



## UPDATE TO SELLER'S DISCLOSURE NOTICE

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UPDATE TO THE SELLER'S DISCLOSURE NOTICE CONCERNING THE PROPERTY AT 1595 S SH 95,  
Smithville, TX 78957

Seller is aware of the following new information regarding the condition of the Property. Section(s) \_\_\_\_\_  
are changed to read (cite specific sections and copy the applicable language in the sections verbatim, making  
any necessary changes): \_\_\_\_\_

old well on 20 acre tract is non-potable

This Update to the Seller's Disclosure Notice was completed by Seller as of the date signed. No person, including the broker(s), has instructed or influenced Seller to provide inaccurate information or to omit any material information. The brokers have relied on this information as true and correct and have no reason to believe it to be false or inaccurate.

Seller acknowledges that the statements in this form are true  
to the best of Seller's belief.

[Signature]  
Signature of Seller

8/15/21  
Date

Printed Name: Mark Burdick

[Signature]  
Signature of Seller

8/15/21  
Date

Printed Name: Carolyn Burdick

Buyer acknowledges receipt of this form.

\_\_\_\_\_  
Signature of Buyer

\_\_\_\_\_  
Date

Printed Name: \_\_\_\_\_

\_\_\_\_\_  
Signature of Buyer

\_\_\_\_\_  
Date

Printed Name: \_\_\_\_\_

(TXR 1418) 02-01-18

Elitch Real Estate LLC, 1439 Elm St Suite 100 New Braunfels TX 78130  
Bernadine Kaiser

Phone: 247725965 Fax: 830214448  
Produced with Love With Transactions (copiform Edition) 717 N Harwood St, Suite 2200, Dallas, TX 75201 [www.ltw.com](http://www.ltw.com)

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Mark & Carolyn



## 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

1595 S SH 95  
Smithville, TX 78957

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
Cable TV Wiring	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carbon Monoxide Det.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ceiling Fans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooktop	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dishwasher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disposal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Escape Ladder(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Exhaust Fans	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fences	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Detection Equip.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
French Drain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liquid Propane Gas:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-LP Community (Captive)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-LP on Property	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Item	Y	N	U
Natural Gas Lines	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fuel Gas Piping:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
-Black Iron Pipe	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
-Copper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
-Corrugated Stainless Steel Tubing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot Tub	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intercom System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Microwave	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor Grill	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patio/Decking	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plumbing System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool Maint. Accessories	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pool Heater	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Item	Y	N	U
Pump: sump grinder	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rain Gutters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Range/Stove	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof/Attic Vents	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sauna	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Smoke Detector	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smoke Detector - Hearing Impaired	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Spa	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Trash Compactor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TV Antenna	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Washer/Dryer Hookup	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Window Screens	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Sewer System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Item	Y	N	U	Additional Information
Central A/C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> electric gas number of units: 3
Evaporative Coolers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	number of units:
Wall/Window AC Units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	number of units: 1 MIN. SPLIT IN GARAGE NOT WORKING
Attic Fan(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	if yes, describe:
Central Heat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	electric gas number of units:
Other Heat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	if yes, describe:
Oven	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	number of ovens: 2 electric gas other:
Fireplace & Chimney	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> wood gas logs mock other:
Carport	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	attached not attached
Garage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	attached <input checked="" type="checkbox"/> not attached 2 GARAGES 4 Bays
Garage Door Openers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	number of units: 10 number of remotes: 2
Satellite Dish & Controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	owned <input checked="" type="checkbox"/> leased from: DIRECTV
Security System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> owned leased from:

(TXR-1406) 07-10-23

Initialed by: Buyer: \_\_\_\_\_ and Seller: mg cb

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Solar Panels	<input type="checkbox"/>	<input checked="" type="checkbox"/>	owned	leased from:
Water Heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	electric <input checked="" type="checkbox"/> gas	other: _____ number of units: <u>3</u>
Water Softener	<input type="checkbox"/>	<input checked="" type="checkbox"/>	owned	leased from:
Other Leased Items(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	if yes, describe:	
Underground Lawn Sprinkler	<input checked="" type="checkbox"/>	<input type="checkbox"/>	automatic	manual areas covered _____
Septic / On-Site Sewer Facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	if yes, attach Information About On-Site Sewer Facility (TXR-1407)	

Water supply provided by: city well MUD ☒ co-op unknown other: \_\_\_\_\_Was the Property built before 1978? yes ☒ no unknown

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

Roof Type: Metal Age: 10 yrs (approximate)Is there an overlay roof covering on the Property (shingles or roof covering placed over existing shingles or roof covering)? yes ☒ no unknownAre 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):mini split in garage  
Ice Maker in pantry

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 checked="" type="checkbox"/>
Ceilings	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Doors	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Driveways	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Electrical Systems	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Exterior Walls	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Item	Y	N
Sidewalks	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Walls / Fences	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Windows	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other Structural Components	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>
Asbestos Components	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diseased Trees: <u>oak wilt</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Endangered Species/Habitat on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fault Lines	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hazardous or Toxic Waste	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Improper Drainage	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Intermittent or Weather Springs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Landfill	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lead-Based Paint or Lead-Based Pt. Hazards	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Encroachments onto the Property	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Improvements encroaching on others' property	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Located in Historic District	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Historic Property Designation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Previous Foundation Repairs	<input type="checkbox"/>	<input type="checkbox"/>

Condition	Y	N
Radon Gas	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Settling	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Soil Movement	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Subsurface Structure or Pits	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Underground Storage Tanks <u>house propane</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Unplatted Easements	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Unrecorded Easements	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Urea-formaldehyde Insulation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Water Damage Not Due to a Flood Event	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Wetlands on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Wood Rot	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Active infestation of termites or other wood destroying insects (WDI)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Previous treatment for termites or WDI	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Previous termite or WDI damage repaired	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Previous Fires	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Concerning the Property at \_\_\_\_\_

1595 S SH 95  
Smithville, TX 78957

Previous Roof Repairs	<input checked="" type="checkbox"/>	
Previous Other Structural Repairs	<input checked="" type="checkbox"/>	
Previous Use of Premises for Manufacture of Methamphetamine		<input checked="" type="checkbox"/>

Termite or WDI damage needing repair		<input checked="" type="checkbox"/>
Single Blockable Main Drain in Pool/Hot Tub/Spa*		<input checked="" type="checkbox"/>

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

Additional caulking around chimney 2014portion of cooldek was damaged due to blocked downspout & drain (leaves) repaired, replaced concrete & placed new cooldek to fill back porch

\*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 conditions?\* (Mark Yes (Y) if you are aware and check wholly or partly as applicable. Mark No (N) if you are not aware.)

Y N

- ☒ Present flood insurance coverage.
- ☒ Previous flooding due to a failure or breach of a reservoir or a controlled or emergency release of water from a reservoir.
- ☒ Previous flooding due to a natural flood event.
- ☒ Previous water penetration into a structure on the Property due to a natural flood.
- ☒ Located wholly partly in a 100-year floodplain (Special Flood Hazard Area-Zone A, V, A99, AE, AO, AH, VE, or AR).
- ☒ Located wholly partly in a 500-year floodplain (Moderate Flood Hazard Area-Zone X (shaded)).
- ☒ Located wholly partly in a floodway.
- ☒ Located wholly partly in a flood pool.
- ☒ Located wholly partly in a reservoir.

If the answer to any of the above is yes, explain (attach additional sheets as necessary): \_\_\_\_\_

**\*If Buyer is concerned about these matters, Buyer may consult Information About Flood Hazards (TXR 1414).**

For purposes of this notice:

"100-year floodplain" means any area of land that: (A) is identified on the flood insurance rate map as a special flood hazard area, which is designated as Zone A, V, A99, AE, AO, AH, VE, or AR on the map; (B) has a one percent annual chance of flooding, which is considered to be a high risk of flooding; and (C) may include a regulatory floodway, flood pool, or reservoir.

"500-year floodplain" means any area of land that: (A) is identified on the flood insurance rate map as a moderate flood hazard area, which is designated on the map as Zone X (shaded); and (B) has a two-tenths of one percent annual chance of flooding, which is considered to be a moderate risk of flooding.

"Flood pool" means the area adjacent to a reservoir that lies above the normal maximum operating level of the reservoir and that is subject to controlled inundation under the management of the United States Army Corps of Engineers.

(TXR-1406) 07-10-23

Initialed by: Buyer: \_\_\_\_\_ and Seller: MS CB

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Concerning the Property at \_\_\_\_\_

"Flood insurance rate map" means the most recent flood hazard map published by the Federal Emergency Management Agency under the National Flood Insurance Act of 1968 (42 U.S.C. Section 4001 et seq.).

"Floodway" means an area that is identified on the flood insurance rate map as a regulatory floodway, which includes the channel of a river or other watercourse and the adjacent land areas that must be reserved for the discharge of a base flood, also referred to as a 100-year flood, without cumulatively increasing the water surface elevation more than a designated height.

"Reservoir" means a water impoundment project operated by the United States Army Corps of Engineers that is intended to retain water or delay the runoff of water in a designated surface area of land.

**Section 6. Have you (Seller) ever filed a claim for flood damage to the Property with any insurance provider, including the National Flood Insurance Program (NFIP)?** yes ~~no~~ If yes, explain (attach additional sheets as necessary): \_\_\_\_\_

"Homes in high risk flood zones with mortgages from federally regulated or insured lenders are required to have flood insurance. Even when not required, the Federal Emergency Management Agency (FEMA) encourages homeowners in high risk, moderate risk, and low risk flood zones to purchase flood insurance that covers the structure(s) and the personal property within the structure(s).

**Section 7. Have you (Seller) ever received assistance from FEMA or the U.S. Small Business Administration (SBA) for flood damage to the Property?** yes ~~no~~ If yes, explain (attach additional sheets as necessary): \_\_\_\_\_

**Section 8. 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

Y

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.

Y

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.

Y

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: \_\_\_\_\_Y

Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.

Y

Any lawsuits or other legal proceedings directly or indirectly affecting the Property. (Includes, but is not limited to: divorce, foreclosure, heirship, bankruptcy, and taxes.)

Y

Any death on the Property except for those deaths caused by: natural causes, suicide, or accident unrelated to the condition of the Property.

Y

Any condition on the Property which materially affects the health or safety of an individual.

Y

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).

Y

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.

(TXR-1406) 07-10-23

Initialed by: Buyer: \_\_\_\_\_ and Seller: MS. CB

Unish Real Estate LLC, 1439 Bess Dr Suite 100 New Braunfels TX 78130

Bernadine Kainer

Phone: 361725485

Fax: 830246683

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www.love.com

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Mark A. Carls

Concerning the Property at \_\_\_\_\_

- ☒ 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.

If the answer to any of the items in Section 8 is yes, explain (attach additional sheets if necessary): \_\_\_\_\_

**Section 9.** 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 10.** 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 11.** Have you (Seller) ever filed a claim for damage, other than flood damage, to the Property with any insurance provider? ☒ yes ☐ no

**Section 12.** 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: Hail storm 2018

Declined to do repairs due to age of roof. we have had no problems, leaks.

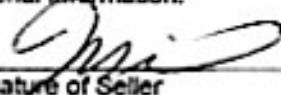
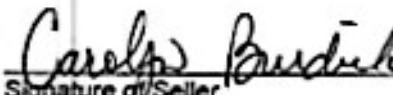
**Section 13.** Does the Property have working smoke detectors installed in accordance with the smoke detector requirements of Chapter 766 of the Health and Safety Code? ☒ unknown ☐ no ☐ yes. If no or unknown, explain. (Attach additional sheets if necessary):

we have smoke detectors unsure if to code

*\*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.

  
Signature of Seller8/15/24  
Date  
Signature of Seller8/15/24  
DatePrinted Name: MARK BURDICKPrinted Name: CAROLYN BURDICK**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 <https://publicsite.dps.texas.gov>. 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* (TXR 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: Bluebonnet Elec. Coopphone #: 800-842-7708

Sewer: \_\_\_\_\_

phone #: \_\_\_\_\_

Water: Aqua Water Supplyphone #: 512-303-3943Cable: DIRECTV

phone #: \_\_\_\_\_

Trash: Texas Disposal Systemsphone #: 800-375-8375

Natural Gas: \_\_\_\_\_

phone #: \_\_\_\_\_

Phone Company: GVTCphone #: 800-367-4882Propane: Fayetteville Propane Cophone #: 979-378-2213Internet: GVTC

phone #: \_\_\_\_\_

Concerning the Property at \_\_\_\_\_

1596 S SH 95  
Smithville, TX 78957

- (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: \_\_\_\_\_





## INFORMATION ABOUT ON-SITE SEWER FACILITY

USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF THE TEXAS ASSOCIATION OF REALTORS®, INC. IS NOT AUTHORIZED.  
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CONCERNING THE PROPERTY AT

1595 S SH 95  
Smithville, TX 78957

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

- (1) Type of Treatment System: ☒ Septic Tank ☐ Aerobic Treatment ☐ Unknown
- (2) Type of Distribution System: Field Lines ☐ Unknown
- (3) Approximate Location of Drain Field or Distribution System: 150 ft from septic tank ☐ Unknown
- (4) Installer: \_\_\_\_\_ ☐ Unknown
- (5) Approximate Age: 10 yrs ☐ 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? Feb 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.

(TXR-1407) 1-7-04

Initialed for Identification by Buyer \_\_\_\_\_ and Seller MD.CB

Page 1 of 2

**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.

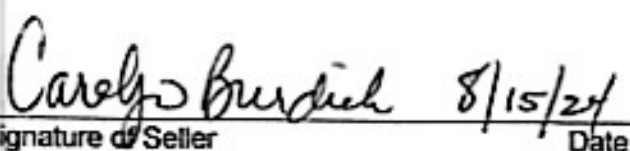
<u>Facility</u>	<u>Usage (gal/day) without water- saving devices</u>	<u>Usage (gal/day) with water- saving devices</u>
Single family dwelling (1-2 bedrooms; less than 1,500 sf)	225	180
Single family dwelling (3 bedrooms; less than 2,500 sf)	300	240
Single family dwelling (4 bedrooms; less than 3,500 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.



Signature of Seller  
Mark Burdick

8/15/24  
Date



Signature of Seller  
Carolyn Burdick

Date

Receipt acknowledged by:

\_\_\_\_\_  
Signature of Buyer Date

\_\_\_\_\_  
Signature of Buyer Date

### System Design Information

Permit #: 13-102

Owner: Burdick

Physical Address: 1595 SSH95

Home Size: 5456 ft<sup>2</sup>

# Of Bedrooms: 4

Septic System Type: ET Beds

GPD: 400

Soil Class: IV

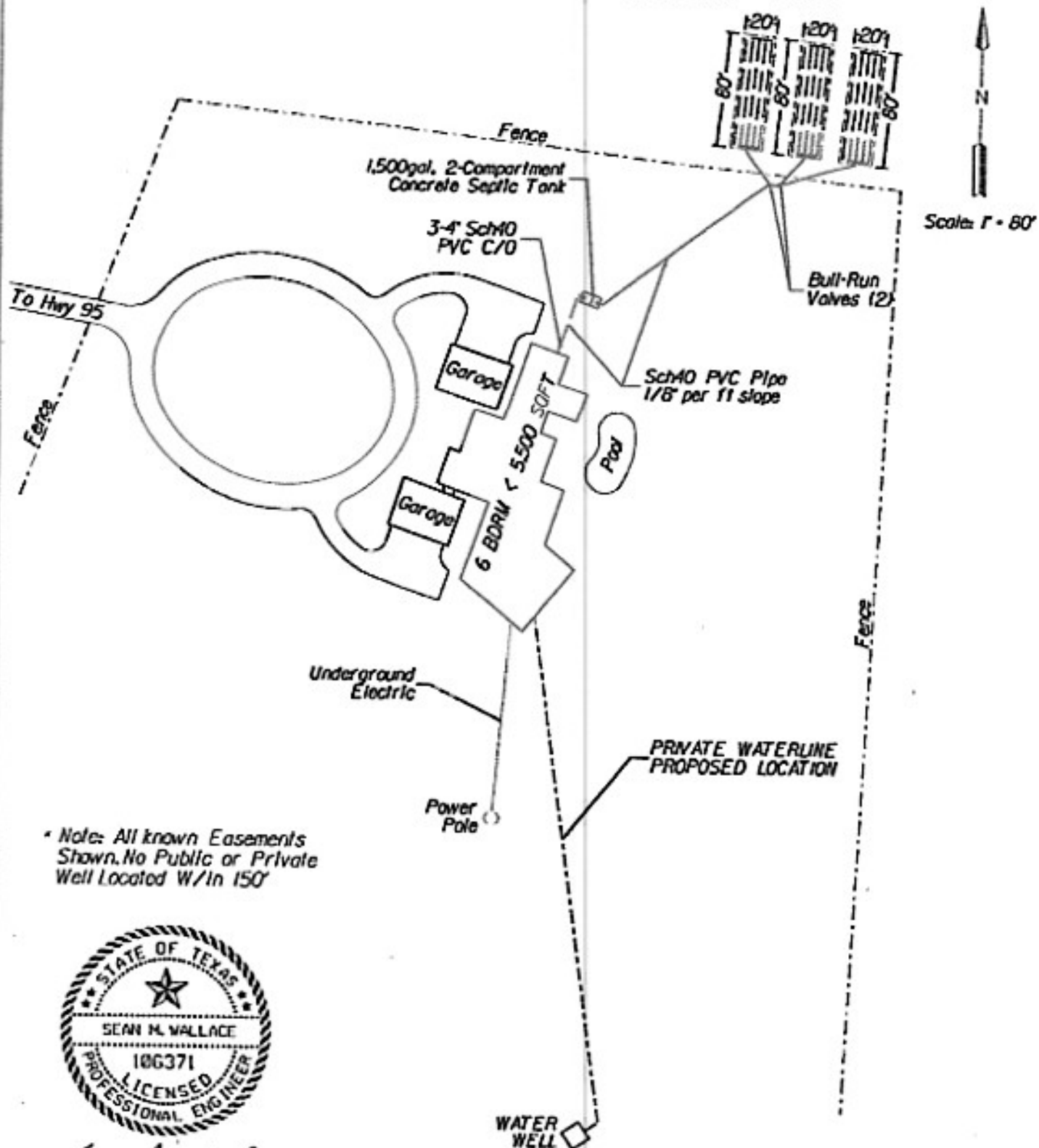
	Required	Actual
# of Tanks	1	1
Tank Size	1250 gal	1500 gal
# of Compartments	2	2
Disposal Area	4800 ft <sup>2</sup>	4800 ft <sup>2</sup>
Panels		
Linear Feet		
Spray Area		
# Spray Heads		
# of Trenches		

Reviewer: Leslie Crosby 038697

Date: 7/14/14

OSSF FOR RESIDENCE AT: 1595 HWY 95 SOUTH, SMITHVILLE, TX 78957

LEGAL INFORMATION: A65 THOMPSON, THOMAS, 136.482 ACRES, BASTROP - R119261



\* Note: All known Easements  
Shown. No Public or Private  
Well Located W/In 150'



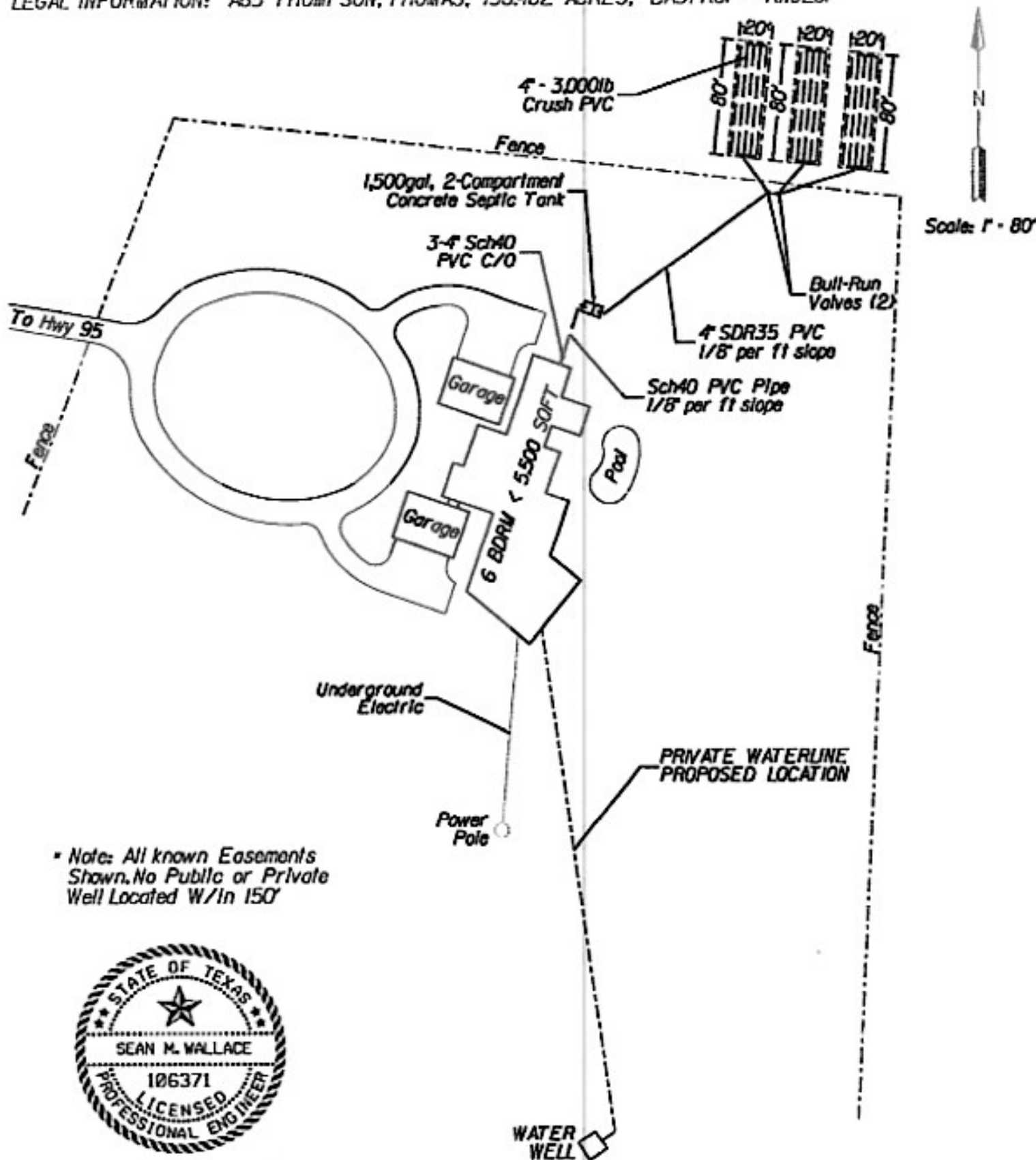
*Sean M. Wallace*  
7/7/14

\* Entire Limits of Property NOT Shown - All portions of disposal system > 5' from property lines



**OSSF FOR RESIDENCE AT: 1595 HWY 95 SOUTH; SMITHVILLE, TX 78957**

**LEGAL INFORMATION: A65 THOMPSON, THOMAS, 136.482 ACRES, BASTROP - RII9261**



*Sean M. Wallace*  
7/7/14

13-102

# EVAPOTRANSPIRATION (ET) BED SEPTIC SYSTEM

Installer: Claude Hoffman

July 7, 2014

## Property Location:

1595 Hwy 95 South

Smithville, TX 78957

Bastrop County

Legal Description: A65 THOMPSON, THOMAS, ACRES 136.482

## Design Requirements:

A Conventional gravity type septic system with evapotranspiration beds is to be installed for a 6-Bedroom Residence of less than 5,500 sqft with water saving fixtures. Acreage: 136.482; Native Soil Class: IV (Clay);  $Q = 420$  GPD;  $Ret = 0.14$ ; 1 - 1,500 gallon 2 - compartment septic tank to be used. 3 - Equally sized ET Beds 80' Long x 20' Wide are to be excavated to a depth of 18"-36"; Rock and Pipe Will be used in the beds and will be covered with geotextile fabric. Beds shall then be backfilled with a Class II soil, mounded up approximately 6" above adjacent natural ground elevation, and graded to shed surface water off the bed itself. Two Bull-Run type selector valves shall also be installed to regulate flow to the beds. All pipe will be 4" Schedule 40 or SDR 26 PVC.

## System Calculations:

Required SF of Surface Area (A) =  $1.6Q / Ret = 1.6(420) / 0.14 = 4,800$  sqft ✓

Proposed SF of Surface Area

- 3 Equally Sized 80' x 20' ET Beds =  $3 \times 80' \times 20' = 2(1,728) = 4,800$  sqft ✓

## Other Requirements:

Tank to be backfilled with suitable soil or pea gravel free of rock larger than 1/2" in diameter, including a minimum of 4" of backfill beneath the tank. Inspection port risers shall extend to within 6" of grade or to grade if tank lid is in excess of 12" below grade.



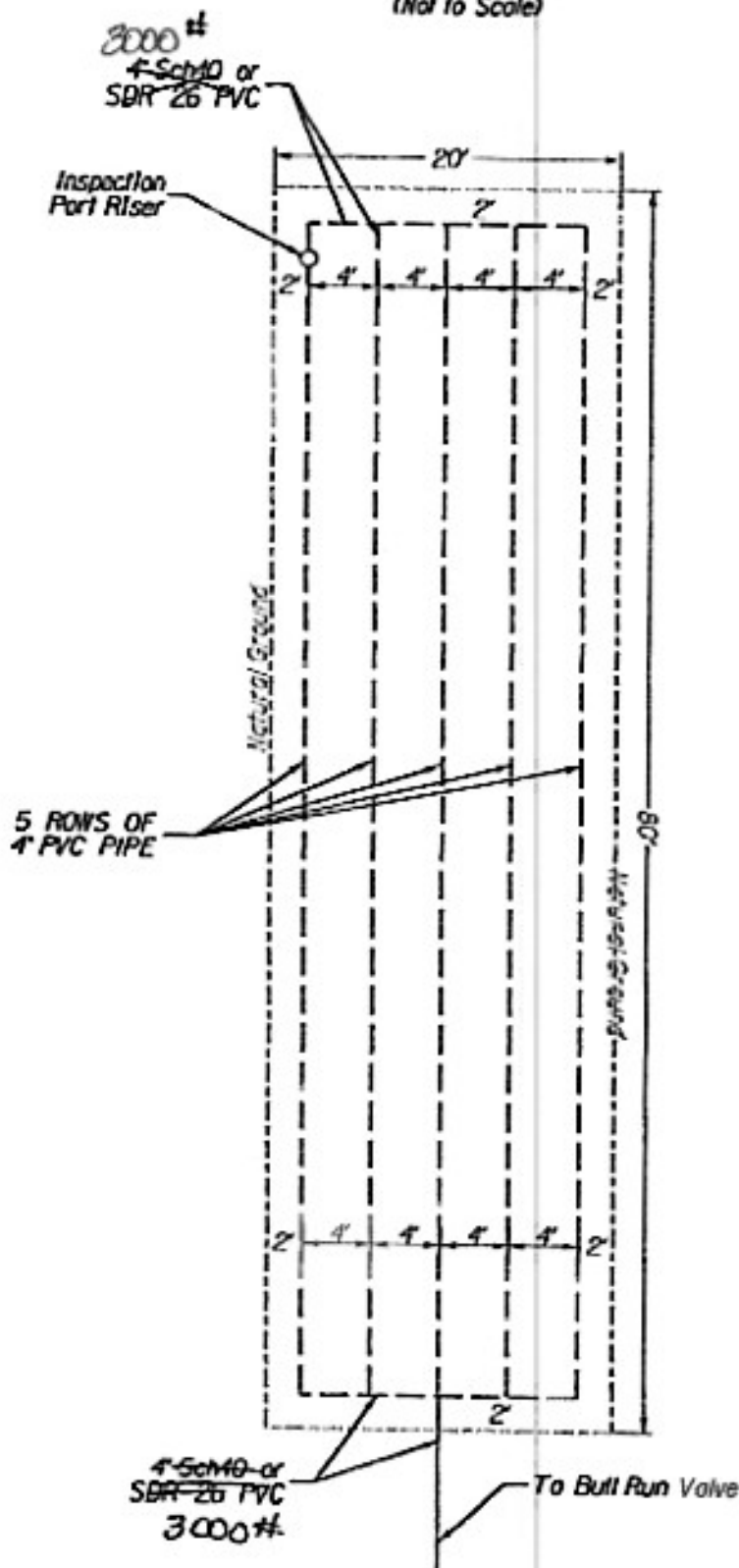
*Sean M. Wallace*  
7/7/14

OSSF FOR RESIDENCE AT: 1595 HWY 95 SOUTH; SMITHVILLE, TX 78957

LEGAL INFORMATION: A65 THOMPSON, THOMAS, 136.482 ACRES, BASTROP - RII926I

EVAPOTRANSPIRATION (ET) BED DETAILS

(Not to Scale)



Sean M. Wallace  
7/7/14

## Soil and Site Evaluation Report

**SITE LOCATION (LEGAL DESCRIPTION AND/OR 9-1-1 ADDRESS)**

1595 HWY 95 SOUTH; SMITHVILLE, TX 78957 - BASTROP COUNTY

## ON-SITE SEWAGE FACILITY SOIL &amp; SITE EVALUATION REPORT FORM

### Requirements:

At least two profile holes must be dug at opposite ends of the proposed disposal area. Location of the profile holes must be shown on the design and they must be flagged at the site if necessary. For all OSSP types, soil must be evaluated to the depth of 5 feet. A licensed site evaluator must complete and describe EACH SOIL HORIZON and IDENTIFY ANY RESTRICTIVE FEATURES on this form. Indicate DEPTHS where features occur.

Excavation Number 1

Depth (feet & inches)	Soil Texture Classification	Gravel Analysis	Structure	Groundwater (moisture/water table)	Restrictive Horizon
0 -- Ground Surface					
1 0' - 5'	Class IV CLAY	<5%	N/A	None	Yes
2					
3					
4					
5					

2

Depth (feet & inches)	Soil Texture Characteristics	Gravel Analysis	Shrinkage	Consistency (moisture/water table)	Water Table Horizon
0 - Gravel Surface					
0' - 5'	Class IV CLAY	<5%	N/A	None	Yes
5' - 10'					
10' - 15'					
15' - 20'					
20' - 25'					
25' - 30'					
30' - 35'					
35' - 40'					
40' - 45'					
45' - 50'					
50' - 55'					
55' - 60'					
60' - 65'					
65' - 70'					
70' - 75'					
75' - 80'					
80' - 85'					
85' - 90'					
90' - 95'					
95' - 100'					

1-3%

## NATURE OF DEBATES

Does surface drainage on property meet Complete slope criteria	YES	300	✓
Presence of Precipitation infiltration planning materials on site	YES	300	✓
Presence of adjacent ponds, streams, water impoundments	YES	300	
Building or proposed structure will be sited (150' setback)	YES	300	✓
Building or proposed structure will be sited (150' setback)	YES	300	✓

IF YOU ANSWERED YES TO ANY OF THE ABOVE, ADDRESS THE ISSUES WITHIN YOUR NEXT PLAN  
ACTION ITEM BY 15 JAN 2015. We will be using this information to make sure we are meeting our goals.

\*\*\*\*\*

unpublished, 274 pp. 2000. 2nd ed. with 2 plates of leaves and flowers. 6 colour photographs. 22

*Sam A. Walker*

PE 106371

979.777.0757



7/7/14