



APPROVED BY THE TEXAS REAL ESTATE COMMISSION (TREC)

SELLER'S DISCLOSURE OF PROPERTY CONDITION

CONCERNING THE PROPERTY AT 23077 FM 542 Oakwood TX 75855  
(Street Address and City)

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 PURCHASER MAY WISH TO OBTAIN. IT IS NOT A WARRANTY OF ANY KIND BY SELLER OR SELLER'S AGENTS.

Seller  Is  is not occupying the Property. If unoccupied, how long since Seller has occupied the Property? \_\_\_\_\_

1. The Property has the items checked below [Write Yes (Y), No (N), or Unknown (U)]:

- Range
- Dishwasher
- Washer/Dryer Hookups
- Security System
- Oven
- Trash Compactor
- Window Screens
- Fire Detection Equipment
- Smoke Detector
- Smoke Detector-Hearing Impaired
- Carbon Monoxide Alarm
- Emergency Escape Ladder(s)
- Microwave
- Disposal
- Rain Gutters
- Intercom System
- TV Antenna
- Cable TV Wiring
- Satellite Dish
- Ceiling Fan(s)
- Attic Fan(s)
- Exhaust Fan(s)
- Central A/C
- Central Heating
- Wall/Window Air Conditioning
- Plumbing System
- Septic System
- Public Sewer System
- Patio/Decking
- Outdoor Grill
- Fences
- Pool
- Sauna
- Spa
- Hot Tub
- Pool Equipment
- Pool Heater
- Automatic Lawn Sprinkler System
- Fireplace(s) & Chimney (Wood burning)
- Fireplace(s) & Chimney (Mock)
- Natural Gas Lines
- Gas Fixtures
- Liquid Propane Gas
- LP Community (Captive)
- LP on Property
- Garage:  Attached
- Not Attached
- Garage Door Opener(s):  Electronic
- Control(s)
- Water Heater:  Gas
- Electric
- Water Supply:  City
- Well
- MUD
- Co-op

Roof Type: shingles Age: \_\_\_\_\_ (approx.)

Are you (Seller) aware of any of the above items that are not in working condition, that have known defects, or that are in need of repair?  Yes  No  Unknown. If yes, then describe. (Attach additional sheets if necessary): \_\_\_\_\_

check fire equ. & smoke detectors

(Street Address and City)

2. Does the property have working smoke detectors installed in accordance with the smoke detector requirements of Chapter 766, Health and Safety Code?  Yes  No  Unknown. If the answer to this question is no or unknown, explain (Attach additional sheets if necessary):

at inspection - batteries low.

\* 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 the installation. The parties may agree who will bear the cost of installing the smoke detectors and which brand of smoke detectors to install.

3. Are you (Seller) aware of any known defects/malfunctions in any of the following? Write Yes (Y) if you are aware, write No (N) if you are not aware.

- |                                  |                             |                            |
|----------------------------------|-----------------------------|----------------------------|
| <u>N</u> Interior Walls          | <u>N</u> Ceilings           | <u>N</u> Floors            |
| <u>N</u> Exterior Walls          | <u>N</u> Doors              | <u>N</u> Windows           |
| <u>N</u> Roof                    | <u>N</u> Foundation/Slab(s) | <u>N</u> Sidewalks         |
| <u>N</u> Walls/Fences            | <u>N</u> Driveways          | <u>N</u> Intercom System   |
| <u>N</u> Plumbing/Sewers/Septics | <u>N</u> Electrical Systems | <u>N</u> Lighting Fixtures |

Other Structural Components (Describe): \_\_\_\_\_

If the answer to any of the above is yes, explain. (Attach additional sheets if necessary): \_\_\_\_\_

4. Are you (Seller) aware of any of the following conditions? Write Yes (Y) if you are aware, write No (N) if you are not aware.

- |  |   |
|--|---|
| <u>N</u> Active Termites (includes wood destroying insects)        | <u>N</u> Previous Structural or Roof Repair   |
| <input type="checkbox"/> Termite or Wood Rot Damage Needing Repair | <input type="checkbox"/> Hazardous or Toxic Waste   |
| <input type="checkbox"/> Previous Termite Damage                   | <input type="checkbox"/> Asbestos Components  |
| <input type="checkbox"/> Previous Termite Treatment                | <input type="checkbox"/> Urea-formaldehyde Insulation   |
| <input type="checkbox"/> Previous Flooding                         | <input type="checkbox"/> Radon Gas  |
| <input type="checkbox"/> Improper Drainage                         | <input type="checkbox"/> Lead Based Paint   |
| <input type="checkbox"/> Water Penetration                         | <input type="checkbox"/> Aluminum Wiring  |
| <input type="checkbox"/> Located in 100-Year Floodplain            | <input type="checkbox"/> Previous Fires   |
| <input type="checkbox"/> Present Flood Insurance Coverage          | <input type="checkbox"/> Unplatted Easements  |
| <u>N</u> Landfill, Settling, Soil Movement, Fault Lines            | <input type="checkbox"/> Subsurface Structure or Pits   |
| <u>N</u> Single Blockable Main Drain in Pool/Hot Tub/Spa*          | <input checked="" type="checkbox"/> Previous Use of Premises for Manufacture of Methamphetamine |

If the answer to any of the above is yes, explain. (Attach additional sheets if necessary): \_\_\_\_\_

\* A single blockable main drain may cause a section entrapment hazard for an individual.

5. Are you (Seller) aware of any item, equipment, or system in or on the Property that is in need of repair?  Yes (if you are aware)  No (if you are not aware) If yes, explain. (Attach additional sheets if necessary): \_\_\_\_\_

6. Are you (Seller) aware of any of the following? Write Yes (Y) if you are aware, write No (N) if you are not aware.

N Room additions, structural modifications, or other alterations or repairs made without necessary permits or not in compliance with building codes in effect at that time.

N Homeowners' Association or maintenance fees or assessments.

N Any "common area" (facilities such as pools, tennis courts, walkways, or other areas) co-owned in undivided interest with others.

N Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.

N Any lawsuits directly or indirectly affecting the Property.

N Any condition on the Property which materially affects the physical health or safety of an individual.

N 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.

N Any portion of the property that is located in a groundwater conservation district or a subsidence district.

If the answer to any of the above is yes, explain. (Attach additional sheets if necessary): \_\_\_\_\_

7. If the property is located in a costal 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 maybe required for repairs or improvements. Contact the local government with ordinance authority over construction adjacent to public beaches for more information.



Signature of Seller

Date

Signature of Seller

Date

The undersigned purchaser hereby acknowledges receipt of the foregoing notice.

Signature of Purchaser

Date

Signature of Purchaser

Date



TEXAS ASSOCIATION OF REALTORS®

**INFORMATION ABOUT ON-SITE SEWER FACILITY**

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CONCERNING THE PROPERTY AT 23077 FM 572 OAKWOOD TX 75835

**A. DESCRIPTION OF ON-SITE SEWER FACILITY ON PROPERTY:**

- (1) Type of Treatment System:  Septic Tank       Aerobic Treatment       Unknown  
 \_\_\_\_\_
- (2) Type of Distribution System: \_\_\_\_\_  Unknown
- (3) Approximate Location of Drain Field or Distribution System: \_\_\_\_\_  Unknown  
\_\_\_\_\_  
\_\_\_\_\_
- (4) Installer: \_\_\_\_\_  Unknown
- (5) Approximate Age: \_\_\_\_\_  Unknown

**B. MAINTENANCE INFORMATION:**

- (1) Is Seller aware of any maintenance contract in effect for the on-site sewer facility?       Yes  No      If yes, name of maintenance contractor: \_\_\_\_\_  
Phone: \_\_\_\_\_ contract expiration date: \_\_\_\_\_  
*(Maintenance contracts must be in effect to operate aerobic treatment and certain non-standard on-site sewer facilities.)*
- (2) Approximate date any tanks were last pumped? \_\_\_\_\_
- (3) Is Seller aware of any defect or malfunction in the on-site sewer facility?       Yes  No  
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (4) Does Seller have manufacturer or warranty information available for review?       Yes  No

**C. PLANNING MATERIALS, PERMITS, AND CONTRACTS:**

- (1) The following items concerning the on-site sewer facility are attached:  
 planning materials     permit for original installation     final inspection when OSSF was installed  
 maintenance contract     manufacturer information     warranty information     \_\_\_\_\_
- (2) "Planning materials" are the supporting materials that describe the on-site sewer facility that are submitted to the permitting authority in order to obtain a permit to install the on-site sewer facility.
- (3) It may be necessary for a buyer to have the permit to operate an on-site sewer facility transferred to the buyer.

(TAR 1407) 1-7-04      Initialed for Identification by Buyer: \_\_\_\_\_ and Seller [Signature]



CIRCLE T REALTY  
Property Data Sheet

Owner Name: BEN J. FORBSON & MATTHEW K. CARTER TRUST

Property Address: \_\_\_\_\_ Lot # \_\_\_\_\_

Price: \$724,200 Financing/Owner Terms: \_\_\_\_\_

MINERALS: Seller agrees to convey 0 % of the oil and gas minerals.  
Seller agrees to convey 100 % of other minerals.

Subject property is { } is not { } presently under an oil and gas lease or it is unknown { } if there is an oil & gas lease.  
Subject property is { } is not { } presently under a coal & lignite lease or it is unknown { } if there is a coal & lignite lease.

ACCESS: Subject property has ingress and egress via:  
{  } Public Road FM 542  
{ } Deeded Easement \_\_\_\_\_

SURVEY: { } New Survey Required  
{  } Seller shall furnish to Buyer, existing survey and plat of the property dated: \_\_\_\_\_

WATER: {  } Seller agrees to convey ownership to the water meter with account in good standing. Water furnished by ST. PAUL  
{ } All transfer fees will be paid by the buyer.  
{ } Water Well \_\_\_\_\_ known depth  
{ } Private Well \_\_\_\_\_ Undivided Interest \_\_\_\_\_

LAND: {  } Pasture 60 %  
{  } Wooded 40 %  
{ } Creeks \_\_\_\_\_ {  } Lakes \_\_\_\_\_

Soil Type \_\_\_\_\_  
Present Use: { } Residential {  } Ranching {  } Recreational/Hunting

FENCING: Perimeter Fenced  Cross Fencing  Barbed Wire \_\_\_\_\_

IMPROVEMENTS: {  } Home { } Mobile Home { } Cabin { } Storage  
\*\* DO OWNERS HAVE TITLE TO MOBILE HOMES? YES \_\_\_\_\_ NO \_\_\_\_\_  
\*\* IS MOBILE HOME ATTACHED TO PROPERTY? YES \_\_\_\_\_ NO \_\_\_\_\_

Approx. Heated/Cooled square footage: 3400  
Approx. Year Built: 1985

Total Rooms: 12 Total Bedrooms \_\_\_\_\_ Total Baths \_\_\_\_\_

Central A/C  Central Heat  Brick \_\_\_\_\_ Frame   
Breakfast \_\_\_\_\_ Dining \_\_\_\_\_ Living  Utility Room   
Pier & Beam \_\_\_\_\_ Slab  Fireplace  Water   
Electricity  Telephone  Gas \_\_\_\_\_ Septic   
Garage \_\_\_\_\_ Carport  Shed \_\_\_\_\_ Barn \_\_\_\_\_  
City Utilities: \_\_\_\_\_ Other: \_\_\_\_\_

SCHOOL DISTRICT: OAKWOOD

TAXES: County 734.57 School 1765.43 City \_\_\_\_\_

TOTAL TAXES: 2500.00

EXEMPTIONS: Ag  Homestead \_\_\_\_\_ Over 65 \_\_\_\_\_ Other \_\_\_\_\_

UTILITIES: Gas \_\_\_\_\_ Electric \_\_\_\_\_ Water \_\_\_\_\_

Electric provided by Houston County Acct # \_\_\_\_\_

NOTE: All information furnished concerning this property has been obtained from sources deemed reliable. It is believed to be correct, but no responsibility is assumed therefore; and no warranty or presentation is made as to the accuracy thereof, and the same is submitted subject to errors, omissions, prior sale or withdraw from the market without notice. All information must be verified independently by buyer.

\*  
\*  
\*

\* all but 2 acres.