



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 2127 River Bend Way
Kingwood, TX 77345-2149

THIS NOTICE IS A DISCLOSURE OF SELLER'S KNOWLEDGE OF THE CONDITION OF THE PROPERTY AS OF THE DATE SIGNED BY SELLER AND IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE BUYER MAY WISH TO OBTAIN. IT IS NOT A WARRANTY OF ANY KIND BY SELLER, SELLER'S AGENTS, OR ANY OTHER AGENT.

Seller is is not occupying the Property. If unoccupied (by Seller), how long since Seller has occupied the Property? (approximate date) or never occupied the Property

Section 1. The Property has the items marked below: (Mark Yes (Y), No (N), or Unknown (U).)

This notice does not establish the items to be conveyed. The contract will determine which items will & will not convey.

Item	Y	N	U
Cable TV Wiring	X		
Carbon Monoxide Det.		X	
Ceiling Fans	X		
Cooktop	X		
Dishwasher	X		
Disposal	X		
Emergency Escape Ladder(s)		X	
Exhaust Fans	X		
Fences	X		
Fire Detection Equip.		X	
French Drain		X	
Gas Fixtures	X		
Natural Gas Lines	X		

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

Item	Y	N	U
Pump: sump grinder		X	
Rain Gutters	X		
Range/Stove	X		
Roof/Attic Vents	X		
Sauna		X	
Smoke Detector	X		
Smoke Detector - Hearing Impaired		X	
Spa		X	
Trash Compactor		X	
TV Antenna		X	
Washer/Dryer Hookup	X		
Window Screens	X		
Public Sewer System	X		

Item	Y	N	U	Additional Information
Central A/C	X			X electric gas number of units: 2
Evaporative Coolers		X		number of units:
Wall/Window AC Units		X		number of units:
Attic Fan(s)		X		if yes, describe:
Central Heat	X			electric X gas number of units: 2
Other Heat		X		if yes, describe:
Oven	X			number of ovens: 2 X electric gas other:
Fireplace & Chimney	X			wood X gas logs mock other:
Carport		X		attached not attached
Garage	X			X attached not attached
Garage Door Openers	X			number of units: 2 number of remotes: 1
Satellite Dish & Controls	X			owned leased from:
Security System	X			X owned leased from:
Solar Panels		X		owned leased from:
Water Heater	X			electric gas X other: number of units: 2
Water Softener		X		owned leased from:
Other Leased Items(s)		X		if yes, describe:

(TXR-1406) 02-01-18

Initialed by: Buyer: _____ and Seller:

Keller Williams Realty Northeast, 20665 W Lake Houston Parkway Kingwood TX 77346
Diana Coleman

Phone: 281.354.4545 Fax: 281.812.0640

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2127 River Bend Way
Kingwood, TX 77345-2149

Concerning the Property at _____

Underground Lawn Sprinkler	<input checked="" type="checkbox"/>	<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: 1 YEAR (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 checked="" type="checkbox"/>
Ceilings		<input checked="" type="checkbox"/>
Doors		<input checked="" type="checkbox"/>
Driveways		<input checked="" type="checkbox"/>
Electrical Systems		<input checked="" type="checkbox"/>
Exterior Walls		<input checked="" type="checkbox"/>

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

Item	Y	N
Sidewalks		<input checked="" type="checkbox"/>
Walls / Fences		<input checked="" type="checkbox"/>
Windows		<input checked="" type="checkbox"/>
Other Structural Components		

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 checked="" type="checkbox"/>
Asbestos Components		<input checked="" type="checkbox"/>
Diseased Trees: oak wilt		<input checked="" type="checkbox"/>
Endangered Species/Habitat on Property		<input checked="" type="checkbox"/>
Fault Lines		<input checked="" type="checkbox"/>
Hazardous or Toxic Waste		<input checked="" type="checkbox"/>
Improper Drainage		<input checked="" type="checkbox"/>
Intermittent or Weather Springs		<input checked="" type="checkbox"/>
Landfill		<input checked="" type="checkbox"/>
Lead-Based Paint or Lead-Based Pt. Hazards		<input checked="" type="checkbox"/>
Encroachments onto the Property		<input checked="" type="checkbox"/>
Improvements encroaching on others' property		<input checked="" type="checkbox"/>
Located in 100-year Floodplain (If yes, attach TXR-1414)		<input checked="" type="checkbox"/>
Located in Floodway (If yes, attach TXR-1414)		<input checked="" type="checkbox"/>
Present Flood Ins. Coverage (If yes, attach TXR-1414)		<input checked="" type="checkbox"/>
Previous Flooding into the Structures		<input checked="" type="checkbox"/>
Previous Flooding onto the Property		<input checked="" type="checkbox"/>
Located in Historic District		<input checked="" type="checkbox"/>

Condition	Y	N
Previous Foundation Repairs		<input checked="" type="checkbox"/>
Previous Roof Repairs		<input checked="" type="checkbox"/>
Previous Other Structural Repairs		<input checked="" type="checkbox"/>
Radon Gas		<input checked="" type="checkbox"/>
Settling		<input checked="" type="checkbox"/>
Soil Movement		<input checked="" type="checkbox"/>
Subsurface Structure or Pits		<input checked="" type="checkbox"/>
Underground Storage Tanks		<input checked="" type="checkbox"/>
Unplatted Easements		<input checked="" type="checkbox"/>
Unrecorded Easements		<input checked="" type="checkbox"/>
Urea-formaldehyde Insulation		<input checked="" type="checkbox"/>
Water Penetration		<input checked="" type="checkbox"/>
Wetlands on Property		<input checked="" type="checkbox"/>
Wood Rot		<input checked="" type="checkbox"/>
Active infestation of termites or other wood destroying insects (WDI)		<input checked="" type="checkbox"/>
Previous treatment for termites or WDI		<input checked="" type="checkbox"/>
Previous termite or WDI damage repaired		<input checked="" type="checkbox"/>
Previous Fires		<input checked="" type="checkbox"/>

(TXR-1406) 02-01-18

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

Concerning the Property at 2127 River Bend Way
Kingwood, TX 77345-2149

Historic Property Designation	<input checked="" type="checkbox"/>	Termite or WDI damage needing repair	<input checked="" type="checkbox"/>
Previous Use of Premises for Manufacture of Methamphetamine	<input checked="" type="checkbox"/>	Single Blockable Main Drain in Pool/Hot Tub/Spa*	<input checked="" type="checkbox"/>

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

*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
 X

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: GREENTREE VILLAGE + RIVERCHASE TRAIL
Manager's name: 281 359 1102 Phone: 713 932 1122
Fees or assessments are: \$ 750 per YEAR 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.

Concerning the Property at 2127 River Bend Way
Kingwood, TX 77345-2149

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
WDA	04/05/17	MIKE BOOM	2
Home E	04/06/17	WILLIAM J MEALY	25

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 brokers(s), has instructed or influenced Seller to provide inaccurate information or to omit any material information.

Signature of Seller [Signature] Date 06/20/19 Signature of Seller [Signature] Date 6/20/2019

Printed Name: LEONARDO TUNES Printed Name: _____

(TXR-1406) 02-01-18 Initialed by: Buyer: _____ and Seller: [Signature]

2127 River Bend Way
Kingwood, TX 77345-2149

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: <u>Reliant</u>	phone #: _____
Sewer: <u>City of Houston</u>	phone #: _____
Water: <u>City of Houston</u>	phone #: _____
Cable: <u>Suddenlink</u>	phone #: _____
Trash: <u>Best Trash</u>	phone #: _____
Natural Gas: <u>Centerpoint</u>	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: _____	

ADDENDUM TO THE SELLER'S DISCLOSURE

For the Property at: 2127 River Bend Way
Kingwood, TX 77345-2149

A. Building Materials

1. Are you aware of any building materials used which have been or are the subject of class action litigation including certain types of stucco, synthetic stucco, siding and water pipes. No, If Yes please explain:

B. Water Related Issues

1. Have you experienced any seepage or leaks including but not limited to prior plumbing leaks, A/C leaks or roof leaks? No, If Yes please explain:

Date: _____ Type: _____ Explanation: _____

C. Insurance Claims:

1. Have you requested or submitted any insurance claims for the property? No, If Yes please explain:

Date: _____ Type: _____ Explanation: _____

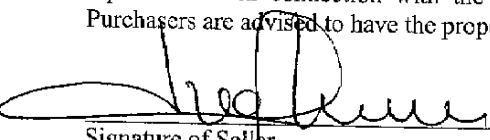
D. Survey

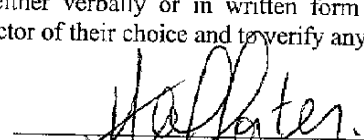
1. Are you aware of any problems or changes regarding your current survey (ie: encroachments, easements, additions)? No, If Yes please explain:

E. Square Footage:

1. Square footage is one, but not the only determination of value. There are several sources of square footage data including, but not limited to blue prints, builder's plans, appraisal, and appraisal district. My square footage reference is:
— Blue Prints — Builder's Plans — Appraisal Appraisal District

KELLER WILLIAMS REALTY and its agents do not warrant or guarantee any information or the accuracy of any inspections or reports made in connection with the subject property given either verbally or in written form regarding the subject property. Purchasers are advised to have the property inspected by an inspector of their choice and to verify any and all representations.


Signature of Seller
Leonardo Manoel Fortes Tunes
06/20/19
Date


Signature of Seller
Ana Luisa Bicalho De Mello Fortes
Date

Signature of Purchaser Date

Signature of Purchaser Date



SELLER'S EXCLUSION LIST

2127 River Bend Way
PROPERTY ADDRESS: Kingwood, TX 77345-2149

PLEASE CHECK / CIRCLE ANY OF THE FOLLOWING ITEMS THAT SELLER WILL BE EXCLUDING FROM THE SALE OF YOUR PROPERTY:

	INDOORS	LOCATION:
<input checked="" type="checkbox"/>	CURTAIN AND RODS, DRAPERIES AND RODS, VALANCES, BLINDS, TOWEL RACKS OR WINDOW SHADES	
<input type="checkbox"/>	WALL TO WALL CARPETING, AREA RUGS	
<input type="checkbox"/>	MIRRORS FIXED IN PLACE, DECORATIVE MIRRORS, DECORATIVE HARDWARE	
<input type="checkbox"/>	FIREPLACE SCREENS / GAS LOGS OR ROCKS	
<input type="checkbox"/>	FLAT SCREEN TVS, MEDIA ROOM EQUIPMENT, TV ANTENNAE, SATELLITE DISH, BUILT-IN SPEAKERS, TV BRACKETS	
<input type="checkbox"/>	BOOKSHELVES ATTACHED OR APPEARING TO BE ATTACHED TO WALLS	
<input type="checkbox"/>	BUILT-IN KITCHEN EQUIPMENT INCLUDING BUILT-IN COFFEE POTS, TOASTER OVENS, MICROWAVES, POT RACKS, WINE REFRIGERATOR	
<input checked="" type="checkbox"/>	OUTDOORS	LOCATION:
<input type="checkbox"/>	WINDOW SCREENS, SHUTTERS, AWNINGS, MAILBOX	
<input type="checkbox"/>	SWIMMING POOL EQUIPMENT, PORTABLE SPA	
<input type="checkbox"/>	SHRUBBERY AND PLANTS	
<input type="checkbox"/>	PERMANENTLY INSTALLED OUTDOOR COOKING EQUIPMENT	
<input type="checkbox"/>	SWING SETS, PLAYGROUND EQUIPMENT, BASKETBALL GOALS	
<input type="checkbox"/>	FOUNTAINS, BIRD BATHS, STATUES AND LIGHTS IN YARD	
<input type="checkbox"/>	WORKBENCH OR SHELVES IN GARAGE OR STORAGE AREAS	
<input checked="" type="checkbox"/>	MISCELLANEOUS	LOCATION:
<input type="checkbox"/>	CEILING FANS, ATTIC FANS, LIGHT FIXTURES	
<input type="checkbox"/>	HEATING AND AIR CONDITIONING UNITS AND EQUIPMENT	
<input type="checkbox"/>	BUILT-IN SECURITY, FIRE EQUIPMENT	
<input type="checkbox"/>	LIGHTING, PLUMBING FIXTURES, WATER SOFTENER	
<input type="checkbox"/>	GARAGE DOOR OPENERS AND CONTROLS, USE & CARE MANUALS FOR APPLIANCES	
<input type="checkbox"/>	CENTRAL VACUUM AND ACCESSORIES	
<input type="checkbox"/>	OTHER PERMANENTLY ATTACHED ITEMS:	

DATE: 6/20/2019

DATE: _____

SELLER: *Leonardo Manuel Fortes Tunes*
 Leonardo Manuel Fortes Tunes

BUYER: _____

SELLER: *Ana Luisa Bicalho De Mello Fortes*
 Ana Luisa Bicalho De Mello Fortes

BUYER: _____

CONTRACT PROPOSAL

4/7/2017



SINCE 1981

Roofing - Siding - Windows

Name **DIANA COLEMAN - REALTOR**
Address **2127 RIVER BEND WAY**
City **KINGWOOD TX 77345**
Phone

We hereby submit specifications and estimates for:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Remove 1 Layers(s) Existing Shingles | <input checked="" type="checkbox"/> A/C Vents: SEAL & PAINT Color to match |
| <input checked="" type="checkbox"/> Install Plywood Decking: UP TO 2 SHEETS | <input checked="" type="checkbox"/> Water Heater Vents: SEAL & PAINT Color to match |
| <input checked="" type="checkbox"/> New Felt Paper RHINO SYNTHETIC | <input type="checkbox"/> Install PVC Airhawks - Color to match |
| <input type="checkbox"/> Install 2 1/2" DL Drip Edge ~ Color REUSE SAME ONES | <input checked="" type="checkbox"/> Re-flash Chimney & Upper Walls w/ 8"x8" Step Flashing |
| <input checked="" type="checkbox"/> Install 20" Galv. Valley Metal ~ Closed Valley System | <input checked="" type="checkbox"/> Remove All Job-Related Debris From Gutters |
| <input checked="" type="checkbox"/> Nails 1 1/4" Galv. (4 per shingle-hand nailed) | <input checked="" type="checkbox"/> Clean Up & Haul Away All Job-Related Debris |
| <input checked="" type="checkbox"/> New Plumbing Jacks (painted to match) | <input type="checkbox"/> Cover Pool to Protect During Job |
| <input checked="" type="checkbox"/> 2 Wind Turbines: 14" Lamanco Lifetime Warranty | <input checked="" type="checkbox"/> Roll Yard & Driveway With Magnetic Sweep |
| <input checked="" type="checkbox"/> ALL UPPER RIDGES Lf. Ridge Vent | <input checked="" type="checkbox"/> Labor Workmanship 10 Years Transferable |
| <input checked="" type="checkbox"/> Decking Repairs: \$20.00 per sheet & \$20.00 per repair | |

- 1) INSTALL GAF TIMBERLINE HD LIFETIME SHINGLES WITH STAINGUARD EXCEPT ON CHARCOAL COLOR.
- 2) INSTALL GAF PRO-STARTER SHINGLES.
- 3) INSTALL GAF COBRA THREE RIDGE VENTS ON ALL UPPER RIDGES.
- 4) INSTALL GAF LOW-SLOPE ROLL ROOFING OVER FRONT DORMER WINDOW METAL ROOF.
- 5) REPLACE 2 OLD ROUND AIRHAWKS WITH 2 NEW WIND TURBINES - MATCH ROOF COLOR.
- 6) WESCO WILL PULL CITY OF HOUSTON REROOFING PERMIT.

We Propose hereby to furnish material and labor, complete in accordance with the above specifications, for the sum of:

ELEVEN THOUSAND SEVEN HUNDRED SEVENTY & NO/100..... Dollars \$11,770.00

Payment to be made as follows:

ZERO DOWN, PAYMENT IN FULL WHEN COMPLETED.

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alterations or deviations from the above specifications involving extra costs will be executed on upon written orders, and will become an extra charge over and above the estimates. Wesco Roofing is no responsible for any damages to A/C lines, electrical lines, plumbing lines or sheetrock nail pops due to standard roof installation. Wesco Roofing is NOT liable for any indirect, incidental or consequential damages resulting from the use of these products or the labor workmanship. Wesco is not responsible for future leaks around satellite dishes that are re-installed on the roof.

Authorized Signature:

Note: This proposal may be withdrawn by us if not accepted within 30 days.

Acceptance of Proposal: The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature: _____ Date of Acceptance: _____

TEXAS OFFICIAL WOOD DESTROYING INSECT REPORT

Inspected Address: 2127 RIVER BEND WAY City KINGWOOD State TX Zip 77345

SCOPE OF INSPECTION

- A. This inspection covers multi-family structure, primary dwelling or place of business. Sheds, detached garages, lean-tos, guest houses or any other structure will not be included in this inspection report unless specifically noted in Section 5 of this report.
B. This inspection is limited to those parts of the structure(s) that are visible and accessible at the time of inspection.
C. Due to the characteristics and behavior of various wood destroying insects, it may not always be possible to determine the presence of infestation without defacing or removing parts of the structure being inspected.
D. If visible evidence of active or previous infestation of listed wood destroying insects is reported, it should be assumed that some degree of damage is present.
E. If visible evidence is reported, it does not imply that damage should be repaired or replaced.
F. THIS IS NOT A STRUCTURAL DAMAGE REPORT OR A WARRANTY AS TO THE ABSENCE OF WOOD DESTROYING INSECTS.
G. If termite treatment (including pesticides, baits or other methods) has been recommended, the treating company must provide a diagram of the structure(s) inspected and proposed for treatment, label of pesticides to be used and complete details of warranty (if any).
H. There are a variety of termite control options offered by pest control companies.
I. There are some specific guidelines as to when it is appropriate for corrective treatment to be recommended.
J. If treatment is recommended based solely on the presence of conducive conditions, a preventive treatment or correction of conducive conditions may be recommended.

1A. Insect Assassins Pest Control, Inc. Name of Inspection Company
1B. TPCL-4848 SPCB Business License Number
1C. 15777 Skeg Drive Crosby, Texas 77532 Address of Inspection Company
1D. Mike Odom Name of Inspector
1E. CA-27042PT Certified Applicator Number
2. Case No. (VA/FHA/Other) Unknown
3. 4-5-17 Inspection Date

4A. LEO TUMES Name of Person Purchasing Inspection
4B. OWNER OF RECORD Owner/Seller
4C. REPORT FORWARDED TO: X Agent X Buyer Title Company or Mortgagee Seller Purchaser of Service
(Under the Structural Pest Control regulations only the purchaser of the service is required to receive a copy)

The structure(s) listed below were inspected in accordance with the official inspection procedures adopted by the Texas Structural Pest Control Board. This report is made subject to the conditions listed under the Scope of Inspection. A diagram must be attached including all structured inspected.

5. Dwelling Dwelling/garage Detached Garage Other
List structure(s) inspected that may include residents, detached garages and other structures on the property. (Refer to Part A, Scope of Inspection).

6A. Were any areas of the property obstructed or inaccessible? Yes No
6B. The obstructed or inaccessible areas include but are not limited to the following:
Attic (partially) Insulated areas of attic Plumbing Areas Composition Roof over Wooden Shingles
Wood Decking Heavy Foliage Slab Joints Planter Box Abutting Structure
High Soil Grade Vinyl Siding Eaves Slab Stress Cracks
Furniture Craw Space Slab Protrusions Weep Holes
Other (See Sketch Page 2)

7A. Conditions conducive to wood destroying insect infestation. (Refer to Part J, Scope of inspection) If "Yes", specify in 7B. Yes No

7B. Conducive conditions include but are not limited to:
(G) Wood to ground contact (K) Debris under or around structure (N) Heavy foliage/ Tree Branches
(I) Form boards left in place (L) High Soil Grade (O) Planter box abutting structure
(J) Excessive Moisture (M) Wood rot (Q) Wood pile in contact with structure
(R) Wood fence touching structure (T) Insufficient ventilation (W) Roof leak
(C) Other

Table with 4 columns: Inspection reveals 'VISIBLE EVIDENCE' in or on the structure, Active Infestation, Previous Infestation, Previous Treatment. Rows include Subterranean Termites, Drywood Termites, Formosan Termites, Carpenter Ants, Other Wood-Destroying Insects.

8F. Explanation of signs of previous termite identified: Drill Marks Notice Posted Seller's Disclosure Bait Stations None Visible
 8G. Visible evidence of: N/A _____ has been observed in the following areas: See Sketch
 If there is visible evidence of active or previous infestation, it must be noted. The type of insect(s) must be listed in the first blank and all identified infested areas of the property inspected must be noted in the second blank (Refer to Part D, E and F, Scope of Inspection).

The conditions conducive to insect infestation reported in 7A & 7B:

9. Will be or has been mechanically corrected by inspecting company: Yes No
 If "Yes," specify corrections: _____
 9A. Corrective treatment recommended for active infestation or evidence of previous infestation with no prior treatment as identified in Section 8. (Refer to Part G, H, and I, Scope of Inspection). Yes No
 9B. A preventive treatment and/or correction of conducive conditions as identified in 7A and 7B is recommended as follows: Yes No
 Lower soil grade to expose 3-4" of slab Trim shrubbery and foliage back 12" from structure Remove climbing ivy from structure wall
 Recommend reinspection after 48 hours Replace rotted wood Prune back tree branches in contact with structure

10A. This structure has been or is being treated by this company for: E. Subterranean Termites Formosan Termites Drywood Termites Other _____
 Treatment Method: Conventional Bait
 If treating Subterranean Termites: Partial Treatment Spot Treatment
 If treating Drywood Termites/Other: Full Treatment Limited Treatment

10B. N/A _____ Common Name of Insect: N/A E. Sub. Termite N/A _____ Name of Pesticide, Bait or Other Method
 Date of Treatment _____ Other _____

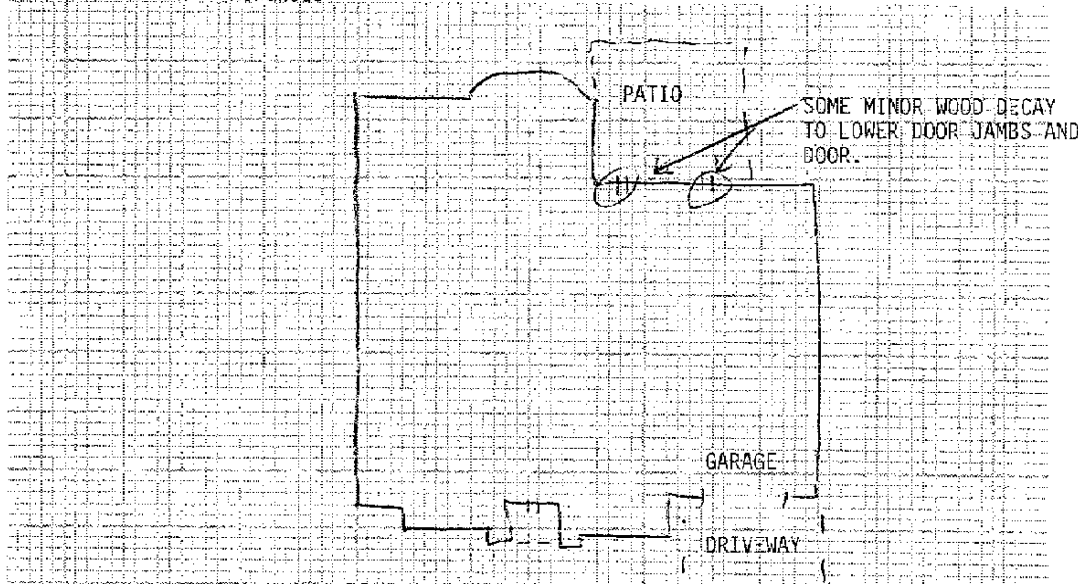
This Company has a contract or warranty in effect for control of the following wood-destroying insects: Yes No
 List insects: E. Subterranean Termite Formosan Termites Drywood Termite Other _____
 If "Yes," copy(ies) of warranty and treatment diagram must be attached.

Diagram of Structure(s) Inspected

- Foundation: Slab Block on Base Pier & Beam Wood Pilings Other _____
 Siding: Brick Wood Masonry/Hardy Masonite Vinyl/Metal Stucco Stone
 Roof: Composition Wood Shingle Metal Tile Composition over Wood Shingle Roll Roofing
 Primary Use: Residence One Story Two Story Commercial Multi-Family Other _____

The inspector must draw a diagram including approximate perimeter measurements and indicate active or previous infestation and type of insect by the following codes:
 E-Evidence of Infestation; A-Active; P-Previous; D-Drywood; S-Subterranean Termite; F-Formosan Termite; C-Conducive conditions; B-Wood boring beetles; H-Carpenter Ants; I-Carpenter Bees; SCC-Slab corner chip; Other(s) _____

2127 RIVER BEND WAY - KINGWOOD



Additional Comments: _____

Due to evidence of previous termite treatment, we recommend that you contact both the Seller and the company who performed the treatment, if known, and inquire about information regarding treatment: such as 1) date treated; 2) chemicals used; 3) areas treated; 4) areas of infestation; 5) type of termite infestation; 6) any known termite damage or repairs from such; 7) warranty, if any, etc.

Neither I, nor the company for which I am acting, have had, presently have, or contemplate having any interest in the property. I do further state that neither I nor the company for which I am acting is associated in any way with any party to this transaction.

Signatures: _____
 11A. _____
 Inspector

12A. Notice of inspection was Posted at or near:
 Electric Breaker Box Tub Trap
 Water Heater Closet Beneath Kitchen Sink

Approved: _____
 11B. #27042PT 4-5-17
 Certified Applicator and Certified Applicator License Number Date

12B. Date Posted 4-5-17

STATEMENT OF PURCHASER

I have received the original or a legible copy of this form. I have read and understand any recommendations made. I have also read and understand the "Scope of Inspection". I understand that my inspector may provide additional information as an addendum to this report. "Any controversy or claim arising from, or relating to, this WDI inspection, or from services rendered under its terms, will be settled in accordance with the Commercial Arbitration Rules of the American Arbitration Association, with the cost of the arbitration to be split equally between the parties. The resulting judgment may be entered in any court having jurisdiction.
 Signature of Purchaser of Property or their Designee: _____ Date: _____

LEO TUMES

Texas Dept. of Agriculture
 Structural Pest Control Service
 P.O. Box 12847
 Austin, Texas 78711-2847