## ADDENDUM to PROPERTY DISCLOSURE DOCUMENT FOR RESIDENTIAL REAL ESTATE DISCLOSURE OF INFORMATION ON RESIDENTIAL SEWERAGE TREATMENT SYSTEMS

Property Description (Address)	2904 LA NWY 1	<b>3</b>		
City, State, Zip	Ethel, LA 70730			apho to this discount the encountry and the second
Seller of residential real estate property described herein.	re: Complete this disclosu	ure document if city, tov	vn, or municipality wast	e treatment does not serve the
or poorly treated water contain	s parasites, bacteria, and hallDbeUkeptUhDserviceDand	viruses that cause ser	ious disease. D.H.H. T	Io⊡he⊡environment.⊡Intreated⊡ itle 51, Subsection 707 states: ompliance⊡vith⊡his⊡code⊡and⊡n⊡
HEALTH HAZARDS AND DIS	EASES			
Gastroenteritis — Esevere Enflar	mmation@f@he@htestines@	hat@nay@auseEsevereD	omiting@and@liarrhea@e	ading@o@lehydration.[]
Severe infection@@esult@f@on				
Hepatitis - serious infection of t	he liver that can lead to lor	ng term illness.		
A residential sewerage treatmer water at the surface. Health ris diseases. Improperly operating	sks also exist from mosq	uito infestations that i	may cause West Nile '	e pooling of improperly treated Virus, Encephalitis, and other
1. Sewerage treatment is suppl	ied by: 🏿 🎜 🗗 rivate 🖽 ti	lity🛘 🎹 [Onsite Sys	tem □[None	□[Not Known
2. If there is an onsite system, i	it is: □[Septic⊡an □[Other □t	ık□	eatment System	didation Pond
a. Is there more than one system	m on the property, e.g. gue □[Yes		barns, etc.? □[Not Known	
b. If yes, answer all questions for	or each system on a separ	ate sheet of paper and	attach to this addendum	١.
3. What is the approximate age of the system? 20 YEARS   [Not Known				□[Not Known
a. The original permit was issue	d by POLICE FURY o	n 2000	_(date).	□[Not Known
b. The system was last inspecte (A non-permitted system of all	nd by Fulland Tilledal, regard	ess of age or type.)	<b>?</b> _(date).	□[Not Known
c. An inspection report is attached	ed.	□[Yes	Ø[No	
d. Has the health department inspected the system?		₽∐Yes	□[No	□[Not Known
e. If yes, on what date was the i		(date).		
4. The system was last pumped	out when? July 20	<u>2/9</u> (date).		
5. Is the system an Advanced To		-∃[Yes	□[No	□[Not Known
a. If yes, name the manufacturer,				□[Not Known
(The name of the manufacturer	•	•		.)
b. If yes, do you have an ongoin □[Yes □[No □[Not Known Individual Mechanical Sewera	(D.H.H. Title 51, Append		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	maintenance be provided on
6. What type of discharge is use □[ArtificialDrain-FieldIIIIIIII] □[Not Known (D.H.H. Title 51, 9 ditches or streams.)	Orip Disposal ☐ Over La	and Surface Flow	Spray Irrigation Below Ground Pipe to I ffluent from septic tan	
7. DfDheldiscargelisDromloverDa	ındШow[Թrြեrom[Alphipe,[Jvh	ereldloeslittdlrain?[]		□[Not Known
8.DWhatDlypeDofDlankDsDlsed?Dl	Metal Concrete	□[Fiberglass	□[Other	□[Not Known
9. Does the system have a com a. If yes, where is it located?	SY OUTSIDE NYC G		□[No	□[Not Known
b.OfGyes,OsOtOnCorkingCorder?O		□ ⊅⊕Yes	□[No	□[Not Known
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