



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 4311 Seminole Street
Pasadena, TX 77504

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?
4/20/19 (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"/> | | |
| Carbon Monoxide Det. | | <input checked="" type="checkbox"/> | |
| Ceiling Fans | <input checked="" type="checkbox"/> | | |
| Cooktop | <input checked="" type="checkbox"/> | | |
| Dishwasher | <input checked="" type="checkbox"/> | | |
| Disposal | <input checked="" type="checkbox"/> | | |
| Emergency Escape Ladder(s) | | <input checked="" type="checkbox"/> | |
| Exhaust Fans | <input checked="" type="checkbox"/> | | |
| Fences | <input checked="" type="checkbox"/> | | |
| Fire Detection Equip. | <input checked="" type="checkbox"/> | | |
| French Drain | <input checked="" type="checkbox"/> | | |
| Gas Fixtures | | <input checked="" type="checkbox"/> | |
| Natural Gas Lines | <input checked="" type="checkbox"/> | | |

| Item | Y | N | U |
|-------------------------|-------------------------------------|-------------------------------------|---|
| Liquid Propane Gas: | | <input checked="" type="checkbox"/> | |
| -LP Community (Captive) | | <input checked="" type="checkbox"/> | |
| -LP on Property | | <input checked="" type="checkbox"/> | |
| Hot Tub | | <input checked="" type="checkbox"/> | |
| Intercom System | | <input checked="" type="checkbox"/> | |
| Microwave | <input checked="" type="checkbox"/> | | |
| Outdoor Grill | | <input checked="" type="checkbox"/> | |
| Patio/Decking | <input checked="" type="checkbox"/> | | |
| Plumbing System | <input checked="" type="checkbox"/> | | |
| Pool | | <input checked="" type="checkbox"/> | |
| Pool Equipment | | <input checked="" type="checkbox"/> | |
| Pool Maint. Accessories | | <input checked="" type="checkbox"/> | |
| Pool Heater | | <input checked="" type="checkbox"/> | |

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

| Item | Y | N | U | Additional Information |
|---------------------------|-------------------------------------|-------------------------------------|---|------------------------------------------------------------------------------------------------------------------|
| Central A/C | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> electric <input type="checkbox"/> gas number of units: <u>1</u> |
| Evaporative Coolers | | <input checked="" type="checkbox"/> | | number of units: _____ |
| Wall/Window AC Units | | <input checked="" type="checkbox"/> | | number of units: _____ |
| Attic Fan(s) | | <input checked="" type="checkbox"/> | | if yes, describe: _____ |
| Central Heat | <input checked="" type="checkbox"/> | | | electric <input checked="" type="checkbox"/> gas number of units: <u>1</u> |
| Other Heat | | <input checked="" type="checkbox"/> | | if yes, describe: _____ |
| Oven | <input checked="" type="checkbox"/> | | | number of ovens: <u>1</u> <input checked="" type="checkbox"/> electric <input type="checkbox"/> gas other: _____ |
| Fireplace & Chimney | <input checked="" type="checkbox"/> | | | wood <input checked="" type="checkbox"/> gas logs <input type="checkbox"/> mock other: _____ |
| Carport | | <input checked="" type="checkbox"/> | | attached <input type="checkbox"/> not attached |
| Garage | <input checked="" type="checkbox"/> | | | attached <input checked="" type="checkbox"/> not attached |
| Garage Door Openers | <input checked="" type="checkbox"/> | | | number of units: _____ (number of remotes: <u>1</u>) |
| Satellite Dish & Controls | | <input checked="" type="checkbox"/> | | owned <input type="checkbox"/> leased from: _____ |
| Security System | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> owned <input type="checkbox"/> leased from: _____ |
| Solar Panels | | <input checked="" type="checkbox"/> | | owned <input type="checkbox"/> leased from: _____ |
| Water Heater | <input checked="" type="checkbox"/> | | | electric <input checked="" type="checkbox"/> gas other: _____ number of units: <u>1</u> |
| Water Softener | | <input checked="" type="checkbox"/> | | owned <input type="checkbox"/> leased from: _____ |
| Other Leased Items(s) | | <input checked="" type="checkbox"/> | | if yes, describe: _____ |

Concerning the Property at _____

| | | | | | |
|---------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------------|--------|----------------------|
| Underground Lawn Sprinkler | <input type="checkbox"/> | <input checked="" type="checkbox"/> | automatic | manual | areas covered: _____ |
| Septic / On-Site Sewer Facility | <input type="checkbox"/> | <input checked="" 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: shingles Age: 5 yrs (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 |
|--------------------|--------------------------|-------------------------------------|
| 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 100-year Floodplain (If yes, attach TXR-1414) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Located in Floodway (If yes, attach TXR-1414) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Present Flood Ins. Coverage (If yes, attach TXR-1414) | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Previous Flooding into the Structures | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Previous Flooding onto the Property | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Located in Historic District | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

| Condition | Y | N |
|-----------------------------------------------------------------------|-------------------------------------|-------------------------------------|
| Previous Foundation Repairs | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Previous Roof Repairs | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Previous Other Structural Repairs | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Radon Gas | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Settling | <input type="checkbox"/> | <input checked="" 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 | <input type="checkbox"/> | <input checked="" 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 Penetration | <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 _____

| | | |
|-------------------------------------------------------------|--------------------------|-------------------------------------|
| Historic Property Designation | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Previous Use of Premises for Manufacture of Methamphetamine | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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

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 | |
|-----|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ___ | <input checked="" type="checkbox"/> | 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. |
| ___ | <input checked="" type="checkbox"/> | 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 ___ 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. |
| ___ | <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: Any optional user fees for common facilities charged? ___ yes ___ no If yes, describe: _____ |
| ___ | <input checked="" type="checkbox"/> | Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property. |
| ___ | <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 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 checked="" type="checkbox"/> | Any condition on the Property which materially affects the health or safety of an individual. |
| ___ | <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. If yes, attach any certificates or other documentation identifying the extent of the remediation (for example, certificate of mold remediation or other remediation). |
| ___ | <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 checked="" type="checkbox"/> | The Property is located in a propane gas system service area owned by a propane distribution system retailer. |
| ___ | <input checked="" type="checkbox"/> | Any portion of the Property that is located in a groundwater conservation district or a subsidence district. |

Concerning the Property at _____

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

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

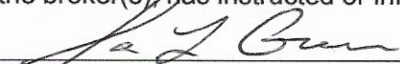
Section 10. Have you (Seller) ever received proceeds for a claim for damage to the Property (for example, an insurance claim or a settlement or award in a legal proceeding) and not used the proceeds to make the repairs for which the claim was made? yes no If yes, explain: _____

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.

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.

 5/1/19
 Signature of Seller _____ Date _____ Signature of Seller _____ Date _____
 Printed Name: Javier L. Guerrero Printed Name: _____

Concerning the Property at _____

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* (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:

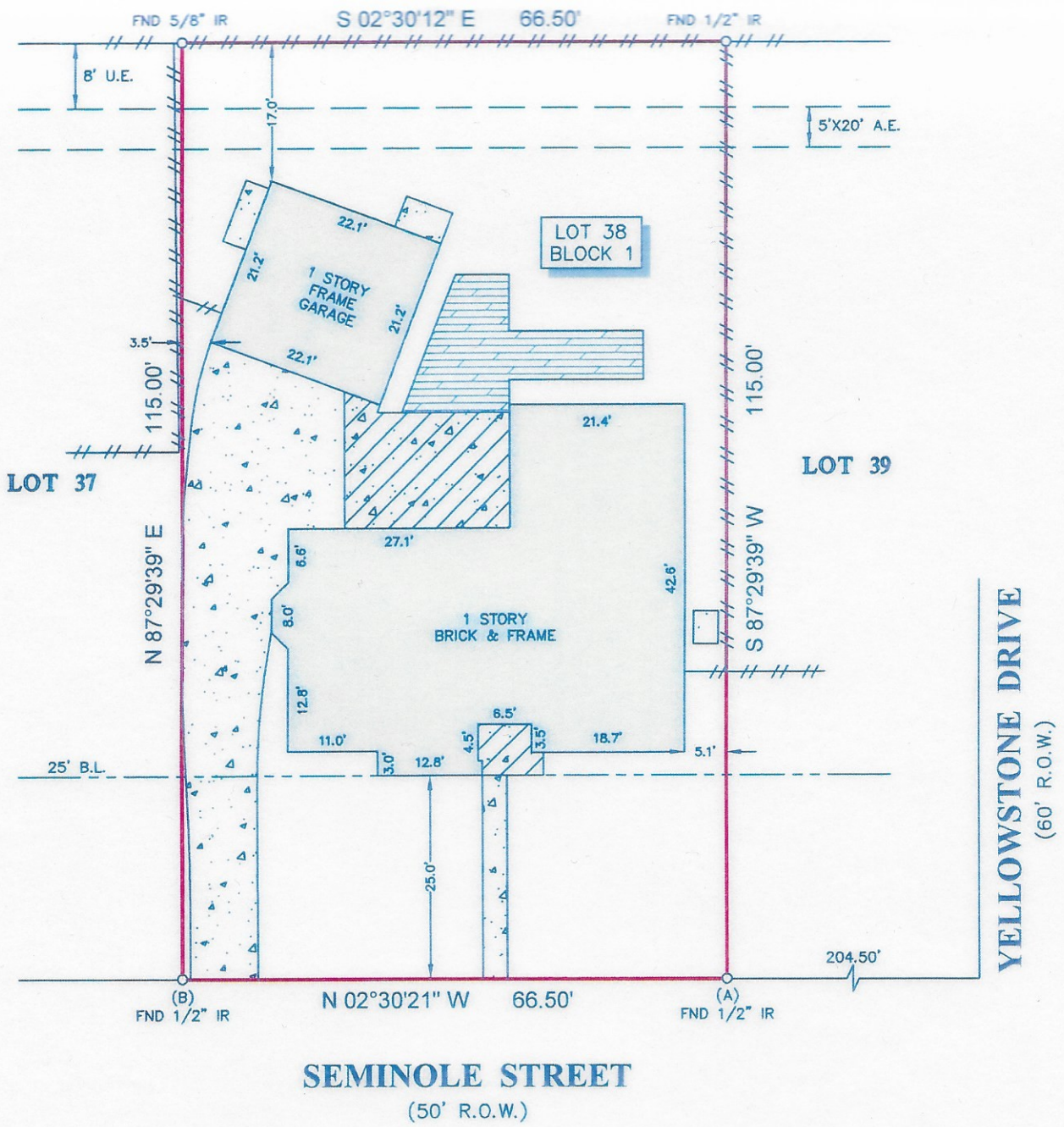
Electric: Gexa
 Sewer: city of PASADENA
 Water: city of PASADENA
 Cable: Xfinity
 Trash: city of PASADENA
 Natural Gas: Reliant
 Phone Company: N/A
 Propane: N/A
 Internet: Xfinity

phone # (713) 961-9399
 phone #: (713) 475-5566
 phone #: (713) 475-5566
 phone #:
 phone #: (713) 475-5566
 phone #: (855) 464-5210
 phone #:
 phone #:
 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: _____ | _____ |



SEMINOLE STREET
(50' R.O.W.)

YELLOWSTONE DRIVE
(60' R.O.W.)

NOTES:

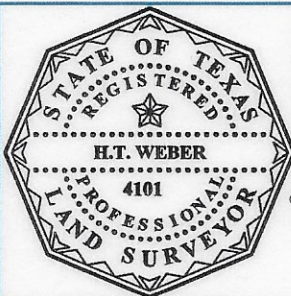
1. ALL BEARINGS SHOWN HEREON ARE REFERENCED TO THE SUBDIVISION PLAT NAMED BELOW, POINTS (A) AND (B) WERE HELD FOR HORIZONTAL CONTROL.
2. FLOOD INFORMATION IS BASED ON THE NATIONAL FLOOD INSURANCE PROGRAM'S FLOOD INSURANCE RATE MAP FOR THE COUNTY LISTED BELOW.
3. ABSTRACT INFORMATION FOR THE SUBJECT TRACT WAS PROVIDED BY THE TITLE INSURANCE COMPANY LISTED ABOVE.
4. THIS SURVEY IS CERTIFIED TO THE TITLE INSURANCE COMPANY LISTED ABOVE FOR THIS TRANSACTION ONLY, IT IS NOT TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR SUBSEQUENT OWNERS.
5. ALL EASEMENTS AND BUILDING LINES SHOWN ARE PER THE RECORDED PLAT UNLESS OTHERWISE NOTED.
6. THERE ARE NO NATURAL DRAINAGE COURSES ON SUBJECT PROPERTY.
7. RESTRICTIVE COVENANTS AS RECORDED IN VOL. 200, PG. 33 M.R. & C.F. NOS. D749073 & 20100062821.
8. AN AGREEMENT WITH H. L. & P. AS RECORDED IN C.F. NO. E050173.

LEGEND

| | | | |
|--|------------------|--|---------------------------------------------------------------------------|
| | CONCRETE | | FENCE |
| | COVERED CONCRETE | | WOOD |
| | WOOD DECK | | |
| | | | B.L. = BUILDING LINE U.E. = UTILITY EASEMENT A.E. = AERIAL EASEMENT |

PROJECT:
 A LAND TITLE SURVEY OF LOT 38, IN BLOCK 1, OF PARKGATE, SECTION 2, A SUBDIVISION IN HARRIS COUNTY, TEXAS, ACCORDING TO THE MAP OR PLAT THEREOF RECORDED IN VOLUME 200, PAGE 33 OF THE MAP RECORDS OF HARRIS COUNTY, TEXAS.

| | |
|-----------------------------------------|-------------------------------------|
| CLIENT: JAVIER GUERRERO | |
| ADDRESS: 4311 SEMINOLE STREET | |
| FLOOD ZONE: "X" | FLOOD MAP#: 4B201C 0920 L |
| FLOOD MAP DATE: 6-18-07 | FLOOD MAP COUNTY: HARRIS |



SURVEYORS CERTIFICATE:
 IN MY PROFESSIONAL OPINION, THIS PLAT REPRESENTS THE FACTS FOUND ON THE GROUND DURING THE COURSE OF A BOUNDARY SURVEY CONDUCTED UNDER MY SUPERVISION ON FEBRUARY 03, 2012 AND THAT THIS PLAT SUBSTANTIALLY COMPLIES WITH THE CURRENT STANDARDS AS ADOPTED BY THE TEXAS BOARD OF PROFESSIONAL LAND SURVEYING; AND THAT THERE ARE NO ENCROACHMENTS OR PROTRUSIONS EXCEPT AS SHOWN.

H.T. Weber
 H.T. WEBER
 RPLS# 4101

SURVEY 1 Inc.
 www.survey1inc.com
 survey1inc@yahoo.com
 P.O. Box 2543 • Alvin, TX 77512
 (281)393-1382 • Fax(281)393-1383

| | |
|--------------------------|---------------------------|
| FIELD CREW: LB | JOB# 2-14934-12 |
| DRAFTER: JB | DATE 02-03-12 |