

TEXAS ASSOCIATION OF REALTORS® OWNER'S NOTICE CONCERNING CONDITION OF PROPERTY UNDER PROPERTY MANAGEMENT AGREEMENT

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CONCERNING THE PROPERTY AT _____

OWNER IS TO COMPLETE THIS FORM TO THE BEST OF THE OWNER'S KNOWLEDGE. THIS NOTICE IS NOT A WARRANTY OF ANY KIND.

Section 1. The Property has the items marked below: (Mark Yes (Y), No (N), or Unknown (U).)

| Item | Υ | Ν | U | Additional Information |
|---------------------------------|---|---|---|--|
| Central A/C | | | | 🔲 electric 🔲 gas 🛄 heat pump number of units: |
| Wall/Window AC Units | | | | number of units: |
| Evaporative Coolers | | | | number of units: |
| Central Heat | | | | 🔲 electric 🔲 gas 🛄 heat pump number of units: |
| Other Heat | | | | if yes describe: |
| Fireplace & Chimney | | | | 🔲 woodburning (no.) 🔲 mock (no.) 🔲 other: |
| Gas Logs in Fireplace | | | | |
| Ceiling Fans | | | | number of units: |
| Carport | | | | 🔲 attached 🛄 not attached |
| Garage | | | | 🔲 attached 🛄 not attached |
| Garage Door Openers | | | | number of units: number of remotes: |
| Fences | | | | 🔲 wood 🔲 chain-link 🛄 other |
| Patio/Decking | | | | describe: |
| Outdoor Grill | | | | location: |
| Hot Tub/Spa | | | | |
| Pool | | | | 🔲 in-ground 🔲 above ground / heater: 🛄 yes 🔲 no |
| Underground Lawn Sprinkler | | | | 🔲 automatic 🛄 manual areas covered: |
| Septic / On-Site Sewer Facility | | | | if yes, attach Information About On-Site Sewer Facility (TAR-1407) |
| Water Heater | | | | electric gas other: number of units: |
| Water Softener | | | | 🔲 owned 🛄 leased from |
| Washer/Dryer Hookups | | | | dryer hookups are: 🔲 gas 🔲 electric |
| Washer | | | | |
| Dryer | | | | |
| Sauna | | | | |
| Alarm System | | | | owned leased from |
| Smoke Alarms | | | | number of units: |
| Kitchen Equipment | | | | 🗖 range-oven combo. 🔲 cooktop 🔲 oven 🔲 microwave |
| | | | | dishwasher disposer hood fan disposer in hood fan disposer |
| | | | | 🖵 refrigerator 🔲 other: |

Section 2. Are you aware of any item, equipment, or system in or on the Property that is in need of repair? Jyes J no If yes, explain (attach additional sheets if necessary): ______

Note: Unless instructed otherwise, items in the Property will be repaired in accordance with the repair provisions in the lease that the Broker negotiates for the Owner.

 (TAR-2206) 8-26-04

 360 Properties LLC & 360 Realty and Leasing, 201 S. Lakeline Blvd, Ste 804 Cedar Park, TX 78613

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 Nicole Martin

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Page 1 of 2

| άĊ | Owners' associations or maintenance fees o | r assessments. If yes, complete the following: | | | | | |
|--------|---|--|--|--|--|--|--|
| | Manager's name: | Phone: | | | | | |
| | Address: Describe the common areas or facilities (r | pool, tennis courts, greenbelts, etc.): | | | | | |
| | | | | | | | |
| | Are there any user tees for the common fa | acilities? 🗋 yes 🗋 no If yes, describe: | | | | | |
| | Name and contact information of any othe | er association to which the Property is subject: | | | | | |
| | | is or governmental ordinances affecting the condition or | | | | | |
| | use of the Property.Any lawsuits or other legal proceedings direct | ty or indirectly affecting the Property | | | | | |
| | | lly affects the health or safety of an individual. | | | | | |
| lf the | e answer to any of the items in Section 3 is yes, e | explain (attach additional sheets if necessary): | | | | | |
| | | | | | | | |
| Sect | tion 4. Other Information. | | | | | | |
| (4) | Water to the Property is supplied by: | | | | | | |
| | | MUD WCID co-op well (location:) | | | | | |
| (2) | The type of root on the Property is: Composition | on shingle 🔲 wood shingle 🖵 flat (tar & gravel) 🔲 metal Approx. Age: years | | | | | |
| (3) | | describe parking spaces (numbers, if assigned, location): | | | | | |
| (4) | Describe the location and number of the mailbox: | | | | | | |
| | | Provide any alarm codes, garage door codes, access codes, gate codes, common facility codes: | | | | | |
| (6) | Describe the location of: | | | | | | |
| | | filter size(s): | | | | | |
| | electrical breakers: | gas shut-off valve: | | | | | |
| | | - | | | | | |
| • • | | ect for the Property or any appliances. Attach copies. | | | | | |
| (8) | Provide the names and phone numbers of the cu | rrent providers to the Property: | | | | | |
| Е | Electricity: | Ph: | | | | | |
| G | as: | Ph: | | | | | |
| | | Ph: | | | | | |
| Т | elephone: | Ph: | | | | | |
| | | Ph: | | | | | |
| | | Ph: | | | | | |
| Р | Pool Service: | Ph: | | | | | |
| | | Ph: | | | | | |
| La | andscaping: | Ph: | | | | | |
| | | | | | | | |
| | | | | | | | |
| Sign | nature of Owner Date | Signature of Owner Date | | | | | |