



SELLER'S DISCLOSURE NOTICE

©Texas Association of REALTORS®, Inc. 2022

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.

170 Rose Mayer Loop
La Grange, TX 78945

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? January 2012 (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	Item	Y	N	U	Item	Y	N	U
Cable TV Wiring	<input checked="" type="checkbox"/>			Natural Gas Lines			<input checked="" type="checkbox"/>	Pump: sump grinder			<input checked="" type="checkbox"/>
Carbon Monoxide Det.	<input checked="" type="checkbox"/>			Fuel Gas Piping:			<input checked="" type="checkbox"/>	Rain Gutters	<input checked="" type="checkbox"/>		
Ceiling Fans	<input checked="" type="checkbox"/>			-Black Iron Pipe			<input checked="" type="checkbox"/>	Range/Stove	<input checked="" type="checkbox"/>		
Cooktop	<input checked="" type="checkbox"/>			-Copper			<input checked="" type="checkbox"/>	Roof/Attic Vents	<input checked="" type="checkbox"/>		
Dishwasher	<input checked="" type="checkbox"/>			-Corrugated Stainless Steel Tubing			<input checked="" type="checkbox"/>	Sauna		<input checked="" type="checkbox"/>	
Disposal	<input checked="" type="checkbox"/>			Hot Tub		<input checked="" type="checkbox"/>		Smoke Detector	<input checked="" type="checkbox"/>		
Emergency Escape Ladder(s)			<input checked="" type="checkbox"/>	Intercom System		<input checked="" type="checkbox"/>		Smoke Detector - Hearing Impaired			<input checked="" type="checkbox"/>
Exhaust Fans	<input checked="" type="checkbox"/>			Microwave	<input checked="" type="checkbox"/>			Spa		<input checked="" type="checkbox"/>	
Fences	<input checked="" type="checkbox"/>			Outdoor Grill		<input checked="" type="checkbox"/>		Trash Compactor			<input checked="" type="checkbox"/>
Fire Detection Equip.	<input checked="" type="checkbox"/>			Patio/Decking	<input checked="" type="checkbox"/>			TV Antenna	<input checked="" type="checkbox"/>		
French Drain			<input checked="" type="checkbox"/>	Plumbing System	<input checked="" type="checkbox"/>			Washer/Dryer Hookup	<input checked="" type="checkbox"/>		
Gas Fixtures			<input checked="" type="checkbox"/>	Pool		<input checked="" type="checkbox"/>		Window Screens	<input checked="" type="checkbox"/>		
Liquid Propane Gas:			<input checked="" type="checkbox"/>	Pool Equipment		<input checked="" type="checkbox"/>		Public Sewer System	<input checked="" type="checkbox"/>		
-LP Community (Captive)			<input checked="" type="checkbox"/>	Pool Maint. Accessories		<input checked="" type="checkbox"/>					
-LP on Property			<input checked="" type="checkbox"/>	Pool Heater		<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> 1 </u>
Evaporative Coolers		<input checked="" type="checkbox"/>		number of units: _____
Wall/Window AC Units		<input checked="" type="checkbox"/>		number of units: _____
Attic Fan(s)			<input checked="" type="checkbox"/>	if yes, describe: _____
Central Heat	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/> electric <input checked="" type="checkbox"/> gas number of units: <u> 1 </u>
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 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> 1 </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: SM

Page 1 of 7

Concerning the Property at _____

Solar Panels	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> owned <input checked="" type="checkbox"/> leased from:
Water Heater	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> electric <input checked="" type="checkbox"/> gas other: _____ number of units: _____
Water Softener	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> owned <input checked="" type="checkbox"/> leased from:
Other Leased Items(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	if yes, describe: _____
Underground Lawn Sprinkler	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____ automatic _____ manual areas covered
Septic / On-Site Sewer Facility	<input checked="" type="checkbox"/>	<input checked="" 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: Shingle Age: 2007 (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 checked="" type="checkbox"/>	Floors	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Sidewalks		<input checked="" type="checkbox"/>
Ceilings	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Foundation / Slab(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Walls / Fences		<input checked="" type="checkbox"/>
Doors		<input checked="" type="checkbox"/>	Interior Walls	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Windows		<input checked="" type="checkbox"/>
Driveways		<input checked="" type="checkbox"/>	Lighting Fixtures		<input checked="" type="checkbox"/>	Other Structural Components		<input checked="" type="checkbox"/>
Electrical Systems		<input checked="" type="checkbox"/>	Plumbing Systems		<input checked="" type="checkbox"/>			
Exterior Walls		<input checked="" type="checkbox"/>	Roof		<input checked="" type="checkbox"/>			

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

Ceiling damage in kitchen. removed carpet from previous tenants. interior walls have had items hung but holes not covered.

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

(TXR-1406) 07-10-23

Initialed by: Buyer: _____ and Seller: SM

Page 2 of 7

Concerning the Property at _____

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

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

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

*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 __ wholly __ 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 __ wholly __ partly in a 500-year floodplain (Moderate Flood Hazard Area-Zone X (shaded)). |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Located __ wholly __ partly in a floodway. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Located __ wholly __ partly in a flood pool. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Located __ wholly __ 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.

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.)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Y
<input type="checkbox"/> N | <input checked="" type="checkbox"/> 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. |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> 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: <input type="checkbox"/> mandatory <input type="checkbox"/> voluntary
Any unpaid fees or assessment for the Property? <input type="checkbox"/> yes (\$ _____) <input type="checkbox"/> no
If the Property is in more than one association, provide information about the other associations below or attach information to this notice. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> 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? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, describe: _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Any lawsuits or other legal proceedings directly or indirectly affecting the Property. (Includes, but is not limited to: divorce, foreclosure, heirship, bankruptcy, and taxes.) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Any death 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"/> | <input type="checkbox"/> Any condition on the Property which materially affects the health or safety of an individual. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> 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). |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> 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. |

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.

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.

S Mathews 10-8-25
Signature of Seller _____ Date _____ Signature of Seller _____ Date _____

Printed Name: Susan Mathews Printed Name: _____

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: unsure

Electric: _____	phone #: _____
Sewer: _____	phone #: _____
Water: _____	phone #: _____
Cable: _____	phone #: _____
Trash: _____	phone #: _____
Natural Gas: _____	phone #: _____
Phone Company: _____	phone #: _____
Propane: _____	phone #: _____
Internet: _____	phone #: _____

(TXR-1406) 07-10-23 Initialed by: Buyer: _____, _____ and Seller: SM, _____ Page 6 of 7

Concerning the Property at _____

170 Rose Mayer Loop
La Grange, TX 78945

(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.

<u>S Mathews</u>		<u>10-8-25</u>	
Signature of Buyer	Date	Signature of Buyer	Date
Printed Name: <u>Susan Mathews</u>		Printed Name: _____	

(TXR-1406) 07-10-23

Initialed by: Buyer: _____ and Seller: SM

Page 7 of 7



**ADDENDUM CONTAINING NOTICE OF OBLIGATION
TO PAY IMPROVEMENT DISTRICT
ASSESSMENT TO Fayette County, TEXAS**
(insert name of municipality or county levying assessment)
CONCERNING THE FOLLOWING PROPERTY
170 Rose Mayer Loop, La Grange, TX 78945
(insert property address)

As the purchaser of the real property described above, you are obligated to pay assessments to Fayette County, Texas, for the costs of a portion of a public improvement or (insert name of municipality or county, as applicable) services project (the "Authorized Improvements") undertaken for the benefit of the property within Fayette County Groundwater Conservation District (the "District") created under Local Government Code (insert name of public improvement district) (insert Subchapter A, Chapter 372, Local

Government Code, or Chapter 382, Local Government Code, as applicable)

AN ASSESSMENT HAS BEEN LEVIED AGAINST YOUR PROPERTY FOR THE AUTHORIZED IMPROVEMENTS, WHICH MAY BE PAID IN FULL AT ANY TIME. IF THE ASSESSMENT IS NOT PAID IN FULL, IT WILL BE DUE AND PAYABLE IN ANNUAL INSTALLMENTS THAT WILL VARY FROM YEAR TO YEAR DEPENDING ON THE AMOUNT OF INTEREST PAID, COLLECTION COSTS, ADMINISTRATIVE COSTS, AND DELINQUENCY COSTS.

The exact amount of the assessment may be obtained from Fayette County (insert name of municipality or county, as applicable)

The exact amount of each annual installment will be approved each year by Fayette County Commissioner's (insert name of city council or county

Court (insert name of municipality or county, as applicable) in the annual service plan update for the district. More information about

the assessments, including the amounts and due dates, may be obtained from Fayette County (insert name of municipality

or county, as applicable)

Your failure to pay any assessment or any annual installment may result in penalties and interest being added to what you owe or in a lien on and the foreclosure of your property.

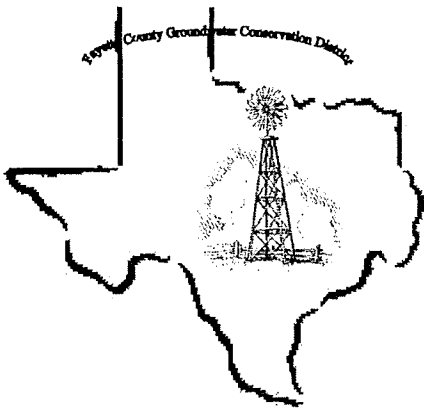
S Mathews 10-8-25 _____
Signature of Seller Date Signature of Seller Date

The undersigned purchaser acknowledges receipt of this notice before the effective date of a binding contract for the purchase of the real property at the address described above.

Signature of Buyer Date Signature of Buyer Date



This form has been approved by the Texas Real Estate Commission for use with similarly approved or promulgated contract forms. Such approval relates to this form only. TREC forms are intended for use only by trained real estate license holders. No representation is made as to the legal validity or adequacy of any provision in any specific transactions. It is not suitable for complex transactions. Texas Real Estate Commission, P.O. Box 12188, Austin, TX 78711-2188, (512) 936-3000 (<http://www.trec.texas.gov>) TREC No. 53-0.



255 Svoboda Lane, Room 115
La Grange, Texas 78945
Telephone: (979) 968-3135
Fax: (979) 968-3194
www.fayettecountygroundwater.com
info@fayettecountygroundwater.com

NOTICE TO PURCHASER

TO PURCHASER SHOWN BELOW:

The real property described below, which you are about to purchase, is located in the **FAYETTE COUNTY GROUNDWATER CONSERVATION DISTRICT**, Fayette County, Texas. The district has taxing authority separate from any other taxing authority, and may, subject to voter approval, issue an unlimited amount of bonds. The adopted tax rate for Year 2023-2024 is \$0.0082 on each \$100.00 dollars assessed valuation.

The physical address and legal description of the property which you are acquiring is as follows (or alternatively, the latitude and longitude of the well location):

Physical address of property or latitude and longitude:

The purpose of the FCGCD is to provide for conserving, preserving, protecting, and recharging the underground water and prevention of waste of the groundwater resources, over which it has jurisdictional authority, for the benefit of the District constituents. If an active or abandoned water well of any type is located on your property, **you are required by FCGCD to register the well.** There is no need to register a well that has been permanently plugged. District staff will inform you at the time of registration as to whether the well will require a permit. Forms and further information regarding this process can be found on the District website at www.fayettecountygroundwater.com

The undersigned purchaser hereby acknowledges receipt of the foregoing notice prior to closing of the purchase of the real property described in such notice and agrees to file a copy with the FCGCD.

ACKNOWLEDGMENT

Purchaser -Printed Name

Susan Mathews
Seller-Printed Name

Purchaser – Signature

S Mathews
Seller- Signature

Date of Purchase: _____

*please mail/email a signed copy to Fayette County GCD
* does not need to be notarized