

SAN ANTONIO BOARD OF REALTORS®, INC.

9110 IH 10 WEST, SAN ANTONIO, TEXAS 78230

RESIDENTIAL LOT SELLERS DISCLOSURE NOTICE

To Be Completed By The Seller For Residential Lots



THIS FORM IS FURNISHED BY THE SAN ANTONIO BOARD OF REALTORS® FOR USE BY ITS MEMBERS. USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF A BOARD/ASSOCIATION OF REALTORS® IS NOT AUTHORIZED.

Concerning the Property at:

1549 FM 1922, Floresville, TX 78114

(Property Address)

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, seller's agents, or any other agent.

A. Mark below: (Y) for Yes (N) for No (U) for Unknown.

Y	N	U		Y	N	U	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Located in 100-Year Flood plain	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Endangered Species/Habitat on Property
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Present Flood Insurance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fault Lines
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Previous Flooding onto the Property	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hazardous or Toxic Waste
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Soil Movement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Intermittent or Weather Springs
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Surface Structures or Pits	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Landfill
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Underground Storage Tanks	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Lead-Based Paint Hazards
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wetlands on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Radon Gas
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Diseased Trees				

If you answered yes to any of the above, please explain:

B. General Information:

Is the Seller aware of any of the following:

Y	N	U	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1. Features of the property shared in common with adjoining landowners, such as walls, roofs, fences and driveways, whose use or responsibility for maintenance may have an effect of the Property.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2. Any encroachments, easements or similar matters that may affect the Property.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3. Any zoning violations, nonconforming uses or violation of "setback" requirement.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. Deed restrictions or obligations affecting the Property.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5. Any lawsuits against the Seller threatening to or affecting the Property.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6. Any notices of abatement or citations against the Property.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	7. Have you (Seller) ever collected any insurance payments pursuant to a claim made for damage to the Property and not used the proceeds to make the repairs for which the claim was submitted?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8. Any tax exemptions(s) which you (Seller) currently claim for the Property. If yes, list: <u>None</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9. Any violent crime or death on the Property except for those deaths caused by: Natural causes, suicide, or accidental unrelated to the Property.

☐ yes ☐ no; If yes, explain: _____

Initialed for Identification by: Buyer _____ Seller TR

SABOR Form 550 08-03-98 Residential Lots Sellers Disclosure Notice

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Mark below: (Y) for Yes (N) for No (U) for Unknown

Y N U
☐ ☒ ☐

10. Any Homeowner's Association or maintenance fees or assessments. If yes, complete:

Amount of fee or assessment: \$ _____

☐ Mandatory ☐ Voluntary Name of Association: _____

Manager's Name: _____

Due: ☐ Monthly ☐ Quarterly ☐ Annually

Any unpaid fees or assessments for the Property: ☐ Yes ☐ No

If yes, amount \$ _____

☐ ☒ ☐ 11. Municipal Utility District which has any authority over the Property; If yes, Name of District: _____

If you answered yes to any of the above, please explain: _____

C. UTILITIES AVAILABLE:

Mark (A) for Available (O) on site (U) Unknown

A O U

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water System	<input checked="" type="checkbox"/>	City	<input type="checkbox"/>	Well	<input type="checkbox"/>	Municipal	<input type="checkbox"/>	Private
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Natural Gas								
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Electric								
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Telephone								
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewer System								
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cable T.V.								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None								

IF WELL ON PROPERTY: approximate depth _____ well extends into _____ (name of water source).

The well ☐ does ☐ does not need repair, if so, explain N/A

IF SEPTIC SYSTEM: In Place ☒ Required ☐ Allowed ☐ Not Allowed ☐

Terrence Baggot
Signature of Seller

Date

Signature of Seller

Date

NOTICE TO BUYER: Listing Broker, Louise Stoeve Baumann, and Other Broker, _____, advise you that this Seller's Disclosure Notice was completed by Seller, as of the date signed. The Listing Broker and Other Broker 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 PRIOR TO CLOSING.

The undersigned purchaser hereby acknowledges receipt of the foregoing notice.

Signature of Buyer

Date

Signature of Buyer

Date