

CIRCLE T REALTY
Property Data Sheet

Owner Name: JERRY & LINDA GIDDENS
Property Address: 10929 E. Hwy 294 Geary, TX
Price: 144,500.00 Financing/Owner Terms: _____

MINERALS: Seller agrees to convey _____% of the oil and gas minerals.
Seller agrees to convey _____% 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:
{X} Public Road State Hwy 294
{ } Deeded Easement _____

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

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

LAND: { } Pasture _____%
{X} Wooded _____%
{ } Creeks _____ { } Lakes _____

Soil Type SANDY LOAM
Present Use: {X} Residential { } Ranching {X} Recreational/Hunting

FENCING: Perimeter Fenced X Cross Fencing _____ Barbed Wire _____

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

Approx. Heated/Cooled square footage: 28x70' 1740' ?
Approx. Year Built: 1995 ?

Total Rooms: _____ Total Bedrooms 3 Total Baths 2 ?

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

SCHOOL DISTRICT: Slocum ISD

TAXES: County Anderson School Slocum City _____

TOTAL TAXES: Mobile Home App 450/yr.

EXEMPTIONS: Ag _____ Homestead ✓ Over 65 ✓ Other _____

UTILITIES: Gas _____ Electric ✓ Water ✓

Electric provided by Houston County Coop 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.



APPROVED BY THE TEXAS REAL ESTATE COMMISSION (TREC)

8-7-2017



SELLER'S DISCLOSURE NOTICE

CONCERNING THE PROPERTY AT 10929 E. State Hwy 294 Grapevine TX 75844
(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)):

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Range | <input checked="" type="checkbox"/> Oven | <input checked="" type="checkbox"/> Microwave |
| <input checked="" type="checkbox"/> Dishwasher | <input checked="" type="checkbox"/> Trash Compactor | <input checked="" type="checkbox"/> Disposal |
| <input checked="" type="checkbox"/> Washer/Dryer Hookups | <input checked="" type="checkbox"/> Window Screens | <input checked="" type="checkbox"/> Rain Gutters |
| <input type="checkbox"/> Security System | <input checked="" type="checkbox"/> Fire Detection Equipment | <input checked="" type="checkbox"/> Intercom System |
| | <input checked="" type="checkbox"/> Smoke Detector | |
| | <input checked="" type="checkbox"/> Smoke Detector-Hearing Impaired | |
| | <input checked="" type="checkbox"/> Carbon Monoxide Alarm | |
| | <input checked="" type="checkbox"/> Emergency Escape Ladder(s) | |
| <input type="checkbox"/> TV Antenna | <input checked="" type="checkbox"/> Cable TV Wiring | <input type="checkbox"/> Satellite Dish |
| <input checked="" type="checkbox"/> Ceiling Fan(s) | <input checked="" type="checkbox"/> Attic Fan(s) | <input checked="" type="checkbox"/> Exhaust Fan(s) |
| <input checked="" type="checkbox"/> Central A/C | <input checked="" type="checkbox"/> Central Heating | <input checked="" type="checkbox"/> Wall/Window Air Conditioning |
| <input type="checkbox"/> Plumbing System | <input checked="" type="checkbox"/> Septic System | <input checked="" type="checkbox"/> Public Sewer System |
| <input checked="" type="checkbox"/> Patio/Decking | <input checked="" type="checkbox"/> Outdoor Grill | <input checked="" type="checkbox"/> Fences |
| <input checked="" type="checkbox"/> Pool | <input checked="" type="checkbox"/> Sauna | <input checked="" type="checkbox"/> Spa <input checked="" type="checkbox"/> Hot Tub |
| <input checked="" type="checkbox"/> Pool Equipment | <input checked="" type="checkbox"/> Pool Heater | <input checked="" type="checkbox"/> Automatic Lawn Sprinkler System |
| <input checked="" type="checkbox"/> Fireplace(s) & Chimney
(Wood burning) | | <input type="checkbox"/> Fireplace(s) & Chimney
(Mock) |
| <input checked="" type="checkbox"/> Natural Gas Lines | | <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 |
| Garage: <input checked="" type="checkbox"/> Attached | <input checked="" type="checkbox"/> Not Attached | <input checked="" type="checkbox"/> Carport |
| Garage Door Opener(s): | <input checked="" type="checkbox"/> Electronic | <input checked="" type="checkbox"/> Control(s) |
| Water Heater: | <input checked="" type="checkbox"/> Gas | <input checked="" type="checkbox"/> Electric |
| Water Supply: <input checked="" type="checkbox"/> City | <input checked="" type="checkbox"/> Well <input checked="" type="checkbox"/> MUD | <input checked="" type="checkbox"/> Co-op |
| Roof Type: <u>Shingle</u> | Age: <u>1-2 yrs</u> | (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): _____

Perimeter Barbed Wire fence need to be restoring in areas

Seller's Disclosure Notice Concerning the Property at

10929 State Hwy 994 Grapevine TX
(Street Address and City) 97797017

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):

* 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.

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Interior Walls | <input checked="" type="checkbox"/> Ceilings | <input checked="" type="checkbox"/> Floors |
| <input checked="" type="checkbox"/> Exterior Walls | <input checked="" type="checkbox"/> Doors | <input checked="" type="checkbox"/> Windows |
| <input checked="" type="checkbox"/> Roof | <input type="checkbox"/> Foundation/Slab(s) | <input type="checkbox"/> Sidewalks |
| <input checked="" type="checkbox"/> Walls/Fences | <input type="checkbox"/> Driveways | <input type="checkbox"/> Intercom System |
| <input checked="" type="checkbox"/> Plumbing/Sewers/Septics | <input checked="" type="checkbox"/> Electrical Systems | <input checked="" type="checkbox"/> Lighting Fixtures |
| <input checked="" type="checkbox"/> Other Structural Components (Describe): <u>Perimeter Buried wire fence needs to be resting in areas</u> | | |

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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Active Termites (includes wood destroying insects) | <input checked="" type="checkbox"/> Previous Structural or Roof Repair |
| <input checked="" type="checkbox"/> Termite or Wood Rot Damage Needing Repair | <input checked="" type="checkbox"/> Hazardous or Toxic Waste |
| <input checked="" type="checkbox"/> Previous Termite Damage | <input checked="" type="checkbox"/> Asbestos Components |
| <input checked="" type="checkbox"/> Previous Termite Treatment | <input checked="" type="checkbox"/> Urea-formaldehyde Insulation |
| <input checked="" type="checkbox"/> Previous Flooding | <input checked="" type="checkbox"/> Radon Gas |
| <input checked="" type="checkbox"/> Improper Drainage | <input checked="" type="checkbox"/> Lead Based Paint |
| <input checked="" type="checkbox"/> Water Penetration | <input checked="" type="checkbox"/> Aluminum Wiring |
| <input checked="" type="checkbox"/> Located in 100-Year Floodplain | <input checked="" type="checkbox"/> Previous Fires |
| <input checked="" type="checkbox"/> Present Flood Insurance Coverage | <input checked="" type="checkbox"/> Unplatted Easements |
| <input checked="" type="checkbox"/> Landfill, Settling, Soil Movement, Fault Lines | <input checked="" type="checkbox"/> Subsurface Structure or Pits |
| <input checked="" type="checkbox"/> 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): Shingle roof replaced 1-2

Yours SLD

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

Seller's Disclosure Notice Concerning the Property at

10929 Skelton Hill (Street Address and City)

8-7-2017

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

Dishwasher needs to be replaced

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.

- 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.
- Homeowners' Association or maintenance fees or assessments.
- Any "common area" (facilities such as pools, tennis courts, walkways, or other areas) co-owned in undivided interest with others.
- Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.
- Any lawsuits directly or indirectly affecting the Property.
- Any condition on the Property which materially affects the physical health or safety of an individual.
- 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.
- 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 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 maybe required for repairs or improvements. Contact the local government with ordinance authority over construction adjacent to public beaches for more information.
- 8. 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.

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

USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF THE TEXAS ASSOCIATION OF REALTORS IS NOT AUTHORIZED
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CONCERNING THE PROPERTY AT 10929 E State 294 Groppland TX 75844

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

- (1) Type of Treatment System: [X] Septic Tank (2) [] Aerobic Treatment [] Unknown
(2) Type of Distribution System: Standard 24" HDPE Pipe Line [] Unknown
(3) Approximate Location of Drain Field or Distribution System: Behind house in back yard [] Unknown
(4) Installer: [] Unknown
(5) Approximate Age: 23 yrs [] Unknown

B. MAINTENANCE INFORMATION:

- (1) Is Seller aware of any maintenance contract in effect for the on-site sewer facility? [] Yes [X] 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? Never needed to be pumped
(3) Is Seller aware of any defect or malfunction in the on-site sewer facility? [] Yes [X] No If yes, explain:
(4) Does Seller have manufacturer or warranty information available for review? [] Yes [X] 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]

Information about On-Site Sewer Facility concerning 10929 E. State 294 GrapeLAND TX 75844

D. INFORMATION FROM GOVERNMENTAL AGENCIES: Pamphlets describing on-site sewer facilities are available from the Texas Agricultural Extension Service. Information in the following table was obtained from Texas Commission on Environmental Quality (TCEQ) on 10/24/2002. The table estimates daily wastewater usage rates. Actual water usage data or other methods for calculating may be used if accurate and acceptable to TCEQ.

<u>Facility</u>	<u>Usage (gal/day) without water-saving devices</u>	<u>Usage (gal/day) with water-saving devices</u>
Single family dwelling (1-2 bedrooms; less than 1,500 sf)	225	180
Single family dwelling (3 bedrooms; less than 2,500 sf)	300	240
Single family dwelling (4 bedrooms; less than 3,500 sf)	375	300
Single family dwelling (5 bedrooms; less than 4,500 sf)	450	360
Single family dwelling (6 bedrooms; less than 5,500 sf)	525	420
Mobile home, condo, or townhouse (1-2 bedroom)	225	180
Mobile home, condo, or townhouse (each add'l bedroom)	75	60

This document is not a substitute for any inspections or warranties. This document was completed to the best of Seller's knowledge and belief on the date signed. Seller and real estate agents are not experts about on-site sewer facilities. Buyer is encouraged to have the on-site sewer facility inspected by an inspector of Buyer's choice.

X [Signature] _____ 2-12-2013 X Linda C. Heddens 7/12/13
 Signature of Seller Date Signature of Seller Date

Receipt acknowledged by:

Signature of Buyer _____ Date _____ Signature of Buyer _____ Date _____