



## 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.

1123 Juniper Canyon Ln  
Houston, TX 77062-2059

CONCERNING THE PROPERTY AT \_\_\_\_\_

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? 2018-2019 (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            | ✓ |   |   |
| 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: sump 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               | ✓ |   |   | ✓ electric gas number of units: <u>one</u>     |
| Evaporative Coolers       |   | ✓ |   | number of units:                               |
| Wall/Window AC Units      |   | ✓ |   | number of units:                               |
| Attic Fan(s)              |   | ✓ |   | if yes, describe:                              |
| Central Heat              | ✓ |   |   | electric ✓ gas number of units: <u>one</u>     |
| Other Heat                |   | ✓ |   | if yes, describe:                              |
| Oven                      | ✓ |   |   | number of ovens: electric \ gas other:         |
| Fireplace & Chimney       | ✓ |   |   | wood ✓ gas logs mock other:                    |
| Carpport                  |   | ✓ |   | attached not attached                          |
| Garage                    | ✓ |   |   | ✓ attached not attached                        |
| Garage Door Openers       | ✓ |   |   | number of units: <u>one</u> number of remotes: |
| Satellite Dish & Controls |   | ✓ |   | owned leased from:                             |
| Security System           |   | ✓ |   | owned leased from:                             |
| Solar Panels              |   | ✓ |   | owned leased from:                             |
| Water Heater              | ✓ |   |   | electric gas other: number of units:           |
| Water Softener            |   | ✓ |   | owned leased from:                             |
| Other Leased Items(s)     |   | ✓ |   | if yes, describe:                              |

(TXR-1406) 02-01-18

Initialed by: Buyer: \_\_\_\_\_ and Seller: LT

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1123 Juniper

Victory Properties, Inc., 201 W San Augustine St Deer Park TX 77536  
Troy Cochran

Phone: (281)479-6100 Fax: \_\_\_\_\_  
Produced with zipForm® by zipLogix 18070 Fifteen Mile Road, Fraser, Michigan 48028 www.ziplogix.com



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

|                                 |                                     |                          |  |        |                |
|---------------------------------|-------------------------------------|--------------------------|--|--------|----------------|
| 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: Shingles Age: Two (Aug. 2016) (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): Downstairs window in breakfast knook-one window has the top part is plastic- was like that when purchased the home. In dining room, the left window has a small BB hole on the top. Was there when purchased the home.

**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 <u>Replaced Aug. 2016</u>                       |                                     | <input checked="" type="checkbox"/> |
| Diseased Trees: <u>oak wilt</u>                                  |                                     | <input checked="" type="checkbox"/> | Previous 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 <u>Standing water after heavy rain.</u> |                                     | <input checked="" type="checkbox"/> | Soil Movement   |                                     | <input checked="" type="checkbox"/> |
| Improper Drainage <u>backyard around tree</u>                    | <input checked="" type="checkbox"/> |                                     | Subsurface Structure or Pits  |                                     | <input checked="" type="checkbox"/> |
| Intermittent or Weather Springs <u>drains slow.</u>              |                                     | <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"/> | <input checked="" type="checkbox"/> |
| Located in 100-year Floodplain (If yes, attach TXR-1414)         |                                     | <input checked="" type="checkbox"/> | Wetlands on Property  |                                     | <input checked="" type="checkbox"/> |
| Located in Floodway (If yes, attach TXR-1414)                    |                                     | <input checked="" type="checkbox"/> | Wood Rot  |                                     | <input checked="" type="checkbox"/> |
| Present Flood Ins. Coverage (If yes, attach TXR-1414) <u>(X)</u> | <input checked="" type="checkbox"/> |                                     | Active infestation of termites or other wood 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"/> |

(TXR-1406) 02-01-18

Initialed by: Buyer: \_\_\_\_\_ and Seller: LF



|   |                          |                                     |
|---|--------------------------|-------------------------------------|
| 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): Wind driven rain during Hurricane Harvey in front of house - flooring got wet and chimney cap leaked in master closet. Got the flooring wet along the front and side. Insurance check was approx. \$1,700 to fix both issues. Downstairs window in breakfast knock-top part is plastic - was a single blockable main drain may cause a suction entrapment hazard for an individual. Note left how window was purchased home window in dining room small BR

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? 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.)**

- |   |  |
|---|--|
| <u>Y</u> <u>N</u>                             |  |
| <u>  </u> <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"/> <u>  </u> | Homeowners' associations or maintenance fees or assessments. If yes, complete the following:<br>Name of association: <u>Associa Kinloch Community Assoc.</u><br>Manager's name: _____ Phone: <u>832-864-1200</u><br>Fees or assessments are: \$ <u>399.00</u> per <u>year</u> and are: <input checked="" type="checkbox"/> mandatory <input type="checkbox"/> voluntary<br>Any unpaid fees or assessment for the Property? <input type="checkbox"/> yes (\$ _____) <input checked="" 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 checked="" type="checkbox"/> <u>  </u> | 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 checked="" type="checkbox"/> no If yes, describe: _____   |
| <u>  </u> <input checked="" type="checkbox"/> | Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.  |
| <u>  </u> <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.)   |
| <u>  </u> <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.  |
| <u>  </u> <input checked="" type="checkbox"/> | Any condition on the Property which materially affects the health or safety of an individual.  |
| <u>  </u> <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).   |
| <u>  </u> <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.  |
| <u>  </u> <input checked="" type="checkbox"/> | The Property is located in a propane gas system service area owned by a propane distribution system retailer.  |
| <u>  </u> <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 \_\_\_\_\_

**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](http://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: <u>Reliant Energy</u>               | phone #: _____ |
| Sewer: <u>Clear Lake City Water Authority</u> | phone #: _____ |
| Water: <u>Clear Lake Water Authority</u>      | phone #: _____ |
| Cable: <u>AT&amp;T</u>                        | phone #: _____ |
| Trash: <u>City of Houston</u>                 | phone #: _____ |
| Natural Gas: <u>Centerpoint Energy</u>        | phone #: _____ |
| Phone Company: <u>N/A</u>                     | phone #: _____ |
| Propane: <u>N/A</u>                           | phone #: _____ |
| Internet: <u>AT&amp;T</u>                     | 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.

|                             |                        |                             |                        |
|-----------------------------|------------------------|-----------------------------|------------------------|
| _____<br>Signature of Buyer | _____<br>Date          | _____<br>Signature of Buyer | _____<br>Date          |
| _____<br>Printed Name:      | _____<br>Printed Name: | _____<br>Printed Name:      | _____<br>Printed Name: |

