



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.**

**3641 Cottonwood Springs Dr
The Colony, TX 75056**

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? Nov. 6, 2024 (approximate date) 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	<input checked="" type="checkbox"/>		
Carbon Monoxide Det.			<input checked="" type="checkbox"/>
Ceiling Fans	<input checked="" type="checkbox"/>		
Cooktop	<input checked="" type="checkbox"/>		
Dishwasher	<input checked="" type="checkbox"/>		
Disposal	<input checked="" type="checkbox"/>		
Emergency Escape Ladder(s)		<input checked="" type="checkbox"/>	
Exhaust Fans	<input checked="" type="checkbox"/>		
Fences	<input checked="" type="checkbox"/>		
Fire Detection Equip.		<input checked="" type="checkbox"/>	
French Drain		<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		<input checked="" type="checkbox"/>	

Item	Y	N	U
Natural Gas Lines	<input checked="" type="checkbox"/>		
Fuel Gas Piping:			
-Black Iron Pipe	<input checked="" type="checkbox"/>		
-Copper			
-Corrugated Stainless Steel Tubing			
Hot Tub		<input checked="" type="checkbox"/>	
Intercom System		<input checked="" type="checkbox"/>	
Microwave	<input checked="" type="checkbox"/>		
Outdoor Grill		<input checked="" type="checkbox"/>	
Patio/Decking	<input checked="" type="checkbox"/>		
Plumbing System	<input checked="" type="checkbox"/>		
Pool		<input checked="" type="checkbox"/>	
Pool Equipment		<input checked="" type="checkbox"/>	
Pool Maint. Accessories		<input checked="" type="checkbox"/>	
Pool Heater		<input checked="" type="checkbox"/>	

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

Item	Y	N	U	Additional Information
Central A/C	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> electric <input type="checkbox"/> gas number of units: <u>2</u>
Evaporative Coolers		<input checked="" type="checkbox"/>		number of units: <u>0</u>
Wall/Window AC Units		<input checked="" type="checkbox"/>		number of units: <u>0</u>
Attic Fan(s)		<input checked="" type="checkbox"/>		if yes, describe: _____
Central Heat	<input checked="" type="checkbox"/>			<input type="checkbox"/> electric <input checked="" type="checkbox"/> gas number of units: _____
Other Heat		<input checked="" type="checkbox"/>		if yes, describe: _____
Oven	<input checked="" type="checkbox"/>			number of ovens: <u>1</u> <input checked="" type="checkbox"/> electric <input type="checkbox"/> gas other: _____
Fireplace & Chimney	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> wood <input checked="" type="checkbox"/> gas logs <input type="checkbox"/> mock other: _____
Carport		<input checked="" type="checkbox"/>		<input type="checkbox"/> attached <input type="checkbox"/> not attached
Garage	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> attached <input type="checkbox"/> not attached
Garage Door Openers	<input checked="" type="checkbox"/>			number of units: <u>1</u> number of remotes: <u>2</u>
Satellite Dish & Controls	<input checked="" type="checkbox"/>			<input type="checkbox"/> owned <input type="checkbox"/> leased from: _____
Security System		<input checked="" type="checkbox"/>		<input type="checkbox"/> owned <input type="checkbox"/> leased from: _____

(TXR-1406) 07-10-23

Initialed by: Buyer: _____ and Seller: JAM

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**3641 Cottonwood Springs Dr
The Colony, TX 75056**

Concerning the Property at _____

Solar Panels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	owned _____ leased from: _____
Water Heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	electric <input checked="" type="checkbox"/> gas _____ other: _____ number of units: <u>1</u>
Water Softener	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	owned _____ leased from: _____
Other Leased Items(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	if yes, describe: _____
Underground Lawn Sprinkler	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> automatic _____ manual _____ areas covered _____
Septic / On-Site Sewer Facility	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	if yes, attach Information About On-Site Sewer Facility (TXR-1407)

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 TXR-1906 concerning lead-based paint hazards).

Roof Type: Composite Age: less than 6 years (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	Item	Y	N	Item	Y	N
Basement	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Floors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sidewalks	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ceilings	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Foundation / Slab(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Walls / Fences	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Doors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Interior Walls	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Windows	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Driveways	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lighting Fixtures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other Structural Components	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Electrical Systems	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plumbing Systems	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Exterior Walls	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Roof	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

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	Condition	Y	N
Aluminum Wiring	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Radon Gas	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Asbestos Components	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Settling	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diseased Trees: <u>oak wilt</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Soil Movement	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Endangered Species/Habitat on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Subsurface Structure or Pits	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fault Lines	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Underground Storage Tanks	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hazardous or Toxic Waste	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Unplatted Easements	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Improper Drainage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Unrecorded Easements	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Intermittent or Weather Springs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Urea-formaldehyde Insulation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Landfill	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Damage Not Due to a Flood Event	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lead-Based Paint or Lead-Based Pt. Hazards	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wetlands on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Encroachments onto the Property	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wood Rot	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Improvements encroaching on others' property	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Active infestation of termites or other wood destroying insects (WDI)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Located in Historic District	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Previous treatment for termites or WDI	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Historic Property Designation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Previous termite or WDI damage repaired	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Previous Foundation Repairs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Previous Fires	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(TXR-1406) 07-10-23

Initialed by: Buyer: _____, _____ and Seller: JAM

3641 Cottonwood Springs Dr
The Colony, TX 75056

Concerning the Property at _____

Previous Roof Repairs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Previous Other Structural Repairs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Previous Use of Premises for Manufacture of Methamphetamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Termite or WDI damage needing repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Single Blockable Main Drain in Pool/Hot Tub/Spa*	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If the answer to any of the items in Section 3 is yes, explain (attach additional sheets if necessary): Foundation repaired on garage side in 2014. Roof replaced ^{within} the past 6 years.

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

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 conditions?* (Mark Yes (Y) if you are aware and check wholly or partly as applicable. Mark No (N) if you are not aware.)

- | | | |
|-------------------------------------|--------------------------|---|
| <u>Y</u> | <u>N</u> | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Present flood insurance coverage. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Previous flooding due to a failure or breach of a reservoir or a controlled or emergency release of water from a reservoir. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Previous flooding due to a natural flood event. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Previous water penetration into a structure on the Property due to a natural flood. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Located <input type="checkbox"/> wholly <input type="checkbox"/> partly in a 100-year floodplain (Special Flood Hazard Area-Zone A, V, A99, AE, AO, AH, VE, or AR). |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Located <input type="checkbox"/> wholly <input type="checkbox"/> partly in a 500-year floodplain (Moderate Flood Hazard Area-Zone X (shaded)). |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Located <input type="checkbox"/> wholly <input type="checkbox"/> partly in a floodway. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Located <input type="checkbox"/> wholly <input type="checkbox"/> partly in a flood pool. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Located <input type="checkbox"/> wholly <input type="checkbox"/> partly in a reservoir. |

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

***If Buyer is concerned about these matters, Buyer may consult Information About Flood Hazards (TXR 1414).**

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.

(TXR-1406) 07-10-23

Initialed by: Buyer: _____, _____ and Seller: Jem, _____

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Concerning the Property at _____

"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.

Section 6. 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).

Section 7. 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): _____

Section 8. 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, with unresolved 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: Stewart Peninsula HOA

Manager's name: Texas Star Community Mgmt Phone: 469-899-1000

Fees or assessments are: \$ 310 per 1/2 year and are: mandatory voluntary (LKM)

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. (Includes, but is not limited to: divorce, foreclosure, heirship, bankruptcy, and taxes.)

Any death on the Property except for those deaths caused 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).

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.

(TXR-1406) 07-10-23 Initialed by: Buyer: _____, _____ and Seller: JLM, _____ Page 4 of 7

3641 Cottonwood Springs Dr
The Colony, TX 75056

Concerning the Property at _____

The Property is located in a propane gas system service area owned by a propane distribution system retailer.

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

If the answer to any of the items in Section 8 is yes, explain (attach additional sheets if necessary): _____

Section 9. 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 10. 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 11. Have you (Seller) ever filed a claim for damage, other than flood damage, to the Property with any insurance provider? yes no

Section 12. 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 13. 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.*

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.

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Concerning the Property at _____

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.

*The Jack Tidwell Revocable Trust
Leah K Mann as Trustee*

Signature of Seller

4/29/24 Date

Signature of Seller

Date

Printed Name: *The Jack Tidwell Revocable Trust* Printed Name: _____

Leah K Mann as Trustee

ADDITIONAL NOTICES TO BUYER:

- (1) The Texas Department of Public Safety maintains a database that the public may search, at no cost, to determine if registered sex offenders are located in certain zip code areas. To search the database, visit <https://publicsite.dps.texas.gov>. For information concerning past criminal activity in certain areas or neighborhoods, contact the local police department.
- (2) 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 may be required for repairs or improvements. Contact the local government with ordinance authority over construction adjacent to public beaches for more information.
- (3) If the Property is located in a seacoast territory of this state designated as a catastrophe area by the Commissioner of the Texas Department of Insurance, the Property may be subject to additional requirements to obtain or continue windstorm and hail insurance. A certificate of compliance may be required for repairs or improvements to the Property. For more information, please review *Information Regarding Windstorm and Hail Insurance for Certain Properties* (TXR 2518) and contact the Texas Department of Insurance or the Texas Windstorm Insurance Association.
- (4) 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.
- (5) If you are basing your offers on square footage, measurements, or boundaries, you should have those items independently measured to verify any reported information.
- (6) The following providers currently provide service to the Property:

Electric: *Coserv*
 Sewer: *The City of The Colony*
 Water: *The City of the Colony*
 Cable: *Spectrum*
 Trash: *The City of the Colony*
 Natural Gas: *Atmos*
 Phone Company: _____
 Propane: _____
 Internet: *Spectrum*

phone #: _____
 phone #: _____
 phone #: _____
 phone #: _____
 phone #: _____
 phone #: _____
 phone #: _____
 phone #: _____

**3641 Cottonwood Springs Dr
The Colony, TX 75056**

Concerning the Property at _____

(7) This Seller's Disclosure Notice was completed by Seller as of the date signed. The brokers have relied on this notice as true and correct and have no reason to believe it to be false or inaccurate. YOU ARE ENCOURAGED TO HAVE AN INSPECTOR OF YOUR CHOICE INSPECT THE PROPERTY.

The undersigned Buyer acknowledges receipt of the foregoing notice.

_____ Signature of Buyer	_____ Date	_____ Signature of Buyer	_____ Date
_____ Printed Name:	_____ Printed Name:	_____ Printed Name:	_____ Printed Name:

HOMESAVERS FOUNDATION REPAIR, INC

1-877-590-2488



WORK AGREEMENT/CONTRACT

SLAB

Contract Date: 9-10-14

Job Date: _____

Dallas
15950 Dallas Pkwy, Ste. 400
Dallas, TX 75248
214-828-7150

Fort Worth
5601 Bridge St, Ste. 300
Ft. Worth, TX 76112
817-590-2488

Houston
5100 Westheimer Rd, Ste. 200
Houston, TX 77056
713-306-4070

San Antonio
9901 IH, 10 West, Ste. 800
San Antonio, TX 78230
210-240-2232

Name of All Owners: DIANE TIDWELL
Street: 3641 COTTONWOOD SPRINGS City: THE COLONY, TX Zip Code: 75056
Best Contact Phone #: 9726238496 Alternative #: _____
Email: _____
This property is: my/our Residence [checked] Rental _____ Commercial _____
Please provide your mailing/physical address: _____

WE HEREBY PROPOSE TO FURNISH ALL MATERIALS AND PERFORM ALL LABOR NECESSARY FOR THE COMPLETION OF FOUNDATION REPAIR. SPECIFICATIONS ARE AS FOLLOWS:

11 TOTAL # OF PIERS > JACK TO REFUSAL > LEVEL PERIMETER SLAB IN AREA OF PIERS
2 ARE INTERIOR > BERM DIRT ALONG HOME > REPAIR REMAINING MORTAR CRACKS, (COLOR MATCH AS CLOSE AS POSSIBLE)
9 ARE EXTERIOR > CLEAN UP WHEN DONE > LIFETIME TRANSFERABLE WARRANTY*
2 # OF BREAKOUTS
Garage (Area of Concern)

I understand and accept this work agreement / contract. I understand if I choose to have only the part of the home that needs foundation repair done currently and not the entire home, in the future other parts of my home could shift and I could need more foundation repair. I understand this future work is not covered under warranty or is it Homesavers Foundation Repair, Inc.'s responsibility and that I am fully responsible for having it repaired at my cost.

Work recommended but declined by Homeowner: _____

INITIAL
DTS INITIAL HERE

ALL WORKMANSHIP GUARANTEED

Table with columns for Selling Price, Payment Method, Total Price, Amount Financed, etc. Includes handwritten values like \$410,000 and \$3,400.00.

*If CASH, the terms are as follows: 100% upon completion of the job. Jobs over \$4000.00; half at completion of first day and balance at completion of job. Any alteration or deviation from above specifications involving extra costs will be executed only upon the written orders and will become an extra charge over and above the estimate.

NOTICE OF RIGHT OF RECISSION: You, the owner, may cancel this transaction at any time before midnight of the third business day after the date of this transaction. The cancellation must be made in writing and mailed to: 15950 Dallas Pkwy, Ste. 400, Dallas, TX 75248.

IMPORTANT-READ BEFORE SIGNING: Homesavers Foundation Repair, Inc. uses care in raising your home. However, we are not responsible for any residual damage done as a result of our leveling efforts. Residual damage includes, but is not limited to, damage to sheetrock, flooring, joists, ceiling, brick, walls, roofs, plumbing, sprinkler wires, electric wires, wires, shrubbery, and lawns.

I HAVE READ AND UNDERSTAND ALL OF THE ABOVE: INITIAL HERE: DTS INITIAL HERE

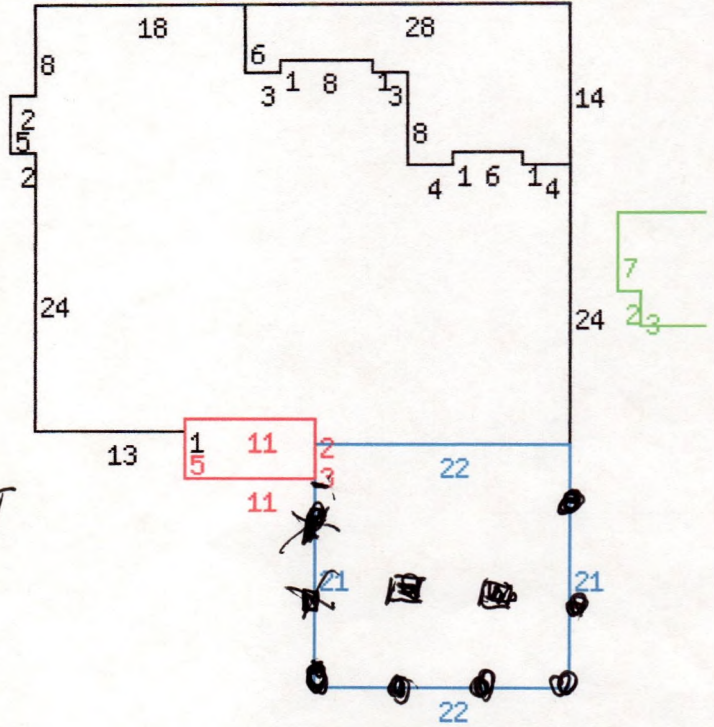
ACCEPTANCE OF PROPOSAL/CONTRACT-IMPORTANT READ BEFORE SIGNING

By signing this work agreement / contract the above prices, specifications and conditions are satisfactory and are hereby accepted. By signing this work agreement / contract, I am authorizing Homesavers Foundation Repair, Inc. to do the work as specified above in accordance with drawing and specifications above.

Customer Signature: Diane Tidwell Date: 9-10-14 SIGN HERE Customer Signature Date


Improvement Sketch

9-10-14
APPROX
PIER
PLACEMENT



Sketch Image Copyright 2014 TaxNetUSA, Inc. Rendered by Digi

3541 COTTONWOOD SPRINGS
THIS COLONY, TX
75056



Homesavers Foundation Repair

Frank Spiro

District Manager

15950 Dallas Parkway

Suite 400

Dallas, TX 75248

Cell: 214-682-5216

Office: 214-828-7150

Toll Free: 1-877-590-2488

Fax: 214-853-5515

www.dallashsfoundationrepair.com

Vandergriff Plumbing • 972-636-1701

Hydrostatic Sanitary Sewer Test and Static Potable Water Test Report

Customer Name: Diana Tidwell VP Job#: Homesaver
Job Site: 3641 Cottonwood Springs Dr Scheduled Date: 9-22-14
The Colony, TX Scheduled Time: PM
Telephone: 972-623-8496 Mapsco: _____
Home: _____ Office: _____ Other: _____

Hydrostatic Test of Sanitary Sewer Pipes

A Hydrostatic test is performed to determine whether a leak/s exist somewhere on the sewer system under floor level and within the perimeter beams of the foundation. An inflatable test ball is inserted into the main sewer line directly under the perimeter beam and is inflated to block off the system. The entire system is filled with water to the floor level and monitored for loss.

Test Date: 9-22-14 Test Time of Day: PM Foundation Type: Slab P&B

Clean Outs: Double Single to house Single to city 2-Way • Cast Iron PVC • Front Back Side (L R) • Ft. from house: 2'
Were clean outs installed? Yes No • What type? Double 2-Way Other: _____

Sewer Line: PVC Clay • Visible condition of pipe: Excellent Fair Poor Rotted Cracked • Depth @ C.O. 4'

Sewer System:
Number of exit points from foundation: 1 • Number of bathrooms downstairs: _____ • Total number of fixtures: _____

Test Observation Site: Commode Shower Tub Other C/O • Bathroom location: Master Hall Half Shared

Cumulative Inches of Water Lost in Riser:
1 minute _____ inches and _____ dropping _____ holding. 10 minute 0 inches and _____ dropping 0 holding.
2 minute _____ inches and _____ dropping _____ holding. 20 minute _____ inches and _____ dropping _____ holding.
5 minute _____ inches and _____ dropping _____ holding. 30 minute _____ inches and _____ dropping _____ holding.

Test Results: Does the sewer system leak? Yes No

Static Test of Potable Water Supply Pipes

A Static test is performed to determine whether a leak/s exist somewhere on the domestic potable water system. The test is performed by first checking and isolating all fixtures above the slab that drip or leak. A pressure gauge is attached to one of the water outlets, and the potable water system is isolated from city main at the meter cut off. The gauge is monitored for pressure loss.

Test Date: 9-22-14 Test Time of Day: PM

Type of Water Pipe: Copper Galvanized PVC Piping located: Under the Slab Pier & Beam Overhead
Pressure Gauge Attached at the Following Hose Bibb: Front Back Right Side Left Side Washing Machine

Water Shut Off at: Meter Valve Other _____

Cumulative Pressure Loss at Times Indicated:
1 minute _____ PSI and _____ dropping _____ holding. 10 minute 0 PSI and _____ dropping 0 holding.
2 minute _____ PSI and _____ dropping _____ holding. 20 minute _____ PSI and _____ dropping _____ holding.
5 minute _____ PSI and _____ dropping _____ holding. 30 minute _____ PSI and _____ dropping _____ holding.

Total Length of Test: 10 minutes

If pressure drops, can water be separated between house and yard? Yes No Comments _____

Op Location is There: Sprinkler System Humidifier T&P Valve Can sprinkler system be isolated from house: Yes No

Test Results: Are Water Lines Leaking? Yes No

Comments: NO leaks on plumbing system

M-39970