



# AUSTIN/CENTRAL TEXAS REALTY INFORMATION SERVICE SELLER'S DISCLOSURE NOTICE

THIS FORM IS FURNISHED BY THE AUSTIN/CENTRAL TEXAS REALTY INFORMATION SERVICE FOR USE BY ITS PARTICIPANTS. USE OF THIS FORM BY PERSONS WHO ARE NOT PARTICIPANTS OF THE AUSTIN/CENTRAL TEXAS REALTY INFORMATION SERVICE IS NOT AUTHORIZED.

NOTE: EFFECTIVE JANUARY 1, 1994, 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, COMPLETE 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.

CONCERNING THE PROPERTY AT 17713 Mahonia Lane, Elgin TX  
(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, SELLER'S AGENTS, OR ANY OTHER AGENT.

Seller  is  is not occupying the Property. If unoccupied, how long since Seller has occupied the Property? \_\_\_\_\_  
Seller  is  is not knowledgeable of the current condition of the Property.

1. FEATURES AND EQUIPMENT TO REMAIN: (Mark all appropriate items **TO REMAIN** and their working condition)

- |   |   |  |   |
|---|---|--|---|
| <input checked="" type="checkbox"/> DISHWASHER  | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> POOL                                  | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> DRYER [E] [G] [110V] [220V]   | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> POOL ACCESSORIES/EQUIPMENT            | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> DRYER HOOKUPS [110V] [220V] [G]                                     | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> POOL HEATER [E] [G] [SOLAR]           | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> GARBAGE DISPOSAL  | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> SPA/HOT TUB                           | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> MICROWAVE   | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> SPA HEATER [E] [G] [SOLAR]            | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> OVEN [E] [G]  | <input checked="" type="checkbox"/> [Y] [N] [U] | <input checked="" type="checkbox"/> CABLE TV WIRING            | <input checked="" type="checkbox"/> [Y] [N] [U] |
| <input checked="" type="checkbox"/> RANGE [E] [G]   | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> INTERCOM SYSTEM                       | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> REFRIGERATOR(S) # <u>1</u>  | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> SATELLITE DISH SYSTEM                 | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> TRASH COMPACTOR  | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> OWNED <input type="checkbox"/> LEASED |   |
| <input checked="" type="checkbox"/> WASHER  | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> MO LEASE \$ _____ MO SVC CHG \$ _____ |   |
| <input checked="" type="checkbox"/> WASHER HOOKUPS [110V] [220V]  | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> SPECIALTY WIRING                      | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> WATER HEATER # _____ [E] [G] [SOLAR]                                | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> TV ANTENNA                            | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> WATER SOFTENER <input type="checkbox"/> OWNED <input type="checkbox"/> LEASED  | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> AUTOMATIC LAWN SPRINKLER SYSTEM       | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> MO LEASE \$ _____ MO SVC CHG \$ _____  | <input type="checkbox"/> [Y] [N] [U]            | <input checked="" type="checkbox"/> CARPORT: ATTACHED [Y] [N]  | <input checked="" type="checkbox"/> [Y] [N] [U] |
| <input checked="" type="checkbox"/> SAUNA   | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> # SPACES <u>2</u>                     |   |
| <input type="checkbox"/> FIREPLACE <input type="checkbox"/> WOOD <input type="checkbox"/> GAS # _____   | <input type="checkbox"/> [Y] [N] [U]            | <input checked="" type="checkbox"/> FENCES/FENCE WALLS         | <input checked="" type="checkbox"/> [Y] [N] [U] |
| <input type="checkbox"/> FIREPLACE LOGS/ ARTIFICIAL # _____   | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> FRENCH DRAIN                          | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> GAS FIRE STARTER # _____   | <input type="checkbox"/> [Y] [N] [U]            | <input checked="" type="checkbox"/> GARAGE: ATTACHED [Y] [N]   | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> MOCK FIREPLACE WITH CHIMNEY # _____  | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> # SPACES <u>2</u>                     |   |
| <input type="checkbox"/> ATTIC FAN(S) # _____   | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> GARAGE DOOR OPENER # _____ [E]        | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> BATHROOM HEATER # _____ [E] [G]  | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> GARAGE REMOTE CONTROL # _____         | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> CEILING FAN(S) # _____   | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> GAZEBO                                | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> CENTRAL A/C # _____ [E] [G]   | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> MAILBOX                               | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> CENTRAL HEAT # _____ [E] [G] [HP]                                   | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> OUTDOOR GRILL                         | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> EVAPORATIVE COOLER # _____   | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> PATIO/DECKING                         | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> EXHAUST FANS # <u>3</u> [E]   | <input checked="" type="checkbox"/> [Y] [N] [U] | <input checked="" type="checkbox"/> PLUMBING SYSTEM            | <input checked="" type="checkbox"/> [Y] [N] [U] |
| <input type="checkbox"/> GAS FIXTURES   | <input type="checkbox"/> [Y] [N] [U]            | <input checked="" type="checkbox"/> PUBLIC SEWER SYSTEM        | <input checked="" type="checkbox"/> [Y] [N] [U] |
| <input type="checkbox"/> GAS LINES (NAT/LP)   | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> SEPTIC SYSTEM/TANK                    | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> SPACE HEATER # _____ [E] [G]   | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> DATE PUMPED _____                     |   |
| <input type="checkbox"/> WALL/WINDOW A/C # _____  | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> PORTABLE STORAGE BLDG(S) # _____      | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> CARBON MONOXIDE DETECTOR   | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> RAIN GUTTERS                          | <input type="checkbox"/> [Y] [N] [U]            |
| <input checked="" type="checkbox"/> SMOKE DETECTORS # _____   | <input checked="" type="checkbox"/> [Y] [N] [U] | <input type="checkbox"/> SUMP PUMP                             | <input type="checkbox"/> [Y] [N] [U]            |
| <input type="checkbox"/> SECURITY SYSTEM <input type="checkbox"/> OWNED <input type="checkbox"/> LEASED | <input type="checkbox"/> [Y] [N] [U]            | <input checked="" type="checkbox"/> WINDOW SCREENS             | <input checked="" type="checkbox"/> [Y] [N] [U] |
| <input type="checkbox"/> MO LEASE \$ _____ MO SVC CHG \$ _____  | <input type="checkbox"/> [Y] [N] [U]            |  |   |
| <input type="checkbox"/> FIRE ALARMS/DETECTOR(S) # _____  | <input type="checkbox"/> [Y] [N] [U]            | <input type="checkbox"/> OTHER _____                           | <input type="checkbox"/> [Y] [N] [U]            |

Explain all No [N] or Unknown [U] answers: \_\_\_\_\_

The following Property is to be excluded from the sale: \_\_\_\_\_

Seller's Disclosure Notice concerning: 17713 Mabonica Ln Elgin Tx 78621  
(Property Address)

2. SERVICES TO THIS PROPERTY PROVIDED BY: (Fill in names of suppliers)

WATER supply: Travis County Mud  
 CITY  WELL  PRIVATE  MUD  
 WCID  COOP  OTHER  
WASTEWATER: Travis County Mud  
 CITY  COOP  MUD  OTHER  
 SEPTIC  TAR 1407 (Information About On-Site Sewer Facility)  
ELECTRICITY: Bluebonnet Electric  
CABLE TV: Time Warner Cable  
SOLID WASTE PROVIDER: Travis County Mud

GAS supply: Centerpoint Energy  
 UTILITY  TANK  BOTTLE  COOP  
TANK/BOTTLE MO. LEASE \$  
HOMEOWNER'S ASSOC: Elgin Creek Homeowners Assn  
MONTHLY HOMEOWNER'S FEE: \$ 20  
MANAGER'S NAME: R. Cameron Scott  
TELEPHONE: 512 219 1927  
HOA Transfer Fee \$  
HOA Transfer Fee Paid by  Seller  Buyer  Negotiable  
 SELLER TO OBTAIN HOA INFORMATION  
DiDdiard Management Co. ?

3. ARE YOU (SELLER) AWARE OF ANY KNOWN DEFECTS/MALFUNCTIONS IN ANY OF THE FOLLOWING? (Mark Yes [Y] if you are aware, mark No [N] if you are not aware.)

BASEMENT	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	FIREPLACE(S)	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	ROOF:	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
CEILINGS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	FLOORS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	ROOF APPROX AGE <u>6 mos.</u>	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
DOORS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	FOUNDATION/SLAB(S)	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	ROOF TYPE <u>Comp Shingles</u>	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
DRIVEWAY(S)	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	INTERIOR WALLS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	SIDEWALKS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
ELECTRICAL SYSTEM(S)	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	LIGHTING FIXTURES	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	SWIMMING POOL	<u>na</u> <input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
EXTERIOR WALLS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	PLUMBING/SEWER/SEPTIC	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	WINDOWS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]

OTHER STRUCTURAL COMPONENTS (DESCRIBE): \_\_\_\_\_

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

4. ARE YOU (SELLER) AWARE OF ANY OF THE FOLLOWING? (Mark Yes [Y] if you are aware, mark No [N] if you are not aware.)

ACTIVE TERMITES	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	PREVIOUS FLOODING OF LAND	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
WOOD DESTROYING INSECTS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	IMPROPER DRAINAGE	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
TERMITE OR WOOD ROT NEEDING REPAIR	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	LOCATED IN 100 YEAR FLOOD PLAIN	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
PREVIOUS TERMITE DAMAGE	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	PRESENT FLOOD INSURANCE COVERAGE	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
PREVIOUS TERMITE TREATMENT	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	SETTLING OR SOIL MOVEMENT	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
WATER PENETRATION OF BLDG	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	FAULTLINES OR LANDFILL	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
PREVIOUS STRUCTURAL OR ROOF REPAIR	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	SUBSURFACE STRUCTURE(S) /PIT(S)	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
ASBESTOS COMPONENTS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	SPRING(S): UNDERGROUND	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
UREA FORMALDEHYDE INSULATION	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	SPRING(S): INTERMITTENT/WEATHER	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
RADON GAS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	UNDERGROUND STORAGE TANKS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
LEAD BASED PAINT	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	ENDANGERED SPECIES/HABITAT ON PROPERTY	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
ALUMINUM WIRING	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	HAZARDOUS OR TOXIC WASTE	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
PREVIOUS FIRES	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	DISEASED TREES	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
FOUNDATION REPAIR	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	FENCE LINES NOT CORRESPONDING TO PROPERTY BOUNDARIES	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
PREVIOUS FLOODING OF BUILDING(S)	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]	WETLANDS ON PROPERTY	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]
		UNPLATTED EASEMENTS	<input checked="" type="checkbox"/> [Y] <input checked="" type="checkbox"/> [N]

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

5. 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 (if you are aware)  No (if you are not aware). If yes, explain (attach additional sheets as necessary).

Seller's Disclosure Notice concerning: 17713 mahonia Ln Elgin Tx 78621  
(Property Address)

6. 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]  Room additions, structural modifications, or other alterations or repairs made without necessary permits or not in compliance with building code in effect at that time?
- [Y]  Homeowners' Association or maintenance fees or assessments?
- [Y]  Any "common area" facilities (such as pools, tennis courts, walkways, or other areas) co-owned in undivided interest with others?
- [Y]  Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property?
- [Y]  Any lawsuits or other legal proceedings directly or indirectly affecting the Property?
- [Y]  Any condition of the Property which materially affects the physical health or safety of an individual?
- [Y]  Features of the Property shared in common with adjoining landowners, such as walls, fences and driveways, whose use or responsibility for maintenance may have an effect on the subject Property?
- [Y]  Any encroachments, easements or similar matters that may affect your interest in the subject Property?
- [Y]  Land fill (compacted or otherwise) on the Property or any portion thereof?
- [Y]  Any settling from any cause or slippage, sliding or other soil problems?
- [Y]  Major damage to the Property or any of the structures from fire, earthquake, floods or landslides?
- [Y]  Any future highway, freeway, air traffic patterns which affects this real Property?
- [Y]  Any future annexation plans which affect this real Property?
- [Y]  Within the previous 12 months, has there been an equity loan on this Property? If Yes, date \_\_\_/\_\_\_/\_\_\_
- [Y]  Flood Insurance on Property?
- [Y]  Previous FEMA claim paid?
- [Y]  Death on the Property other than death caused by: natural causes, suicide, or accident unrelated to the Property's condition.
- [Y]  Was the dwelling built before 1978?  Unknown
- [Y]  Any repairs or treatment, other than routine maintenance, made to the Property to eliminate environmental hazards such as asbestos, radon, lead-based paint, urea formaldehyde, or mold?
- [Y]  Other items of concern? \_\_\_\_\_

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

7. CHECK ANY TAX EXEMPTION(S) WHICH YOU (SELLER) CURRENTLY CLAIM FOR THE PROPERTY:

- Homestead
- Disabled
- Agricultural
- Over 65
- Disabled Veteran
- Unknown
- None
- Other \_\_\_\_\_

8. 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 list the following:

Date of Inspection	Name of Document	Author of Report	Number of Pages

- IS A PREVIOUS SELLER'S DISCLOSURE AVAILABLE?  Yes  No. If so, please attach.
- IS A CURRENT SURVEY AVAILABLE?  Yes  No. If so, please attach.
- HAVE ANY CHANGES BEEN MADE THAT WOULD AFFECT THE SURVEY?  Yes  No

9. HAVE YOU (SELLER) MADE, OR HAD MADE, MAJOR REPAIRS OR IMPROVEMENTS (COSTING \$500 OR MORE) TO THE PROPERTY DURING THE TIME YOU HAVE OWNED THE PROPERTY?  Yes  No. ARE YOU AWARE OF MAJOR REPAIRS OR IMPROVEMENTS MADE BY PREVIOUS OWNERS?  Yes  No. If yes to either, please explain.

*n/a*

Seller's Disclosure Notice concerning: 17713 Mahonia Ln Elgin Tx 78621  
(Property Address)

10. SELLER HAS NOT RECEIVED ANY NOTICES, EITHER ORAL OR WRITTEN, REGARDING THE NEED FOR REPAIR OR REPLACEMENT OF ANY PORTION OF THE PROPERTY FROM ANY GOVERNMENTAL AGENCY, APPRAISER, INSPECTOR, MORTGAGE LENDER, REPAIR SERVICE OR OTHERS, EXCEPT:

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

Rebecca Burlein  
Seller's Signature

\_\_\_\_\_  
Seller's Signature

18 Dec 2004  
Date

\_\_\_\_\_  
Date

THE UNDERSIGNED BUYER HEREBY ACKNOWLEDGES RECEIPT OF A COPY OF THIS STATEMENT.

NOTICES TO BUYER:

LISTING BROKER, Glennberry Associates AND OTHER BROKER \_\_\_\_\_, ADVISE YOU THAT SELLER'S DISCLOSURE NOTICE WAS COMPLETED BY SELLER, AS OF THE DATE SIGNED. THE LISTING AND OTHER BROKERS HAVE RELIED ON THIS NOTICE AS TRUE AND CORRECT AND HAVE NO REASON TO BELIEVE IT TO BE FALSE OR INACCURATE.

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 DATABASE, VISIT WWW.TXDPS.STATE.TX.US. FOR INFORMATION CONCERNING PAST CRIMINAL ACTIVITY IN CERTAIN AREAS OR NEIGHBORHOODS, CONTACT THE LOCAL POLICE DEPARTMENT.

YOU ARE ENCOURAGED TO HAVE AN INSPECTOR OF YOUR CHOICE INSPECT THE PROPERTY PRIOR TO CLOSING. ALL INSPECTION REPORTS FURNISHED BY THE SELLER ARE PROVIDED FOR INFORMATION PURPOSES ONLY AND ARE NOT INTENDED TO BE A SUBSTITUTE FOR AN INSPECTION PERFORMED BY AN INSPECTOR OF BUYER'S CHOICE.

THE DISCLOSURE NOTICE CONTAINS NO ESTIMATE OF THE NUMBER OF SQUARE FEET OF SPACE WITHIN THE RESIDENCE AND BROKERS MAKE NO REPRESENTATIONS REGARDING SUCH AREA. IF SQUARE FOOTAGE IS IMPORTANT TO BUYER, BUYER SHOULD HAVE IT MEASURED BY A PROFESSIONAL.

Rebecca Burlein  
Buyer's Signature

\_\_\_\_\_  
Buyer's Signature

18 Dec 2004  
Date

\_\_\_\_\_  
Date

[NOTE: This form furnished by the AUSTIN/CENTRAL TEXAS REALTY INFORMATION SERVICE for the convenience of its Participants.]