



# 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.**

4720 Providence St  
Houston, TX 77020-6408

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? \_\_\_ (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)			
-LP on Property			

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			
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: sump 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			
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"/>	
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 checked="" type="checkbox"/> gas number of units: 1
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 checked="" type="checkbox"/> electric <input checked="" type="checkbox"/> gas number of units: 1
Other Heat		<input checked="" type="checkbox"/>		if yes, describe: _____
Oven	<input checked="" type="checkbox"/>			number of ovens: 1 <input checked="" type="checkbox"/> electric <input checked="" type="checkbox"/> gas other: _____
Fireplace & Chimney		<input checked="" type="checkbox"/>		wood <input checked="" type="checkbox"/> gas logs <input checked="" type="checkbox"/> mock other: _____
Carport		<input checked="" type="checkbox"/>		attached <input checked="" type="checkbox"/> not attached
Garage		<input checked="" 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"/>		owned <input checked="" type="checkbox"/> leased from: _____
Security System		<input checked="" type="checkbox"/>		owned <input checked="" type="checkbox"/> leased from: _____

(TXR-1406) 07-10-23

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

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

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*	<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): \_\_\_\_\_

fire damage on 2/29/2024.

**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): \_\_\_\_\_

**\*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.

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

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

*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): \_\_\_\_\_

\_\_\_\_\_

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

(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: _____	