



TEXAS ASSOCIATION OF REALTORS®  
**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 1101 San Augustine 78733

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?  
 \_\_\_\_\_ 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	✓		
Carbon Monoxide Det.			
Ceiling Fans	✓		
Cooktop	✓		
Dishwasher	✓		
Disposal	✓		
Emergency Escape Ladder(s)			✓
Exhaust Fans			
Fences	✓		
Fire Detection Equip.	✓		
French Drain			
Gas Fixtures	✓		
Natural Gas Lines			✓

Item	Y	N	U
Liquid Propane Gas:	✓		
-LP Community (Captive)			
-LP on Property	✓		
Hot Tub			✓
Intercom System			
Microwave	✓		
Outdoor Grill			✓
Patio/Decking	✓		
Plumbing System	✓		
Pool			✓
Pool Equipment			✓
Pool Maint. Accessories			✓
Pool Heater			✓

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

Item	Y	N	U	Additional Information
Central A/C	✓			<input checked="" type="checkbox"/> electric <input type="checkbox"/> gas number of units: <u>1</u>
Evaporative Coolers		✓		number of units: _____
Wall/Window AC Units	✓			number of units: <u>2</u>
Attic Fan(s)			✓	if yes, describe: _____
Central Heat	✓			<input type="checkbox"/> electric <input type="checkbox"/> gas number of units: _____
Other Heat			✓	if yes, describe: _____
Oven	✓			number of ovens: <u>1</u> <input type="checkbox"/> electric <input checked="" type="checkbox"/> gas <input type="checkbox"/> other: _____
Fireplace & Chimney	✓			<input type="checkbox"/> wood <input type="checkbox"/> gas logs <input type="checkbox"/> mock <input type="checkbox"/> other: _____
Carport			✓	<input type="checkbox"/> attached <input type="checkbox"/> not attached
Garage			✓	<input type="checkbox"/> attached <input type="checkbox"/> not attached
Garage Door Openers			✓	number of units: _____ number of remotes: _____
Satellite Dish & Controls			✓	<input type="checkbox"/> owned <input type="checkbox"/> leased from _____
Security System	✓			<input type="checkbox"/> owned <input type="checkbox"/> leased from _____
Water Heater	✓			<input type="checkbox"/> electric <input type="checkbox"/> gas <input type="checkbox"/> other: _____ number of units: _____
Water Softener			✓	<input type="checkbox"/> owned <input type="checkbox"/> leased from <u>2</u>
Underground Lawn Sprinkler	✓			<input checked="" type="checkbox"/> automatic <input type="checkbox"/> manual areas covered: <u>5</u>
Septic / On-Site Sewer Facility	✓			if yes, attach Information About On-Site Sewer Facility (TAR-1407)

(TAR-1406) 9-01-11

Initialed by: Seller: ED and Buyer: \_\_\_\_\_

Concerning the Property at 1101 San Augustine 78733

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 TAR-1906 concerning lead-based paint hazards).

Roof Type: Comp. Shingle Age: \_\_\_\_\_ (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):  
Upstairs door needs to be replaced.  
Driveway needs to be cleaned. Oil stains-

**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: <input type="checkbox"/> oak wilt <input type="checkbox"/> _____		<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 100-year Floodplain		<input checked="" type="checkbox"/>
Located in Floodway		<input checked="" type="checkbox"/>
Present Flood Ins. Coverage (If yes, attach TAR-1414)		<input checked="" type="checkbox"/>
Previous Flooding into the Structures		<input checked="" type="checkbox"/>
Previous Flooding onto the Property		<input checked="" type="checkbox"/>
Previous Fires		<input checked="" type="checkbox"/>
Previous Use of Premises for Manufacture of Methamphetamine		<input checked="" type="checkbox"/>

Condition	Y	N
Previous Foundation Repairs		<input checked="" type="checkbox"/>
Previous Roof Repairs		<input checked="" type="checkbox"/>
Other Structural Repairs		<input checked="" type="checkbox"/>
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 Penetration		<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"/>
Termite or WDI damage needing repair		<input checked="" type="checkbox"/>
Single Blockable Main Drain in Pool/Hot Tub/Spa*		<input checked="" type="checkbox"/>

Concerning the Property at 1101 San Augustine 78733

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 (Mark Yes (Y) if you are aware. Mark No (N) if you are not aware.)**

- |                          |                                     |  |
|--------------------------|-------------------------------------|--|
| <u>Y</u>                 | <u>N</u>                            |  |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Room additions, structural modifications, or other alterations or repairs made without necessary permits or not in compliance with building codes in effect at the time.   |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Homeowners' associations or maintenance fees or assessments. If yes, complete the following:<br>Name of association: _____<br>Manager's name: _____ Phone: _____<br>Fees or assessments are: \$ _____ per _____ and are: <input type="checkbox"/> mandatory <input type="checkbox"/> voluntary<br>Any unpaid fees or assessment for the Property? <input type="checkbox"/> yes (\$ _____) <input type="checkbox"/> no<br>If the Property is in more than one association, provide information about the other associations below or attach information to this notice. |
| <input type="checkbox"/> | <input checked="" 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:<br>Any optional user fees for common facilities charged? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no If yes, describe: _____<br>_____  |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any notices of violations of deed restrictions or governmental ordinances affecting the condition or use of the Property.  |
| <input type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" type="checkbox"/> | Any condition on the Property which materially affects the health or safety of an individual.  |
| <input type="checkbox"/> | <input checked="" 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.<br>If yes, attach any certificates or other documentation identifying the extent of the remediation (for example, certificate of mold remediation or other remediation).   |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any rainwater harvesting system connected to the property's public water supply that is able to be used for indoor potable purposes.   |

If the answer to any of the items in Section 5 is yes, explain (attach additional sheets if necessary):  
\_\_\_\_\_  
\_\_\_\_\_

(TAR-1406) 9-01-11 Initialed by: Seller: SP and Buyer: \_\_\_\_\_ Page 3 of 5

Concerning the Property at 1101 San Augustine 78733

Section 6. Seller  has  has not attached a survey of the Property.

Section 7. 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
5/2010	Septic	TENUS SEPTIC SERVICE (Repair - See Invoice)	

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 8. 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 9. 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 10. 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.

Repallet Deal 3/19/2013  
 Signature of Seller Date Signature of Seller Date  
 Printed Name: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Concerning the Property at 1101 San Augustine 78733

**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 [www.txdps.state.tx.us](http://www.txdps.state.tx.us). 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 you are basing your offers on square footage, measurements, or boundaries, you should have those items independently measured to verify any reported information.

(4) The following providers currently provide service to the property:

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

(5) 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: _____	



TEXAS ASSOCIATION OF REALTORS®

INFORMATION ABOUT ON-SITE SEWER FACILITY

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CONCERNING THE PROPERTY AT 1101 San Augustine 78733

A. DESCRIPTION OF ON-SITE SEWER FACILITY ON PROPERTY:

- (1) Type of Treatment System: [X] Septic Tank [ ] Aerobic Treatment [ ] Unknown
(2) Type of Distribution System: [ ] Unknown
(3) Approximate Location of Drain Field or Distribution System: East side of house [ ] Unknown
(4) Installer: [ ] Unknown
(5) Approximate Age: [ ] Unknown

B. MAINTENANCE INFORMATION:

- (1) Is Seller aware of any maintenance contract in effect for the on-site sewer facility? [ ] Yes [X] No
(2) Approximate date any tanks were last pumped? 2 yrs. ago
(3) Is Seller aware of any defect or malfunction in the on-site sewer facility? [ ] Yes [X] No
(4) Does Seller have manufacturer or warranty information available for review? [ ] Yes [ ] No

C. PLANNING MATERIALS, PERMITS, AND CONTRACTS:

- (1) The following items concerning the on-site sewer facility are attached: [ ] planning materials [ ] permit for original installation [ ] final inspection when OSSF was installed [ ] maintenance contract [ ] manufacturer information [ ] warranty information
(2) 'Planning materials' are the supporting materials that describe the on-site sewer facility that are submitted to the permitting authority in order to obtain a permit to install the on-site sewer facility.
(3) It may be necessary for a buyer to have the permit to operate an on-site sewer facility transferred to the buyer.

Information about On-Site Sewer Facility concerning 1101 San Augustine 78733

**D. INFORMATION FROM GOVERNMENTAL AGENCIES:** Pamphlets describing on-site sewer facilities are available from the Texas Agricultural Extension Service. Information in the following table was obtained from Texas Commission on Environmental Quality (TCEQ) on 10/24/2002. The table estimates daily wastewater usage rates. Actual water usage data or other methods for calculating may be used if accurate and acceptable to TCEQ.

<u>Facility</u>	<u>Usage (gal/day) without water- saving devices</u>	<u>Usage (gal/day) with water- saving devices</u>
Single family dwelling (1-2 bedrooms; less than 1,500 sf)	225	180
Single family dwelling (3 bedrooms; less than 2,500 sf)	300	240
Single family dwelling (4 bedrooms; less than 3,500 sf)	375	300
Single family dwelling (5 bedrooms; less than 4,500 sf)	450	360
Single family dwelling (6 bedrooms; less than 5,500 sf)	525	420
Mobile home, condo, or townhouse (1-2 bedroom)	225	180
Mobile home, condo, or townhouse (each add'l bedroom)	75	60

**This document is not a substitute for any inspections or warranties. This document was completed to the best of Seller's knowledge and belief on the date signed. Seller and real estate agents are not experts about on-site sewer facilities. Buyer is encouraged to have the on-site sewer facility inspected by an inspector of Buyer's choice.**

*[Handwritten Signature]* 3/19/2013  
Signature of Seller Date

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

Receipt acknowledged by:

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

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

*Edgemoor Books 6-27-08*

SCALE 1"=20'

A TITLE SURVEY OF LOT 14, BLOCK 52 AUSTIN LAKE HILLS, SECTION 3, A SUBDIVISION IN TRAVIS COUNTY, TEXAS, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 13, PAGE 36, OF THE PLAT RECORDS OF TRAVIS COUNTY, TEXAS

**TITLE COMMITMENT NOTE:**

COMMITMENT FOR TITLE INSURANCE PREPARED BY:

Chicago Title Insurance Company  
G.F. No.: 2002343 Effective Date: 09/27/00 Issued: 10/05/2000

The surveyor has relied upon the referenced Commitment for Title regarding easements, restrictions, and other matters affecting this property. No additional research was done for the purpose of this survey. Items listed are worded according to the commitment, followed by surveyor's notes and/or observations.

Schedule "B" items contained therein and re-listed below were considered:

- 1) Restrictions:  
Volume 13, Page 36 of the Plat Records of Travis County, Texas, and Volume 4083, Page 2208 of the Deed Records of Travis County, Texas. --- Subject to
- 13) Blanket-type easement as reserved and described in instrument recorded in Volume 556, Page 207, and transferred in Volume 614, Page 207 and Volume 676, Page 298 Deed Records of Travis County, Texas. --- Not subject to

**SURVEYOR'S CERTIFICATE:**

CERTIFIED TO: Gregory T. Linenfesler and Debra Ann Linenfesler  
W. Forrest Jourdan and Emily E. Forman  
First Community Mortgage  
Chicago Title Insurance Company

PROPERTY ADDRESS: 1101 San Augustine Drive, Austin Texas

DATE OF SURVEY: October 1, 2000

BEARING BASIS: Plat reference as shown.

I hereby certify that a survey of the property shown hereon was actually made upon the ground under my direction and supervision on the date shown, and that to the best of my professional knowledge and belief: there are no apparent encroachments, overlapping of improvements, discrepancies, deed line conflicts, visible utility lines or roads in place, except as shown hereon, and that this property has access to a dedicated road right-of-way or access easement, unless noted hereon.

The tract shown hereon lies within Zone "X" (areas determined to be outside 500-year flood-plain), as identified by the Federal Emergency Management Agency, Federal Insurance Administration, as shown on map no. 48453C0245 E, dated JUNE 16, 1993, for TRAVIS County, Texas and incorporated areas. If this site is not within an identified special flood hazard area, this flood statement does not imply that the property and/or the structures thereon will be free from flooding or flood damage. This flood statement shall not create liability on the part of the surveyor.

Charles M. Benson  
Registered Professional Land Surveyor  
State of Texas No. 4863

*CM Benson* date November 1, 2000

SAN AUGUSTINE DRIVE  
(50' R.O.W.)

N52°00'49"W 96.80'  
(N51°52'00"W 96.79')

CEDAR FENCING

LOT 14  
BLOCK 52

S35°02'00"W 99.90'  
(S35°02'00"W 99.66')  
BEARING BASIS

CUERNAVACA DRIVE  
(R.O.W. Varies)

NUMBER	CHORD BEARING	RADIUS	ARC	CHORD	RECORD
C1	N47°34'20"W	244.91	40.22	40.17	(N47°11'00"W 39.99')

- LEGEND**
- 1/2" REBAR FOUND
  - ⊕ FIRE HYDRANT
  - ⊗ WATER VALVE
  - ⊞ WATER METER
  - ⊘ POWER POLE
  - ← GUY WIRE



Charles M. Benson  
R.P.L.S. 4863

**Chaparral**

Professional Land Surveying, Inc.  
Surveying and Mapping

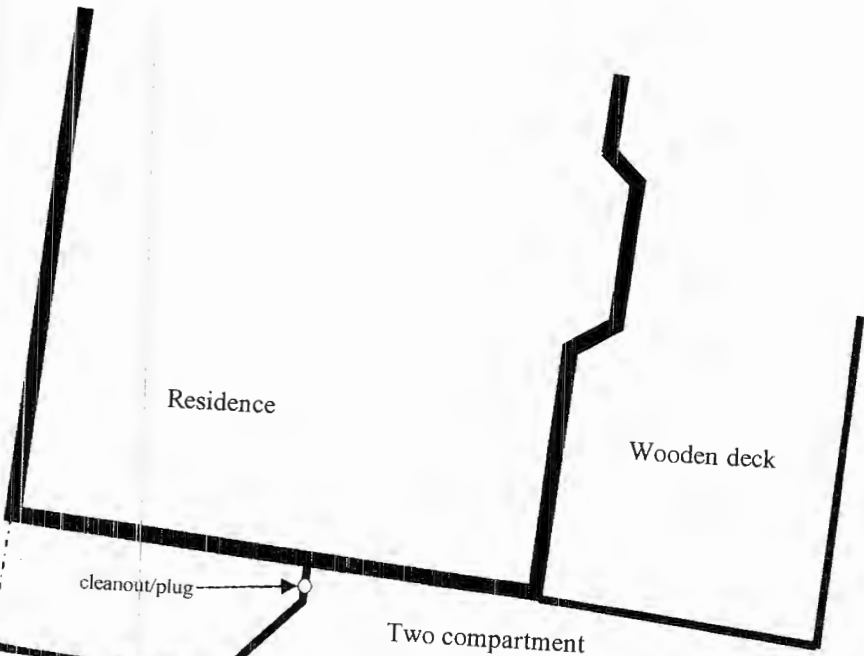
510 South Congress Ave., Suite B-100  
Austin, Texas 78704  
512-476-7103

PROJECT NO.:  
FORREST  
DRAWING NO.:  
FORREST  
PLOT DATE:  
11/01/2000  
PLOT SCALE:  
1"=20'  
DRAWN BY:  
CMB

SHEET  
01 OF 01

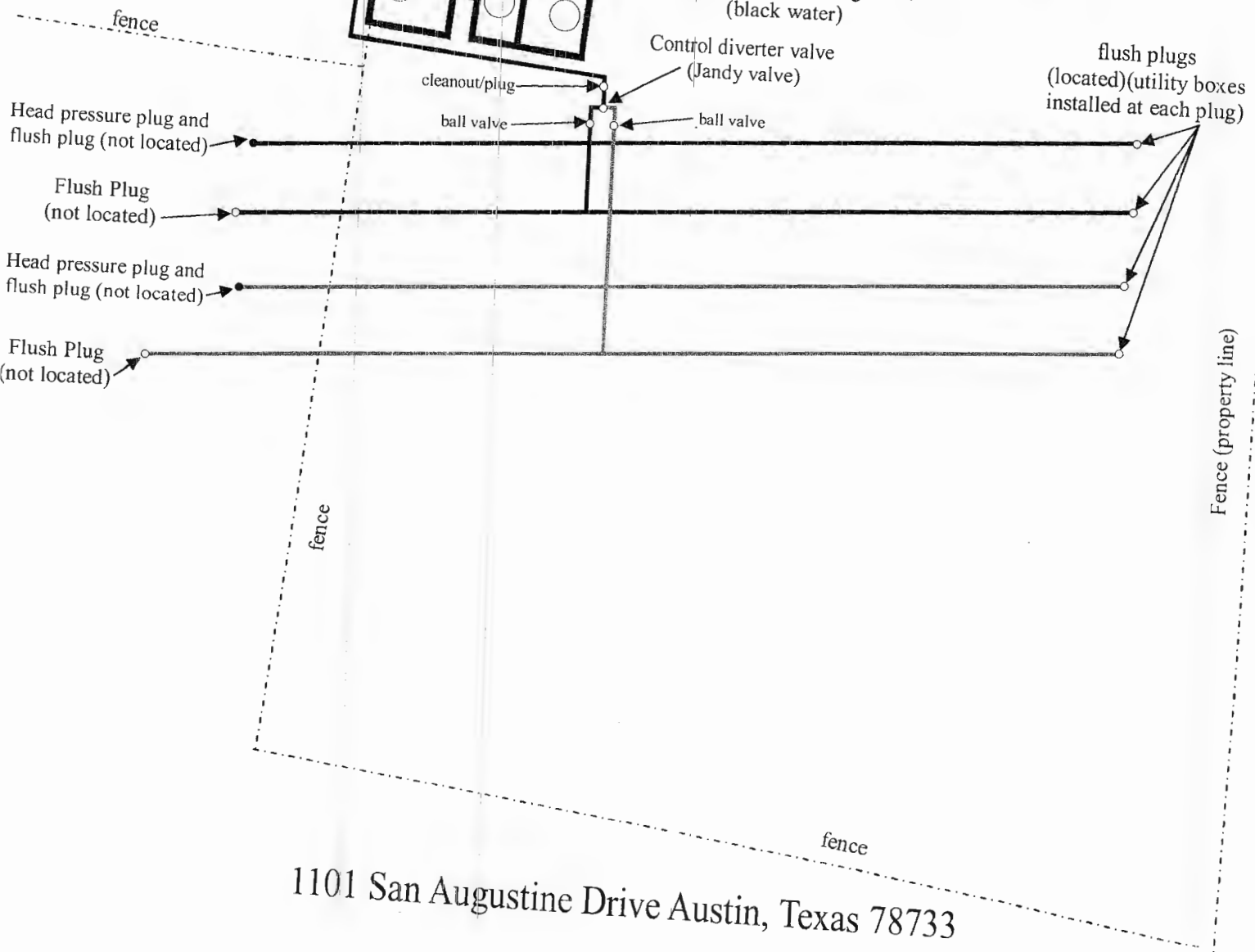


←  
← To San Augustine Drive  
←



Single compartment  
concrete pump tank  
Volume capacity 500 gallons  
(black water)

Two compartment  
concrete septic tank  
Volume capacity 750 gallons  
(black water)



To North Cuernavaca  
↓ ↓ ↓



**TEXAS SEPTIC SERVICES & INSPECTIONS**

Invoice No: **R-10-0012**

Residential & Commercial OSSF Inspections • Repairs • New Installation • Maintenance

Invoice Date: **06/01/2010**

**Customer information:**

Elizabeth Decker eliart15@msn.com

NAME	E-MAIL ADDRESS
1101 San Augustine Drive	Austin Texas 78733
MAILING ADDRESS	CITY STATE ZIP CODE
HOME PHONE	OTHER CONTACT NUMBERS
(310) 247-1603	(512) 284-9940 and (310) 222-8234
CELL PHONE	

**Job location information:**

1101 San Augustine Drive	1101 San Augustine Drive	Austin	Texas	78733
STREET ADDRESS	STREET ADDRESS	CITY	STATE	ZIP CODE

**Repair category information:**

- REPAIR    
  REQUIRED REPAIR ITEM due to INSPECTION by TSSI    
  MAKE READY for LCRA INSPECTION  
 INSTALLATION    
  OTHER (DESCRIBE):

DATE	WORK DESCRIPTION	AMOUNT
05/05/2010	Removed the two existing gate valves installed in the supply lines that go out to the two black water low pressure dosing drain lines. Installed two ball valves to replace the gate valves and re-installed utility boxes at each ball valve. Proposal letter amount was \$350.00 applied \$50.00 discount off proposal letter amount.	\$ 300.00
05/05/2010	Installed cleanout plug to the supply line between the effluent pump and the drainfield of the black water system. Cleanout plug was installed to provide access to the supply line for treating drainfield with a chemical product from Ecological Laboratories, Inc. called "PRO-PUMP Bio-Remediation Kit," should it become necessary to treat the drainfield in the future. The bio-remediation kit is comprised of bacterial cultures that are specially formulated to restore the soils absorption capability.	No charge
05/12/2010	Located 4 of the 8 plugs installed at the end of each low pressure dosing drain line to the black water drainfields. The purpose of locating the plugs to the low pressure dosing drain lines was so that the lines could be flushed and cleaned. The location of the 4 plugs on the property was at the most northern property line just east of the main residence. Utility boxes were installed at the location of the flush plugs for future access to the plugs in order to flush and clean the low pressure dosing lines. The low pressure dosing drainfield lines were clogged with sediment and sludge build up. TSSI flushed and cleaned the 4 low pressure dosing lines where the plugs were located.	625.00
	Balance carried forward ►	925.00

PAID IN FULL

HECKER 45



# TEXAS SEPTIC SERVICES & INSPECTIONS

Residential & Commercial OSSF Inspections • Repairs • New Installation • Maintenance

**DATE:** June 1, 2010

**TO:** To Whom It May Concern

**FROM:** Terry G. Moore, Sr. • Inspector  
TSSI-Texas Septic Services & Inspections  
Installer II • TCEQ License Number OS0025140  
Maintenance Provider • TCEQ License Number MS0001598

**SUBJECT:** Required repairs to the black water system of the On-Site Sewage Facility (OSSF) installed at 1101 San Augustine Drive; Austin, Travis County, Texas 78733-2563 **Legal Description:** Austin Lake Hills Subdivision; Section 3; Block 32; Lot 14 (0.30 acres); **CADID# / GEO#: 125447**

It is TSSI's professional opinion that the cause of the effluent backup falls under the term "plumbing stoppage". Less than 125 linear feet from the point of access was flushed and cleaned.

**TSSI's findings:** The cause of the effluent backing up into the pump tank was due to clogged low pressure dosing lines. TSSI located four of the eight flush plugs to the low pressure dosing lines. The low pressure dosing lines were found to be clogged with sediment and sludge buildup. The low pressure dosing lines were flushed out and cleaned on May 12, 2010.

On June 1, 2010, the low pressure dosing lines where checked again and remained unclogged with clear effluent coming from the lines. The effluent level in the black water pump tank was at the tanks normal operating level and the black water system appeared to be functioning properly on June 1, 2010.

In closing, if you have any questions, please direct them to either Stewart or I. Our phone numbers are listed below or you can e-mail us, your calls and e-mails are always welcomed.

Sincerely,

Terry G. Moore, Sr. • Inspector  
TSSI-Texas Septic Services & Inspections  
Installer II • TCEQ License Number OS0025140  
Maintenance Provider • TCEQ License Number MS0001598