



# SELLER'S DISCLOSURE NOTICE TO BE COMPLETED BY SELLER(S)

CONCERNING THE PROPERTY AT 13895 Park Way Log Cabin Henderson  
(Street Address and City) (County)

**Note:** Section 5.008 of the Texas Property Code requires a seller of residential real property of not more than one dwelling unit to deliver a copy of the Seller's Disclosure Notice, completed to the best of the seller's belief and knowledge, to a purchaser on or before the effective date of a contract for the sale of the property. If a contract is entered into without the seller providing the notice, the buyer may terminate the contract for any reason within seven (7) days after receiving the notice. If information required by the notice is unknown to the seller, the seller may indicate that fact on the notice and thereby comply with the requirements of Section 5.008 of the Texas Property Code. This form complies with and contains additional disclosures which exceed the minimum disclosures required by the Code.

THIS STATEMENT IS A DISCLOSURE OF SELLER'S KNOWLEDGE OF THE CONDITION OF THE PROPERTY AS OF THE DATE OF THE SELLER'S SIGNATURE INDICATED BELOW. THIS STATEMENT IS NOT A WARRANTY OF ANY KIND BY THE SELLER OR LISTING BROKER AND IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE BUYER(S) MAY WISH TO OBTAIN AND A BUYER IS URGED TO OBTAIN AN INSPECTION OF THE PROPERTY BY A QUALIFIED AND LICENSED INSPECTOR. THE FOLLOWING STATEMENTS ARE REPRESENTATIONS MADE BY THE SELLER(S) BASED UPON SELLER'S KNOWLEDGE AND ARE NOT REPRESENTATIONS OF THE LISTING BROKER, ANY OTHER BROKER PARTICIPATING IN A SALE TRANSACTION, NORTH TEXAS REAL ESTATE INFORMATION SYSTEMS (THE REGIONAL MULTIPLE LISTING SERVICE), OR ANY MULTIPLE LISTING SERVICE, OR LOCAL BOARDS AND ASSOCIATIONS OF REALTORS. THE LISTING BROKER HAS RELIED UPON THE FOLLOWING INFORMATION IN DISSEMINATING INFORMATION ABOUT THE CONDITION OF THE PROPERTY.

### GENERAL INFORMATION

- The Property is currently:  Owner Occupied  Vacant  Estate  Leased  Foreclosure  
If owner occupied, for 8 years. If not owner occupied, for \_\_\_\_\_ years.  
If leased: Origination Date \_\_\_\_\_ Expiration Date \_\_\_\_\_
- Seller is the current owner of the Property and can sell the property without being joined by any other person:  
 Yes  No If "No", explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Year the property was constructed: 2001  Per Owner  Per Tax Rolls  
(If before 1978, complete, sign and attach TXR-1906 concerning lead-based paint hazards.)
- Is Seller a United States citizen?  Yes  No  
If "No", the seller is a "foreign person" as defined in the Internal Revenue Code  Yes  No
- Check any of the following exemptions which Seller claims for the Property:  
 Homestead  Senior Citizen  Disabled Veteran  Disabled  Agricultural  Wildlife Management  
 Other \_\_\_\_\_
- Has the Seller asserted any claim under any insurance policy, other than for flood damage, or against any person for any physical condition of the Property?  Yes  No If "Yes", explain:  
\_\_\_\_\_  
\_\_\_\_\_

Seller's Initials LM Seller's Initials JM Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

(6. Cont'd)

\_\_\_\_\_

7. Is there currently in force for the Property a written Builder's Warranty?  Yes  No  Unknown  
If "Yes", identify the warranty by stating:

Name of Company issuing warranty: \_\_\_\_\_  
Warranty number: \_\_\_\_\_

8. Except for manufacturer warranties, if any, on appliances, do there exist any other warranties for the Property?  
 Yes  No  Unknown If "Yes", identify the warranties:

\_\_\_\_\_

9. Are there any pending or threatened condemnation proceedings which affect the Property?  
 Yes  No  Unknown If "Yes", explain:

\_\_\_\_\_

10. Has the property been the subject of any pending or concluded litigation?  
 Yes  No  Unknown If "Yes", explain:

\_\_\_\_\_  
\_\_\_\_\_

11. Is this property in an overlay, proposed overlay, historic or conservation district that may have special restrictions?  
 Yes  No  Unknown If "Yes", explain:

\_\_\_\_\_  
\_\_\_\_\_

**INSPECTION REPORTS AND NOTICES**

12. Seller has not received any notices in the last 5 years, either oral or written, regarding the need for repair or replacement of any portion of the Property from any government agency, appraiser, mortgage lender, repair service or other, except: \_\_\_\_\_

13. List and attach any written inspection reports that Seller has received in the last 5 years that were completed by persons who regularly provide inspections and who are either licensed as inspectors or otherwise permitted by law to perform inspections.

Date of Inspection	Type of Inspection	Name of Inspector/Company	Number of pages

Explanatory comments by Seller, if any: \_\_\_\_\_

Seller's Initials LM Seller's Initials pm Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

(13. Explanatory comments by Seller cont'd)

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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 or the buyer's own choice.

**INFORMATION ABOUT EQUIPMENT AND SYSTEMS**

14. For items listed below and on the following pages, check appropriate box if items are presently in "Working Condition" and there are no known defects. Please check if item has been repaired (note date of repair) or if item is in need of repair. Check N/A for items that do not apply to Property.  
 NOTE: THIS NOTICE DOES NOT ESTABLISH WHICH ITEMS ARE TO BE CONVEYED IN A SALE OF THE PROPERTY. THE TERMS OF A CONTRACT OF SALE WILL DETERMINE WHICH ITEMS ARE TO BE CONVEYED.

EQUIPMENT & SYSTEM	IN WORKING CONDITION		HAS BEEN REPAIRED	DATE OF REPAIR Month/Year	IN NEED OF REPAIR	DESCRIPTION OF COMPLETED / NEEDED REPAIRS
	N/A	CONDITION				
Attic Fan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Automatic Lawn Sprinkler System (Front <input checked="" type="checkbox"/> Back <input checked="" type="checkbox"/> L. Side <input checked="" type="checkbox"/> R. Side <input checked="" type="checkbox"/> Fully <input checked="" type="checkbox"/> )	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Broadband Cat 5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Cable TV Wiring	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Carbon Monoxide Detector	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Ceiling Fans	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Cooktop Gas <input type="checkbox"/> Electric <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Cooling Ctrl(Gas <input type="checkbox"/> Elec <input checked="" type="checkbox"/> # units <u>1</u> )	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Dishwasher	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Disposal	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Electrical System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Emergency Escape Ladder	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Exhaust Fan(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Fire Detection Equipment Electric <input type="checkbox"/> Battery Operated <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Foundation/Slab(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Garage (Attached <input checked="" type="checkbox"/> Not Attached <input type="checkbox"/> )	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Garage Door Openers & Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	EAST DOOR REAR OPENER FIXED
Gas Fixtures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Gas Lines (Natural <input type="checkbox"/> Propane <input checked="" type="checkbox"/> )	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Heating(Ctrl Gas <input type="checkbox"/> Elec <input checked="" type="checkbox"/> #units <u>1</u> )	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Heating (Window <input type="checkbox"/> Wall <input type="checkbox"/> )	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Hot Tub	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Icemaker	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Intercom System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Jetted Bathroom Tub	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

Seller's Initials JM Seller's Initials pm Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

**EQUIPMENT & SYSTEM**

	N/A	IN WORKING CONDITION	HAS BEEN REPAIRED	DATE OF	IN NEED	DESCRIPTION OF COMPLETED / NEEDED REPAIRS
				REPAIR	OF	
				Month/Year	REPAIR	
Lighting Fixtures	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Media Wiring & Equipment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Microwave	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Outdoor Cooking Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Oven(s) (Electric <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Other <input checkbox"="" type="checkbox/&gt;)&lt;/td&gt;&lt;td&gt;&lt;input type="/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Oven-Convection	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Plumbing System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Propane Tank (Leased <input type="checkbox"/> Owned <input checkbox"="" checked="" type="checkbox/&gt;)&lt;/td&gt;&lt;td&gt;&lt;input type="/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Public Sewer & Water System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Range	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Refrigerator (Built-In)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Satellite Dish and Receiver	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Sauna	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Security System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Septic or other On-Site Sewer System (In Use <input checked="" type="checkbox"/> Abandoned <input checkbox"="" type="checkbox/&gt;)&lt;/td&gt;&lt;td&gt;&lt;input type="/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Shower Enclosure & Pan	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Smoke Detector	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Smoke Detector (hearing impaired)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Spa	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Stove(free standing)(Gas <input type="checkbox"/> Electric <input "="" checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Sump or Grinder Pump	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Swimming Pool & Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Swimming Pool Built-In Cleaning Equip.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Trash Compactor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
TV Antenna	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Water Heater (Gas <input checked="" type="checkbox"/> Electric <input checkbox"="" type="checkbox/&gt;)&lt;/td&gt;&lt;td&gt;&lt;input type="/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Water Softener	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Wells	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

**INFORMATION ABOUT STRUCTURE/OTHER**

**EQUIPMENT & SYSTEM**

	N/A	IN WORKING CONDITION	HAS BEEN REPAIRED	DATE OF	IN NEED	DESCRIPTION OF COMPLETED / NEEDED REPAIRS
				REPAIR	OF	
				Month/Year	REPAIR	
Basement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Carport (Attached <input type="checkbox"/> Not attached <input "="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Ceilings	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Doors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Drains ( French <input type="checkbox"/> Other <input checkbox"="" type="checkbox/&gt;)&lt;/td&gt;&lt;td&gt;&lt;input type="/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Driveway	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Electrical Wiring	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Fences	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Fireplaces / Chimney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Mock <input type="checkbox"/> Woodburning <input checkbox"="" type="checkbox/&gt;)&lt;/td&gt;&lt;td&gt;&lt;input type="/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
With Gas Logs <input checked="" type="checkbox"/> Other <input checkbox"="" type="checkbox/&gt;)&lt;/td&gt;&lt;td&gt;&lt;input type="/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Floor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Foundation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Garage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Lighting (Outdoor)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

SELLER'S DISCLOSURE NOTICE - (08/01/2019) | PROPERTY ADDRESS 13895 Park Way, Log Cabin, 75148  
 Ebby Halliday Real Estate, Inc. TX Lic. 257740 TX

Seller's Initials JM Seller's Initials Am

Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

**EQUIPMENT & SYSTEM**

	IN WORKING		HAS BEEN REPAIRED	DATE OF REPAIR Month/Year	IN NEED OF REPAIR	DESCRIPTION OF COMPLETED / NEEDED REPAIRS
	N/A	CONDITION				
Patio / Decking	—	<input checked="" type="checkbox"/>	—	—	—	—
Retaining Wall	—	<input checked="" type="checkbox"/>	—	—	—	—
Rain Gutters & Down Spouts	—	<input checked="" type="checkbox"/>	—	—	—	—
Roof	—	<input checked="" type="checkbox"/>	—	—	—	—
Sidewalks	—	<input checked="" type="checkbox"/>	—	—	—	—
Skylights	<input checked="" type="checkbox"/>	—	—	—	—	—
Walls (Exterior / Interior)	—	<input checked="" type="checkbox"/>	—	—	—	—
Washer/Dryer (Gas ___ Electric <input checked="" type="checkbox"/> )	—	<input checked="" type="checkbox"/>	—	—	—	—
Windows	—	<input checked="" type="checkbox"/>	—	—	—	—
Window Screens	—	<input checked="" type="checkbox"/>	—	—	—	—
Other	—	—	—	—	—	—

15. The shingles or roof covering is constructed of:  
 \_\_\_ Wood  Composition \_\_\_ Tile \_\_\_ Other \_\_\_  
 There is an overlay covering? \_\_\_ Yes \_\_\_ No  Unknown
16. The age of the shingles or roof covering: 9 years \_\_\_ Unknown
17. The electrical wiring of the Property is:  Copper \_\_\_ Aluminum \_\_\_ Unknown  
 \_\_\_ Other (Specify) \_\_\_\_\_
18. Is there an alarm system?  Yes \_\_\_ No  
 If "Yes", system is \_\_\_ Owned by Seller  Leased by Seller  
 If leased, is lease transferrable?  Yes \_\_\_ No
19. Please identify other systems, if any, of the Property which are leased and not owned by Seller:  
 \_\_\_\_\_  
 \_\_\_\_\_
20. Is there a single blockable main drain in pool/hot tub/spa? \_\_\_ Yes \_\_\_ No N/A  
 (A single blockable main drain may cause a suction entrapment hazard for an individual.)

**MISCELLANEOUS INFORMATION ABOUT PROPERTY**

21. Is the Seller aware of any of the following conditions?	YES	NO	UNKNOWN	IF YES, EXPLAIN
<b>ASBESTOS</b> Components	—	<input checked="" type="checkbox"/>	—	—
Any personal or business <b>BANKRUPTCY</b> pending which would affect the sale of the property	—	<input checked="" type="checkbox"/>	—	—
<b>CARPET</b> Stains (not visible)	—	<input checked="" type="checkbox"/>	—	—
Located on or near <b>CORP OF ENGINEER</b> Property	—	—	<input checked="" type="checkbox"/>	—
Any <b>DEATH</b> on the Property except for those deaths caused by natural causes, suicide, or accident unrelated to the condition of the Property	—	<input checked="" type="checkbox"/>	—	—
Unplatted <b>EASEMENTS</b>	—	—	<input checked="" type="checkbox"/>	—
Does the property have <b>EMERGENCY ESCAPE LADDERS</b>	—	<input checked="" type="checkbox"/>	—	—
<b>FAULT</b> lines	—	—	<input checked="" type="checkbox"/>	—
Previous <b>FIRES</b>	—	<input checked="" type="checkbox"/>	—	—
Any <b>FORECLOSURES</b> pending or threatened with respect to the Property	—	<input checked="" type="checkbox"/>	—	—
Urea formaldehyde <b>INSULATION</b>	—	—	<input checked="" type="checkbox"/>	—
<b>LANDFILL</b>	—	<input checked="" type="checkbox"/>	—	—

SELLER'S DISCLOSURE NOTICE – (08/01/2019) | PROPERTY ADDRESS 13895 Park Way, Log Cabin, 75148  
 Ebby Halliday Real Estate, Inc. TX Lic. 257740 TX

Seller's Initials JM Seller's Initials [Signature]

Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

(21. cont'd)

	<u>YES</u>	<u>NO</u>	<u>UNKNOWN</u>	<u>IF YES, EXPLAIN</u>
LEAD-BASED PAINT	—	<input checked="" type="checkbox"/>	—	_____
Tax or judgment LIENS	—	<input checked="" type="checkbox"/>	—	_____
LIQUID PROPANE GAS	<input checked="" type="checkbox"/>	—	—	_____
LP community (Captive)	—	—	—	_____
LP on Property	—	—	—	_____
PREVIOUS STRUCTURAL REPAIRS	—	<input checked="" type="checkbox"/>	—	_____
RADON GAS	—	<input checked="" type="checkbox"/>	—	_____
Are there MINERAL RIGHTS with the property?	—	<input checked="" type="checkbox"/>	—	_____
If yes, who owns them _____	—	—	—	_____
Any NOTICES of violation of deed restrictions or governmental ordinances affecting the condition or use of the Property	—	<input checked="" type="checkbox"/>	—	_____
Room additions, structural modification, or other alterations or repairs made without necessary PERMITS or not in compliance with building codes in effect at that time	—	<input checked="" type="checkbox"/>	—	_____
Above-ground impediment to swimming POOL	—	—	—	N/A
Underground impediment to swimming POOL	—	—	—	N/A
Any PROPERTY CONDITION which materially affects the physical health or safety of an individual	—	<input checked="" type="checkbox"/>	—	_____
House SETTLING	—	<input checked="" type="checkbox"/>	—	_____
SOIL movement	—	<input checked="" type="checkbox"/>	—	_____
Subsurface STRUCTURES, TANKS or pits	—	<input checked="" type="checkbox"/>	—	_____
Synthetic STUCCO	—	<input checked="" type="checkbox"/>	—	_____
Diseased TREES	—	<input checked="" type="checkbox"/>	—	_____
Hazardous or TOXIC WASTE Affecting the Property	—	<input checked="" type="checkbox"/>	—	_____
Holes in WALLS	—	<input checked="" type="checkbox"/>	—	_____
Previous WATER DAMAGE not due to a Flood Event	—	<input checked="" type="checkbox"/>	—	_____
WOOD ROT Damage Needing Repair	—	<input checked="" type="checkbox"/>	—	_____

22. Is the Seller aware of any condition on the property, not previously addressed in this disclosure statement, which in Seller's opinion is a defective condition or materially affects the physical health or safety of an individual?  
 \_\_\_ Yes  No If "Yes", explain:  
 \_\_\_\_\_  
 \_\_\_\_\_

23. If the Property is part of a regime creating a homeowner's association, state the following information:  
 Amount of dues or assessments: Monthly \$ \_\_\_\_\_ Quarterly \$ \_\_\_\_\_ Annually \$ \_\_\_\_\_  
 Payment of dues/assessments is: \_\_\_ Mandatory \_\_\_ Voluntary  
 Seller's Percentage Ownership in Common Areas: \_\_\_\_\_ %  
 Amount of Unpaid Dues or Assessments, if any: \$ \_\_\_\_\_ Optional Membership: \$ \_\_\_\_\_  
 HOA Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

24. High speed Internet available?  Yes \_\_\_ No  
 \_\_\_ Cable \_\_\_ DSL \_\_\_ Cable TV \_\_\_ Other SATELLITE & CENTRALINK

25. Is Property in a Public Improvement District (PID)? \_\_\_ Yes  No  
 Are you being taxed for these improvements? \_\_\_ Yes  No

26. The Property is currently being serviced by the following utilities (check as applicable):  
 Water  Sewer \_\_\_ Septic  Electricity \_\_\_ Gas \_\_\_ Cable  
 \_\_\_ Other SATELLITE

27. The water service to the Property is provided by (check as applicable):  
 City \_\_\_ Well \_\_\_ MUD \_\_\_ Co-op

Seller's Initials AM Seller's Initials JM Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

28. Has the Seller ever collected any insurance payments pursuant to a claim you have made for damage, other than flood damage, to the Property and then not used the proceeds to make the repairs for which the claim was submitted?  
 Yes  No
29. Are any common areas (facilities such as pools, tennis courts, walkways, or other) co-owned with others?  
 Yes  No If yes, complete the following:  
 Any optional user fees for common facilities charged:  Yes  No  
 If "Yes", describe:  
 \_\_\_\_\_  
 \_\_\_\_\_
30. Are there any outstanding IRS judgment or mechanics liens or lis pendens against the Property?  Yes  No
31. 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  Yes  No
32. Is any portion of the Property located in a groundwater conservation district or a subsidence district?  
 Yes  No  Unknown

### INFORMATION ABOUT FOUNDATION

33. Has the Seller ever obtained a written report about the condition of the foundation from any engineer, contractor, inspector, or expert?  Yes  No If "Yes", identify the report by stating the date of the report, the person or company who made the report and its content:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 If "Yes", have you given a copy of each report to the Listing Broker?  Yes  No
34. Have repairs been made to the foundation of the Property since its original construction?  Yes  No  
 If "Yes" explain what repairs you know or believe to have been made:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### INFORMATION ABOUT DRAINAGE AND FLOODING

35. Has the Seller ever obtained a written report about any improper drainage condition from any engineer, inspector, or expert?  
 Yes  No  
 If "Yes", identify the report by stating the date of the report, the person or company who made the report and its content:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 If "Yes", have you given a copy of each report to the Listing Broker?  Yes  No
36. Have repairs been made to the drainage of the Property since its original construction?  
 Yes  No  Unknown  
 If "Yes" explain what repairs you know or believe to have been made:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
37. Does the Seller know of any currently defective condition to the drainage of the Property?  Yes  No

Seller's Initials LM Seller's Initials JM

Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

(37. cont'd)

If "Yes" explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

38. 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 (if yes, attach TXR 1414)
- 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 (if yes, attach TXR 1414)
- Previous water penetration into a structure on the Property due to a natural flood event event (if yes, attach TXR 1414).
- Located \_\_\_ wholly \_\_\_ partly in a 100-year floodplain (Special Flood Hazard Area-Zone A, V A99, AE, AO, AH, VE, or AR) (if yes, attach TXR 1414).
- Located \_\_\_ wholly \_\_\_ partly in a 500-year floodplain (Moderate Flood Hazard Area-Zone X (shaded)).
- Located \_\_\_ wholly \_\_\_ partly in a floodway (if yes, attach TXR 1414).
- 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): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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.

Seller's Initials Im Seller's Initials Jm Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_



39. 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):

\*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).

40. 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):

**INFORMATION ABOUT TERMITES/WOOD DESTROYING INSECTS**

41. Has the Seller ever obtained a written report about active termites or other wood destroying insects?

Yes  No

If "Yes", identify the report by stating the date of the report, the person or company who made the report and its content: OPKIN

If "Yes", have you given a copy of each report to the Listing Broker?  Yes  No

42. Has the Property been treated for termites or other wood destroying insects?  Yes  No  Unknown

If "Yes" please state date of treatment: 2015

43. Have there been any repairs made to damage caused by termites or other wood destroying insects?

Yes  No  Unknown

If "Yes" explain what repairs you know or believe to have been made:

44. Do active termites or other wood destroying insects currently infest the Property?

Yes  No  Unknown

If "Yes" explain:

45. Is there any existing termite damage in need of repair?

Yes  No  Unknown

If "Yes" explain:

46. Is the Property currently covered by a termite policy?  Yes  No

If "Yes" identify the policy by stating:  
Name of Company issuing policy: \_\_\_\_\_  
Policy Number: \_\_\_\_\_  
Date of policy renewal: \_\_\_\_\_

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INFORMATION ABOUT ENVIRONMENTAL CONDITIONS

47. Has the Seller ever obtained a written report about treatment or repairs about any of the following environmental conditions:

- The presence or removal of asbestos
The presence of radon gas
The presence or treatment for Stachybotrys commonly known as "black mold"
The presence of lead based paint

If "Yes", identify the report by stating the date of the report, the person or company who made the report and its content:

If "Yes", have you given a copy of the Certification of Mold Remediation to the Listing Broker?

48. Is the Seller aware of previous use of premises for manufacture of Methamphetamine?

49. Is the Seller aware of the presence of any of the conditions referred to in question 45?

If "Yes" please explain:

ACKNOWLEDGEMENT BY SELLER

50 I, the Seller, state that the information in this disclosure is complete and accurate to the best of my knowledge and belief.

Seller Initial
Seller Initial

51. I, the Seller, understand the information in this statement will be disseminated by Listing Broker to prospective buyers and other brokers.

Seller Initial
Seller Initial

52. The listing agent has not instructed Seller how to answer any question in this disclosure or suggested any answer to Seller or in any way sought to influence Seller to provide any information or answers which are not absolutely true so far as the Seller knows.

Seller Initial
Seller Initial

DISCLOSURES

Municipal Utility District Disclosures

Check which Apply:

(Attach additional MUD Disclosure Notice provided by Chapter 49, Texas Water Code)

- The Property is located in a Municipal Utility District which is either:
Located in whole or in part within the corporate boundaries of a municipality. (MUD Disclosure Form #1)
Not located in whole or in part within the corporate boundaries of a municipality. (MUD Disclosure Form #2)
Located in whole or in part within the extraterritorial jurisdiction of the corporate boundaries of a municipality (MUD Disclosure Form #3)

SELLER'S DISCLOSURE NOTICE - (08/01/2019) | PROPERTY ADDRESS 13895 Park Way, Log Cabin, 75148 Page 10 of 12
Ebby Halliday Real Estate, Inc. TX Lic. 257740 TX

Seller's Initials Seller's Initials Buyer's Initials Buyer's Initials

**On-site Sewer Facility**

If Property has a septic or other On-Site Sewer Facility:  
 Attached is Information About On-Site Sewer Facility (TXR #1407)

**SMOKE DETECTION EQUIPMENT**

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

\*Chapter 766 of the Health and Safety Code requires one-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.

**CONDOMINIUM / TOWNHOME ADDITIONAL INFORMATION, IF APPLICABLE**

- Is the roof covered by the Property Owner's Association?  Yes  No
- Is the heating and cooling control regulated by the Property Owner's Association?  Yes  No
- What Services are paid for by the Property Owner's Association?  
 Water  Sewer  Septic  Electricity  Gas  Cable  
 Other \_\_\_\_\_
- The water service to the Property is provided by:  
 City  Well  MUD  Co-op
- Is Parking:  Assigned  Unassigned # of Spaces \_\_\_\_\_ Space Numbers: \_\_\_\_\_  
 Carport  Uncovered  Garage

**INDEMNIFICATION**

**SELLER HEREBY AGREES TO INDEMNIFY LISTING BROKER AND ALL OTHER BROKERS PARTICIPATING IN ANY SALE OF THE PROPERTY OF AND FROM ANY CLAIM, LOSS OR DAMAGE ARISING FROM ANY FALSE REPRESENTATION CONTAINED IN THIS DISCLOSURE STATEMENT.**

  
SELLER (SIGN AS NAME APPEARS ON TITLE) \_\_\_\_\_ DATE \_\_\_\_\_  
**Larry Michener**

  
SELLER (SIGN AS NAME APPEARS ON TITLE) \_\_\_\_\_ DATE \_\_\_\_\_  
**Phyllis Michener**

Seller's Initials LM Seller's Initials PM Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_

**NOTICES TO BUYER**

1. The Texas Department of Public Safety maintains a database that consumers may search, at no cost, to determine if registered sex offenders are located in certain zip code areas. To search the data base, visit <https://publicsite.dps.texas.gov/SexOffenderRegistry/Search>. For information concerning past criminal activity in certain areas or neighborhoods, contact the local police department.
2. Such written information in this Seller's Disclosure Notice for the Property does not constitute the representations of the Listing Broker, and other Broker participating in a sale transaction or their sales associates, employees or agents who are relying upon the written information provided by the Seller in this disclosure notice. Buyer is not relying upon any statement or representation by the Listing Broker and any other broker and their sales associates, employees, and agents concerning the condition of the property. THIS IS NOT A WARRANTY. YOU ARE ENCOURAGED TO HAVE AN INSPECTOR OF YOUR CHOICE INSPECT THE PROPERTY PRIOR TO CLOSING.
3. Buyer may be provided information about the size of the property, either of the real property or the improvements. All such information has been obtained by Broker or Seller from third parties, including information obtained from official tax records. Such information is not always accurate.
4. If Buyer bases an offer on square footage, measurements or boundaries, Buyer should have those items independently measured to verify any reported information which is often unreliable.
5. If the property is located in a coastal area that is seaward of the Gulf Inter-coastal 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.
6. 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.

7. The following providers currently provide service to the Property:
- |                         |                          |
|-------------------------|--------------------------|
| Electric: TVEC          | phone # 972 - 932 - 2214 |
| Sewer: LOG CABIN        | phone # _____            |
| Water: LOG CABIN        | phone # 903 - 489 - 2195 |
| Cable:                  | phone # _____            |
| Trash: LOG CABIN        | phone # 903 - 489 - 2195 |
| Natural Gas:            | phone # _____            |
| Phone Company:          | phone # _____            |
| Propane: NELSON PROPANE | phone # 903 - 677 - 7411 |
| Internet: CENTURY LINK  | phone # 800 - 201 - 4099 |

\*The above described waiver applies only to a hearing impaired purchaser.

The undersigned Buyer(s) hereby acknowledge(s) receipt of this Seller's Disclosure Notice for the Property.

\_\_\_\_\_  
BUYER  
  
\_\_\_\_\_  
DATE

\_\_\_\_\_  
BUYER  
  
\_\_\_\_\_  
DATE

Seller's Initials Jm Seller's Initials [Signature] Buyer's Initials \_\_\_\_\_ Buyer's Initials \_\_\_\_\_