



APPROVED BY THE TEXAS REAL ESTATE COMMISSION (TREC)

01-01-2010

SELLER'S DISCLOSURE OF PROPERTY CONDITION

CONCERNING THE PROPERTY AT 2433 Colonial Parkway Fort Worth
(Street Address and City)

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 PURCHASER MAY WISH TO OBTAIN. IT IS NOT A WARRANTY OF ANY KIND BY SELLER OR SELLER'S AGENTS.

Seller ☒ is ☐ is not occupying the Property. If unoccupied, how long since Seller has occupied the Property? _____

1. The Property has the items checked below [Write Yes (Y), No (N), or Unknown (U)]:

<input checked="" type="checkbox"/> Range	<input checked="" type="checkbox"/> Oven	<input checked="" type="checkbox"/> Microwave
<input checked="" type="checkbox"/> Dishwasher	<input checked="" type="checkbox"/> Trash Compactor	<input checked="" type="checkbox"/> Disposal
<input checked="" type="checkbox"/> Washer/Dryer Hookups	<input checked="" type="checkbox"/> Window Screens	<input checked="" type="checkbox"/> Rain Gutters
<input checked="" type="checkbox"/> Security System	<input checked="" type="checkbox"/> Fire Detection Equipment	<input checked="" type="checkbox"/> Intercom System
<input checked="" type="checkbox"/> TV Antenna	<input checked="" type="checkbox"/> Smoke Detector	<input checked="" type="checkbox"/> Satellite Dish
<input checked="" type="checkbox"/> Ceiling Fan(s)	<input checked="" type="checkbox"/> Smoke Detector-Hearing Impaired	<input checked="" type="checkbox"/> Exhaust Fan(s)
<input checked="" type="checkbox"/> Central A/C	<input checked="" type="checkbox"/> Carbon Monoxide Alarm	<input checked="" type="checkbox"/> Wall/Window Air Conditioning
<input checked="" type="checkbox"/> Plumbing System	<input checked="" type="checkbox"/> Emergency Escape Ladder(s)	<input checked="" type="checkbox"/> Public Sewer System
<input checked="" type="checkbox"/> Patio/Decking	<input checked="" type="checkbox"/> Cable TV Wiring	<input checked="" type="checkbox"/> Fences
<input checked="" type="checkbox"/> Pool	<input checked="" type="checkbox"/> Attic Fan(s)	<input checked="" type="checkbox"/> Spa <input checked="" type="checkbox"/> Hot Tub
<input checked="" type="checkbox"/> Pool Equipment	<input checked="" type="checkbox"/> Central Heating	<input checked="" type="checkbox"/> Automatic Lawn Sprinkler System
<input checked="" type="checkbox"/> Fireplace(s) & Chimney (Woodburning) <u>/GAS</u>	<input checked="" type="checkbox"/> Septic System	<input checked="" type="checkbox"/> Fireplace(s) & Chimney (Mock)
<input checked="" type="checkbox"/> Gas Lines (Nat./LP)	<input checked="" type="checkbox"/> Outdoor Grill	<input checked="" type="checkbox"/> Carport
<input checked="" type="checkbox"/> Garage: <input checked="" type="checkbox"/> Attached <input type="checkbox"/> Not Attached	<input checked="" type="checkbox"/> Sauna	<input checked="" type="checkbox"/> Water Supply <input checked="" type="checkbox"/> City <input type="checkbox"/> Well <input type="checkbox"/> MUD <input type="checkbox"/> Co-op
	<input checked="" type="checkbox"/> Pool Heater	
<input checked="" type="checkbox"/> Garage Door Opener(s): <input checked="" type="checkbox"/> Electronic <input type="checkbox"/> Controls	<input checked="" type="checkbox"/> Water Heater: <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric	

Roof Type: SLATE Age: 2 years old (approx)

Are you (Seller) aware of any of the above items that are not in working condition, that have known defects or that are in need of repair? ☐ Yes ☐ No ☒ Unknown If yes, then describe. (Attach additional sheets if necessary): _____

2. Does the property have working smoke detectors installed in accordance with the smoke detector requirements of Chapter 766, Health and Safety Code? ☒ Yes* ☐ No ☐ Unknown

If the answer to the question above is no or unknown, explain. (Attach additional sheets if necessary): _____

*Smoke detectors installed, but may not be in accordance with Chapter 766.

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- * 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 the installation. The parties may agree who will bear the cost of installing the smoke detectors and which brand of smoke detectors to install.

3. Are you (Seller) aware of any known defects/malfunctions in any of the following?

Write Yes (Y) if you are aware, write No (N) if you are not aware.

<u>N</u> Interior Walls	<u>N</u> Ceilings	<u>N</u> Floors
<u>N</u> Exterior Walls	<u>N</u> Doors	<u>N</u> Windows
<u>N</u> Roof	<u>N</u> Foundation/Slab(s)	<u>N</u> Basement
<u>N</u> Walls/Fences	<u>N</u> Driveways	<u>N</u> Sidewalks
<u>N</u> Plumbing Sewers/Septics	<u>N</u> Electrical Systems	<u>N</u> Lighting Fixtures
<u>N</u> Other Structural Components (Describe) _____		

If the answer to any of the above is yes, explain. (Attach additional sheets if necessary): _____

4. Are you (Seller) aware of any of the following conditions?

Write Yes (Y) if you are aware, write No (N) if you are not aware.

<u>N</u> Active Termites (includes wood destroying insects)	<u>N</u> Termite or Wood Rot Damage Needing Repair	<u>N</u> Previous Termite Damage
<u>X</u> Previous Termite Treatment	<u>N</u> Previous Flooding	<u>N</u> Improper Drainage
<u>N</u> Water Penetration	<u>N</u> Located in 100-Year Floodplain	<u>N</u> Present Flood Insurance Coverage
<u>N</u> Previous Structural or Roof Repair	<u>N</u> Hazardous or Toxic Waste	<u>N</u> Asbestos Components
<u>N</u> Urea-formaldehyde Insulation	<u>N</u> Radon Gas	<u>N</u> Lead Based Paint
<u>N</u> Aluminum Wiring	<u>N</u> Previous Fires	<u>N</u> Unplatted Easements
<u>N</u> Landfill, Settling, Soil Movement, Fault Lines		<u>N</u> Subsurface Structure or Pits
<u>N</u> Previous Use of Premises for Manufacture of Methamphetamine		

If the answer to any of the above is yes, explain. (attach additional sheets if necessary): _____

5. Are you (Seller) aware of any item, equipment, or system in or on the Property that is in need of repair? ☐ Yes (if you are aware) ☒ No (if you are not aware). If yes, then describe. (Attach additional sheets if necessary). _____

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6. Are you (Seller) aware of any of the following? Write Yes (Y) if you are aware, write No (N) if you are not aware.

N Room additions, structural modifications, or other alterations or repairs made without necessary permits or not in compliance with building codes in effect at that time.

N Homeowners' Association or maintenance fees or assessments.

N Any "common area" (facilities such as pools, tennis courts, walkways, or other areas) co-owned in undivided interest with others.

N Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.

N Any lawsuits directly or indirectly affecting the Property.

N Any condition on the Property which materially affects the physical health or safety of an individual.

If the answer to any of the above is yes explain. (Attach additional sheets if necessary): _____

7. 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.

M. Lawrence 11-1-11
 Date Signature of Seller
 Martha C. Lawrence

DocuSigned by:
Michael Lawrence
 Date 7783D9C89206409... Signature of Seller
 Michael Lawrence

The undersigned purchaser hereby acknowledges receipt of the foregoing notice.

 Date Signature of Purchaser

 Date Signature of Purchaser

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