



## 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 15714 Craighurst Dr. Houston, TX 77059

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?  April 4, 2022 (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"/>		
Liquid Propane Gas:		<input checked="" type="checkbox"/>	
-LP Community (Captive)		<input checked="" type="checkbox"/>	
-LP on Property		<input checked="" type="checkbox"/>	

Item	Y	N	U
Natural Gas Lines	<input checked="" type="checkbox"/>		
Fuel Gas Piping:			<input checked="" type="checkbox"/>
-Black Iron Pipe			<input checked="" type="checkbox"/>
-Copper			<input checked="" type="checkbox"/>
-Corrugated Stainless Steel Tubing			<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: <input type="checkbox"/> sump <input type="checkbox"/> 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"/>	<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>2</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"/>			<input type="checkbox"/> electric <input checked="" type="checkbox"/> gas number of units: _____
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 <input type="checkbox"/> other: _____
Fireplace & Chimney	<input checked="" type="checkbox"/>			<input type="checkbox"/> wood <input checked="" type="checkbox"/> gas logs <input type="checkbox"/> mock <input type="checkbox"/> other: _____
Carport			<input checked="" type="checkbox"/>	<input type="checkbox"/> attached <input type="checkbox"/> not attached
Garage	<input checked="" type="checkbox"/>			<input type="checkbox"/> attached <input checked="" type="checkbox"/> not attached
Garage Door Openers	<input checked="" type="checkbox"/>			number of units: _____ number of remotes: _____
Satellite Dish & Controls	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> owned <input type="checkbox"/> leased from _____
Security System		<input checked="" type="checkbox"/>		<input type="checkbox"/> owned <input type="checkbox"/> leased from _____

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Solar Panels	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> owned <input type="checkbox"/> leased from
Water Heater	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> electric <input checked="" type="checkbox"/> gas <input type="checkbox"/> other: _____ number of units: _____
Water Softener	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> owned <input checked="" type="checkbox"/> leased from
Other Leased Item(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	if yes, describe: _____
Underground Lawn Sprinkler	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> automatic <input type="checkbox"/> manual areas covered: _____
Septic / On-Site Sewer Facility	<input checked="" 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: Composition Age: unknown (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"/>	<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): \_\_\_\_\_

Living and office floors carpets need replacing; fence on side of garage needs repair

**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"/>	Radon Gas		<input checked="" type="checkbox"/>
Asbestos Components		<input checked="" type="checkbox"/>	Settling		<input checked="" type="checkbox"/>
Diseased Trees: <input type="checkbox"/> oak wilt <input type="checkbox"/>		<input checked="" type="checkbox"/>	Soil Movement		<input checked="" type="checkbox"/>
Endangered Species/Habitat on Property		<input checked="" type="checkbox"/>	Subsurface Structure or Pits		<input checked="" type="checkbox"/>
Fault Lines		<input checked="" type="checkbox"/>	Underground Storage Tanks		<input checked="" type="checkbox"/>
Hazardous or Toxic Waste		<input checked="" type="checkbox"/>	Unplatted Easements		<input checked="" type="checkbox"/>
Improper Drainage		<input checked="" type="checkbox"/>	Unrecorded Easements		<input checked="" type="checkbox"/>
Intermittent or Weather Springs		<input checked="" type="checkbox"/>	Urea-formaldehyde Insulation		<input checked="" type="checkbox"/>
Landfill		<input checked="" type="checkbox"/>	Water Damage Not Due to a Flood Event		<input checked="" type="checkbox"/>
Lead-Based Paint or Lead-Based Pt. Hazards		<input checked="" type="checkbox"/>	Wetlands on Property		<input checked="" type="checkbox"/>
Encroachments onto the Property		<input checked="" type="checkbox"/>	Wood Rot	<input checked="" type="checkbox"/>	
Improvements encroaching on others' property		<input checked="" type="checkbox"/>	Active infestation of termites or other wood destroying insects (WDI)		<input checked="" type="checkbox"/>
Located in Historic District		<input checked="" type="checkbox"/>	Previous treatment for termites or WDI		
Historic Property Designation		<input checked="" type="checkbox"/>	Previous termite or WDI damage repaired		
Previous Foundation Repairs		<input checked="" type="checkbox"/>	Previous Fences		<input checked="" type="checkbox"/>

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Previous Roof Repairs		<input checked="" type="checkbox"/>
Previous Other Structural Repairs		<input checked="" type="checkbox"/>
Previous Use of Premises for Manufacture of Methamphetamine		<input checked="" type="checkbox"/>

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

If the answer to any of the items in Section 3 is yes, explain (attach additional sheets if necessary): exterior siding has random wood rot

\*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): n/a

**Section 5. Are you (Seller) aware of any of the following conditions?\*** (Mark Yes (Y) if you are aware and check wholly or partly as applicable. Mark No (N) if you are not aware.)

Y N

- Present flood insurance coverage.
- Previous flooding due to a failure or breach of a reservoir or a controlled or emergency release of water from a reservoir.
- Previous flooding due to a natural flood event.
- Previous water penetration into a structure on the Property due to a natural flood.
- Located  wholly  partly in a 100-year floodplain (Special Flood Hazard Area-Zone A, V, A99, AE, AO, AH, VE, or AR).
- Located  wholly  partly in a 500-year floodplain (Moderate Flood Hazard Area-Zone X (shaded)).
- Located  wholly  partly in a floodway.
- Located  wholly  partly in a flood pool.
- Located  wholly  partly in a reservoir.

If the answer to any of the above is yes, explain (attach additional sheets as necessary): n/a

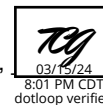
**\*If Buyer is concerned about these matters, Buyer may consult Information About Flood Hazards (TXR 1414).**

For purposes of this notice:

"100-year floodplain" means any area of land that: (A) is identified on the flood insurance rate map as a special flood hazard area, which is designated as Zone A, V, A99, AE, AO, AH, VE, or AR on the map; (B) has a one percent annual chance of flooding, which is considered to be a high risk of flooding; and (C) may include a regulatory floodway, flood pool, or reservoir.

"500-year floodplain" means any area of land that: (A) is identified on the flood insurance rate map as a moderate flood hazard area, which is designated on the map as Zone X (shaded); and (B) has a two-tenths of one percent annual chance of flooding, which is considered to be a moderate risk of flooding.

"Flood pool" means the area adjacent to a reservoir that lies above the normal maximum operating level of the reservoir and that is subject to controlled inundation under the management of the United States Army Corps of Engineers.



"Flood insurance rate map" means the most recent flood hazard map published by the Federal Emergency Management Agency under the National Flood Insurance Act of 1968 (42 U.S.C. Section 4001 et seq.).

"Floodway" means an area that is identified on the flood insurance rate map as a regulatory floodway, which includes the channel of a river or other watercourse and the adjacent land areas that must be reserved for the discharge of a base flood, also referred to as a 100-year flood, without cumulatively increasing the water surface elevation more than a designated height.

"Reservoir" means a water impoundment project operated by the United States Army Corps of Engineers that is intended to retain water or delay the runoff of water in a designated surface area of land.

**Section 6. Have you (Seller) ever filed a claim for flood damage to the Property with any insurance provider, including the National Flood Insurance Program (NFIP)?**  yes  no If yes, explain (attach additional sheets as necessary): n/a

\*Homes in high risk flood zones with mortgages from federally regulated or insured lenders are required to have flood insurance. Even when not required, the Federal Emergency Management Agency (FEMA) encourages homeowners in high risk, moderate risk, and low risk flood zones to purchase flood insurance that covers the structure(s) and the personal property within the structure(s).

**Section 7. Have you (Seller) ever received assistance from FEMA or the U.S. Small Business Administration (SBA) for flood damage to the Property?**  yes  no If yes, explain (attach additional sheets as necessary): n/a

**Section 8. 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

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: Brook Forest Community Association

Manager's name: \_\_\_\_\_ Phone: 281-480-2663

Fees or assessments are: \$ 530.00 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.

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- 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.

If the answer to any of the items in Section 8 is yes, explain (attach additional sheets if necessary): \_\_\_\_\_

**Section 9. 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
12/2021		see report, attached, following the 7th page	11

*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 10. 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 11. Have you (Seller) ever filed a claim for damage, other than flood damage, to the Property with any insurance provider?**  yes  no

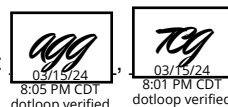
**Section 12. Have you (Seller) ever received proceeds for a claim for damage to the Property (for example, an insurance claim or a settlement or award in a legal proceeding) and not used the proceeds to make the repairs for which the claim was made?**  yes  no If yes, explain: \_\_\_\_\_

**Section 13. 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): They are the same as when purchased in 2022 allowed by the

conventional lender that we closed with.

*\*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.*



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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.

Anthony G. Gonzales dotloop verified 03/15/24 8:05 PM CDT EURL-6HDX-UWSE-OENR 03.14.2024  
Signature of Seller Date

Tirsa C. Gonzales dotloop verified 03/15/24 8:01 PM CDT J2KF-CFMM-VZKZ-BVL9 4.2024  
Signature of Seller Date

Printed Name: Anthony G. Gonzales

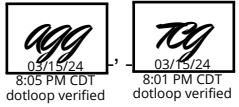
Printed Name: Tirsa C. Gonzales

**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>TXU Energy</u>	phone #: <u>866-278-4898</u>
Sewer: <u>Clear Lake Water Authority</u>	phone #: <u>(281) 488-1164</u>
Water: <u>Clear Lake Water Authority</u>	phone #: <u>(281) 488-1164</u>
Cable: <u>Xfinity</u>	phone #: <u>(800) 934-6489</u>
Trash: <u>Clear Lake Water Authority</u>	phone #: <u>(281) 488-1164</u>
Natural Gas: <u>Centerpoint</u>	phone #: <u>800-227-1376</u>
Phone Company: <u>AT&amp;T Wireless</u>	phone #: <u>(281) 335-9766</u>
Propane: <u>n/a</u>	phone #: _____
Internet: <u>Xfinity</u>	phone #: <u>(800) 934-6489</u>





**State: TX**

## Seller's Property Disclosure Statement

The attached Seller's Property Disclosure Statement was provided to Seller at the time of purchasing the Property (described at the address below) from the preceding owner. That Seller's Property Disclosure Statement is meant to disclose material facts or defects known to the preceding owner at the time of selling the Property. It is hereby supplemented by the work performed by Seller during Seller's ownership period of the Property and as further described in the table below.

The contents contained in this Disclosure Statement are for informational purposes only and are not intended to be a part of any written agreement between Buyer and Seller. Seller shall not be responsible for any inaccuracies or omissions in the Disclosure Statement completed by the preceding owner, which are not otherwise known to Seller. Seller has never occupied the Property or performed a sewer scope inspection. Seller encourages Buyer to perform their own inspections and examinations of the Property, including all applicable sewer lines and connections. Seller additionally encourages Buyer to confirm the square footage of the Property with a certified appraiser because any informal measurements procured by Seller for renovation purposes only could vary from the measurements identified in the county records. Buyer shall purchase the Property solely on the basis of and in reliance upon Buyer's own inspections and not on any information provided by Seller.

As used herein, "Property" shall mean the real property and all fixtures and improvements thereon and appurtenances incidental thereto. An "appurtenance" is a right, privilege or improvement belonging to and passing with the land (e.g., an outbuilding or easement).

<b>Seller</b>	<b>Zillow Homes Property Trust</b>	<b>Date</b>	<b>10-Dec-21</b>
	Corporate Entity Name		

<b>Property Address</b>	<b>15714 Craighurst Dr, Houston, TX 77059</b>		
	Street	City	State Zip

### Seller Property Disclosure Statement from previous seller

**Attached**

#### Seller Performed Work

<u>Room Category</u>	<u>Item</u>	<u>Quantity/ Size</u>
HVAC - Residential	Hvac Replaced capacitor at both units	2
HVAC - Residential	Hvac Evaluate both units per sop	2
HVAC - Residential	Hvac Install safety float switch at drain pan	1
HVAC - Residential	Thermostat replacement, tstat not working	1
Pool Equipment & Repairs	Pool - Resurface	1
Pool Equipment & Repairs	Pool - Pump - Install/Replace - Standard	1
Pool Equipment & Repairs	Multi port valve leaking - Multi port valve leaking in two places, needs replacement	1
Pool Equipment & Repairs	Pool - Install 5 eyeball returns	1
Pool Equipment & Repairs	Pool - Pool light need replacement non functional	1



Pool Equipment & Repairs	Pool - Replace non functioning gfci, safety	1
Pool Equipment & Repairs	Pool - pump2 pump replaced the motor it includes impeller, shaft seal, diffuser o-ring and housing o-ring	1
Doors	Locks and Keys - Rekey Exterior Doors - Install/Replace	2
Lighting/Ceiling Fixtures	Ceiling Fan - Globe - Install/Replace	1
Lighting/Ceiling Fixtures	Light Fixture - Interior - Install/Replace	2
Lighting/Ceiling Fixtures	Ceiling Fan - Globe - Install/Replace	1
Plumbing Fixtures, etc.	Toilet - Seat - Install/Replace	1
Lighting/Ceiling Fixtures	Ceiling Fan - Globe - Install/Replace	1
Pool Equipment & Repairs	Pool - Alarm - Install/Replace	8
Initial Walk-Through Repairs	Completion Package	1
Appliances - Range/Oven/Microwave	Range - Clean	1
Electrical Systems Wiring	Smoke/Carbon Monoxide Detector - Whole House - Install/Replace	1
Initial Housecleaning	House Interior - Initial - Clean - 1,501-3,000 sqft	1
Renovation Certifications	Fireplace - Service - Wood Burning	1
Doors	Locks and Keys - Rekey Exterior Doors - Install/Replace(1) Kwikset Cove Venetian Bronze Exterior Entry Door Knob and Single Cylinder Deadbolt Combo Pack Door - Lock - Knob/Deadbolt - Venetian Bronze Venetian BronzeMissing 1 additional rekey needed, match color as close as possible. Use passage for knob	1
Plumbing Fixtures, etc.	Toilet - Seat - Install/Replace(1) KOHLER Wellworth Round Closed Front Toilet Seat in White Toilet - Seat - Round White Round PlasticToilet seat is stained	1
Plumbing Fixtures, etc.	Plumbing - Replace broken flapper in bathroom 2	1
Paint - Interior	Room - Entire Wall (Corner-to-Corner) - Paint(104) Room - Entire Wall (Corner-to-Corner) - PaintPaint corner to corner in hallway where unfinished paint is	1
Demolition	Fencing - Remove broken wrought iron gate at front door and haul off	1
Landscapings/Irrigation	Trees & Plants - Trim(3) Palm - 11 foot to 20 foot Palm 11 foot to 20 footTrim trees branches hanging lower than 20 feet. On right side clear branches in front hanging over neighbors driveway	1
Paint - Interior	Room - Touch Up - Paint(2) Room - Touch Up - Paint / Paint the area inside the shelf area where tv was in living room	1
Doors	Locks - Install and program kwikset power bolt lock	1

**Additional Material Information**

Seller discovered the following additional material information during their ownership period of the Property.

N/A

**Party Verifications**

Seller provides the foregoing answers, disclosures, explanations and attachments based on its actual knowledge and without inquiry.

**Seller Signature**

*Jennifer Amador*

dotloop verified  
12/10/21 2:20 PM CST  
RMRX-MPPU-7NKV-0E9Z

**Date** 12/10/2021

Buyer hereby acknowledges receipt of the foregoing answers, disclosures, explanations and attachments and has carefully reviewed the same. Buyer further acknowledges that Seller has never occupied the Property and that these disclosures are made for informational purposes only. Buyer will have the opportunity to fully inspect and examine the Property. Buyer will rely solely upon those inspections and examinations to verify the conditions and suitability of the Property.

**Buyer Signature**

**Date**

**Buyer Signature**

**Date**

**Seller Property Disclosure Statement from previous seller**

**Property Address** 15714 Craighurst Dr, Houston, TX 77059

Street

City

State

Zip

**1. Property Characteristics**

**Provide the following Property information:**

- |   |          |
|---|----------|
| 1. Year built   | 1979     |
| 2. Date purchased   | 5/25/12  |
| 3. Status of occupancy (vacant or occupied)                                 | vacant   |
| 4. If vacant, time since last occupied                                      | 07/15/21 |
| 5. Any portion of the Property a mobile, modular, or manufactured dwelling? | N        |

**2. Cable**

**Does the Property have connection availability to the following:**

- |                    |   |
|--------------------|---|
| 1. Cable/Satellite | Y |
| 2. Internet        | Y |
| 3. Telephone       | Y |

**Current or past problems on the Property with:**

- |  |   |
|--|---|
| 1. Electrical systems                                    | N |
| 2. Service connectivity (ex: cable, internet, telephone) | N |
| 3. If yes, please explain.                               |   |

**3. County/Govt**

**Will the Property be subject to new government taxes/assessments or belong to an improvement district?** N

1. If yes, please explain.

**Were permits required for any work performed on the Property in the last 5 years?** N

1. If yes, were they obtained and closed?  
2. If no, explain.

**Is the Property in violation or alleged violation of any code, regulation or covenant?** N

1. If yes, please explain.

**Are there any special assessments on the property? (e.g. is this property subject to a PACE loan?)** N

1. If yes, please explain.

#### 4. Animals/Bugs/Mold/Termites

**Are there currently or have there been pets residing on the Property?** Y

1. If yes, please explain.

Dog, two year ago

#### Current or past problems on the Property with:

- |  |   |
|--|---|
| 1. Bees  | N |
| 2. Rabid animals   | N |
| 3. Rodents   | N |
| 4. Reptiles  | N |
| 5. Insects   | N |
| 6. Spiders (or scorpions)  | N |
| 7. Termites  | N |
| 8. Bed bugs  | N |
| 9. If yes to any of the above, please explain (including treatment, remediation and warranties). |   |

#### 5. Flooding

##### Does the Property contain:

- |                                |   |
|--------------------------------|---|
| 1. Dams                        | N |
| 2. Storm water retention ponds | N |
| 3. Underground springs         | N |
| 4. Irrigation system/pumps     | N |

**Is the Property located in a special flood zone?** N

**Is the Property located within the 100 year flood zone?** N

##### Current or past problems on the Property related to:

- |   |   |
|---|---|
| 1. Flooding   | N |
| 2. Water damage   | N |
| 3. Leaks  | N |
| 4. Water intrusion  | N |
| 5. Moisture   | N |
| 6. Fungi  | N |
| 7. Dry rot  | N |
| 8. Mold   | N |
| 9. Irrigation system/pumps  | N |
| 10. If yes to any of the above, please explain (including treatment and remediation). |   |

**Has the Property been subject to any Insurance claim, including with the National Flood Insurance Program (NFIP), due to flood damage?** N

1. If yes, please explain (including claim amount, date, and the result).

**Have you, as the Seller, ever received assistance from the Federal Emergency Management Agency (FEMA) or the U.S. Small Business Administration (SBA) due to flood damage to the Property?** N

1. If yes, please explain (including the amount received and the date).

## 6. Gas/Fuel

**Does the Property contain any of the following:**

- 1. Fuel tank N
- 2. Heating stove N
- 3. Gas line N
- 4. Radiant heating system N
- 5. Fireplace Y
- 6. If yes to any of the above, please explain (including age, current or past problems, repair history, service providers and applicability of warranty).

Working gas log fireplace

**Is the property connected to:**

- 1. Natural gas line Y
- 2. Propane N
- 2(a). If the property is connected to propane, is the propane tank owned or leased?
- 2(b). If the property has a propane tank, please indicate the level
- 3. Oil N
- 4. If yes to any of the above, please list which appliances are connected to these sources and explain all pertinent information (including age, current or past problems, repair history, service providers and warranty information).

Fireplace, hot water heater and furnace are natural gas

## 7. Air/Cooling

**Does the Property contain:**

- 1. Central air conditioning Y
- 2. Split units N
- 3. Window units N
- 4. Evaporative cooler N
- 5. Attic/whole house fan N
- 6. Humidifier N
- 7. Air purifier N
- 8. If yes to any of the above, please explain (including age, current or past problems, repair history, service providers and applicability of warranty).

3-ton central air/furnace replaced 9/24/2014. 20 year warranty. David Morse A/C American Standard condensing unit replaced 4/12/2014. 5 year warranty. David Morse A/C Secondary central air/furnace on kitchen side of house needs repair

**8. Homeowners'/Community Association**

- Is the Property part of a Homeowners' or Community Association?** Y
1. Is there pending litigation against the association? N
  2. Is the Property subject to any outstanding violations or fines? N
  3. Is the Property subject to any assessments (including regular or sporadic) or monthly fees? N
  
  4. Are there any new but not yet implemented assessments or dues? N
  5. Are there any problems with the common elements within the Association? N
  6. If yes to any of the above, please explain.

Brook Forest Community Association

**Are there any common areas (including pools, tennis courts, walkways, or other co-owned areas with others)?** N

1. If yes, are there any pending or threatened claims that may affect the common areas?

**Please provide additional details pertaining to the following (if a feature is not applicable, please mark N/A):**

- Parking/Garage Stall Number N/A
- Garage door code N/A
- Storage space number N/A
- Mailbox number N/A
- Gate code number N/A
- Any other pertinent access information a Buyer may reasonably want to know

**9. Insurance**

**Has the Property been subject to any insurance claim (other than any insurance claim due to flood damage)?** N

1. If yes, please explain (including claim amount, date, result and reason for each claim).

**10. Legal/Access/Use**

**Is the Property subject to any of the following:**

1. Encroachments N
2. Boundary disputes N
3. Unrecorded easements N
4. Access agreements N
5. Shared easements N
6. License agreements N
7. Rights of first offer or refusal or option N

- 8. Maintenance obligations or agreements with regard to shared fences, walls, walkways, or driveways N
- 9. Other issues to limit access N
- 10. If yes to any of the above, please explain.

**Is or has the Property been subject to any threatened or actual:**

- 1. Condemnation proceeding N
- 2. Construction defect claim N
- 3. Mechanic's lien claim N
- 4. Title dispute N
- 5. Other legal action N
- 6. If yes to any of the above, please explain (including claim amount, date, result and reason for each claim).

**Do any of the following restrict the use of the Property:**

- 1. Age covenants N
- 2. Historic districts N
- 3. Landmark designation N
- 4. Proximity to agricultural, open spaces or wetlands N
- 5. Government hazard zone N
- 6. Any other zoning violation, ordinance, or nonconforming use N
- 7. If yes to any of the above, please explain.

**11. Land/Ground/Soil**

**Current or past problems on the Property related to:**

- 1. Soil settlement/expansion N
- 2. Drainage/grade N
- 3. Erosion N
- 4. Fissure N
- 5. If yes to any of the above, please explain.

**12. Plumbing**

**Current or past problems on the Property related to:**

- 1. Backflow prevention devices N
- 2. Water lines N
- 3. Pargets N
- 4. Sprinkler systems N
- 5. Plumbing/water/sewage systems N
- 6. If yes to any of the above, please explain (including damage, repair history, service providers and warranty information).

**Does the Property contain:**

- 1. Galvanized or Polybutylene piping N
- 2. If yes to the above, please explain which type of piping the Property contains.
- 3. Irrigation system N
- 4. Indoor or outdoor sprinkler system N
- 5. Hot tub, spa, sauna, or pool Y

**13. Alternative Energy**

**Does the Property contain a solar or wind power system?** N

1. Is the solar or wind power system owned or leased?
2. Current or past problems?
3. If yes to any of the above, please explain (including damage, repair history, service providers and warranty information).

#### 14. Service/Utility Providers

**Who is the provider of the following services:**

1. Electricity

Reliant Energy

2. Water

CLCWA

3. Sewer

CLCWA

4. Gas/Fuel

centerpoint

5. Cable/Satellite/Internet

AT&T/Direct TV

6. Garbage

AmericanWaste

7. Fire services

Houston FD

8. Irrigation

N/A

9. Solar or wind power

N/A

#### 15. Quality of Life

**Is the Property subject to any nuisance, excessive noise (example: airport, rail, highway, traffic, neighbors) or foul odors?** N

1. If yes, please explain.

#### 16. Lease/Rental

**Is the Property subject to any lease or tenancy?** N

1. If yes, when will the lease be terminated?
2. If yes, when will the tenant vacate the Property?

#### 17. Safety/Environmental Hazards

**Are or have of any of the following been present on the Property:**

1. Asbestos N

- 2. Underground tanks N
- 3. Toxic/hazardous/biohazardous/radioactive substances N
- 4. Herbicides/pesticides N
- 5. Wastewater sludge N
- 6. Fill (compacted or otherwise) N
- 7. Radon N
- 8. Methane N
- 9. Petroleum products N
- 10. Fuel/chemical storage N
- 11. Drug or narcotic lab N
- 12. Lead-based paint N
- 13. Abandoned wells or tunnels N
- 14. Sink holes N
- 15. Any other environmental hazard N
- 16. If yes to any of the above, please explain (including date, remediation and service provider).

### 18. Safety Systems

Are any of the following safety systems present on the Property:

- 1. Smoke/fire detector Y
- 2. CO2 detector N
- 3. Security alarm N
- 4. Safety bars N
- 5. Pool child resistant barrier, hot tub/spa locking safe cover, or other related child safety mechanism N
- 6. Any other safety system N
- 7. If yes to any of the above, please provide the service provider or lessor information if the system is not owned.

### 19. Roof/Structure/Other Fixtures

Provide the following information regarding the roof of the Property:

1. Age

December 2008

2. Material

Composition

- 3. Warranty (including transferability) N/A
- 4. Regular service provider N/A

**Current or past problems related to the roof, structure, or fixtures on the Property, including:**

- 1. Gutters N



- |  |   |
|--|---|
| 2. Downspouts  | Y |
| 3. Flashing  | N |
| 4. Skylights   | N |
| 5. Exterior walls/windows  | Y |
| 6. Exterior artificial stucco  | N |
| 7. Fireplace/chimney   | N |
| 8. Foundation  | N |
| 9. Walls (interior & exterior)   | N |
| 10. Flooring   | N |
| 11. Basement   | N |
| 12. Aluminum wiring  | N |
| 13. Electrical service amps  | N |
| 14. Built-in speakers  | N |
| 15. Intercom or doorbell   | Y |
| 16. Elevator   | N |
| 17. Entry gate   | N |
| 18. Garage electrical (including keypad and openers)   | N |
| 19. Garage doors   | N |
| 20. Landscape lighting   | N |
| 21. Ceiling fans   | N |
| 22. Hot tub, spa, sauna, or pool   | Y |
| 23. Light fixtures   | N |
| 24. Outlets  | N |
| 25. If yes to any of the above, please explain (including damage, repair history, service providers and warranty information). |   |

One downspout knocked off by yard crew, in garage Some windows do not stay u on on their own Front doorbell is not working Pool equipment needs repair, pool is green

## 20. Appliances

### Current or past problems with any of the following:

- |                                  |   |
|----------------------------------|---|
| 1. Clothes dryer                 | N |
| 2. Clothes washing machine       | N |
| 3. Dishwasher                    | N |
| 4. Garbage disposal              | Y |
| 5. Ice maker                     | N |
| 6. Microwave Oven                | N |
| 7. Oven                          | N |
| 8. Refrigerator/freezer          | N |
| 9. Stove                         | N |
| 10. Trash compactor              | N |
| 11. Vacuum system                | N |
| 12. Wine cooler                  | N |
| 13. Cable jacks/receiver/remotes | N |
| 14. Satellite dish/receiver      | N |

- 15. Chandeliers N
- 16. Mirros N
- 17. Window blinds/shutters/screens/hardware N
- 18. Fences Y
- 19. Landscape lighting N
- 20. Mailbox N
- 21. Swing set/tree house N
- 22. Grill N
- 23. Alarm system or security apparatus N
- 24. Thermostat N
- 25. Other built-in appliances, fixtures, equipment or other systems Y
- 26. If yes to any of the above, please explain (including damage, repair history, service providers and warranty information).

Garbage deposal is not working Some screens bent/missing Decorative front gates needs to be reattached, Fence and gate in breezewa6y need repair. All other fencing replaced in 2019. As noted, pool equipment and secondary A/C need repair.

### 21. Septic/Sewer

**Does the Property contain a septic or sewer system?**

**Does the Property contain:**

- 1. Sump pumps N
- 2. Other sanitary system N
- 3. If yes to any of the above, please explain (including age, current or past problems, repair history, service providers and warranty information).

### 22. Water

**Does the Property contain any of the following water systems:**

- 1. Well (including shared well) N
- 2. Filtration system N
- 3. Water heater Y
- 4. Water softener N
- 5. Treatment system N
- 6. If yes to any of the above, please explain (including age, current or past problems, repair history, service providers and warranty information).

We were told that the hot water heater was new when we purchased the house. No issues or repairs.

### 23. Other

**Are any fixtures, equipment, improvements or appliances on the Property leased?** N

- 1. If yes, please explain.

**Has a death occurred on the Property in the past three years?** N

**Please describe any other material information (including latent defects) concerning the Property that a reasonable buyer would want to know.**