



HOMEOWNER CHECKLIST

Property Address: ____3405 Snowblossom Pearland____

What is the age of the following items:

A/C unit 1: __2021__ A/C unit 2: __2006__ Stove: 2006____ Oven: __2006____
Furnace 1: __unknown__ Furnace 2: __2006__ Dishwasher: __2020__ Microwave: __2006__
Water Heater 1: 2018 Water Heater 2: ____ Refrigerator: __2019__ Carpet: __2022____
Roof: __2006____ Pool: __2013__ Int. Paint: __varies__ Ext. Paint: __2006__

Utility Suppliers:

Electric: __Reliant__ Tel: _____ Water: _____ Tel: _____
Gas: ____ Tel: _____ Trash: _____ Tel: _____
Telephone: _____ Tel: _____

Average Monthly Utilities:

| | | | |
|-------------|---------------|--------------|------------------|
| Electricity | High \$ _____ | Low \$ _____ | Average \$ _____ |
| Gas | High \$ _____ | Low \$ _____ | Average \$ _____ |
| Water | High \$ _____ | Low \$ _____ | Average \$ _____ |

HOA Information:

Fees: \$ _____ How Often: Monthly Quarterly Semi-Annually Annually

Included in Fees:

- | | | | |
|--|--------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> Insurance | <input type="checkbox"/> Taxes | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Trash Pick-Up |
| <input type="checkbox"/> Water/Sewer | <input type="checkbox"/> Electric | <input type="checkbox"/> Gas | <input type="checkbox"/> Security Gates |
| <input type="checkbox"/> Ext. Bldg. Maint. | <input type="checkbox"/> Common Area | <input type="checkbox"/> Amenities | <input type="checkbox"/> Concierge |

Are you aware of any special assessments covered by the HOA? Yes No

If yes, indicate the amount and term of the special assessment: \$ _____

Describe what the special assessment covers:

Please list any upgrades or remodeling you have done to the home, dollar investment and dates of completion:

Seller

Date

Seller

Date