



TEXAS ASSOCIATION OF REALTORS®
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.**

CONCERNING THE PROPERTY AT _____

THIS NOTICE IS A DISCLOSURE OF SELLER'S KNOWLEDGE OF THE CONDITION OF THE PROPERTY AS OF THE DATE SIGNED BY SELLER AND IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THE BUYER MAY WISH TO OBTAIN. IT IS NOT A WARRANTY OF ANY KIND BY SELLER, SELLER'S AGENTS, OR ANY OTHER AGENT.

Seller is is not occupying the Property. If unoccupied (by Seller), how long since Seller has occupied the Property? _____ or never occupied the Property

Section 1. The Property has the items marked below: (Mark Yes (Y), No (N), or Unknown (U).)

This notice does not establish the items to be conveyed. The contract will determine which items will & will not convey.

| Item | Y | N | U |
|----------------------------|---|---|---|
| Cable TV Wiring | | | |
| Carbon Monoxide Det. | | | |
| Ceiling Fans | | | |
| Cooktop | | | |
| Dishwasher | | | |
| Disposal | | | |
| Emergency Escape Ladder(s) | | | |
| Exhaust Fans | | | |
| Fences | | | |
| Fire Detection Equip. | | | |
| French Drain | | | |
| Gas Fixtures | | | |

| Item | Y | N | U |
|-------------------------|---|---|---|
| Gas Lines (Nat/LP) | | | |
| Hot Tub | | | |
| Intercom System | | | |
| Microwave | | | |
| Outdoor Grill | | | |
| Patio/Decking | | | |
| Plumbing System | | | |
| Pool | | | |
| Pool Equipment | | | |
| Pool Maint. Accessories | | | |
| Pool Heater | | | |
| Public Sewer System | | | |

| Item | Y | N | U |
|--|---|---|---|
| Pump: <input type="checkbox"/> sump <input type="checkbox"/> grinder | | | |
| Rain Gutters | | | |
| Range/Stove | | | |
| Roof/Attic Vents | | | |
| Sauna | | | |
| Smoke Detector | | | |
| Smoke Detector – Hearing Impaired | | | |
| Spa | | | |
| Trash Compactor | | | |
| TV Antenna | | | |
| Washer/Dryer Hookup | | | |
| Window Screens | | | |

| Item | Y | N | U | Additional Information |
|---------------------------------|---|---|---|---|
| Central A/C | | | | <input type="checkbox"/> electric <input type="checkbox"/> gas number of units: _____ |
| Evaporative Coolers | | | | number of units: _____ |
| Wall/Window AC Units | | | | number of units: _____ |
| Attic Fan(s) | | | | if yes, describe: _____ |
| Central Heat | | | | <input type="checkbox"/> electric <input type="checkbox"/> gas number of units: _____ |
| Other Heat | | | | if yes describe: _____ |
| Oven | | | | number of ovens: _____ <input type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> other: _____ |
| Fireplace & Chimney | | | | <input type="checkbox"/> wood <input type="checkbox"/> gas logs <input type="checkbox"/> mock <input type="checkbox"/> other: _____ |
| Carport | | | | <input type="checkbox"/> attached <input type="checkbox"/> not attached |
| Garage | | | | <input type="checkbox"/> attached <input type="checkbox"/> not attached |
| Garage Door Openers | | | | number of units: _____ number of remotes: _____ |
| Satellite Dish & Controls | | | | <input type="checkbox"/> owned <input type="checkbox"/> leased from _____ |
| Security System | | | | <input type="checkbox"/> owned <input type="checkbox"/> leased from _____ |
| Water Heater | | | | <input type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> other: _____ number of units: _____ |
| Water Softener | | | | <input type="checkbox"/> owned <input type="checkbox"/> leased from _____ |
| Underground Lawn Sprinkler | | | | <input type="checkbox"/> automatic <input type="checkbox"/> manual areas covered: _____ |
| Septic / On-Site Sewer Facility | | | | if yes, attach Information About On-Site Sewer Facility (TAR-1407) |

Concerning the Property at _____

Water supply provided by: city well MUD co-op unknown other: _____

Was the Property built before 1978? yes no unknown

(If yes, complete, sign, and attach TAR-1906 concerning lead-based paint hazards).

Roof Type: _____ Age: _____ (approximate)

Is there an overlay roof covering on the Property (shingles or roof covering placed over existing shingles or roof covering)? yes no unknown

Are you (Seller) aware of any of the items listed in this Section 1 that are not in working condition, that have defects, or are need of repair? yes no If yes, describe (attach additional sheets if necessary): _____

Section 2. Are you (Seller) aware of any defects or malfunctions in any of the following?: (Mark Yes (Y) if you are aware and No (N) if you are not aware.)

| Item | Y | N |
|--------------------|---|---|
| Basement | | |
| Ceilings | | |
| Doors | | |
| Driveways | | |
| Electrical Systems | | |
| Exterior Walls | | |

| Item | Y | N |
|----------------------|---|---|
| Floors | | |
| Foundation / Slab(s) | | |
| Interior Walls | | |
| Lighting Fixtures | | |
| Plumbing Systems | | |
| Roof | | |

| Item | Y | N |
|-----------------------------|---|---|
| Sidewalks | | |
| Walls / Fences | | |
| Windows | | |
| Other Structural Components | | |
| | | |
| | | |

If the answer to any of the items in Section 2 is yes, explain (attach additional sheets if necessary): _____

Section 3. Are you (Seller) aware of any of the following conditions: (Mark Yes (Y) if you are aware and No (N) if you are not aware.)

| Condition | Y | N |
|--|---|---|
| Aluminum Wiring | | |
| Asbestos Components | | |
| Diseased Trees: <input type="checkbox"/> oak wilt <input type="checkbox"/> _____ | | |
| Endangered Species/Habitat on Property | | |
| Fault Lines | | |
| Hazardous or Toxic Waste | | |
| Improper Drainage | | |
| Intermittent or Weather Springs | | |
| Landfill | | |
| Lead-Based Paint or Lead-Based Pt. Hazards | | |
| Encroachments onto the Property | | |
| Improvements encroaching on others' property | | |
| Located in 100-year Floodplain | | |
| Present Flood Insurance Coverage (If yes, attach TAR-1414) | | |
| Previous Flooding into the Structures | | |
| Previous Flooding onto the Property | | |
| Previous Fires | | |
| Previous Foundation Repairs | | |

| Condition | Y | N |
|---|---|---|
| Previous Roof Repairs | | |
| Other Structural Repairs | | |
| Radon Gas | | |
| Settling | | |
| Soil Movement | | |
| Subsurface Structure or Pits | | |
| Underground Storage Tanks | | |
| Unplatted Easements | | |
| Unrecorded Easements | | |
| Urea-formaldehyde Insulation | | |
| Water Penetration | | |
| Wetlands on Property | | |
| Wood Rot | | |
| Active infestation of termites or other wood-destroying insects (WDI) | | |
| Previous treatment for termites or WDI | | |
| Previous termite or WDI damage repaired | | |
| Termite or WDI damage needing repair | | |
| Previous Use of Premises for Manufacture of Methamphetamine | | |

Concerning the Property at _____

If the answer to any of the items in Section 3 is yes, explain (attach additional sheets if necessary): _____

Section 4. Are you (Seller) aware of any item, equipment, or system in or on the Property that is in need of repair, which has not been previously disclosed in this notice? yes no If yes, explain (attach additional sheets if necessary): _____

Section 5. Are you (Seller) aware of any of the following (Mark Yes (Y) if you are aware. Mark No (N) if you are not aware.)

Y N

Room additions, structural modifications, or other alterations or repairs made without necessary 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: _____
Manager's name: _____ Phone: _____
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: _____

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

Any lawsuits or other legal proceedings directly or indirectly affecting the Property.

Any death on the Property except for those deaths cause by: natural causes, suicide, or accident unrelated to the condition of the Property.

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

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).

If the answer to any of the items in Section 5 is yes, explain (attach additional sheets if necessary): _____

Concerning the Property at _____

Section 6. Seller has has not attached a survey of the Property.

Section 7. Within the last 4 years, have you (Seller) received any written inspection reports from persons who regularly provide inspections and who are either licensed as inspectors or otherwise permitted by law to perform inspections? yes no If yes, attach copies and complete the following:

| Inspection Date | Type | Name of Inspector | No. of Pages |
|-----------------|------|-------------------|--------------|
| | | | |
| | | | |
| | | | |
| | | | |

Note: A buyer should not rely on the above-cited reports as a reflection of the current condition of the Property. A buyer should obtain inspections from inspectors chosen by the buyer.

Section 8. Check any tax exemption(s) which you (Seller) currently claim for the Property:

- Homestead Senior Citizen Disabled
- Wildlife Management Agricultural Disabled Veteran
- Other: _____ Unknown

Section 9. Have you (Seller) ever received proceeds for a claim for damage to the Property (for example, an insurance claim or a settlement or award in a legal proceeding) and not used the proceeds to make the repairs for which the claim was made? yes no If yes, explain: _____

Section 10. Does the property have working smoke detectors installed in accordance with the smoke detector requirements of Chapter 766 of the Health and Safety Code?* unknown no yes. If no or unknown, explain. (Attach additional sheets if necessary): _____

**Chapter 766 of the Health and Safety Code requires one-family or two-family dwellings to have working smoke detectors installed in accordance with the requirements of the building code in effect in the area in which the dwelling is located, including performance, location, and power source requirements. If you do not know the building code requirements in effect in your area, you may check unknown above or contact your local building official for more information.*

Seller acknowledges that the statements in this notice are true to the best of Seller's belief and that no person, including the broker(s), has instructed or influenced Seller to provide inaccurate information or to omit any material information.

Signature of Seller Date
Printed Name: _____

Signature of Seller Date
Printed Name: _____

