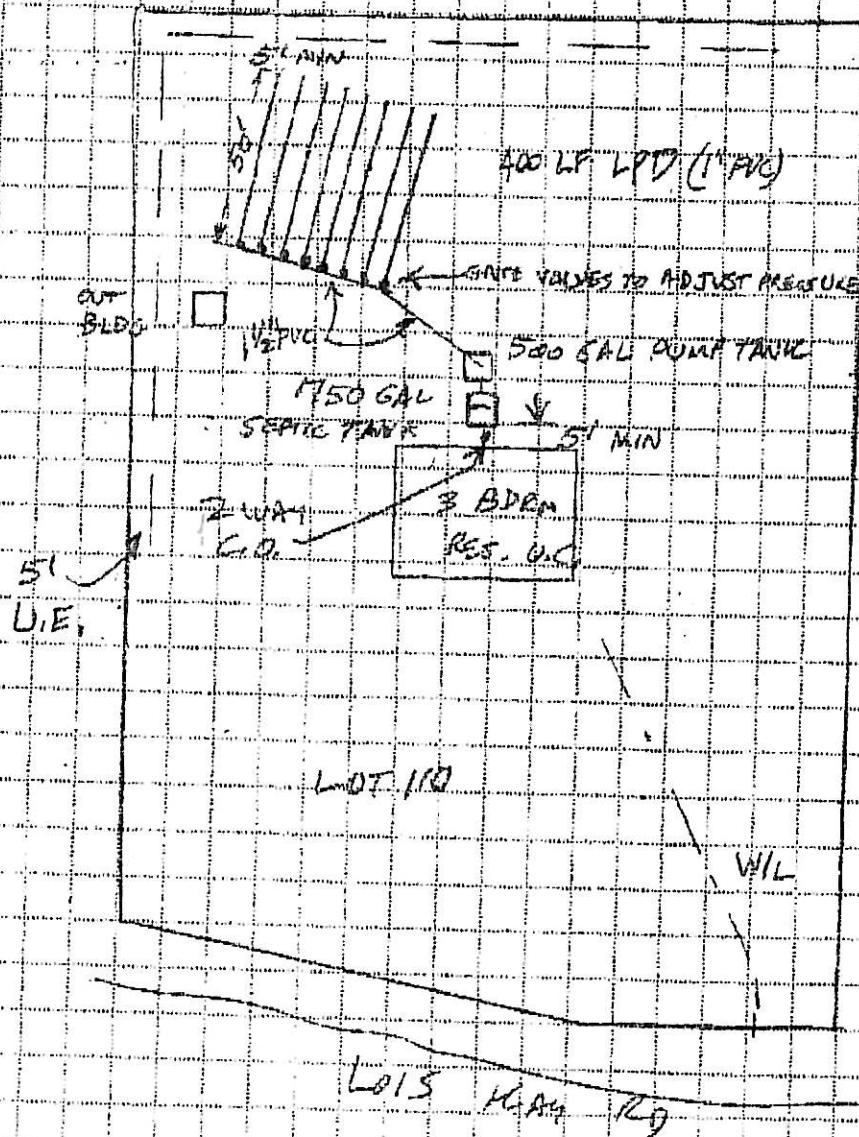
BRUCE P. CEREPKA, P.E.

BPC + SONS ENGINEERING

P.O. BOX 283
CHEROKEE, TEXAS 76832VOICE MAIL 800/330-7000
AUSTIN MOBILE 912/650-1845

WOODWARD RESIDENCE - HARPER

SHT 1/3

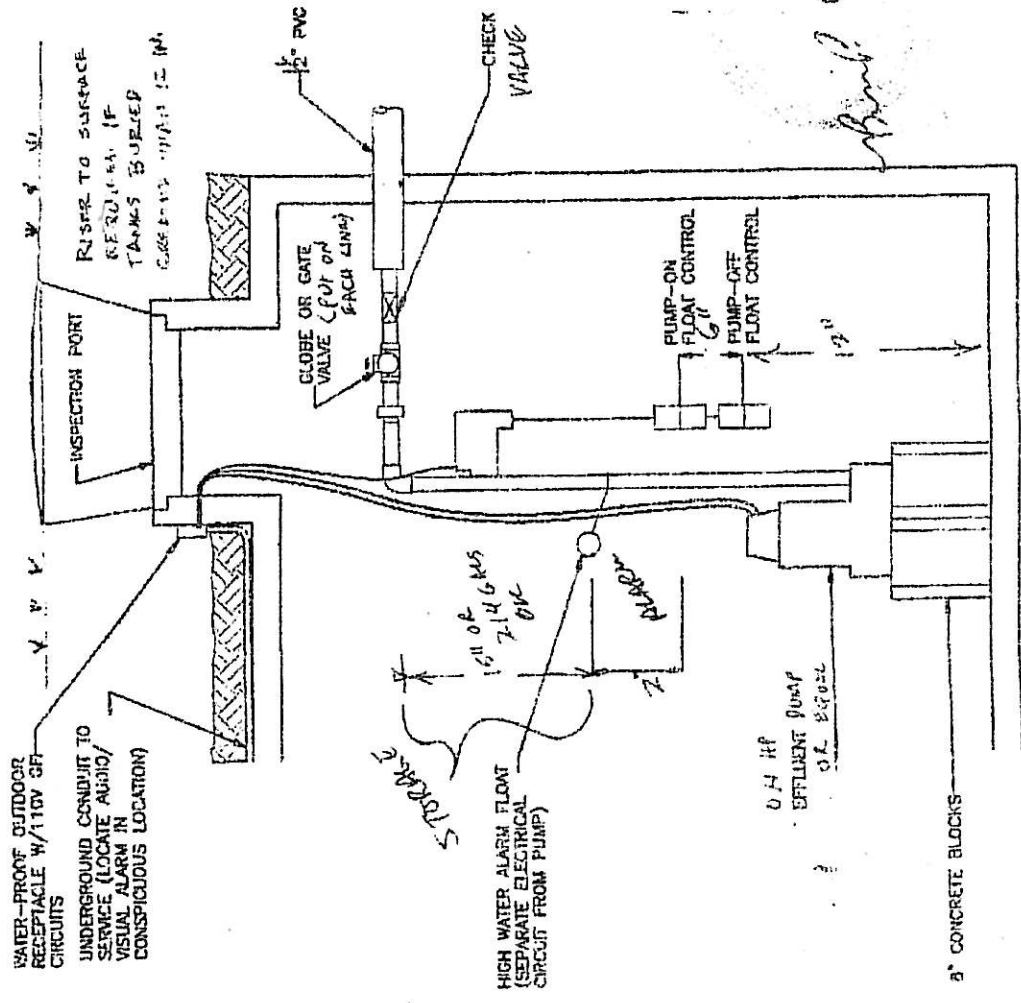
OSSF SITE PLAN
NTJ

8/26/99

2/3

NOTES & CALCULATIONS

SYSTEM SIZED FOR 3 BEDRM. 2.510 GPM. $Q = 240$ CFB LAY
 $A = 240' \times 0.2 = 4800$ H. $LPD = 1,200' \times 3 = 4000$ FLOW
 PROVIDE 8" PIPE RUNS AT 50 L.F. = 400 L.F.
 SEPTIC TANK PRECAST CONCRETE, 2 COMPARTMENT, 150 GALLON TANK (ASTM C1227-92A)
 SEPTIC TANK FITTINGS AND BUILDING SEWER PIPES 4" PVC (SCH. 40)
 SEWER PIPE FALL FROM BUILDING TO SEPTIC TANK, 1/8" PER FT.
 OUTLET OF SEPTIC TANK TO PUMPING TANK 1/8" PER FT.
 OUTLET PIPE FROM PUMPING TANK TO PRESSURE DOSE FIELD 1/2" PVC (SCH. 40)
 NO WATER WELLS WITHIN 100 FT. NO FLOOD PLUM ON LOT.
 NO CUTS OR FILLS OVER 4 FT.
 EXISTING EASEMENTS AS SHOWN.
 PRESSURE HEAD ON TOP PIPE = 2 FT.
 FRICTION HEAD: 12' x 1/2" MANHOLE (PVC) x 2.5' / 100 FT. = 3 FT.
 ELEVATION HEAD: 5 FT. TOTAL HEAD = 10 FT.
 PUMPING TANK TO MAINTAIN 30 GALLONS CAPACITY ABOVE ALARM - 2.14 GPM REQUIRED OR
 STORAGE VOLUME: 400 L.F. 1" PVC x 4.1 GPM / 100 FT. = 16.4 GPM
 100 L.F. 1" PVC, 4.1 GPM / 100 FT. = 4.1 GPM TOTAL = 20.5 GPM
 DOWNSIDE VOLUME: 9.2' GPM x 5' = 46.4' = 91.2 GPM. CALCULATE SPACING FOR
 FLOW CONTROL BASED ON 15' WORKING DEPTH IN 50' GAL PUMP TANK: 91.2 / 50 = 1.824
 6.3' DRAW DOWN 504 GPM



500 GALLON PUMPING TANK DETAIL
 (PRECAST CONCRETE) N.T.S.

NOTE: PUMP WITH AUTOMATIC CONTROLS MAY BE SUBSTITUTED FOR FLOAT CONTROLS

MIKE WOODWARD RESIDENCE - HARPER	
100 TRUCK DRIVE	DESIGNED BY
BRUCE P. CEREPKA, P.E. (713) 622-4691	CHECKED BY
100 BOX 263, CHESTNUT, TX 75832	DATE
8/26/99	ISSUED
	REVISION NUMBER

Handwritten: 5/26/99

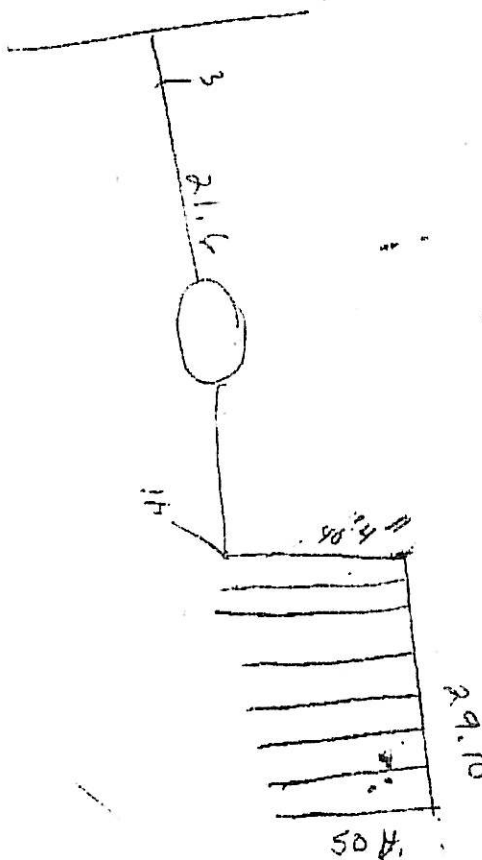
CERTIFICATION OF APPROVAL

FINAL INSPECTION

DATE 9/3/99 PERMIT NO. 3533 FEE 150
MANUFACTURER BUCHANAN SEPTIC TANK
TANK #1 SN# 813991 TANK #2 SN#
SIZE TANK #1 1250 GALS. TANK #2 GALS. TYPE concrete
ABSORPTION TRENCH () LENGTH 400 WIDTH 3
LPP ()
ABSORPTION BED AREA () SQUARE FEET 1200 SQ FT.
COMMERCIAL () PRIVATE RESIDENCE ()
INSTALLER OR CONTRACTOR PAUL ZINSMEISTER
ADDRESS HC 63 Box 538 HARPER TX. 78631 PHONE # 864-4574
DATE 9/3/99 FINAL INSPECTION MADE BY Darryl H. Smith

(INSPECTION IS REQUIRED AFTER TANK AND PIPES ARE INSTALLED, BUT NOT COVERED)
MAKE A SKETCH OF SYSTEM
(NOT TO SCALE)

SEE DESIGN



PROPERTY INSPECTION REPORT

Prepared For:

Lisa Reid

(Name of Client)

Concerning: 84 Lois Kay, Harper TX

(Address or Other Identification of Inspected Property)

By: Lynn Haber, Haber Home Inspection LLC

License No. 7720

(Name and License Number of Inspector)

2/26/09

(Date)

This property inspection report may include an inspection agreement (contract), addenda, and other information related to property conditions. If any item or comment is unclear, you should ask the inspector to clarify the findings. It is important that you carefully read ALL of this information.

This inspection is subject to the rules ("Rules") of the Texas Real Estate Commission ("TREC"), which can be found at www.trec.state.tx.us.

The TREC Standards of Practice (Sections 535.227-535.231 of the Rules) are the minimum standards for inspections by TREC-licensed inspectors. An inspection addresses only those components and conditions that are present, visible, and accessible at the time of the inspection. While there may be other parts, components or systems present, only those items specifically noted as being inspected were inspected. The inspector is not required to move furnishings or stored items. The inspection report may address issues that are code-based or may refer to a particular code; however, this is NOT a code compliance inspection and does NOT verify compliance with manufacturer's installation instructions. The inspection does NOT imply insurability or warrantability of the structure or its components. Although some safety issues may be addressed in this report, this inspection is NOT a safety/code inspection, and the inspector is NOT required to identify all potential hazards.

In this report, the inspector will note which systems and components were Inspected (I), Not Inspected (NI), Not Present (NP), and/or Deficient (D). General deficiencies include inoperability, material distress, water penetration, damage, deterioration, missing parts, and unsuitable installation. Comments may be provided by the inspector whether or not an item is deemed deficient. The inspector is not required to prioritize or emphasize the importance of one deficiency over another.

Some items reported as Deficient may be considered life-safety upgrades to the property. For more information, refer to Texas Real Estate Consumer Notice Concerning Recognized Hazards, form OP-I.

This property inspection is not an exhaustive inspection of the structure, systems, or components. The inspection may not reveal all deficiencies. A real estate inspection helps to reduce some of the risk involved in purchasing a home, but it cannot eliminate these risks, nor can the inspection anticipate future events or changes in performance due to changes in use or occupancy. It is recommended that you obtain as much information as is available about this property, including any seller's disclosures, previous inspection reports, engineering reports, building/remodeling permits, and reports performed for or by relocation companies, municipal inspection departments, lenders, insurers, and appraisers. You should also attempt to determine whether repairs, renovation, remodeling, additions, or other such activities have taken place at this property. It is not the inspector's responsibility to confirm that information obtained from these sources is complete or accurate or that this inspection is consistent with the opinions expressed in previous or future reports.

Items identified in the report do not obligate any party to make repairs or take other action, nor is the purchaser required to request that the seller take any action. When a deficiency is reported, it is the client's responsibility to obtain further evaluations and/or cost estimates from qualified service professionals. Any such follow-up should take place prior to the expiration of any time limitations such as

|Address:

I=Inspected NI=Not Inspected NP=Not Present D=Deficiency

option periods. Evaluations by qualified tradesmen may lead to the discovery of additional deficiencies which may involve additional repair costs. Failure to address deficiencies or comments noted in this report may lead to further damage of the structure or systems and add to the original repair costs. The inspector is not required to provide follow-up services to verify that proper repairs have been made. Property conditions change with time and use. For example, mechanical devices can fail at any time, plumbing gaskets and seals may crack if the appliance or plumbing fixture is not used often, roof leaks can occur at any time regardless of the apparent condition of the roof, and the performance of the structure and the systems may change due to changes in use or occupancy, effects of weather, etc. These changes or repairs made to the structure after the inspection may render information contained herein obsolete or invalid. This report is provided for the specific benefit of the client named above and is based on observations at the time of the inspection. If you did not hire the inspector yourself, reliance on this report may provide incomplete or outdated information. Repairs, professional opinions or additional inspection reports may affect the meaning of the information in this report. It is recommended that you hire a licensed inspector to perform an inspection to meet your specific needs and to provide you with current information concerning this property.

ADDITIONAL INFORMATION PROVIDED BY INSPECTOR:

By accepting receipt of this report you understand and agree to the scope of the inspection performed which is outlined below:

Scope of the Inspection and Agreement:

At your request, Haber Home Inspection, llc is completing a property inspection conducted in accordance with the standards of practice of the TREC The inspection has clearly defined limitations and is not a substitute for the Transfer Disclosure Statement, which the seller may be required to provide by civil code. The inspection is performed by a generalist in a matter of hours and does not include any warranties, as opposed to that by a specialist, which could take several days to complete and could include warranties. Therefore, please be aware of the following limitations of this service: It is not a code-compliance inspection and does not include any research, such as that necessary to establish boundaries, easements, and the issuance of permits or certificates of occupancy. It is not a specialized inspection, such as that conducted by geologists, engineers, environmental specialists, and termite inspectors, who evaluate soil conditions, determine differential settling or structural movement, test the quality of air and water, or detect the presence of pests or rodents, and harmful contaminants, such as radon, methane, asbestos, lead, formaldehyde, electro-magnetic radiation, molds and fungi, termites, and other wood-destroying organisms.

Similarly, in accordance with TREC standards, Haber Home Inspection, llc does not evaluate or endorse any concealed areas or components, such as subterranean ducts, pipes, or conduits within walls, floors, or ceilings, obstructed switches and outlets, the slab beneath carpets, the interior of heat exchangers, air-conditioning coils and supply ducts, significant portions of chimney flues, and the waterproof membrane beneath roofs, balconies or shower pans. Also, we do not evaluate or endorse the following specific components: computerized systems, radio or remotely controlled components, central vacuum systems, alarm, telephone, cable, or intercom systems,

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private sewage systems, private water supply systems, water softeners, water circulating devices, water filtration or purification devices, automatic sprinklers or confirm their area of coverage, the hermetic seal of dual-glazed windows or skylights, solar systems, fire-sprinkler systems, shut-off valves that are not in daily use, elevators, saunas, steam showers, humidifiers, electronic air cleaners, in-line duct motors or dampers, washers, dryers, and their valves or drain pipes, condensate pumps, thermostats or thermostatically controlled attic fans, timers, clocks, rotisseries, refrigerators, portable or free-standing appliances, retaining walls, landscaping or landscape items, including decorative and low-voltage lighting, portable spas, fountains and ponds, barbecues, fire-pits, pool sweep assemblies, in-line chlorinators, or similar devices dispensing bromine or ozone, and the coatings on pools, spas, countertops, fixtures, appliances, decks and walkways.

In addition, Haber Home Inspection, llc does not tacitly endorse or guarantee the integrity of any structure or component that was built or installed without permit, and which could include latent defects, or any item that may have been subject to a manufacturer's recall.

What Haber Home Inspection, llc provides is a conscientious but essentially visual inspection, recommendations for appropriate specialist service, and any consultation that may be necessary.

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Additional pages and photos may be attached to this report. Read them very carefully. This report may not be complete without the attachments. If an item is present in the property but is not inspected, the "NI" column will be checked and an explanation is necessary. Comments may be provided by the inspector whether or not an item is deemed in need of repair.

Address:

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I	NI	NP	D	Inspection Item
I. STRUCTURAL SYSTEMS				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A. Foundations Type of Foundation(s): Concrete slab. Comments: Repair item: The slab foundation is in functional condition noting some slight corner cracks. These should be patched with a concrete patch product. There are areas of exposed rebar ends on the front of the slab. These should be scrubbed with a wire brush, sprayed with Rustoleum and patched with concrete. See grading and drainage section of this report.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	B. Grading & Drainage – Comments: There are some low areas where roof runoff water is ponding against the foundation. These low areas should be filled in to provide grading which is negatively pitched away from the foundation. (showed buyer) This will prevent corner cracks in the foundation.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	C. Roof Covering Materials Type(s) of Roof Covering: Asphalt shingled roof covering. Viewed From: A ladder on both side. Comments: The roof covering appears functional. Repair item: The fascia trim boards have areas of deterioration. This is due to the short amount of shingle edge hanging over. Roof runoff water is dribbling down the front. I suggest replacing the rotten board and then adding a metal drip edge flashing over the top. After this, then you can add the gutters if desired.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	D. Roof Structure & Attic Viewed From: a ladder through the access panel. Approximate Average Depth of Insulation: 16" Approximate Average Thickness of Vertical Insulation: n/a Comments: The attic structure consists of a prefabricated truss system with an OSB sub roof. No deficiencies noted.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	E. Walls (Interior & Exterior) – Comments:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F. Ceilings & Floors – Comments:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	G. Doors (Interior & Exterior) – Comments:

Address:

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I	NI	NP	D	Inspection Item
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	H. Windows – <i>Comments:</i> Double paned aluminum framed windows.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	I. Fireplace/Chimney - <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	J. Porches, Balconies, Decks, and Carports – <i>Comments:</i> The rear porch roof cover appears to be leaking in some areas. This may be at the screw heads. One of the 4x4 posts have bowed.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	K. Other – <i>Comments:</i>

II. ELECTRICAL SYSTEMS

- | | | | | |
|-------------------------------------|--------------------------|--------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A. Service Entrance and Panels – <i>Comments:</i> No deficiencies noted. Main shut off panel is located on the left end of the home. The sub panel is in the exterior closet. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | B. Branch Circuits, Connected Devices, and Fixtures
<i>Type of Wiring:</i> Copper.
<i>Comments:</i> No deficiencies. |

III. HEATING, VENTILATION AND AIR CONDITIONING SYSTEMS

- | | | | | |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A. Heating Equipment
<i>Type of System:</i> split system heat pump.
<i>Energy Source:</i> Electric
<i>Comments:</i> It is too hot to operate unit of heat mode without damaging the equipment. Operated and tested on AC mode. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | B. Cooling Equipment
<i>Type of System:</i> Electric split system.
<i>Comments:</i> Unit is supplying AC at an average of 58 degrees with a return of 73.
The return air filter is extremely dirty and will need to be changed. The exterior suction line insulation needs to be replaced. This will help the unit to operate more efficiently. |

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I	NI	NP	D	Inspection Item
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☒ ☒ ☐ ☐ C. Duct System, Chases, and Vents – Comments: No all visible.

IV. PLUMBING SYSTEM

☒ ☐ ☐ ☒ A. Water Supply System and Fixtures
 Location of water meter: n/a
 Location of main water supply valve: n/a
 Static water pressure reading: 45 PSI
 Comments: The kitchen sink hand sprayer is missing the mount. It also barely sprays. It may need to be cleaned.

☒ ☐ ☐ ☒ B. Drains, Wastes, and Vents – Comments: The hall bath sink drains very slow. This will need drain cleaner and may need to be snaked.

☒ ☐ ☐ ☒ C. Water Heating Equipment
 Energy Source: Electric
 Capacity: 50
 Comments: TPR drain line drains up hill. Due to the location of the line in the wall there may not be much you can do about this.

☐ ☐ ☒ ☐ D. Hydro-Massage Therapy Equipment – Comments:

V. APPLIANCES

☒ ☐ ☐ ☐ A. Dishwasher – Comments: Operated on a normal wash cycle.

☒ ☐ ☐ ☐ B. Food Waste Disposer – Comments:

☒ ☐ ☐ ☐ C. Range Exhaust Vent – Comments:

☒ ☐ ☐ ☐ D. Ranges, Cook tops, and Ovens – Comments: Electric Whirlpool unit.

☐ ☐ ☒ ☐ E. Microwave Oven – Comments: No built in unit.

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I	NI	NP	D	Inspection Item
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	F. Trash Compactor – <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	G. Mechanical Exhaust Vents and Bathroom Heaters – <i>Comments:</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	H. Garage Door Operator(s) – <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I. Doorbell and Chimes – <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	J. Dryer Vents – <i>Comments:</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	L. Other Built-In Appliances <i>Comments:</i>

VI. OPTIONAL SYSTEMS

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A. Lawn and Garden Sprinkler Systems – <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	B. Swimming Pools, Spas, Hot Tubs, and Equipment <i>Type of Construction: Above ground. The pool liner has ripped and may need to be replaced. Unable to test the equipment due to no water in the pool.</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C. Outbuildings – <i>Comments: 2 metal shed. Functional.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	D. Outdoor Cooking Equipment <i>Energy Source:</i> <i>Comments:</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	E. Gas Supply Systems – <i>Comments: Visual only.</i>

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I	NI	NP	D	Inspection Item
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<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F. Private Water Wells (A coliform analysis is recommended.) <i>Type of Pump:</i> <i>Type of Storage Equipment:</i> <i>Comments:</i>
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<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	G. Private Sewage Disposal (Septic) Systems <i>Type of System:</i> <i>Location of Drain Field:</i> <i>Comments:</i>
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<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	H. Whole-House Vacuum Systems – Comments:
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<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	I. Other Built-in Appliances – Comments:
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