



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

6400 CR 410
Evant, TX 76525

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? (approximate date) 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	Item	Y	N	U	Item	Y	N	U
Cable TV Wiring				Liquid Propane Gas:				Pump: sump grinder			
Carbon Monoxide Det.				-LP Community (Captive)				Rain Gutters			
Ceiling Fans				-LP on Property				Range/Stove			
Cooktop				Hot Tub				Roof/Attic Vents			
Dishwasher				Intercom System				Sauna			
Disposal				Microwave				Smoke Detector			
Emergency Escape Ladder(s)				Outdoor Grill				Smoke Detector - Hearing Impaired			
Exhaust Fans				Patio/Decking				Spa			
Fences				Plumbing System				Trash Compactor			
Fire Detection Equip.				Pool				TV Antenna			
French Drain				Pool Equipment				Washer/Dryer Hookup			
Gas Fixtures				Pool Maint. Accessories				Window Screens			
Natural Gas Lines				Pool Heater				Public Sewer System			

Item	Y	N	U	Additional Information
Central A/C				electric gas number of units:
Evaporative Coolers				number of units:
Wall/Window AC Units				number of units:
Attic Fan(s)				if yes, describe:
Central Heat				electric gas number of units:
Other Heat				if yes, describe:
Oven				number of ovens electric gas other:
Fireplace & Chimney				wood gas logs mock other:
Carport				attached not attached
Garage				attached not attached
Garage Door Openers				number of units: number of remotes:
Satellite Dish & Controls				owned leased from:
Security System				owned leased from:
Solar Panels				owned leased from:
Water Heater				electric gas other: number of units:
Water Softener				owned leased from:
Other Leased Items(s)				if yes, describe:

(TAR-1406) 02-01-18

Burks Real Estate, 715 E US 84 Hwy Evant TX 76525
Calvin Burks

Initialed by: Buyer: _____ and Seller: _____

Phone: (254) 471-5128 Fax: (254) 471-5978

Produced with zipForm® by zipLogix 18070 Fifteen Mile Road, Fraser, Michigan 48026 www.zipLogix.com

Page 1 of 5
392 acres

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Concerning the Property at _____

Underground Lawn Sprinkler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	automatic <input type="checkbox"/> manual <input type="checkbox"/> areas covered: _____
Septic / On-Site Sewer Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	if yes, attach Information About On-Site Sewer Facility (TAR-1407)

Water supply provided by: ☐ city ☐ well ☐ MUD ☐ co-op ☐ unknown ☐ other: Multi County Water Supply
 Was the Property built before 1978? ☐ yes ☐ no ☐ unknown

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

Roof Type: Metal Age: Unknown (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 type="checkbox"/>	<input type="checkbox"/>
Ceilings	<input type="checkbox"/>	<input type="checkbox"/>
Doors	<input type="checkbox"/>	<input type="checkbox"/>
Driveways	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Systems	<input type="checkbox"/>	<input type="checkbox"/>
Exterior Walls	<input type="checkbox"/>	<input type="checkbox"/>

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

Item	Y	N
Sidewalks	<input type="checkbox"/>	<input type="checkbox"/>
Walls / Fences	<input type="checkbox"/>	<input type="checkbox"/>
Windows	<input type="checkbox"/>	<input type="checkbox"/>
Other Structural Components	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>
Asbestos Components	<input type="checkbox"/>	<input type="checkbox"/>
Diseased Trees: <u>oak wilt</u>	<input type="checkbox"/>	<input type="checkbox"/>
Endangered Species/Habitat on Property	<input type="checkbox"/>	<input type="checkbox"/>
Fault Lines	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous or Toxic Waste	<input type="checkbox"/>	<input type="checkbox"/>
Improper Drainage	<input type="checkbox"/>	<input type="checkbox"/>
Intermittent or Weather Springs	<input type="checkbox"/>	<input type="checkbox"/>
Landfill	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lead-Based Paint or Lead-Based Pt. Hazards	<input type="checkbox"/>	<input type="checkbox"/>
Encroachments onto the Property	<input type="checkbox"/>	<input type="checkbox"/>
Improvements encroaching on others' property	<input type="checkbox"/>	<input type="checkbox"/>
Located in 100-year Floodplain (If yes, attach TAR-1414)	<input type="checkbox"/>	<input type="checkbox"/>
Located in Floodway (If yes, attach TAR-1414)	<input type="checkbox"/>	<input type="checkbox"/>
Present Flood Ins. Coverage (If yes, attach TAR-1414)	<input type="checkbox"/>	<input type="checkbox"/>
Previous Flooding Into the Structures	<input type="checkbox"/>	<input type="checkbox"/>
Previous Flooding onto the Property	<input type="checkbox"/>	<input type="checkbox"/>
Located in Historic District	<input type="checkbox"/>	<input type="checkbox"/>

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

(TAR-1406) 02-01-18

Initialed by: Buyer: _____ and Seller: _____

Concerning the Property at _____

6400 CR 410
Evant, TX 76525

Historic Property Designation		
Previous Use of Premises for Manufacture of Methamphetamine		

Termite or WDI damage needing repair		
Single Blockable Main Drain in Pool/Hot Tub/Spa*		

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

*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, with unresolved 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 ☐ voluntaryAny 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 located on the Property that is larger than 500 gallons and that uses a public water supply as an auxiliary water source.

___ ___ The Property is located in a propane gas system service area owned by a propane distribution system retailer.

___ ___ Any portion of the Property that is located in a groundwater conservation district or a subsidence district.

(TAR-1406) 02-01-18

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

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Concerning the Property at _____

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

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

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 filed a claim for damage to the Property with any insurance provider? ___ yes ___ no

Section 10. 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 11. 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 X 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.

Allison Dayton Haynes

4/16/2019

Roberta M. Chambers

4/16/2019

Roberta M. Chambers

4/16/2019

Signature of Seller

Signature of Seller

Printed Name:

Printed Name:

(TAR-1406) 02-01-18

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

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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 the Property is located in a seacoast territory of this state designated as a catastrophe area by the Commissioner of the Texas Department of Insurance, the Property may be subject to additional requirements to obtain or continue windstorm and hail insurance. A certificate of compliance may be required for repairs or improvements to the Property. For more information, please review *Information Regarding Windstorm and Hail Insurance for Certain Properties* (TAR 2518) and contact the Texas Department of Insurance or the Texas Windstorm Insurance Association.
- (4) This Property may be located near a military installation and may be affected by high noise or air installation compatible use zones or other operations. Information relating to high noise and compatible use zones is available in the most recent Air Installation Compatible Use Zone Study or Joint Land Use Study prepared for a military installation and may be accessed on the Internet website of the military installation and of the county and any municipality in which the military installation is located.
- (5) If you are basing your offers on square footage, measurements, or boundaries, you should have those items independently measured to verify any reported information.
- (6) The following providers currently provide service to the Property:

Electric: Hamilton County Electric Cooperative

phone #: 254-386-3123

Sewer: _____

phone #: _____

Water: Multi County Water Supply

phone #: 254-865-2269

Cable: _____

phone #: _____

Trash: _____

phone #: _____

Natural Gas: _____

phone #: _____

Phone Company: _____

phone #: _____

Propane: Bert Schrank LP Gas Company

phone #: 254-386-8144

Internet: _____

phone #: _____

- (7) 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

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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
- _____
- (4) Installer: _____ ☒ Unknown
- (5) Approximate Age: _____ ☒ 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? DS
ADH DS
CRA DS
RMC
- (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.

(TAR-1407) 1-7-04

Initialed for Identification by Buyer _____ and Seller

DS
ADH DS
CRA DS
RMC

Page 1 of 2

6400 CR 410

Information about On-Site Sewer Facility concerning

Evant, TX 76525

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.

DocuSigned by:

Roberta M. Chambers

4/16/2019

Signature of Seller

Lakeshore Resources, Roberta M. Chambers

Date

DocuSigned by:

C. Chambers

4/16/2019

FBA325D880E4438...

DocuSigned by:

Allison Dayton Haynes

4/16/2019

Signature of Seller

Catherine A. Chambers, Allison Dayton Haynes

Date

Receipt acknowledged by:

Signature of Buyer

Date

Signature of Buyer

Date