



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 7379 CR 401  
Navasota, TX 77868

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?  
 \_\_\_\_\_ 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            |   |   | ✓ |
| Carbon Monoxide Det.       |   |   | ✓ |
| Ceiling Fans               |   |   | ✓ |
| Cooktop                    |   |   | ✓ |
| Dishwasher                 |   |   | ✓ |
| Disposal                   |   |   | ✓ |
| Emergency Escape Ladder(s) |   |   | ✓ |
| Exhaust Fans               |   |   | ✓ |
| Fences                     | ✓ |   |   |
| Fire Detection Equip.      |   |   | ✓ |
| French Drain               |   |   | ✓ |
| Gas Fixtures               |   |   | ✓ |
| Natural Gas Lines          |   |   | ✓ |

| Item                    | Y | N | U |
|-------------------------|---|---|---|
| Liquid Propane Gas:     |   |   | ✓ |
| -LP Community (Captive) |   |   | ✓ |
| -LP on Property         |   |   | ✓ |
| Hot Tub                 |   |   | ✓ |
| Intercom System         |   |   | ✓ |
| Microwave               |   |   | ✓ |
| Outdoor Grill           |   |   | ✓ |
| Patio/Decking           | ✓ |   |   |
| Plumbing System         | ✓ |   |   |
| Pool                    |   |   | ✓ |
| Pool Equipment          |   |   | ✓ |
| Pool Maint. Accessories |   |   | ✓ |
| Pool Heater             |   |   | ✓ |

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

| Item                            | Y | N | U | Additional Information                                                                                                                              |
|---------------------------------|---|---|---|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Central A/C                     |   |   | ✓ | <input checked="" type="checkbox"/> electric <input type="checkbox"/> gas number of units: <u>3</u> <del>number of units: (1, 1, 1) (1, 1, 1)</del> |
| Evaporative Coolers             |   |   | ✓ | number of units: <u>N/A</u>                                                                                                                         |
| Wall/Window AC Units            | ✓ |   |   | number of units: <u>3</u>                                                                                                                           |
| Attic Fan(s)                    |   |   | ✓ | if yes, describe: <u>N/A</u>                                                                                                                        |
| Central Heat                    |   |   | ✓ | <input type="checkbox"/> electric <input type="checkbox"/> gas number of units: <u>N/A</u>                                                          |
| Other Heat                      |   |   | ✓ | if yes, describe: <u>(1) N/A</u>                                                                                                                    |
| Oven                            |   |   | ✓ | number of ovens: <u>N/A</u> <input type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> other:                          |
| Fireplace & Chimney             |   |   | ✓ | <input type="checkbox"/> wood <input type="checkbox"/> gas logs <input type="checkbox"/> mock <input type="checkbox"/> other: <u>N/A</u>            |
| Carport                         |   |   | ✓ | <input type="checkbox"/> attached <input type="checkbox"/> not attached                                                                             |
| Garage                          |   |   | ✓ | <input type="checkbox"/> attached <input type="checkbox"/> not attached                                                                             |
| Garage Door Openers             |   |   | ✓ | number of units: <u>N/A</u> number of remotes: <u>N/A</u>                                                                                           |
| Satellite Dish & Controls       |   |   | ✓ | <input type="checkbox"/> owned <input type="checkbox"/> leased from <u>N/A</u>                                                                      |
| Security System                 |   |   | ✓ | <input type="checkbox"/> owned <input type="checkbox"/> leased from <u>N/A</u>                                                                      |
| Water Heater                    | ✓ |   |   | <input checked="" type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> other: number of units: <u>1</u>                 |
| Water Softener                  |   |   | ✓ | <input type="checkbox"/> owned <input type="checkbox"/> leased from <u>N/A</u>                                                                      |
| Underground Lawn Sprinkler      |   |   | ✓ | <input type="checkbox"/> automatic <input type="checkbox"/> manual areas covered: <u>N/A</u>                                                        |
| Septic / On-Site Sewer Facility | ✓ |   |   | if yes, attach Information About On-Site Sewer Facility (TAR-1407)                                                                                  |

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

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 TAR-1906 concerning lead-based paint hazards)

Roof Type: COMPOSITE SHINGLE Age: 3-4 yrs. old (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                                   | Item                 | Y | N                                   | Item                        | Y | N                                   |
|--------------------|---|-------------------------------------|----------------------|---|-------------------------------------|-----------------------------|---|-------------------------------------|
| Basement           |   | <input checked="" type="checkbox"/> | Floors               |   | <input checked="" type="checkbox"/> | Sidewalks                   |   | <input checked="" type="checkbox"/> |
| Ceilings           |   | <input checked="" type="checkbox"/> | Foundation / Slab(s) |   | <input checked="" type="checkbox"/> | Walls / Fences              |   | <input checked="" type="checkbox"/> |
| Doors              |   | <input checked="" type="checkbox"/> | Interior Walls       |   | <input checked="" type="checkbox"/> | Windows                     |   | <input checked="" type="checkbox"/> |
| Driveways          |   | <input checked="" type="checkbox"/> | Lighting Fixtures    |   | <input checked="" type="checkbox"/> | Other Structural Components |   | <input checked="" type="checkbox"/> |
| Electrical Systems |   | <input checked="" type="checkbox"/> | Plumbing Systems     |   | <input checked="" type="checkbox"/> |                             |   |                                     |
| Exterior Walls     |   | <input checked="" type="checkbox"/> | Roof                 |   | <input checked="" type="checkbox"/> |                             |   |                                     |

If the answer to any of the items in Section 2 is yes, explain (attach additional sheets if necessary): N/A

**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                                   | Condition                                                                | Y | N                                   |
|----------------------------------------------------------------------------------|---|-------------------------------------|--------------------------------------------------------------------------|---|-------------------------------------|
| Aluminum Wiring                                                                  |   | <input checked="" type="checkbox"/> | Previous Foundation Repairs                                              |   | <input checked="" type="checkbox"/> |
| Asbestos Components                                                              |   | <input checked="" type="checkbox"/> | Previous Roof Repairs                                                    |   | <input checked="" type="checkbox"/> |
| Diseased Trees: <input type="checkbox"/> oak wilt <input type="checkbox"/> _____ |   | <input checked="" type="checkbox"/> | Other Structural Repairs                                                 |   | <input checked="" type="checkbox"/> |
| Endangered Species/Habitat on Property                                           |   | <input checked="" type="checkbox"/> | Radon Gas                                                                |   | <input checked="" type="checkbox"/> |
| Fault Lines                                                                      |   | <input checked="" type="checkbox"/> | Settling                                                                 |   | <input checked="" type="checkbox"/> |
| Hazardous or Toxic Waste                                                         |   | <input checked="" type="checkbox"/> | Soil Movement                                                            |   | <input checked="" type="checkbox"/> |
| Improper Drainage                                                                |   | <input checked="" type="checkbox"/> | Subsurface Structure or Pits                                             |   | <input checked="" type="checkbox"/> |
| Intermittent or Weather Springs                                                  |   | <input checked="" type="checkbox"/> | Underground Storage Tanks                                                |   | <input checked="" type="checkbox"/> |
| Landfill                                                                         |   | <input checked="" type="checkbox"/> | Unplatted Easements                                                      |   | <input checked="" type="checkbox"/> |
| Lead-Based Paint or Lead-Based Pt. Hazards                                       |   | <input checked="" type="checkbox"/> | Unrecorded Easements                                                     |   | <input checked="" type="checkbox"/> |
| Encroachments onto the Property                                                  |   | <input checked="" type="checkbox"/> | Urea-formaldehyde Insulation                                             |   | <input checked="" type="checkbox"/> |
| Improvements encroaching on others' property                                     |   | <input checked="" type="checkbox"/> | Water Penetration                                                        |   | <input checked="" type="checkbox"/> |
| Located in 100-year Floodplain                                                   |   | <input checked="" type="checkbox"/> | Wetlands on Property                                                     |   | <input checked="" type="checkbox"/> |
| Located in Floodway                                                              |   | <input checked="" type="checkbox"/> | Wood Rot                                                                 |   | <input checked="" type="checkbox"/> |
| Present Flood Ins. Coverage<br>(If yes, attach TAR-1414)                         |   | <input checked="" type="checkbox"/> | Active infestation of termites or other wood<br>destroying insects (WDI) |   | <input checked="" type="checkbox"/> |
| Previous Flooding into the Structures                                            |   | <input checked="" type="checkbox"/> | Previous treatment for termites or WDI                                   |   | <input checked="" type="checkbox"/> |
| Previous Flooding onto the Property                                              |   | <input checked="" type="checkbox"/> | Previous termite or WDI damage repaired                                  |   | <input checked="" type="checkbox"/> |
| Located in Historic District                                                     |   | <input checked="" type="checkbox"/> | Previous Fires                                                           |   | <input checked="" type="checkbox"/> |
| Historic Property Designation                                                    |   | <input checked="" type="checkbox"/> | Termite or WDI damage needing repair                                     |   | <input checked="" type="checkbox"/> |
| Previous Use of Premises for Manufacture<br>of Methamphetamine                   |   | <input checked="" type="checkbox"/> | Single Blockable Main Drain in Pool/Hot<br>Tub/Spa*                      |   | <input checked="" type="checkbox"/> |

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

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

\*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                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Room additions, structural modifications, or other alterations or repairs made without necessary permits or not in compliance with building codes in effect at the time.                                                                                                                                                                                                                                                                                                                                                                                               |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Homeowners' associations or maintenance fees or assessments. If yes, complete the following:<br>Name of association: _____<br>Manager's name: _____ Phone: _____<br>Fees or assessments are: \$ _____ per _____ and are: <input type="checkbox"/> mandatory <input type="checkbox"/> voluntary<br>Any unpaid fees or assessment for the Property? <input type="checkbox"/> yes (\$ _____) <input type="checkbox"/> no<br>If the Property is in more than one association, provide information about the other associations below or attach information to this notice. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any common area (facilities such as pools, tennis courts, walkways, or other) co-owned in undivided interest with others. If yes, complete the following:<br>Any optional user fees for common facilities charged? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, describe: _____                                                                                                                                                                                                                                                                    |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any lawsuits or other legal proceedings directly or indirectly affecting the Property. (Includes, but is not limited to: divorce, foreclosure, heirship, bankruptcy, and taxes.)                                                                                                                                                                                                                                                                                                                                                                                       |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any death on the Property except for those deaths caused by: natural causes, suicide, or accident unrelated to the condition of the Property.                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any condition on the Property which materially affects the health or safety of an individual.                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 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.<br>If yes, attach any certificates or other documentation identifying the extent of the remediation (for example, certificate of mold remediation or other remediation).                                                                                                                                                                                                     |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 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.                                                                                                                                                                                                                                                                                                                                                                                                              |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | The Property is located in a propane gas system service area owned by a propane distribution system retailer.                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

Concerning the Property at Navasota, TX 77868

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

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  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.





# TEXAS ASSOCIATION OF REALTORS® INTERMEDIARY RELATIONSHIP NOTICE

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To: William L. Pellerin, Maria Isela Pellerin (Seller or Landlord)  
and \_\_\_\_\_ (Prospect)  
From: Navasota Realty - Nancy Perry Broker (Broker's Firm)  
7379 CR 401  
Re: Navasota, TX 77868 (Property)  
Date: \_\_\_\_\_

- A. Under this notice, "owner" means the seller or landlord of the Property and "prospect" means the above-named prospective buyer or tenant for the Property.
- B. Broker's firm represents the owner under a listing agreement and also represents the prospect under a buyer/tenant representation agreement.
- C. In the written listing agreement and the written buyer/tenant representation agreement, both the owner and the prospect previously authorized Broker to act as an intermediary if a prospect who Broker represents desires to buy or lease a property that is listed by the Broker. When the prospect makes an offer to purchase or lease the Property, Broker will act in accordance with the authorizations granted in the listing agreement and in the buyer/tenant representation agreement.
- D. Broker  will  will not appoint licensed associates to communicate with, carry out instructions of, and provide opinions and advice during negotiations to each party. If Broker makes such appointments, Broker appoints:  
\_\_\_\_\_ to the owner; and  
\_\_\_\_\_ to the prospect.
- E. By acknowledging receipt of this notice, the undersigned parties reaffirm their consent for broker to act as an intermediary.
- F. Additional information: (Disclose material information related to Broker's relationship to the parties, such as personal relationships or prior or contemplated business relationships.)

The undersigned acknowledge receipt of this notice

[Signature] 9/10/14  
Seller or Landlord Date  
William L. Pellerin

\_\_\_\_\_  
Prospect Date

[Signature] 9-10-14  
Seller or Landlord Date  
Maria Isela Pellerin

\_\_\_\_\_  
Prospect Date

(TAR-1409) 1-7-04



Approved by the Texas Real Estate Commission for Voluntary Use  
 Texas law requires all real estate licensees to give the following information about  
 brokerage services to prospective buyers, tenants, sellers and landlords.

10-10-11

## Information About Brokerage Services

**B**efore working with a real estate broker, you should know that the duties of a broker depend on whom the broker represents. If you are a prospective seller or landlord (owner) or a prospective buyer or tenant (buyer), you should know that the broker who lists the property for sale or lease is the owner's agent. A broker who acts as a subagent represents the owner in cooperation with the listing broker. A broker who acts as a buyer's agent represents the buyer. A broker may act as an intermediary between the parties if the parties consent in writing. A broker can assist you in locating a property, preparing a contract or lease, or obtaining financing without representing you. A broker is obligated by law to treat you honestly.

### IF THE BROKER REPRESENTS THE OWNER:

The broker becomes the owner's agent by entering into an agreement with the owner, usually through a written - listing agreement, or by agreeing to act as a subagent by accepting an offer of subagency from the listing broker. A subagent may work in a different real estate office. A listing broker or subagent can assist the buyer but does not represent the buyer and must place the interests of the owner first. The buyer should not tell the owner's agent anything the buyer would not want the owner to know because an owner's agent must disclose to the owner any material information known to the agent.

### IF THE BROKER REPRESENTS THE BUYER:

The broker becomes the buyer's agent by entering into an agreement to represent the buyer, usually through a written buyer representation agreement. A buyer's agent can assist the owner but does not represent the owner and must place the interests of the buyer first. The owner should not tell a buyer's agent anything the owner would not want the buyer to know because a buyer's agent must disclose to the buyer any material information known to the agent.

### IF THE BROKER ACTS AS AN INTERMEDIARY:

A broker may act as an intermediary between the parties if the broker complies with The Texas Real Estate License Act. The broker must obtain the written consent of each party to the transaction to act as an

intermediary. The written consent must state who will pay the broker and, in conspicuous bold or underlined print, set forth the broker's obligations as an intermediary. The broker is required to treat each party honestly and fairly and to comply with The Texas Real Estate License Act. A broker who acts as an intermediary in a transaction:

(1) shall treat all parties honestly;

(2) may not disclose that the owner will accept a price less than the asking price unless authorized in writing to do so by the owner;

(3) may not disclose that the buyer will pay a price greater than the price submitted in a written offer unless authorized in writing to do so by the buyer; and

(4) may not disclose any confidential information or any information that a party specifically instructs the broker in writing not to disclose unless authorized in writing to disclose the information or required to do so by The Texas Real Estate License Act or a court order or if the information materially relates to the condition of the property.

With the parties' consent, a broker acting as an intermediary between the parties may appoint a person who is licensed under The Texas Real Estate License Act and associated with the broker to communicate with and carry out instructions of one party and another person who is licensed under that Act and associated with the broker to communicate with and carry out instructions of the other party.

If you choose to have a broker represent you, you should enter into a written agreement with the broker that clearly establishes the broker's obligations and your obligations. The agreement should state how and by whom the broker will be paid. You have the right to choose the type of representation, if any, you wish to receive. Your payment of a fee to a broker does not necessarily establish that the broker represents you. If you have any questions regarding the duties and responsibilities of the broker, you should resolve those questions before proceeding.

Real estate licensee asks that you acknowledge receipt of this information about brokerage services for the licensee's records.

Buyer, Seller, Landlord or Tenant  
 William L. Pellerin, Maria Esela Pellerin

9-10-14  
 Date

9/10/14

Texas Real Estate Brokers and Salespersons are licensed and regulated by the Texas Real Estate Commission (TREC). If you have a question or complaint regarding a real estate licensee, you should contact TREC at P.O. Box 12188, Austin, Texas 78711-2188. 512-936-3000 (<http://www.trec.texas.gov>)

(TAR-2501) 10-10-11

TREC No. OP-K

Navasota Realty, 502 S. LaSalle, Suite C Navasota, TX 77868  
 Phone: 936.825.5094

Fax: 936.825.3076

Navasota Realty

Pellerin, William L.

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TEXAS ASSOCIATION OF REALTORS®

INFORMATION ABOUT ON-SITE SEWER FACILITY

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CONCERNING THE PROPERTY AT 7379 CR 401 Navasota, TX 77868

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

- (1) Type of Treatment System: [X] Septic Tank [ ] Aerobic Treatment [ ] Unknown
(2) Type of Distribution System: FIELD LINE + 2 TANKS [ ] Unknown
(3) Approximate Location of Drain Field or Distribution System: NORTH EAST AREA OF TRACT (FROM BUNKHOUSE TO FENCE ALONG FM 3090) [ ] Unknown
(4) Installer: MRY SEPTIC [ ] Unknown
(5) Approximate Age: 2011? [ ] Unknown

B. MAINTENANCE INFORMATION:

- (1) Is Seller aware of any maintenance contract in effect for the on-site sewer facility? [ ] Yes [X] No
(2) Approximate date any tanks were last pumped? N/A
(3) Is Seller aware of any defect or malfunction in the on-site sewer facility? [ ] Yes [X] No
(4) Does Seller have manufacturer or warranty information available for review? [ ] Yes [X] 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 [ ] N/A
(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 [Signature] and Seller [Signature] MTP Page 1 of 2




Information about On-Site Sewer Facility concerning \_\_\_\_\_

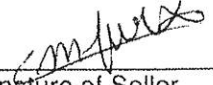
D. INFORMATION FROM GOVERNMENTAL AGENCIES: Pamphlets describing on-site sewer facilities are available from the Texas Agricultural Extension Service. Information in the following table was obtained from Texas Commission on Environmental Quality (TCEQ) on 10/24/2002. The table estimates daily wastewater 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)<br/>without water-<br/>saving devices</u> | <u>Usage (gal/day)<br/>with water-<br/>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  
 William L. Pellerin

\_\_\_\_\_  
 Date  
 9/10/14

  
 \_\_\_\_\_  
 Signature of Seller  
 Maria Isela Pellerin

\_\_\_\_\_  
 Date  
 9-10-14

Receipt acknowledged by:

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

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