



# SAN ANTONIO BOARD OF REALTORS®, INC.

9110 IH 10 WEST, SAN ANTONIO, TEXAS 78230

## RESIDENTIAL LOT SELLERS DISCLOSURE NOTICE

To Be Completed By The Seller For Residential Lots



THIS FORM IS FURNISHED BY THE SAN ANTONIO BOARD OF REALTORS® FOR USE BY ITS MEMBERS. USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF A BOARD/ASSOCIATION OF REALTORS® IS NOT AUTHORIZED.

### Concerning the Property at:

Your Property Address, ,  
(Property Address)

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.

A. Mark below: (Y) for Yes (N) for No (U) for Unknown.

- | Y                        | N                        | U                        |                                     | Y                        | N                        | U                        |  |
|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Located in 100-Year Flood plain     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Endangered Species/Habitat on Property |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Present Flood Insurance             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Fault Lines                            |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Previous Flooding onto the Property | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hazardous or Toxic Waste               |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Soil Movement                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Intermittent or Weather Springs        |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Surface Structures or Pits          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Landfill                               |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Underground Storage Tanks           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Lead-Based Paint Hazards               |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Wetlands on Property                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Radon Gas                              |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Diseased Trees                      |                          |                          |                          |  |

If you answered yes to any of the above, please explain:

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

### B. General Information:

Is the Seller aware of any of the following:

- | Y                        | N                        | U                        |   |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Features of the property shared in common with adjoining landowners, such as walls, roofs, fences and driveways, whose use or responsibility for maintenance may have an effect of the Property.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Any encroachments, easements or similar matters that may affect the Property.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Any zoning violations, nonconforming uses or violation of "setback" requirement.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Deed restrictions or obligations affecting the Property.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Any lawsuits against the Seller threatening to or affecting the Property.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Any notices of abatement or citations against the Property.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Have you (Seller) ever collected any insurance payments pursuant to a claim made for damage to the Property and not used the proceeds to make the repairs for which the claim was submitted?<br><br>_____ yes _____ no; If yes, explain: _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Any tax exemptions(s) which you (Seller) currently claim for the Property. If yes, list: _____<br>_____  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Any violent crime or death on the Property except for those deaths caused by: Natural causes, suicide, or accidental unrelated to the Property.  |

Initialed for Identification by: Buyer \_\_\_\_\_ Seller \_\_\_\_\_

Concerning the Property at: \_\_\_\_\_ **Your Property Address, ,** \_\_\_\_\_

Mark below: (Y) for Yes (N) for No (U) for Unknown

Y N U

10. Any Homeowner's Association or maintenance fees or assessments. If yes, complete:

Amount of fee or assessment: \$ \_\_\_\_\_.

Mandatory  Voluntary Name of Association: \_\_\_\_\_

Manager's Name: \_\_\_\_\_

Due: \_\_\_\_\_ Monthly \_\_\_\_\_ Quarterly \_\_\_\_\_ Annually

Any unpaid fees or assessments for the Property: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, amount \$ \_\_\_\_\_

11. Municipal Utility District which has any authority over the Property; If yes, Name of District: \_\_\_\_\_

If you answered yes to any of the above, please explain: \_\_\_\_\_

C. UTILITIES AVAILABLE:

Mark (A) for Available (O) on site (U) Unknown

A O U

Water System  City  Well  Municipal  Private

Natural Gas

Electric

Telephone

Sewer System

Cable T.V.

Other \_\_\_\_\_

None

IF WELL ON PROPERTY: approximate depth \_\_\_\_\_ well extends into \_\_\_\_\_ (name of water source). The well  does  does not need repair, if so, explain: \_\_\_\_\_

IF SEPTIC SYSTEM: In Place \_\_\_\_\_ Required \_\_\_\_\_ Allowed \_\_\_\_\_ Not Allowed \_\_\_\_\_

\_\_\_\_\_  
Signature of Seller Date  
**Your Name**

\_\_\_\_\_  
Signature of Seller Date

NOTICE TO BUYER: Listing Broker, \_\_\_\_\_ **Dial Boles** \_\_\_\_\_, and Other Broker, \_\_\_\_\_ advise you that this Seller's Disclosure Notice was completed by Seller, as of the date signed. The Listing Broker and Other Broker 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 PRIOR TO CLOSING.

The undersigned purchaser hereby acknowledges receipt of the foregoing notice.

\_\_\_\_\_  
Signature of Buyer Date

\_\_\_\_\_  
Signature of Buyer Date