

# **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.

12040 Craigen Rd

| CONCERNING THE PR                         | ROPI        | ERT         | ΥA                  | Γ       |            |                  |                          | Bea         | aum         | ont           | TX 77705   |             |             | _      |
|---|-------------|-------------|---------------------|---------|------------|------------------|--------------------------|-------------|-------------|---------------|--|-------------|-------------|--------|
| AS OF THE DATE                            | SIG<br>SUYE | NEI<br>ER 1 | D E<br>MAY          | SY<br>W | SEL<br>ISH | LER<br>TO        | R AND IS NOT             | A S         | SUB         | STIT          | E CONDITION OF THE PRO<br>UTE FOR ANY INSPECTION<br>RANTY OF ANY KIND BY S | NS          | OF          | R      |
| Seller X is is not the Property?          | Vol         | ccup        | ying<br><b>55</b> C | the     | P P        | rope<br><b>7</b> | rty. If unoccupied       | (by<br>appr | Sel<br>oxim | ler),<br>nate | how long since Seller has date) or never occup                             | occu<br>led | upie<br>the | d<br>e |
| Section 1. The Proper<br>This notice does |             |             |                     |         |            |                  |                          |             |             |               | or Unknown (U).)<br>ne which items will & will not convey                  | <i>i</i> .  |             |        |
| Item                                      | Υ           | N           | U                   |         | Ite        | m                |                          | Υ           | N           | U             | Item   | Υ           | N           | U      |
| Cable TV Wiring                           | X           |             |                     | 1       | Na         | tura             | l Gas Lines              |             |             | X             | Pump:  | ×           |             |        |
| Carbon Monoxide Det.                      | X           |             |                     | 1       | Fu         | el G             | as Piping:               | X           |             |               | Rain Gutters Blak Varuo  | x           |             |        |
| Ceiling Fans                              | X           |             |                     |         | -B         | lack             | Iron Pipe                |             |             | ×             | Range/Stove  | X           |             |        |
| Cooktop                                   | X           |             |                     |         | -C         | oppe             | er .                     |             |             | ×             | Roof/Attic Vents   | X           |             |        |
| Dishwasher                                | K           |             |                     |         |            |                  | gated Stainless<br>ubing |             |             | х             | Sauna  |             | Х           |        |
| Disposal                                  | X           |             |                     |         | Но         | t Tu             | b                        | Х           |             |               | Smoke Detector   | X           |             |        |
| Emergency Escape<br>Ladder(s)             |             | ×           |                     |         | Int        | Intercom System  |                          |             | ×           |               | Smoke Detector - Hearing Impaired  |             |             | ×      |
| Exhaust Fans                              | X           |             |                     |         | Mi         | crow             | /ave                     | ×           |             |               | Spa  | ×           |             |        |
| Fences                                    | ×           |             |                     |         | Οι         | Outdoor Grill    |                          | X           |             |               | Trash Compactor  |             | X           |        |
| Fire Detection Equip.                     |             |             | X                   |         | Pa         | Patio/Decking    |                          |             |             | X             | TV Antenna   |             | X           |        |
| French Drain                              |             |             | X                   |         | Plu        | ımbi             | ing System               | X           |             |               | Washer/Dryer Hookup  | ×           |             |        |
| Gas Fixtures                              |             | X           |                     |         | Po         | ol               |                          | X           |             |               | Window Screens   |             |             |        |
| Liquid Propane Gas:                       | X           |             |                     |         | Pc         | ol E             | quipment                 | ×           |             |               | Public Sewer System  |             | X           |        |
| -LP Community (Captive)                   |             | X           |                     |         | Po         | ol M             | laint. Accessories       | ×           |             |               |  |             |             |        |
| -LP on Property                           | X           |             |                     |         | Pc         | ol H             | eater                    | X           |             |               |  |             |             |        |
|   |             |             |                     |         |            |                  |                          |             |             |               |  |             |             |        |
| Item                                      |             |             |                     | Υ       | N          | U                | A                        |             |             |               | onal Information   |             |             | -      |
| Central A/C                               |             |             |                     | X       |            |                  | ✓ electricgas            | nun         | nber        | of u          | nits:  |             |             |        |
| Evaporative Coolers                       |             |             |                     |         |            | X                | number of units:         |             |             |               |  |             |             |        |
| Wall/Window AC Units                      |             |             |                     |         | X          |                  | number of units:         |             | VIEW        | BL.           | <u>building</u>  |             |             |        |
| Attic Fan(s)                              |             |             |                     |         | X          |                  | if yes, describe:        |             | .1          |               | 7  |             |             |        |
| Central Heat                              |             |             |                     | X       | 9          |                  | ✓ electric gas           | nun         | nber        | or u          | nits: 2  |             |             |        |
| Other Heat                                |             |             |                     |         | ,          | ×                | if yes, describe:        |             |             | -1-           | - this control of  |             |             |        |
| Oven                                      |             |             |                     | X       |            | _                | number of ovens:         |             |             |               | ectric _/gas other:  | 1.0         |             |        |
| Fireplace & Chimney                       |             |             |                     | X       | 1.         | _                | ✓ wood ✓gas log          |             | _           | ock_          | other: wood outside / 645  | 08          | Soc         | PA US  |
| Carport                                   |             |             |                     |         | ×          |                  |                          | atta        |             |               |  |             |             |        |
| Garage                                    |             |             |                     | X       |            |                  |                          | atta        | cne         | u             | www.bou.of.wowt  |             |             |        |
| Garage Door Openers                       |             |             |                     | X       | -          |                  | number of units:         | 2           |             | N             | number of remotes:   |             |             | -      |
| Satellite Dish & Controls                 | 5           |             |                     | X       | .,         |                  | owned _/ lease           |             |             | U             | tect TV  |             |             |        |
| Security System                           |             |             |                     |         | X          |                  | owned lease              | u tro       | m           |               |  |             |             |        |

Kirby Smith Realty Group, 2017 Sun Ave Port Neches TX 77651 Kirby Smith

(TXR-1406) 07-10-23

Phone: 4097186966 Produced with Lone Wolf Transactions (zipForm Edition) 717 N Harwood St, Suite 2200, Dallas, TX 75201 www.lwolf.com

Initialed by: Buyer:

and Seller:

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12040 Craigen Rd,

| Concerning the Property at _  |                          |   |                          |                                      |                |         | Be                         | aumon              | t , 7   | T)        | 777           | 05  |          |          |
|---|--------------------------|---|--------------------------|--------------------------------------|----------------|---------|----------------------------|--------------------|---------|-----------|---------------|---|----------|----------|
| Solar Panels  |                          |   | X                        |                                      | owr            | ned     | lea                        | sed fro            | m:      |           |               |   |          |          |
| Water Heater  |                          |   |                          | electric gas other: number of units: |                |         |                            |                    |         |           |               |   |          |          |
| Water Softener  |                          | ×   | X                        | _                                    | owr            |         |                            | sed fro            |         | _         | // ** **      |   |          |          |
| Other Leased Items(s)   |                          | X   | 1                        | if                                   | yes,           | descr   | ribe:                      | LPTO               | nK      | 1         | Fax H         | NE-HKL BUZANE-UhnNIET                         | ĺχ       |          |
| Underground Lawn Sprinkler  | r                        | ✓ automatic manual areas covered Acoust The Young TR              |                          |                                      |                |         | vered Brands THE House TRO | er f               | B400    |           |               |   |          |          |
| Septic / On-Site Sewer Facil  | ity                      | if yes, attach Information About On-Site Sewer Facility (TXR-1407 |                          |                                      |                |         |                            |                    |         |           |               |   |          |          |
| Water supply provided by: Was the Property built before (If yes, complete, sign, a Roof Type: | e 197<br>ind a<br>overii | 78?<br>ttach T<br>ng on   | yes <sub>-</sub><br>XR-1 | <b>∠</b> no _<br>906 co              | _ unk<br>ncerr | nowr    | n<br>ead-                  | based <sub>l</sub> | pain    | nt        | hazar         |   | dima     | te)      |
| Are you (Seller) aware of defects, or are need of repai                                       |                          |   |                          |                                      |                |         |                            |                    |         |           |               | not in working condition, that if necessary): | at h     | ave<br>— |
| if you are aware and No (N  |                          | ou are  |                          | aware.)                              |                | or r    | malf                       | unction            | ns      |           | n any         | of the following? (Mark Y                     | es       | (Y)      |
| Item  | -                        | N   | 75000                    |                                      |                |         |                            |                    | I       | +         |               | Sidewalks                                     | <u>'</u> | _        |
| Basement  |                          | X   |                          | ors<br>undatio                       | n / S          | lob/c   | ١                          |                    |         |           | X             | Walls / Fences                                |          | X        |
| Ceilings  | -                        | X   |                          | erior Wa                             |                | iau(s)  | )                          |                    |         | _         | <u>У</u><br>У | Windows                                       |          | ×        |
| Doors<br>Driveways  |                          | <u>X</u> X  |                          | hting F                              |                | 26      |                            |                    |         | _         | ×             | Other Structural Components                   |          | ×        |
| Electrical Systems  | _                        | *   | _                        |                                      |                |         |                            |                    |         |           | ×             | Curei cu dotarar compenente                   |          |          |
| Exterior Walls  |                          | ×   |                          | Plumbing Systems Roof                |                |         |                            |                    | †       | ×         |               |   |          |          |
| If the answer to any of the ite   | ems i                    | in Secti  | on 2                     | is yes,                              | expla          | ain (a  | ttacł                      | n additio          | onal    | 1 8       | sheets        | if necessary):                                |          | _        |
| Section 3. Are you (Selle and No (N) if you are not a   |                          |   | of a                     | any of                               | the            | foll    | owir                       | ng cor             | ndit    | ic        | ns?           | (Mark Yes (Y) if you are                      | aw       | are      |
| Condition   |                          |   |                          |                                      | Υ              | N       | _                          | onditio            |         |           |               |   | Υ        | N        |
| Aluminum Wiring   |                          |   |                          |                                      |                | ×       |                            | adon G             | as      |           |               |   |          | X        |
| Asbestos Components   |                          |   |                          |                                      |                | X       |                            | ettling            |         |           |               |   |          | ×        |
| Diseased Trees: oak wilt  |                          |   |                          |                                      |                | Х       | _                          | voM lic            |         | _         |               | . 5"  |          | ×        |
| Endangered Species/Habitat  | CONT                     | Dronort   |                          |                                      |                | iheurfa | CO (                       | S                  | tructur | a or Pits | 1             | V   |          |          |

| Condition                                    | Υ | N |
|--|---|---|
| Aluminum Wiring                              |   | × |
| Asbestos Components                          |   | X |
| Diseased Trees: oak wilt                     |   | Х |
| Endangered Species/Habitat on Property       |   | X |
| Fault Lines                                  |   | X |
| Hazardous or Toxic Waste                     |   | X |
| Improper Drainage                            |   | X |
| Intermittent or Weather Springs              |   | X |
| Landfill                                     |   | × |
| Lead-Based Paint or Lead-Based Pt. Hazards   |   | X |
| Encroachments onto the Property              |   | × |
| Improvements encroaching on others' property |   | × |
| Located in Historic District                 |   | × |
| Historic Property Designation                |   | × |
| Previous Foundation Repairs                  |   | X |

| Condition                                    | Y | N           |
|--|---|-------------|
| Radon Gas                                    |   | X           |
| Settling                                     |   | ×           |
| Soil Movement                                |   | ×           |
| Subsurface Structure or Pits                 |   | X           |
| Underground Storage Tanks                    |   | ×           |
| Unplatted Easements                          |   | ×           |
| Unrecorded Easements                         |   | ×           |
| Urea-formaldehyde Insulation                 |   | ×           |
| Water Damage Not Due to a Flood Event        |   | X           |
| Wetlands on Property                         |   | ×           |
| Wood Rot                                     |   | ×           |
| Active infestation of termites or other wood |   |             |
| destroying insects (WDI)                     |   | <i>&gt;</i> |
| Previous treatment for termites or WDI       |   | ×           |
| Previous termite or WDI damage repaired      |   | X           |
| Previous Fires                               |   | ×           |

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| Concerning the Property a | erty at | Prop | the | cerning | Conce |
|---------------------------|---------|------|-----|---------|-------|
|---------------------------|---------|------|-----|---------|-------|

# 12040 Craigen Rd Beaumont , TX 77705

| Duning                                    | Doof Donoise  | T                       |                | Termite or WDI damage needing repair  | 11              |
|---|---|-------------------------|----------------|---|-----------------|
|   | Roof Repairs Other Structural Repairs   |                         | X              | Single Blockable Main Drain in Pool/Hot   | _ X             |
| rievious                                  | Other Structural Nepalls  | ,                       | x l            | Tub/Spa*  | ×               |
|   | Use of Premises for Manufacture   |                         | ×              | ras/opa   |                 |
|   | -   |                         | <u> </u>       | W. J. 189 - 1-1-1-4-2   |                 |
| If the ansv                               | wer to any of the items in Section 3 is yes   | s, expla                | ain (a         | attach additional sheets if necessary):   | -               |
|   |   |                         |                |   |                 |
|   |   |                         |                |   |                 |
| *A sing                                   | gle blockable main drain may cause a suction  | entrap                  | ment           | hazard for an individual.   |                 |
| of repair                                 | , which has not been previously d   | lisclos                 | ed i           | nent, or system in or on the Property that is in notice?yes <u>y</u> no If yes, explain (a  | need<br>ittach  |
|   |   |                         |                |   |                 |
|   |   |                         |                |   |                 |
| Section 5                                 | Are you (Seller) aware of any of  | the fo                  | llow           | ring conditions?* (Mark Yes (Y) if you are aware  | and             |
|   | nolly or partly as applicable. Mark No (  |                         |                |   |                 |
| Y N                                       |   |                         |                |   |                 |
| <del>``</del> <del>``</del> <del>``</del> | Present flood insurance coverage.   |                         |                |   |                 |
| $-\frac{\lambda}{\lambda}$                | ,   | or hre                  | ach            | of a reservoir or a controlled or emergency releas  | se of           |
|   | water from a reservoir.   | OI DIE                  | acii           | of a reservoir of a controlled of emergency release   | 30 01           |
| $^{-}$ $\overline{x}$                     | Previous flooding due to a natural flood  | d even                  | t.             |   |                 |
| <u>×</u> _                                | Previous water penetration into a struc   | cture or                | n the          | Property due to a natural flood.  |                 |
| _ x                                       | Located wholly partly in a 10 AO, AH, VE, or AR).   | 0-year                  | floc           | dplain (Special Flood Hazard Area-Zone A, V, A99,   | , AE,           |
| _ 🗴                                       | Located wholly partly in a 500-   | -year fl                | oodp           | lain (Moderate Flood Hazard Area-Zone X (shaded)).  |                 |
| _ X                                       | Located wholly partly in a floor  | dway.                   |                |   |                 |
| _ K                                       | Located wholly partly in a floor  | d pool.                 |                |   |                 |
| _ <del>X</del>                            | Located wholly partly in a rese   |                         |                |   |                 |
| If the ansv                               |   | ttach a                 | dditi          | onal sheets as necessary):  |                 |
| retal                                     | BUILDING TOOK ON & AF TOOLEE  | Bourno                  |                |   |                 |
| *#F D.                                    |   | Divis                   |                | w consult Information About Flood Hazarda /TVD 14   |                 |
|   |   | , Биуе                  | I IIIa         | y consult Information About Flood Hazards (TXR 14   | 14).            |
| •   | urposes of this notice:   | /AV : : :               |                | "   |                 |
| which                                     | is designated as Zone A, V, A99, AE, AO, A  | AH, VE,                 | , or A         | ied on the flood insurance rate map as a special flood hazard<br>AR on the map; (B) has a one percent annual chance of floo<br>clude a regulatory floodway, flood pool, or reservoir. | area,<br>oding, |
| area,                                     | rear floodplain" means any area of land that:<br>which is designated on the map as Zone X (<br>is considered to be a moderate risk of floodin | (shaded                 | iden<br>d); ar | tified on the flood insurance rate map as a moderate flood hid (B) has a two-tenths of one percent annual chance of floo  | azard<br>oding, |
| "Flood<br>subjed                          | l pool" means the area adjacent to a reservoir<br>to controlled inundation under the managem  | r that lie<br>nent of t | es ab<br>the U | ove the normal maximum operating level of the reservoir and a<br>nited States Army Corps of Engineets.  | that is         |
| (TXR-1406                                 | s) 07-10-23 Initialed by: Buyer: _  |                         | _ ,            | and Seller:, Page   | 3 of 7          |
| 373                                       | ulty Group, 2017 Sun Ave Port Neches TX 77651   |                         | dition)        | Phone: 4097186966 Fax: 12040 Cr:<br>717 N Harwood St, Suite 2200, Dallas, TX 75201 www.lwolf.com  | aigen Rd,       |

### 12040 Craigen Rd Beaumont, TX 77705

| Canaa | maina | 460                       | Dranart | 10+  |
|-------|-------|---------------------------|---------|------|
| Conce | mma   | $\Pi \Pi \hookrightarrow$ | Propert | v ai |

"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.   |
|----------------------------|--|
| provider,                  | 6. Have you (Seller) ever filed a claim for flood damage to the Property with any insurance including the National Flood Insurance Program (NFIP)?* yes 💢 no If yes, explain (attach sheets as necessary):   |
|                            |  |
| Even<br>risk, a<br>structu | • •  |
| Administ                   | 7. Have you (Seller) ever received assistance from FEMA or the U.S. Small Business tration (SBA) for flood damage to the Property?yes \( \subseteq \) no If yes, explain (attach additional necessary):  |
|                            | 3. Are you (Seller) aware of any of the following? (Mark Yes (Y) if you are aware. Mark No (N) e not aware.)   |
| ΥN                         |  |
| <u>Y N</u> <u>X</u>        | 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: Phone:  |
|                            | Fees or assessments are: \$ per and are: mandatory voluntary   |
|                            | Manager's name:  Fees or assessments are: \$ per 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:  |
| <b>-</b> ⊁                 | Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.  |
| _ X                        | Any lawsuits or other legal proceedings directly or indirectly affecting the Property. (Includes, but is not limited to: divorce, foreclosure, heirship, bankruptcy, and taxes.)   |
| _ <b>x</b>                 | Any death on the Property except for those deaths caused by: natural causes, suicide, or accident unrelated to the condition of the Property.  |
| $^{-}$ $^{\times}$         | Any condition on the Property which materially affects the health or safety of an individual.  |
| _ <b>x</b>                 | 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). |
| _ <u>x</u>                 | 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.  |
| (TXR-1406                  | S) 07-10-23 Initialed by: Buyer:, and Seller:, Page 4 of 7   |
|                            | Alty Group, 2017 Sun Ave Port Neches TX 77651 Phone: 4097186966 Fax: 12040 Craigen Rd,   |

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Kirby Smith

| Concernir          | ng the Pro                                     | pertv at  |   | 12040 Craigen<br>Beaumont , TX 7   |   |                                 |
|--------------------|--|---|---|--|---|---------------------------------|
|                    |  |   |   |  |   | 4 - 25 / 2                      |
|                    | The Pr<br>retailer.                            | operty is located   | I in a propane gas sy   | stem service area o  | wned by a propane d   | istribution system              |
| _ <del>*</del>     | Any po   | ortion of the Pr  | operty that is located  | in a groundwater   | conservation district   | or a subsidence                 |
| If the ans         | wer to any                                     | of the items in S   | ection 8 is yes, explain  | (attach additional she   | ets if necessary):  |                                 |
| 2                  |  |   |   |  |   |                                 |
|                    |  |   |   |  |   |                                 |
| s <del></del>      |  |   |   |  |   |                                 |
|                    |  |   |   |  |   | *                               |
| persons            | who reg  | gularly provide   | years, have you (S<br>inspections and w<br>ctions?yes <u>x</u> no   | vho are either lic   | ensed as inspector  | s or otherwise                  |
| Inspection         | n Date   | Туре  | Name of Inspec  | tor:   |   | No. of Pages                    |
|                    |  |   |   |  |   |                                 |
|                    |  |   |   |  |   |                                 |
|                    |  |   |   |  | 7-7-2   |                                 |
| Note               | e: A buyei                                     |   | on the above-cited repor<br>ould obtain inspections i   |  |   | he Property.                    |
| Section 1          | 0. Check                                       | any tax exempt  | ion(s) which you (Selle   | er) currently claim fo   | or the Property:  |                                 |
| <u>×</u> Ho        | omestead                                       |   | Senior Citizen<br>Agricultural  |  | Disabled  |                                 |
| Wi                 | ildlife Man                                    | agement<br>AY AS  | Agricultural  |  | Disabled Veteran<br>Unknown   |                                 |
|                    |  | •   | ()  |  | <del></del> -   | to the Duencutu                 |
|                    |  | you (Seller) ev<br>e provider? ye                               | ver filed a claim for<br>es ✔ no  | damage, other tr   | ian nood damage,  | to the Property                 |
| Section 1 example, | 2. Have<br>an insu                             | you (Seller) e<br>rance claim or                                | ever received proce<br>a settlement or awa<br>claim was made?ye   | ard in a legal proc  | eeding) and not use   |                                 |
|                    |  |   |   |  |   |                                 |
| detector           | requirem                                       | ents of Chapte  | have working smoker 766 of the Health all sheets if necessary):   | and Safety Code?   | ?* unknown no   | vith the smoke<br>yes. If no    |
| inst<br>incl       | talled in acc<br>luding perfo                  | cordance with the r<br>rmance, location, ar                     | afety Code requires one-fa<br>requirements of the buildir<br>nd power source requireme<br>own above or contact your                                       | ng code in effect in the ents. If you do not know t                                  | area in which the dwellin<br>the building code requirem                                   | g is located,                   |
| fam<br>imp<br>sell | nily who will<br>airment fron<br>er to install | reside in the dwe<br>n a licensed physici<br>smoke detectors fo | stall smoke detectors for th<br>Illing is hearing-impaired; (<br>an; and (3) within 10 days a<br>or the hearing-impaired and<br>the smoke detectors and w | (2) the buyer gives the<br>after the effective date, th<br>d specifies the locations | seller written evidence of<br>ne buyer makes a written re<br>for installation. The partie | f the hearing<br>equest for the |
| (TXR-1406          | 3) 07-10-23                                    | Initia  | led by: Buyer:  | and Seller   |   | Page 5 of 7                     |

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| Со  | ncerning the Property at  | 12040 Craigen Rd<br>Beaumont , TX 77705  |
|-----|---|--|
| inc | ler acknowledges that the statements in this notice luding the broker(s), has instructed or influenced terial information.                                      | are true to the best of Seller's belief and that no person, Seller to provide inaccurate information or to omit any  |
| Sig | nature of Seller Date   | Signature of Seller Date   |
| Pri | nted Name:  | Printed Name:  |
|     | DITIONAL NOTICES TO BUYER:  | *  |
|     | The Texas Department of Public Safety maintains determine if registered sex offenders are located   | a database that the public may search, at no cost, to<br>in certain zip code areas. To search the database, visit<br>oncerning past criminal activity in certain areas or  |
| (2) | feet of the mean high tide bordering the Gulf of M<br>Act or the Dune Protection Act (Chapter 61 or 63<br>construction certificate or dune protection permit in | seaward of the Gulf Intracoastal Waterway or within 1,000 Mexico, the Property may be subject to the Open Beaches B, Natural Resources Code, respectively) and a beachfront may be required for repairs or improvements. Contact the er construction adjacent to public beaches for more             |
| (3) | Commissioner of the Texas Department of Ir<br>requirements to obtain or continue windstorm a<br>required for repairs or improvements to the Pr                  | of this state designated as a catastrophe area by the surance, the Property may be subject to additional nd hail insurance. A certificate of compliance may be operty. For more information, please review <i>Information Certain Properties</i> (TXR 2518) and contact the Texastrance Association. |
| (4) | compatible use zones or other operations. Informational available in the most recent Air Installation Compa   | lation and may be affected by high noise or air installation ation relating to high noise and compatible use zones is atible Use Zone Study or Joint Land Use Study prepared the Internet website of the military installation and of the ation is located.  |
| (5) | If you are basing your offers on square footage items independently measured to verify any reported in  | e, measurements, or boundaries, you should have those formation.   |
| (6) | The following providers currently provide service to the  | Property:  |
|     | Electric: ENERGY  | phone #:   |
|     | Sewer: Bosco  | phone #:   |
|     | Water: W. SEFFESON O. M.W.D.  | phone #:   |
|     | Cable: Six - DiRECTV  |  |
|     | Trash: //A  |  |
|     | Natural Gas:/A  |  |
|     | Phone Company:  |  |
|     | Propane: HILL BUTANE  |  |
|     | Internet: T MoBIL   |  |
|     |   | $-u \in \mathbb{N}$  |

(TXR-1406) 07-10-23

Initialed by: Buyer: \_\_ and Seller: Page 6 of 7

12040 Craigen Rd,

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(TXR-1406) 07-10-23

Initialed by: Buyer: \_\_\_\_\_, \_\_\_\_and Seller: \_\_\_\_, Phone: 4097186966 Fax:



Date: 5/17/2023

To: Greg/Sherri Hunt 12040 Craigen Rd Beaumont, TX 77705

# **Bosco Industries** 802 LaPointe Bridge City, TX 77611

Phone: (409) 738-2007 Fax: (409) 738-2005

Contract Period -

Start Date: 7/21/2023 End Date: 7/21/2024

Permit #: 28067

Phone: (409) 284-4081 Subdivision:

Site: 12040 Craigen Rd, Beaumont, TX 77705

County: Jefferson

Installer: Bosco Industries

Agency: Jefferson County Environmental Control Dept

Mfg/Brand: Murphy Cormier General Contractor / Hoot

Installed: 7/21/2017

Bosco Industries

✓ Inspector adds chlorine

3 visits per year - one every 4 months

Map Key: ID: 4422

Email: greg@ampan.com

Warranty Expired: 7/21/2019

This is to Certify that the above named RESIDENTIAL sewage system has a RENEWED inspections agreement.

Inspections will be made once every 4 - 6 months for a surface irrigation system (spray) or a drip irrigation system during the service period by the service company named above. Inspection reports will be filed with the authorized agency. A weather proof tag or label will be attached to the controller showing the month that each inspection was completed.

17017

Items on the Inspection Report generally include aerators, filters, irrigation pump, air compressor, disinfection device, chlorine supply, "Okay" system light, spray field vegetation, probe, sprinkler or drip backwash.

The air filter will be cleaned at each visit.

This agreement does not include the cost of parts or repair calls.

We will visit your site within 72 hours of you notifying us of a system problem.

Bosco Industries is a licensed OSSF Maintenance Company #MC0000486

Bosco Industries or anyone authorized by the contractor may enter the property at reasonable time without prior notice for the purpose of the above described services.

Service technicians must be able to access your property at any time. If technician goes to your property and does not have access due to locked gates, animals, high grass/weeds etc. the visit will be counted as an inspection.

A return fee of \$45.00 will be charged to the homeowner if the technician has to return to the site to perform the routine inspection. The required yearly TSS & BOD is the responsibility of system owner. If owner would like Bosco Industries to perform TSS & BOD, additional charges will apply.

Over water usage may require additional chlorine at homeowner's expense.

| This contract is non refundable.   |
|--|
| PLEASE CHECK ONE OF THE FOLLOWING AND MAKE PAYMENT ACCORDINGLY (Refer to contract letter for amount due):  |
| Service Agreement with drip emitters, or spray field WITH one to six chlorine tablets provided per inspection and added to the system by Bosco Industries.           |
| Service Agreement for spray field with NO chlorine provided. Homeowner is responsible for maintaining chlorine supply in the system and cleaning of the chlorinator. |
| Please sign and date below. Return in provided envelope with payment. A copy will be supplied to the appropriate Regulatory Agency                                   |
| Home Owner Signature: Date: 5/30/2023  |
| Preferred Phone: 409-284-4081 Email Address: 97eg@ampan.com  |
|  |

Date:

Carl Dauterive OS0028446 / John Dauterive OS0029154



# Bosco Industries 802 LaPointe Bridge City, TX 77611

Phone: (409) 738-2007 Fax: (409) 738-2005

Date Printed: 5/17/2023

Owner Phone (409) 284-4081

To: Greg/Sherri Hunt 12040 Craigen Rd Beaumont, TX 77705

Jefferson County Environmental Control Dept

County: Jefferson

Permit: 28067

Installed: 7/21/2017

Start: 7/21/2023 End: 7/21/2024

Site: 12040 Craigen Rd, Beaumont, TX 77705

Dear Customer,

This letter is to inform you that your annual SERVICE contract for your aerobic sewer system will expire on the above date.

\$250.00

Total Fee:

Enclosed please find a new contract for your signature. Please return it to the office with your payment due 30 days prior to the above date. Also please verify your mailing address and phone number as listed above and note any corrections. The cost of the contract per year for each system is \$250 with chlorine or drip emitters, or \$200 with no chlorine added. Acceptable payment types include cash, check, or credit card (+ 3% fee). Credit card payments can be made by calling our office. Also, we would appreciate it if you would provide an alternate phone number and email address.

\*\* Two year agreement available - fee: \$465.00 with chlorine or \$370.00 no chlorine\*\*

When paying by credit card over the phone or by bank check payment, you may return your signed copy to admin@boscoindustries.com.

If you have any questions, please call at 409-738-2007. Thank you in advance for your cooperation in expediting this matter.

Sincerely,

John Dauterive

John Danterive