John Shell, Inc.
DBA BEST PEST CONTROL AND PRO. HOME INSPECTION
1590 Groesbeck, Stephenville, TX 76401
254-965-2616 fax 360-285-5402 shellj22@yahoo.com
JOHN SHELL, OWNER

Property Inspection Report

Prepared For: Morrie Mishew
(Name of Client)

Concerning: 7031 Ct. Rd 137, St.
(Address or Other Identification of Inspected Property)
Tom M at Brooks
(Real Estate Office) (Agent)
Lawyers
(Title Company) (Closing Date)

By: John Shell, Professional 4705 2-16-07
(Name and License Number of Inspector) (Date)

The inspection of the property listed above must be performed in compliance with the rules of the Texas Real Estate Commission (TREC).
The inspection is of conditions which are present and visible at the time of the inspection, and all of the equipment is operated in normal modes. The inspector must indicate which items are in need of repair or are not functioning and will report on all applicable items required by TREC rules.
This report is intended to provide you with information concerning the condition of the property at the time of inspection. Please read the report carefully. If any item is unclear, you should request the inspector to provide clarification.
It is recommended that you obtain as much history as is available concerning this property. This historical information may include copies of any seller's disclosures, previous inspection or engineering reports, reports performed for or by relocation companies, municipal inspection departments, lenders, insurers, and appraisers. You should attempt to determine whether repairs, renovation, remodeling, additions or other such activities have taken place at this property.
Property conditions change with time and use. Since this report is provided for the specific benefit of the client(s), secondary readers of this information should hire a licensed inspector to perform an inspection to meet their specific needs and to obtain current information concerning this property.

ADDITIONAL INFORMATION PROVIDED BY INSPECTOR

Property inspected was ☒ Occupied ☐ Vacant ☐ ____
Parties present at inspection ☐ Buyer ☐ Seller ☐ Listing Agent ☐ Buyers Agent
Documents provided to inspector ☐ Sellers Disclosure ☐ Engineers Report ☐ Previous inspection report
Weather Condition during inspection ☒ Sunny ☐ Overcast ☐ Raining ☐ Snowing
Outside temperature during inspection 45° Time of inspection 11 am

Inspection Scope ☒ Full ☐ Limited - Reason
Additional written information provide with this inspection report ☐ Yes ☒ No
Cost of inspection services $ to be paid at ☐ Inspection ☒ Closing ☐ By Mail
Report given to: buyer and Tom M.

Promulgated by the Texas Real Estate Commission (TREC) P. O. Box 12188, Austin, TX 78711-2188,
1-800-250-8732 or (512) 459-6544 (http:\\www.trec.state.tx.us). REI 7A-0

Additional pages 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

I = Inspected NI = Not Inspected NP = Not Present R = Not Functioning or In Need of Repair C = Comment only

I	NI	NP	R	Inspection Item

I. STRUCTURAL SYSTEMS

☒ ☐ ☐ ☐ **A. Foundations** (If all crawl space areas are not inspected, provide an explanation.)
Comments (An opinion on performance is mandatory.):
foundation is metal frame on concrete blocks with concrete footings; frame is anchored to ground with metal straps and ground augurs; there are no indications of signficiant foundation movement, such as large cracks in walls, ceilings, over windows, buckeled or unlevel floors, doors not plumb, etc. it appears foundation is functioning as designed;

☒ ☐ ☐ ☐ **B. Grading & Drainage**
Comments: Appears to be adequate, no ponding or erosion evident

☒ ☐ ☐ ☒ **C. Roof Covering** (If the roof is inaccessible, report the method used to inspect)
Comments: inspected by walking roof with composition shingles; one shingle is missing over front door area; fyi- lots of small repairs with tar observed;

☒ ☐ ☐ ☐ **D. Roof Structure and Attic** (If the attic is inaccessible, report the method used to inspect)
Comments: Eaves have soffitt vents, good; there is no attic for inspection; attic structure looks good, no sagging observed in roof line;

☒ ☐ ☐ ☐ **E. Walls (Interior & Exterior)**
Comments: **Interior:** in good condition
Exterior: is vinyl siding, in good condition

☒ ☐ ☐ ☐ **F. Ceilings & Floors**
Comments: **Ceilings**: no large or significant cracking or water damage observed **Floors**: wood and rug in good condition

☒ ☐ ☐ ☒ **G. Doors (Interior & Exterior)**
Comments: front does not have good weather seal

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☒ ☐ ☐ ☐ **H. Windows**
Comments: double hung single pane with storm window; no broken panes found

☐ ☐ ☒ ☐ **I. Fireplace / Chimney**
Comments: none

☒ ☐ ☐ ☐ **J. Porches, Decks, and Carports (Attached)**
Comments: front porch, in good condition

☒ ☐ ☐ ☒ **K. Other**
Comments: ceiling fan in master bed is out of balance;

II. ELECTRICAL SYSTEMS

☒ ☐ ☐ ☒ **A. Service Entrance & Panels**
☒fyi- branch circuits for outlets have copper wiring, and accuracy of breaker labeling is not verified
Comments: 200 amp panel located in utility room, with sub panel in well house, and main breaker at meter pole;
repair items include: aluminum wiring at breaker box and meter pole main lugs is not treated with anti-corrosion gel, (no corrosion observed)

☒ ☐ ☐ ☒ **B. Branch Circuits** (Report as in need of repair the lack of ground fault circuit protection where required.)
Comments: repairs include: GFCI outlet in master bath is defective, will not reset; hall bath and outside are dead because of this; also, there is no arc suppressor breaker protection for bedroom circuits, (new 2003 code)

III. HEATING, VENTING, AND AIR-CONDITIONING SYSTEMS

☒ ☐ ☐ ☐ **A. Heating Equipment**
Type and Energy Source: central electric
Comments: heating well

☐ ☒ ☐ ☐ **B. Cooling Equipment**
Type and Energy Source: central electric
Comments: not inspected in cooling mode as outside temp is below 60F; air handler coils are clean

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☒ ☐ ☐ ☐ **C. Ducts and Vents**
Comments: ducts and vents appear to be adequate

IV. Plumbing Systems

☒ ☐ ☐ ☒ **A. Water Supply System and Fixtures**
Comments: 2 bathroom
Kitchen: leaking around faucet handle
Master Bath: no leaks observed
Hall Bath: no leaks observed
Outside faucets: good
Washer hookup: good, no leaks or plumbing problems found

☒ ☐ ☐ ☐ **B. Drain, Wastes and Vents**
Comments: good, no leaks or backups found

☒ ☐ ☐ ☒ **C. Water Heating Equipment** (Report as in need of repair those conditions Specifically listed as recognized hazards by TREC rules.)
Energy Source: 30 gallon electric
Comments: heating well
repairs: heater should be in metal drain pan

☐ ☐ ☒ ☐ **D. Hydro-Therapy Equipment**
Comments: none

IV. APPLIANCES

☒ ☐ ☐ ☐ **A. Dishwasher**
Comments: good

☐ ☐ ☒ ☐ **B. Food Waste Disposer**
Comments: none

☒ ☐ ☐ ☐ **C. Range Hood**
Comments: hood is non vented type, good

☒ ☐ ☐ ☐ **D. Ranges / Ovens / Cooktops**
Comments: electric oven, heating well

☒ ☐ ☐ ☐ **E. Microwave Cooking Equipment**
Comments: good

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I	NI	NP	R	Inspection Item
☐	☐	☒	☐	**F. Trash Compactor** Comments: none
☒	☐	☐	☐	**G. Bathroom Exhaust Fans and/or Heaters** Comments: fans working well
☐	☐	☒	☐	**H. Whole House Vacuum Systems** Comments: none
☐	☐	☒	☐	**I. Garage Door Operators** Comments: no garage
☐	☐	☒	☐	**J. Door Bell and Chimes** Comments: none
☒	☐	☐	☐	**K. Dryer Vents** Comments: vented to outside, good
☐	☐	☒	☐	**L. Other Built-in Appliances** Comments: none

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IV. OPTIONAL SYSTEMS

☐ ☐ ☒ ☐ **Lawn Sprinklers**

☐ ☐ ☒ ☐ **Swimming Pools and Equipment**

☒ ☐ ☐ ☐ **Outbuildings**
Comments: well house, in good condition

☐ ☐ ☒ ☐ **Outdoor Cooking Equipment**

☐ ☐ ☒ ☐ **Gas Line**
Comments: none

☒ ☐ ☐ ☐ **Water Well** (A coliform analysis recommended)
Type of Pump: sumbersible and booster Type of Storage Equipment: galvanized and fiberglass storage tank
Comments: 1/2 hp submersible pumps into 1500 gallon storage tank; second pump is booster for galvanized presssure tank; water treatment system not inspected; pumps appear to be in good working condition; depth of well unknown; water flow and pressure are good; pump is 60 ft. from septic tank;

☒ ☐ ☐ ☐ **Septic Systems (an acceptable inspection is not a prediction of future performance)**
Comments: tested by running water for 15 minutes; there was no backups into house and no standing effluent found in lateral field area, it appears system is performing as designed; unable to determine exact location of lateral line field, tank in back yard; location of lateral line unknown;

☒ ☐ ☐ ☐ **Smoke and fire alarms**
Comments:
bedroom alarms are tied together and working well

Other comments and suggestions:
house is Fleetwood doublewide mobile home with skirting, dom 2003; well, septic; very neat and clean

OBSTRUCTIONS TO INSPECTION:
☒ house occupied (cannot see all walls, floors, plumbing, electrical outlets, etc) ☐ closets and cabinets full
☐ heavy foliage ☒ no access to bath traps ☐ household furnishings ☐ house has vinyl or metal siding
☐ inadequate crawl space or opening for complete under house inspection ☐ house has been repainted
☒ rugs ☒ pictures ☒ furniture ☒ appliances

Items not inspected: security and telephone systems, cable and dish wiring, buried or inaccessible water, gas, drain pipes, electrical wiring and outlets, and water softener and filter systems;

IMPORTANT LIMITATIONS AND DISCLAIMERS

This Inspection Report reports only on the items listed and only on the present condition of those items. This Report reflects only if the items inspected are observed to be "operable or "inoperable" at the time of inspection, that is whether such items at this time are observed to serve the purpose for which they are ordinarily intended. This report reflects only those items that are reasonably observable at the time of inspection. NO REPRESENTATION OR COMMENT is made concerning any latent defect or defects not reasonably observable at the time of the inspection or of items, which require the removal of major or permanent coverings. For example, but without limitation, recent repairs, painting or covering may conceal prior or present leak damage which is not reasonably observable by the inspector and no representation or comment can be made. NO REPRESENTATION IS MADE CONCERNING ANY OTHER CONDITION OR THE FUTURE PERFORMANCE OF ANY ITEM. NO REPRESENTATION IS MADE AS TO ITEMS NOT SPECIFICALLY COMMENTED UPON; ALL WARRANTIES, EXPRESS OR IMPLIED, NOT SPECIFICALLY STATED HEREIN ARE EXCLUDED AND DISCLAIMED. If a comment is made concerning the condition of any item, the Buyer is URGED to contract a qualified SPECIALIST to make further inspections or evaluations of the item. Buyer must notify BEST PEST CONTROL AND PROFESSIONAL HOME INSPECTION in writing of any complaints with seven (7) days of the date of inspection and must thereafter allow prompt reinspection of the item complained of, otherwise, all claims for damages arising out of such complaint are waived by Buyer. If Buyer institutes any legal action concerning this inspection, and fails to prevail on all of the causes of action alleged, Buyer shall be liable to BEST PEST CONTROL AND PROFESSIONAL HOME INSPECTION for all of its attorney's fees incurred in such action. Actual damages for any breach of contract or warranty, negligence or otherwise are limited to the amount of the inspection fee shown hereon, Buyer, by accepting this Report or relying upon it in any way, expressly agrees to these Limitations and Disclaimers.

For more information concerning your rights, contact the Consumer Protection Division of the Attorney General's Office, your local District or County Attorney, or the attorney of your choice.

I FULLY and COMPLETELY understand that this inspection is not a warranty or guarantee. This inspection is essentially visual, it is not technically exhaustive, and it does not imply that every defect will be discovered. It is only a statement of operation and/or condition as of and on this date 2-16-07

Buyer Signature_____ **Inspected by: John Shell** John Shell

TEXAS OFFICIAL WOOD DESTROYING INSECT REPORT

7031 CR 137 — Inspected Address
Stephenville — City
76401 — Zip Code

SCOPE OF INSPECTION

A. This inspection covers only the multi-family structure, primary dwelling or place of business. Sheds, detached garages, lean-tos, fences, guest houses or any other structure will not be included in this inspection report unless specifically noted in Section 5 of this report.

B. This inspection is limited to those parts of the structure(s) that are visible and accessible at the time of the inspection. Examples of inaccessible areas include but are not limited to (1) areas concealed by wall coverings, furniture, equipment and stored articles and (2) any portion of the structure in which inspection would necessitate removing or defacing any part of the structure(s) (including the surface appearance of the structure). **Inspection does not cover any condition or damage which was not visible in or on the structure(s) at time of inspection but which may be revealed in the course of repair or replacement work.**

C. Due to the characteristics and behavior of various wood destroying insects, it may not always be possible to determine the presence of infestation without defacing or removing parts of the structure being inspected. Previous damage to trim, wall surface, etc., is frequently repaired prior to the inspection with putty, spackling, tape or other decorative devices. Damage that has been concealed or repaired may not be visible except by defacing the surface appearance. **The WDI inspecting company cannot guarantee or determine that work performed by a previous pest control company, as indicated by visual evidence of previous treatment; has rendered the pest(s) inactive.**

D. If visible evidence of active or previous infestation of listed wood destroying insects is reported, it should be assumed that some degree of damage is present.

E. If visible evidence is reported, it does not imply that damage should be repaired or replaced. Inspectors of the inspection company usually are not engineers or builders qualified to give an opinion regarding the degree of structural damage. Evaluation of damage and any corrective action should be performed by a qualified expert.

F. **THIS IS NOT A STRUCTURAL DAMAGE REPORT OR A WARRANTY AS TO THE ABSENCE OF WOOD DESTROYING INSECTS.**

G. If termite treatment (including pesticides, baits or other methods) has been recommended, the treating company must provide a diagram of the structure(s) inspected and proposed for treatment, label of pesticides to be used and complete details of warranty (if any). At a minimum, the warranty must specify which areas of the structure(s) are covered by warranty, renewal options and approval by a certified applicator in the termite category. Information regarding treatment and any warranties should be provided by the party contracting for such services to any prospective buyers of the property. The inspecting company has no duty to provide such information to any person other than the contracting party.

H. There are a variety of termite control options offered by pest control companies. These options will vary in cost, efficacy, areas treated, warranties, treatment techniques and renewal options.

I. There are some specific guidelines as to when it is appropriate for corrective treatment to be recommended. Corrective treatment may only be recommended if (1) there is visible evidence of an active infestation in or on the structure, (2) there is visible evidence of a previous infestation with no evidence of a prior treatment.

J. If treatment is recommended based solely on the presence of conducive conditions, a preventive treatment or correction of conducive conditions may be recommended. The buyer and seller should be aware that there may be a variety of different strategies to correct the conducive condition(s). These corrective measures can vary greatly in cost and effectiveness and may or may not require the services of a licensed pest control operator. There may be instances where the inspector will recommend correction of the conducive conditions by either mechanical alteration or cultural changes. Mechanical alteration may be in some instances the most economical method to correct conducive conditions. If this inspection report recommends any type of treatment and you have any questions about this, you may contact the inspector involved, another licensed pest control operator for a second opinion, and/or the Structural Pest Control Board.

1A. BEST PEST CONTROL — Name of Inspection Company
1B. 11603 — SPCB Business License Number

1C. 1590 GROESBECK | STEPHENVILLE | TX | 76401-4016 | (254) 965-2616
Address of Inspection Company | City | State | Zip | Telephone No.

1D. JOHN SHELL — Name of Inspector (Please Print)
1.E Certified Applicator [✓] (check one) Technician [ ]

2. none — Case Number (VA/FHA/Other)
3. 2-16-07 — Inspection Date

4A. Monie Menshew — Name of Person Purchasing Inspection
Seller [ ] Agent [ ] Buyer [✓] Management Co. [ ] Other [ ]

4B. unknown — Owner/Seller

4C. REPORT FORWARDED TO: Title Company or Mortgagee [ ] Purchaser of Service [ ] Seller [ ] Agent [✓] Buyer [✓]
(Under the Structural Pest Control regulations only the purchaser of the service is required to receive a copy) Tom M.

The structure(s) listed below were inspected in accordance with the official inspection procedures adopted by the Texas Structural Pest Control Board. This report is made subject to the conditions listed under the Scope of Inspection. A diagram must be attached including all structures inspected.

5. double wide mobile w/ 5 buttons, occupied 2 bath
List structure(s) inspected that may include residence, detached garages and other structures on the property. (Refer to Part A, Scope of Inspection)

6A. Were any areas of the property obstructed or inaccessible? Yes [✓] No [ ]
(Refer to Part B & C, Scope of Inspection) If "Yes" specify in 6B.

6B. The obstructed or inaccessible areas include but are not limited to the following:

Attic	[✓]	Insulated area of attic	[✓]	Plumbing Areas	[✓]	Planter box abutting structure	[ ]
Deck	[ ]	Sub Floors	[ ]	Slab Joints	[ ]	Crawl Space	[✓]
Soil Grade Too High	[ ]	Heavy Foliage	[ ]	Eaves	[✓]	Weepholes	[ ]
Other	[ ]	Specify:					

7A. Conditions conducive to wood destroying insect infestation: Yes [✓] No [ ]
(Refer to Part J, Scope of Inspection) If "Yes" specify in 7B.

7B. Conducive Conditions include but are not limited to:

		Wood to Ground Contact (G)	[ ]	Formboards left in place (I)	[ ]	Excessive Moisture (J)	[ ]
Debris under or around structure (K)	[ ]	Footing too low or soil line too high (L)	[ ]	Wood Rot (M)	[ ]	Heavy Foliage (N)	[ ]
Planter box abutting structure (O)	[ ]	Wood Pile in Contact with Structure (Q)	[ ]	Wooden Fence in Contact with the Structure (R)		[ ]	
Insufficient ventilation (T)	[ ]	Other (C)	[✓]	Specify:	all houses have conducive conditions		

8. Inspection Reveals Visible Evidence in or on the structure:

	Active Infestation	Previous Infestation	Previous Treatment
8A. Subterranean Termites	Yes [ ] No [✓]	Yes [ ] No [✓]	Yes [ ] No [✓]
8B. Drywood Termites	Yes [ ] No [✓]	Yes [ ] No [✓]	Yes [ ] No [✓]
8C. Formosan Termites	Yes [ ] No [✓]	Yes [ ] No [✓]	Yes [ ] No [✓]
8D. Carpenter Ants	Yes [ ] No [✓]	Yes [ ] No [✓]	Yes [ ] No [✓]
8E. Other Wood Destroying Insects	Yes [ ] No [✓]	Yes [ ] No [✓]	Yes [ ] No [✓]

Specify:

8F. Explanation of signs of previous treatment (including pesticides, baits, existing treatment stickers or other methods) identified:

8G. Visible evidence of: _____ has been observed in the following areas: _____

If there is visible evidence of active or previous infestation, it must be noted. The type of insect(s) must be listed in the first blank and all identified infested areas of the property inspected must be noted in the second blank. (Refer to Part D, E & F, Scope of Inspection)

TEXAS OFFICIAL WOOD DESTROYING INSECT REPORT

The conditions conducive to insect infestation reported in 7A & 7B:

9. Will be or has been mechanically corrected by inspecting company: Yes [ ] No [X]

If "Yes," specify corrections: _____

9A. Corrective treatment recommended for active infestation or evidence of previous infestation with no prior treatment as identified in Section 8. (Refer to Part G, H, and I, Scope of Inspection) Yes [ ] No [X]

9B. A preventive treatment and/or correction of conducive conditions as identified in 7A & 7B is recommended as follows: Yes [ ] No [X]

Specify reason: _____

Refer to Scope of Inspection Part J

10A. This company has treated or is treating the structure for the following wood destroying insects: NO

If treating for subterranean termites, the treatment was: Partial [ ] Spot [ ] Bait [ ] Other [ ]

If treating for drywood termites or related insects, the treatment was: Full [ ] Limited [ ]

10B. _____ (Date of Treatment by Inspecting Company) _____ (Common Name of Insect) _____ (Name of Pesticide, Bait or Other Method)

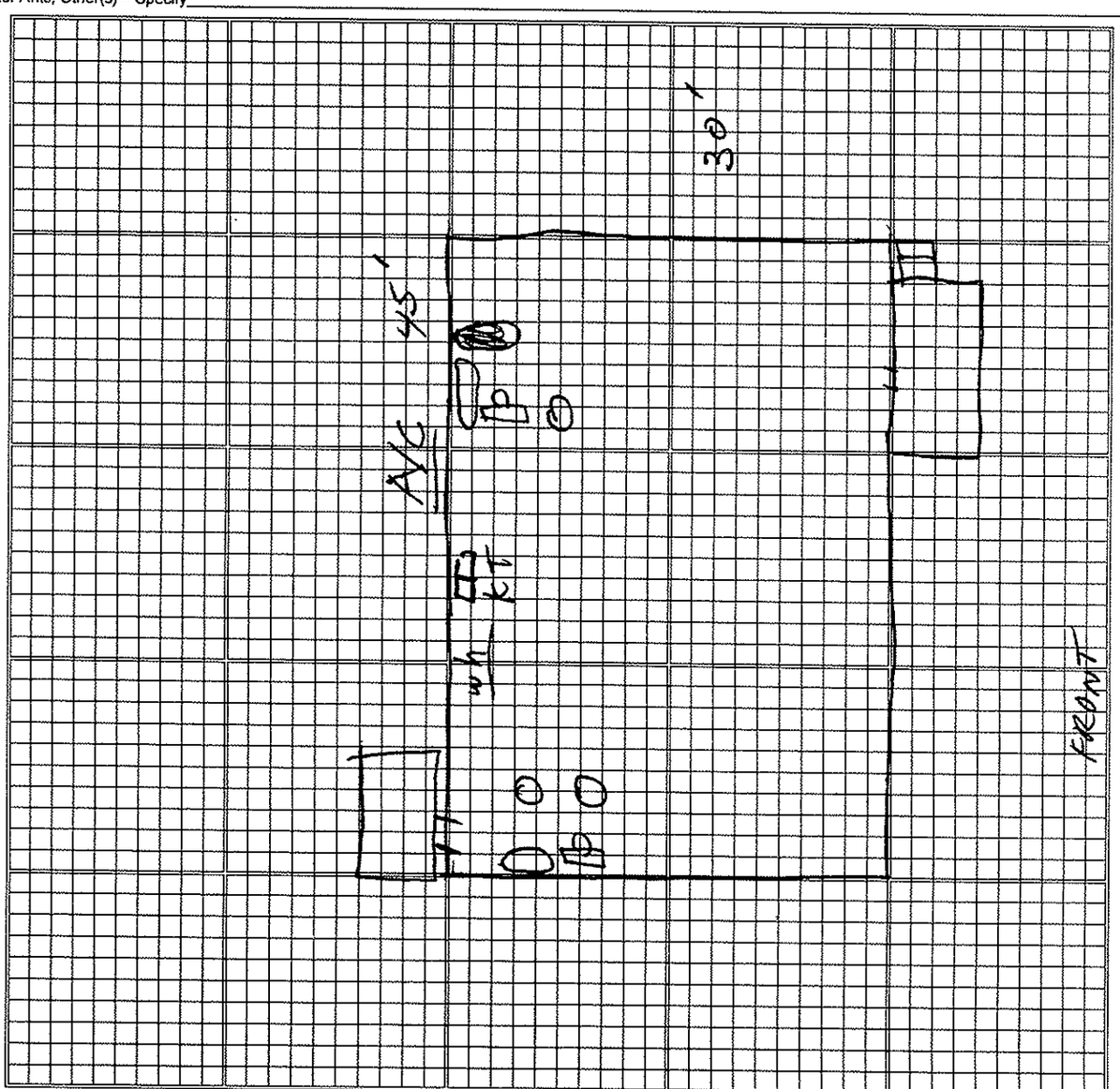
This company has a contract or warranty in effect for control of the following wood destroying insects:

Yes [ ] No [ ] List Insects: _____

If "Yes", copy(ies) of warranty and treatment diagram must be attached.

Diagram of Structure(s) Inspected

The inspector must draw a diagram including approximate perimeter measurements and indicate active or previous infestation and type of insect by using the following codes: E-Evidence of Infestation, A-Active; P-Previous; D-Drywood Termites; S-Subterranean Termites; F-Formosan Termites; C-Conducive Conditions; B-Wood Boring Beetles; H-Carpenter Ants; Other(s) – Specify _____



Additional Comments wood porches + steps not fixed to house, not touching

Neither I nor the company for which I am acting have had, presently have, or contemplate having any interest in the property. I do further state that neither I nor the company for which I am acting is associated in any way with any party to this transaction.

Signatures:

11A. John Sheel (Inspector) 12A.

Approved:

11B. John Sheel 36803 PT (Certified Applicator and Certified Applicator License Number) 12B.

Notice of Inspection Was Posted At or Near

Electric Breaker Box [ ]
Water Heater Closet [ ]
Bath Trap Access [ ]
Beneath the Kitchen Sink [X]

Date Posted 2-16-07 (Date)

Statement of Purchaser

I have received the original or a legible copy of this form. I have read and understand any recommendations made. I have also read and understand the "Scope of Inspection." I understand that my inspector may provide additional information as an addendum to this report.

If additional information is attached, list number of pages: _____

Signature of Purchaser of Property or their Designee _____ Date _____