

HOMEOWNER QUESTIONNAIRE

Property Address: 7676 Hicks Dairy Rd

City: Sulzbcc ZIP: 77656

Public Utilities your property is connected to (such as natural gas, electricity, water, sewer, storm sewer, etc.):  
electric - Entergy ; Water - North Haven Water Supply Corp

Is your property served by a <sup>acrobic</sup> Septic System? Yes  No   
If yes, when was the tank last serviced?  
~ 2 yrs

Please describe any additions, remodeling improvements (kitchen cabinets, countertops, appliances etc.), upgrades (windows, flooring, Central air or Heat, Etc.) or special maintenance done to your property, including year of completion and permit status:

Kitchen: Replaced lights over bar - 2021 ; added pantry cabinets - 2018  
Year Completed \_\_\_\_\_

Baths: \_\_\_\_\_  
Year Completed \_\_\_\_\_

Other: Replaced support poles on carport and back porch - 2018 ; Replaced roof - Dec 2017 ; Enclosed RV parking area and added windows, added half bath to shop - 2017  
Year Completed \_\_\_\_\_

Were these additions completed with the proper Permits Yes \_\_\_ No (N/A)

Were the additions allowed by Deed Restrictions Yes \_\_\_ No (N/A)

List what you feel would be the three (3) most desirable/marketable aspects of your home:

- Large kitchen w/ lots of counter space and storage
- All the windows in the living room that let in light
- Full home generator that really does run the whole house

When was your roof last serviced or replaced? replaced December ~~2016~~ 2017

What type of access does your attic have? drop down ladders in primary closet & carport; doors + panels in upstairs bedrooms

Type of windows in your home: Single Pane \_\_\_ Double Pane  Storm Windows \_\_\_  
Wood Frame \_\_\_ Aluminum Frame  Vinyl Frame \_\_\_

Screens: Aluminum  Vinyl \_\_\_ None \_\_\_

Do you have a Home Owner's Warranty? Yes \_\_\_ No   
If yes, what is the name of the warranty program and when does the warranty expire?

Are there any features, conditions, or amenities of your home that are not readily apparent? Please describe:

hidden ~~type~~ storage space in secondary bedroom  
closet

Are there any easements, encroachments, special assessments and/or road maintenance agreements or boundary disputes affecting your property?

no

Have you had a recent Home Inspection Yes \_\_\_\_\_ No X Date \_\_\_\_\_

Were you made aware of any safety and or structural deficiencies (electrical, rotting wood) from inspection

Yes \_\_\_\_\_ No X Deficiencies \_\_\_\_\_

Appliances:

- Central A/C Yes \_\_\_\_\_ No X
- Central Heat Yes \_\_\_\_\_ No X
- Microwave Yes \_\_\_\_\_ No X
- Range/Oven Yes \_\_\_\_\_ No X
- Dishwasher Yes \_\_\_\_\_ No X
- Disposal Yes \_\_\_\_\_ No X
- Washer/Dryer Yes \_\_\_\_\_ No X
- Other \_\_\_\_\_

Known deficiencies with any of the above appliances

\_\_\_\_\_  
\_\_\_\_\_

- Rotting Wood Yes \_\_\_\_\_ No X
- Broken Windows Yes \_\_\_\_\_ No X
- All Utilities on Yes X No \_\_\_\_\_

Are there any substances, materials, or products that may be considered an environmental hazard such as, but not limited to, asbestos, formaldehyde, radon gas, lead based paint, fuel or chemical storage tanks, and contaminated soil or water on the property? Yes \_\_\_\_\_ No X

If yes, please explain: \_\_\_\_\_

Are there any land uses or conditions near your property such as power lines, microwave stations, military bases, airports, refuse disposal sites, toxic substance storage sites, and/or any other noise or pollution situations?

Please explain: none

Has your house had any pest infestation problems and/or symptoms in the last 2 years? Yes \_\_\_\_\_ No X

If yes, please explain: \_\_\_\_\_

Has there ever been any flooding or standing water on your property? Yes \_\_\_\_\_ No X

If yes, please explain: \_\_\_\_\_

Do you have a sump pump in the crawl space or basement area? Yes \_\_\_\_\_ No \_\_\_\_\_ N/A

If yes, please indicate location(s): \_\_\_\_\_

Is there a vapor barrier in the crawl space? Yes \_\_\_\_\_ No \_\_\_\_\_ Don't Know \_\_\_\_\_ N/A

Are there any zoning issues, nonconforming uses, or unusual restrictions on the property that would affect future construction or remodeling? Yes \_\_\_\_\_ No

If yes, please explain: \_\_\_\_\_

**PUD only information:**

Is your home located in a Planned Unit Development (PUD), or do you participate in a Home Owner's Association? Yes \_\_\_\_\_ No  If yes, what amount of dues to you pay?

\_\_\_\_\_ Monthly \_\_\_\_\_ Quarterly \_\_\_\_\_ Yearly

What common area amenities are included? (Park/Playground, Pool, Sports Court, Trails, Maintenance, etc.)

Are there any declarations of covenants, conditions or restrictions that affect the property? Yes \_\_\_\_\_ No \_\_\_\_\_

**Sales History:**

Was your property recently purchased? When \_\_\_\_\_ Amount \_\_\_\_\_

Has your property been offered for sale within the past 12 months? Yes \_\_\_\_\_ No  \$ \_\_\_\_\_

If yes:

From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Listing agent: \_\_\_\_\_

I affirm the foregoing to be true and correct to the best of my knowledge.

Owner: Rhonda D. Selfridge Date: 3/21/23

Owner: Michael Selfridge Date: 3/21/23