



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 503 Teague Street
Navasota, TX 77868

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 X is not occupying the Property. If unoccupied (by Seller), how long since Seller has occupied the Property? (approximate date) or X 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		X	
Carbon Monoxide Det.		X	
Ceiling Fans	X		
Cooktop		X	
Dishwasher	X		
Disposal		X	
Emergency Escape Ladder(s)		X	
Exhaust Fans	X		
Fences	X		
Fire Detection Equip.		X	
French Drain		X	
Gas Fixtures		X	
Liquid Propane Gas:		X	
-LP Community (Captive)		X	
-LP on Property		X	

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

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

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

(TXR-1406) 07-10-23

Initialed by: Buyer: _____ and Seller: DL

Concerning the Property at _____

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Solar Panels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	owned	leased from:
Water Heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	electric	<input checked="" type="checkbox"/> gas other: _____ number of units: /
Water Softener	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	owned	leased from:
Other Leased Items(s)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	if yes, describe: _____	
Underground Lawn Sprinkler	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> automatic	<input type="checkbox"/> manual areas covered _____
Septic / On-Site Sewer Facility	<input type="checkbox"/>	<input checked="" 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: 11-12 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
Basement		<input checked="" type="checkbox"/>
Ceilings		<input checked="" type="checkbox"/>
Doors		<input checked="" type="checkbox"/>
Driveways		<input checked="" type="checkbox"/>
Electrical Systems		<input checked="" type="checkbox"/>
Exterior Walls		<input checked="" type="checkbox"/>

Item	Y	N
Floors		<input checked="" type="checkbox"/>
Foundation / Slab(s)		<input checked="" type="checkbox"/>
Interior Walls		<input checked="" type="checkbox"/>
Lighting Fixtures		<input checked="" type="checkbox"/>
Plumbing Systems		<input checked="" type="checkbox"/>
Roof		<input checked="" type="checkbox"/>

Item	Y	N
Sidewalks		<input checked="" type="checkbox"/>
Walls / Fences		<input checked="" type="checkbox"/>
Windows		<input checked="" type="checkbox"/>
Other Structural Components		<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
Aluminum Wiring		<input checked="" type="checkbox"/>
Asbestos Components		<input checked="" type="checkbox"/>
Diseased Trees: <u>oak wilt</u>		<input checked="" type="checkbox"/>
Endangered Species/Habitat on Property		<input checked="" type="checkbox"/>
Fault Lines		<input checked="" type="checkbox"/>
Hazardous or Toxic Waste		<input checked="" type="checkbox"/>
Improper Drainage		<input checked="" type="checkbox"/>
Intermittent or Weather Springs		<input checked="" type="checkbox"/>
Landfill		<input checked="" type="checkbox"/>
Lead-Based Paint or Lead-Based Pt. Hazards		<input checked="" type="checkbox"/>
Encroachments onto the Property		<input checked="" type="checkbox"/>
Improvements encroaching on others' property		<input checked="" type="checkbox"/>
Located in Historic District		<input checked="" type="checkbox"/>
Historic Property Designation		<input checked="" type="checkbox"/>
Previous Foundation Repairs		<input checked="" type="checkbox"/>

Condition	Y	N
Radon Gas		<input checked="" type="checkbox"/>
Settling		<input checked="" type="checkbox"/>
Soil Movement		<input checked="" type="checkbox"/>
Subsurface Structure or Pits		<input checked="" type="checkbox"/>
Underground Storage Tanks		<input checked="" type="checkbox"/>
Unplatted Easements		<input checked="" type="checkbox"/>
Unrecorded Easements		<input checked="" type="checkbox"/>
Urea-formaldehyde Insulation		<input checked="" type="checkbox"/>
Water Damage Not Due to a Flood Event		<input checked="" type="checkbox"/>
Wetlands on Property		<input checked="" type="checkbox"/>
Wood Rot		<input checked="" type="checkbox"/>
Active infestation of termites or other wood destroying insects (WDI)		<input checked="" type="checkbox"/>
Previous treatment for termites or WDI	<input checked="" type="checkbox"/>	
Previous termite or WDI damage repaired	<input checked="" type="checkbox"/>	
Previous Fires		<input checked="" type="checkbox"/>

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Initialed by: Buyer: _____ and Seller: *OK*

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Concerning the Property at _____

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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):

roof was replaced when property was purchased

*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.)

Y N

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

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"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: _____
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. (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.

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- 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
11-6-2011	termite	Coastal Fumigators	
10-21-22	"	Stan Secheliski Ger Nay Pest	

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.

(TXR-1406) 07-10-23 Initialed by: Buyer: _____, _____ and Seller: DU

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.

Dennis W. Underwood
 Signature of Seller _____ Date _____ Signature of Seller _____ Date _____
 Printed Name: Dennis Underwood 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:

Electric: <u>Entergy</u>	phone #: _____
Sewer: <u>City</u>	phone #: _____
Water: <u>City</u>	phone #: _____
Cable: _____	phone #: _____
Trash: <u>City</u>	phone #: _____
Natural Gas: <u>City</u>	phone #: _____
Phone Company: <u>-</u>	phone #: _____
Propane: <u>-</u>	phone #: _____
Internet: <u>-</u>	phone #: _____

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

Concerning the Property at _____

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(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:



APPROVED BY THE TEXAS REAL ESTATE COMMISSION
ADDENDUM FOR SELLER'S DISCLOSURE OF INFORMATION
ON LEAD-BASED PAINT AND LEAD-BASED PAINT HAZARDS
AS REQUIRED BY FEDERAL LAW

10-10-11

CONCERNING THE PROPERTY AT 503 Teague Street Navasota (Street Address and City)

A. LEAD WARNING STATEMENT: "Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-paint hazards is recommended prior to purchase."

NOTICE: Inspector must be properly certified as required by federal law.

B. SELLER'S DISCLOSURE:

- 1. PRESENCE OF LEAD-BASED PAINT AND/OR LEAD-BASED PAINT HAZARDS (check one box only):
(a) Known lead-based paint and/or lead-based paint hazards are present in the Property (explain):
(b) Seller has no actual knowledge of lead-based paint and/or lead-based paint hazards in the Property.
2. RECORDS AND REPORTS AVAILABLE TO SELLER (check one box only):
(a) Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the Property (list documents):
(b) Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the Property.

C. BUYER'S RIGHTS (check one box only):

- 1. Buyer waives the opportunity to conduct a risk assessment or inspection of the Property for the presence of lead-based paint or lead-based paint hazards.
2. Within ten days after the effective date of this contract, Buyer may have the Property inspected by inspectors selected by Buyer. If lead-based paint or lead-based paint hazards are present, Buyer may terminate this contract by giving Seller written notice within 14 days after the effective date of this contract, and the earnest money will be refunded to Buyer.

D. BUYER'S ACKNOWLEDGMENT (check applicable boxes):

- 1. Buyer has received copies of all information listed above.
2. Buyer has received the pamphlet Protect Your Family from Lead in Your Home.

E. BROKERS' ACKNOWLEDGMENT: Brokers have informed Seller of Seller's obligations under 42 U.S.C. 4852d to:

(a) provide Buyer with the federally approved pamphlet on lead poisoning prevention; (b) complete this addendum; (c) disclose any known lead-based paint and/or lead-based paint hazards in the Property; (d) deliver all records and reports to Buyer pertaining to lead-based paint and/or lead-based paint hazards in the Property; (e) provide Buyer a period of up to 10 days to have the Property inspected; and (f) retain a completed copy of this addendum for at least 3 years following the sale. Brokers are aware of their responsibility to ensure compliance.

F. CERTIFICATION OF ACCURACY: The following persons have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

Buyer Date Gary Underwood 05/08/2024 Date Seller Sun Baked Properties, LLC
Buyer Date Seller Date
Other Broker Date Lauren Stuart 05/08/2024 Date Listing Broker Lauren Stuart

The form of this addendum has been approved by the Texas Real Estate Commission for use only with similarly approved or promulgated forms of contracts. Such approval relates to this contract form only. TREC forms are intended for use only by trained real estate licensees. 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. OP-L

I N V O I C E

GER NAY PEST CONTROL
112 AUSTIANA HILLS DR
NAVASOTA, TX 77868
936-825-7449 (NAVASOTA)
936-756-PEST (CONROE)

INVOICE: 101362 OC
DATE: 10/11/22
ACCOUNT: 11398
ROUTE: 20 1000
LAST: 10/11/22 20
GARY HOLLEY

YEARLY TERMITE RENEWAL-\$200.00

BILL TO
UNDERWOOD, DENNIS
5057 THIANE RD.
NAVASOTA, TX 77868

SERVICE TO
UNDERWOOD, DENNIS
FOR :503 TEAGUE
NAVASOTA, TX 77868

936-825-4958

DESCRIPTION	QTY	PRICE	AMOUNT
SUB-TERR. TERMITE PARTIAL TREAT		1,912.00	1,912.00
		SUBTOTAL	1,912.00
		TAX	157.74
		TOTAL	2,069.74
		PREVIOUS BALANCE	0.00
		TOTAL DUE	2,069.74

*Paid credit card
10-20-22
(RS)*

Quantity	Products	Concentration	Location	Target Pests
-----	-----	-----%	-----	-----
-----	-----	-----%	-----	-----
-----	-----	-----%	-----	-----
-----	-----	-----%	-----	-----
-----	-----	-----%	-----	-----
-----	-----	-----%	-----	-----
-----	-----	-----%	-----	-----

Signature _____ Serviced By: *Gary Holley* CHECK CASH CARD
Stan Seckelste

LICENSE #0562181 (#0793867) (#0554863) #0765427

LICENSED AND REGULATED BY:
TEXAS DEPT. OF AGRICULTURE-866-918-4481
P.O. BOX 12847, AUSTIN, TX. 78711-2847
FAX 888-232-2567 TPCL 4836

CHARGE

WWW.GERNAYPESTCONTROL.COM

Thank you for your business. Have a nice day.

Ger Nay Pest Control
Subterranean Termite Treatment
(Agreement and Guarantee)

Customer Name: Dennis Underwood

Customer Address: 503 Teague
City: Navasota State: TX Zip Code: 77868

Telephone:
Home: _____ Office: _____ Other: 936-825-4958

Billing Address (if different from above):
5057 Thane Rd.
City: Navasota State: TX Zip Code: 77868

Ger Nay Pest Control agrees to treat the property described above for the control of subterranean termites and to furnish for a period of one (1) year, from the date of initial treatment, its subterranean termite control service.

For this service, the owner agrees to pay Ger Nay Pest Control the sum of \$ 1912.00 plus sales tax \$ 157.74 for a total of \$ 2069.74 payable upon completion of the initial treatment as follows: trench & drill. This agreement may be renewed for 1 additional years by payment of an annual renewal fee of \$ 200.00 plus sales tax, payable on or before the anniversary date of this agreement, to Ger Nay Pest Control. If warranty does not include entire structure treated, the areas excluded are:

During the term of this agreement, Ger Nay Pest Control will inspect the property annually. If additional termite infestation is discovered, Ger Nay Pest Control will perform any further treatments it finds necessary (governed by the chemical label), at no additional charged to the owner. Ger Nay Pest Control does not accept any liability for any subterranean termite damage repair, present or future. Should ownership of the specified property change, the unexpired portion of this agreement may be assigned to the new owner by giving written notice to Ger Nay Pest Control.

This service agreement constitutes the entire agreement between the parties and no other statements, remarks, or understandings, will be recognized or enforced.

Date of Treatment: 10-11-22 By: Gary Holley & Stan Secheliski

Owner: 

Ger Nay Pest Control – 112 Austiana Hills Dr, Navasota, TX 77868 (936)825-7449 – TPCL #4836

LICENSED AND REGULATED BY THE TEXAS DEPARTMENT OF AGRICULTURE – STRUCTURAL PEST CONTROL SERVICE – P.O. BOX 12847, AUSTIN, TX 78711-2847 (512)305-8250

Ger Nay Pest Control
Consumer Disclosure Statement

This information is being provided to you in compliance with Texas Structural Pest Control Law and Regulations Section 599.4. If you have any questions please call the Service Center manager at the phone number provided below.

- 1) A copy of the graph describing the structures and treatment are included as part of this disclosure.
- 2) A copy of the label of the pesticide to be used in the treatment is included as part of this disclosure.
- 3) All details of the contract terms and warranties provided and other important information may be found in the Service Agreement. If you do not have a copy of this Agreement, please request one.

CUSTOMER NAME Dennis Underwood

PROPERTY ADDRESS 503 Teague St.

I HAVE RECEIVED A COPY OF THIS DISCLOSURE STATEMENT ALONG WITH THE GRAPH AND PESTICIDE LABEL.

 _____
CUSTOMER NAME DATE

SERVICE CENTER NAME: Ger Nay Pest Control
112 Austiana Hills Dr
Navasota, Texas 77868
(936)825-7449

CERTIFIED APPLICATOR SIGNATURE  _____

CAL # 0562181 DATE 10-11-27

LICENSED AND REGULATED BY THE TEXAS DEPARTMENT OF AGRICULTURE – STRUCTURAL PEST CONTROL SERVICE
P.O. BOX 12847, AUSTIN, TEXAS, 78711-2847, (512)305-8250
TPCL #4836

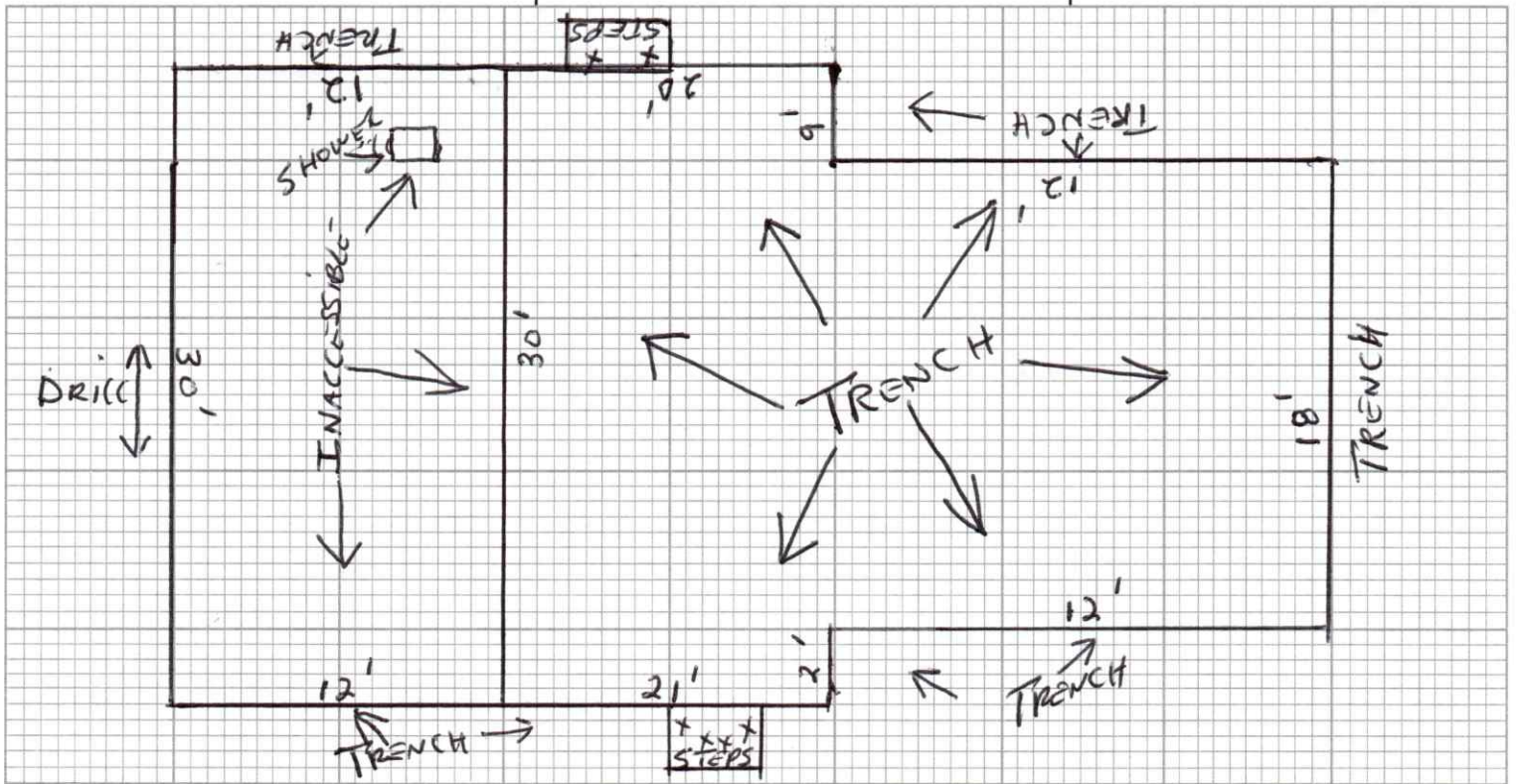
TEXAS DEPARTMENT OF AGRICULTURE WDI POST-CONSTRUCTION TREATMENT DISCLOSURE DOCUMENT

Description of Structure(s)

TREATMENT GRAPH FOR THIS
SERVICE ADDRESS / PHYSICAL LOCATION:

503 Teague St. Navasota, TX 77868

<p>There are conducive conditions for Wood Destroying Insects. It is recommended the corrections be made to the structure. (noted on the graph)</p> <p><input type="checkbox"/> (G) Wood to Ground Contact</p> <p><input type="checkbox"/> (I) Form boards left in place</p> <p><input type="checkbox"/> (j) Excessive Moisture</p> <p><input type="checkbox"/> (K) Cellulose Debris under or around structure</p> <p><input type="checkbox"/> (L) Footing too low/soil line to high</p> <p><input type="checkbox"/> (O) Planter box abutting structure</p> <p><input type="checkbox"/> (Q) Wood Pile in Contact with Structure</p> <p><input type="checkbox"/> (R) Wooden Fence in Contact with the Structure</p> <p><input type="checkbox"/> (V) Insufficient Ventilation</p> <p><input type="checkbox"/> (C) Other (Describe): _____</p>	<p>Notated on the graph are areas to be treated:</p> <p><input checked="" type="checkbox"/> (X) Drilled</p> <p><input checked="" type="checkbox"/> (O) Trenched</p> <p><input type="checkbox"/> (R) Rodded</p> <p><input type="checkbox"/> (BS) Bait Stations</p> <p><input type="checkbox"/> (BT) Barrier (Physical)</p> <p><input type="checkbox"/> Other label approved treatment method: _____ (specify)</p> <p><input type="checkbox"/> Other label approved treatment method: _____ (specify)</p>	<p>Notated on the graph is active or previous infestation:</p> <p><input checked="" type="checkbox"/> (A) Active</p> <p><input type="checkbox"/> (P) Previous</p>
		<p>Location of the Treatment Sticker:</p> <p><input type="checkbox"/> Beneath the Kitchen Sink</p> <p><input type="checkbox"/> Adjacent to the Hot Water Heater</p> <p><input checked="" type="checkbox"/> Electric Breaker Box</p>



Notes pertaining to construction details and or treatment details:

<p>Warrantied:</p> <p><input checked="" type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p> <p><input type="checkbox"/> Complete Warranty Information Attached</p>	<p>Full Label(s) provided:</p> <p><input checked="" type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>	<p><input type="checkbox"/> Completed Use Record</p> <p><input checked="" type="checkbox"/> Consumer Information Sheet Provided</p>
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Gary Holley #0554863

Signature of Certified Applicator or Licensed Technician & License Number

Gary Holley & Stan Sechelski

Certified Applicator or Technician Printed Name

[Signature]

Signature of Customer

*Apprentice Name & Registration Number

Date

* Apprentice may **ONLY** complete a Disclosure Document. **IF** a Certified Applicator **or** Licensed Technician licensed in the Termite Category is present during the inspection and completion of the form; this is allowed for training purposes **ONLY**.