

# No. 1 Quality Realty

## SUBSURFACE SEWAGE DISPOSAL SYSTEM PERMIT DISCLOSURE

1 Regarding: 724 West Old Highway 53 North Celina TN 38551  
PROPERTY ADDRESS

2 The owner of this residential property discloses the following:

3  According to the subsurface sewage disposal system permit issued for this property, this property is permitted for \_\_\_\_\_  
4 (number of) bedrooms. A copy of the permit was obtained from the appropriate governmental permitting authority and  
5 is attached to this disclosure.

6  I/We have requested a copy of the subsurface sewage disposal system permit issued for this property from the  
7 appropriate governmental permitting authority. However, I/we were informed that

8  The file could not be located.

9 OR

10  A permit was not issued for this property.

11 As a result, I/we do not have any knowledge as to the number of bedrooms for which this property has been permitted.

12 NOTE: There may be additional information which may be of interest and/or concern to Buyers contained in the official file  
13 with the Tennessee Department of Environment and Conservation, Groundwater Protection division located in the  
14 county office regulating septic systems. This file may contain information concerning maintenance that has been done  
15 on the system as well as any violations imposed by the state. Buyers are encouraged to obtain this information and  
16 if of concern to them, to have a soil engineer interpret the contents of the file. Real estate licensees are not soil  
17 engineers and are not experts who can provide an interpretation of the contents of the official file.

18 The following parties have reviewed the information above and certify, to the best of their knowledge, that the information  
19 they have provided is true and accurate and acknowledge receipt of a copy:

20 The party(ies) below have signed and acknowledge receipt of a copy.

21 _____ 22 BUYER	_____
_____ at _____ o'clock <input type="checkbox"/> am/ <input type="checkbox"/> pm 23 Date	_____ at _____ o'clock <input type="checkbox"/> am/ <input type="checkbox"/> pm 24 Date

25 The party(ies) below have signed and acknowledge receipt of a copy.

26 <input checked="" type="checkbox"/> _____ 27 SELLER Doris T. Barbieri	_____
28 <input checked="" type="checkbox"/> 7-1-2024 at 10:00 o'clock <input checked="" type="checkbox"/> am/ <input type="checkbox"/> pm 29 Date CST	_____ at _____ o'clock <input type="checkbox"/> am/ <input type="checkbox"/> pm Date

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