

Concerning the Property at 7810 Breaman Crest Ln

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|---------------------------------|--------------------------|--------------------------|-------------------------------------|--|--------|----------------------|
| Underground Lawn Sprinkler | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | automatic | manual | areas covered: _____ |
| Septic / On-Site Sewer Facility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | if yes, attach Information About On-Site Sewer Facility (TAR-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 TAR-1906 concerning lead-based paint hazards).

Roof Type: Composite Age: 13 (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 type="checkbox"/> | <input checked="" type="checkbox"/> | Floors | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Sidewalks | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Ceilings | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Foundation / Slab(s) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Walls / Fences | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Doors | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Interior Walls | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Windows | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Driveways | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Lighting Fixtures | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Other Structural Components | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Electrical Systems | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plumbing Systems | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> |
| Exterior Walls | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Roof | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | <input 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 | Condition | Y | N |
|--|--------------------------|-------------------------------------|---|--------------------------|-------------------------------------|
| Aluminum Wiring | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Previous Foundation Repairs | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Asbestos Components | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Previous Roof Repairs | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Diseased Trees: <u>oak wilt</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Previous Other Structural Repairs | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Endangered Species/Habitat on Property | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Radon Gas | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Fault Lines | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Settling | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Hazardous or Toxic Waste | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Soil Movement | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Improper Drainage | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Subsurface Structure or Pits | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Intermittent or Weather Springs | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Underground Storage Tanks | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Landfill | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Unplatted Easements | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Lead-Based Paint or Lead-Based Pt. Hazards | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Unrecorded Easements | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Encroachments onto the Property | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Urea-formaldehyde Insulation | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Improvements encroaching on others' property | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water Penetration | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Located in 100-year Floodplain (If yes, attach TAR-1414) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Wetlands on Property | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Located in Floodway (If yes, attach TAR-1414) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Wood Rot | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Present Flood Ins. Coverage (If yes, attach TAR-1414) | <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 Flooding into the Structures | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Previous treatment for termites or WDI | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Previous Flooding onto the Property | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Previous termite or WDI damage repaired | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Located in Historic District | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Previous Fires | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

(TAR-1406) 02-01-18

Initialed by: Buyer: _____, _____ and Seller: [Signature], _____

Concerning the Property at 7810 Breman Crest Ln

| | | | | | |
|---|--|---|--|--|---|
| Historic Property Designation | | X | Termite or WDI damage needing repair | | X |
| Previous Use of Premises for Manufacture of Methamphetamine | | X | Single Blockable Main Drain in Pool/Hot Tub/Spa* | | X |

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

*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

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.

Homeowners' associations or maintenance fees or assessments. If yes, complete the following:
 Name of association: Stoneyway Village Association/Creative Management Company
 Manager's name: Nicole Rowan Phone: 713-772-4420 EXT 112
 Fees or assessments are: \$ 204 per month and are: mandatory voluntary
 Any 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.

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: _____

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

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

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

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

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).

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.

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.

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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 www.txdps.state.tx.us. 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* (TAR 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: _____ | phone #: _____ |
| Sewer: _____ | phone #: _____ |
| Water: _____ | phone #: _____ |
| Cable: _____ | phone #: _____ |
| Trash: _____ | phone #: _____ |
| Natural Gas: _____ | phone #: _____ |
| Phone Company: _____ | phone #: _____ |
| Propane: _____ | phone #: _____ |
| Internet: _____ | phone #: _____ |

- (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: _____ | |