



INFORMATION ABOUT ON-SITE SEWER FACILITY

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CONCERNING THE PROPERTY AT 4601 Agnes Circle Springtown TX 76082

A. DESCRIPTION OF ON-SITE SEWER FACILITY ON PROPERTY:

- (1) Type of Treatment System: ☒ Septic Tank ☐ Aerobic Treatment ☐ Unknown
☐ _____
- (2) Type of Distribution System: leach lines ☐ Unknown
- (3) Approximate Location of Drain Field or Distribution System: Back yard ☐ 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? 2/9/2024
- (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.

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.

Vanessa Orrison 2/8/24
Signature of Seller Orrison Date

Sam Orrison 2/8/24
Signature of Seller Date

Receipt acknowledged by:

Signature of Buyer Date

Signature of Buyer Date

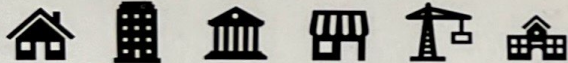
America's Best Vacuum Service LLC

AMERICASBESTPUMPING.COM

1432 Greg Sreet

Azle, TX 76020

817-444-9999



SERVICED BY 36-19	\$\$	✓	MI	MP	BFO	COF
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NOTES/PAYMENT INSTRUCTIONS :

Check #

* TRAP LOCATION *

INSIDE / OUTSIDE

IN GROUND / ABOVE GROUND

F / B / L / R OF BUILDING

SIZE 500

BUSINESS ID	PHONE 940-210-3565	DATE 2-9-24
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NAME Vanessa Orrison

STREET ADDRESS 4601 Agnes Cir

CITY Springtown	STATE TX	ZIPCODE 76082
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CONTACT	BILLED TO
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DESCRIPTION OF SERVICE								AMOUNT
M	2M	3M	4M	5M	6M	9M	Y	\$275- 00
<input type="radio"/> GREASE SERVICE <input checked="" type="radio"/> SEPTIC SERVICE <input type="radio"/> GRIT SERVICE								+3%
Pumped 1 tank								

PROJECTED RETURN DATE 2-9-26	TOTAL \$283.25
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RECEIVED BY

Vanessa Orrison

BY SIGNING ABOVE, I VERIFY COMPLETION OF SERVICES RENDERED &

ACCEPT RESPONSIBILITY OF PAYMENT DUE.

No. 27799

