

*Your Dealership Name*  
*Your Address*  
*Your Town, AZ 85007*

License Number: \_\_\_\_\_

Compatibility Agreement

Date:

This form is required by the Arizona Department of Housing. Its purpose is to inform you, our customer that the utility service facilities for manufactured home spaces are not standardized and compatibility between a chosen manufactured home space and a manufactured home to be purchased is the purchaser's responsibility, if this applies.

\_\_\_\_\_  
Buyer's Signature

\_\_\_\_\_  
Date

(NOTE: BUYER MUST DATE HIS OWN SIGNATURE. COMPATIBILITY AGREEMENT MUST BE SIGNED AND DATED PRIOR TO OR ON THE SAME DATE AS THE PURCHASE AGREEMENT.)

COMPATIBILITY AGREEMENT IS NOT NEEDED WHEN A USED HOME IS SOLD "WHERE IS" NOR IS IT NEEDED WHEN THE HOME IS BEING PLACED ON PRIVATE LAND.





DOUGLAS A. DUCEY  
Governor



MICHAEL TRAILOR  
Director

STATE OF ARIZONA  
DEPARTMENT OF HOUSING  
1110 WEST WASHINGTON, SUITE 280  
PHOENIX, ARIZONA 85007  
(602) 771-1000 FAX: (602) 771-1002

**MANUFACTURED HOUSING HOMEOWNER INFORMATION BULLETIN – (NEW)**

Buying a new manufactured home/FBB in Arizona is both a smart and wise investment. You have the quality assurances of the federal government under the U.S. Department of Housing and Urban Development Construction Standards Program as well as the standards adopted by the State of Arizona. In addition, the Arizona Department of Housing is responsible by law for enforcing the standards, rules, and regulations under which your home was constructed, sold, and installed.

**If any problems arise with your new home within 120 days for cosmetic items and one (1) year for structural, gas, electric, water, or air conditioning/heating:**

1. Send the retailer a letter detailing the problem areas, keeping a copy for your own files.
2. If, for some reason, the retailer and/or installer have not responded in a reasonable length of time, call the retailer and send a letter to the manufacturer listing your concerns, again keeping a copy for your files.
3. If, after providing sufficient time for all parties to respond to your concerns, problems still exist, you may contact the Department of Housing at 1110 W. Washington, Suite 280, Phoenix, AZ 85007-2935, Phone: (602) 771-1000 and file a complaint.

**Cosmetic, superficial, or minor complaints are limited to 120 days after date of installation or the designated cosmetic complaint date provided:**

1. A walk-through inspection was performed and all cosmetic, superficial, or minor complaints were noted on the walk-through form. All repairs on the walk-through form need to be corrected within ninety (90) days after the end of the cosmetic complaint period (120 days).
2. The purchaser shall notify the retailer in writing regarding cosmetic, superficial or minor matters found after the walk-through and before the 120-day deadline before a complaint may be filed. The retailer or manufacturer shall replace or repair these items within 90 days after the end of the cosmetic complaint period. If, after providing sufficient time for all parties to respond to your concerns, problems still exist, you may contact the Department of Housing at the above address.

Misrepresenting a down payment or financing on a credit application to influence a federal agency or a financial institution is a violation of federal law. Penalties for these violations may include a fine of up to \$1,000,000.00, imprisonment up to 30 years, or both. Misrepresenting the amount of down payment on a sales contract is a violation of state law. Please notify the Department if any salesperson or retailer advise actions in violation of the law.

I hereby acknowledge that I have read the foregoing Notice and received a copy of the Homeowner Information Bulletin attached hereto and that all applicable warranties are stated on the sales contract.

Homeowner's Signature \_\_\_\_\_ Date \_\_\_\_\_

PRINTED Homeowner's Name: \_\_\_\_\_

**INFORMATION BELOW TO BE COMPLETED BY DEALER: (Please Print or Type)**

Business Name \_\_\_\_\_ License# \_\_\_\_\_

Manufacturer \_\_\_\_\_ Serial #: \_\_\_\_\_

Salesperson License #: \_\_\_\_\_

Manufactured Home

Factory Built Building

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Governor



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Director

STATE OF ARIZONA  
DEPARTMENT OF HOUSING  
1110 WEST WASHINGTON, SUITE 280  
PHOENIX, ARIZONA 85007  
(602) 771-1000 FAX: (602) 771-1002

**MANUFACTURED HOUSING HOMEOWNER INFORMATION BULLETIN – (USED)**

The Arizona Department of Housing (“Department”) is the licensing agency and regulatory authority for manufacturers, dealers, brokers, salespersons and installers of manufactured homes. The Department is responsible by law for enforcing the standards, rules and regulations under which your unit was constructed, sold and installed. The Department has established procedures for handling unresolved consumer complaints against licensees. If any problems should arise, we suggest you take the following steps:

1. Send the dealer or broker a letter detailing your problems. Keep a copy for your records. After a short period of time, follow up your letter with a phone call.
2. If after a reasonable time the problem is not resolved, contact the Department at the above address. Our Complaint Section will assist you in a fair resolution to your problem with complaints that are filed within one year from the date of sale or installation.

If you have any questions, feel free to contact the Department.

\*\*\*\*\*NOTICE\*\*\*\*\*

Misrepresenting a downpayment or financing on a credit application to influence a federal agency or a financial institution is a violation of federal law. Misrepresenting the amount of downpayment on a sales contract is a violation of state law. Penalties for these violations may include a fine of up to \$150,000.00 and imprisonment for up to seven years. Please notify the Department of any salesperson, dealer or broker who advises action in violation of the law.

\*\*\*\*\*RETURN BOTTOM PORTION\*\*\*\*\*

I hereby acknowledge that I have read the foregoing Notice and received a copy of the Homeowner Information Bulletin attached hereto and that all applicable warranties are stated on the sales contract.

Homeowner’s (Purchaser) Signature \_\_\_\_\_ Date \_\_\_\_\_  
*Do not sign until you have read the above notice*

**INFORMATION BELOW TO BE COMPLETED BY DEALER: (Please Print or Type)**

Dealer’s or Broker’s Business Name \_\_\_\_\_ License# \_\_\_\_\_

Manufacturer \_\_\_\_\_

Serial #: \_\_\_\_\_ Purchase Date \_\_\_\_\_ Salesperson License #: \_\_\_\_\_

Purchaser’s Printed Name \_\_\_\_\_

Installer \_\_\_\_\_ or License # \_\_\_\_\_

Selling price: Check appropriate box below

Under \$50,000.00  
*\*Requires \$30.00 Recovery Fund fee*

\$50,000.00 or more  
*\*No Recovery Fund fee required*



**OFFICE OF MANUFACTURED HOUSING**  
1110 West Washington, Suite 100, Phoenix, AZ 85007, Phone: (602) 364-1028



**Home Walk Through Inspection Checklist**

Homeowner Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 \*\*\*\*\*  
 Retailer Name: \_\_\_\_\_ License # \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 \*\*\*\*\*  
 Manufacturer: \_\_\_\_\_ Year: \_\_\_\_\_ Model: \_\_\_\_\_ Serial No: \_\_\_\_\_

Installation Date: \_\_\_\_\_ or Designated Cosmetic Complaint Date: \_\_\_\_\_

**!!! ATTENTION HOME BUYER!!!**

This walk through inspection is being conducted for your benefit. It is important to thoroughly examine each item listed below.

**Instructions:** Inspect all items below for operation and appearance and check the box next to the item to show it was inspected. If there is a problem, circle the number and the item on the list then write the room letter and the item number in the description area on page 2 and describe the problem. Example: A. 13 Countertop – 3 inch scratch near sink.)

**A. Kitchen**

- 1. Door
- 2. Switches/Receptacles
- 3. Light Fixture(s)
- 4. Walls
- 5. Trim
- 6. Windows
- 7. Drapes/Mini-Blinds
- 8. Carpet/Floor Covering
- 9. Ceiling
- 10. Air Registers
- 11. Fan(s)
- 12. TV/Phone Jacks
- 13. Countertops
- 14. Cabinets
- 15. Appliances
- 16. Sink
- 17. Disposal

**B. Living Room/Dining Room**

- 1. Door
- 2. Switches/Receptacles
- 3. Light Fixture(s)
- 4. Walls
- 5. Trim
- 6. Windows
- 7. Drapes/Mini-Blinds
- 8. Carpet/Floor Covering
- 9. Ceiling
- 10. Air Registers
- 11. Fan(s)
- 12. Foyer
- 13. TV/Phone Jacks
- 14. Fireplace/Doors & Hearth
- 15. Hutch/Entertainment Center

**C. Den/Family Room**

- 1. Door
- 2. Switches/Receptacles
- 3. Light Fixture(s)
- 4. Walls
- 5. Trim
- 6. Windows
- 7. Drapes/Mini-Blinds
- 8. Carpet/Floor Covering
- 9. Ceiling
- 10. Air Registers
- 11. Fan(s)
- 12. TV/Phone Jacks
- 13. Cabinets

**D. Hallway**

- 1. Door
- 2. Switches/Receptacles
- 3. Light Fixture(s)
- 4. Walls
- 5. Trim
- 6. Windows
- 7. Drapes/Mini-Blinds
- 8. Carpet/Floor Covering
- 9. Ceiling
- 10. Air Registers
- 11. Fan(s)

**E. Master Bedroom**

- 1. Door
- 2. Switches/Receptacles
- 3. Light Fixture(s)
- 4. Walls
- 5. Trim
- 6. Windows
- 7. Drapes/Mini-Blinds
- 8. Carpet/Floor Covering
- 9. Ceiling
- 10. Air Registers
- 11. Fan(s)
- 12. Closet Door(s)
- 13. TV/Phone Jacks

**F. Bedroom 2**

- 1. Door
- 2. Switches/Receptacles
- 3. Light Fixture(s)
- 4. Walls
- 5. Trim
- 6. Windows
- 7. Drapes/Mini-Blinds
- 8. Carpet/Floor Covering
- 9. Ceiling
- 10. Air Registers
- 11. Fan(s)
- 12. Closet Door(s)
- 13. TV/Phone Jacks

**G. Bedroom 3**

- 1. Door
- 2. Switches/Receptacles
- 3. Light Fixture(s)
- 4. Walls
- 5. Trim
- 6. Windows
- 7. Drapes/Mini-Blinds
- 8. Carpet/Floor Covering
- 9. Ceiling
- 10. Air Registers
- 11. Fan(s)
- 12. Closet Door(s)
- 13. TV/Phone Jacks

**H. Home Exterior**

- 1. Door
- 2. Switches/Receptacles
- 3. Light Fixture(s)
- 4. Siding/Paint
- 5. Shutters/Trim
- 6. Windows
- 7. Hose Bib
- 8. Water Heater/Furnace Doors
- 9. Skirting
- 10. Awnings/Post
- 11. Roof
- 12. Stairs
- 13. Fan(s)



**RUNNING GEAR BUYBACK AGREEMENT**

DATE \_\_\_\_\_

I/WE HAVE ELECTED TO SELL MY/OUR WHEELS/TIRES AND AXLES FROM OUR NEW MANUFACTURED

HOME, SERIAL # \_\_\_\_\_ TO \_\_\_\_\_  
NAME OF DEALERSHIP

IN RETURN FOR THE FOLLOWING COMPENSATION:

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

\_\_\_\_\_  
PURCHASER SIGNATURE                      DATE

\_\_\_\_\_  
PURCHASE SIGNATURE                      DATE



**MANUFACTURED HOUSING  
AGENCY DISCLOSURE STATEMENT**

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Before the Buyer or Seller enters into a discussion with a Manufactured Housing Broker, the Buyer or Seller should know and understand whom the Broker will represent in the transaction. The Buyer or Seller should read carefully all agreements to insure that the agreements adequately express their understanding of the transaction. The duties of a Broker do not relieve the Buyer or Seller of the responsibility to protect their own interests.

**ELECTION**

**BUYER ELECTION** (Complete this section only if you are the Buyer.)

The undersigned elects to have the Broker (Check any that apply)

- represent the Buyer as Buyer's Broker
- represent the Seller as the Seller's Broker
- show Buyer properties listed with the Broker's firm. As a result, Buyer agrees that Broker shall act as agent for both Buyer and Seller provided that Seller consents to dual representation. Buyer's and Seller's consent should be acknowledged in a separate writing other than the purchase contract.

**SELLER ELECTION** (Complete this section only if you are the Seller.)

The undersigned elects to have the Broker (Check any that apply)

- represent the Seller as Seller's Broker
- represent the Buyer as the Buyer's Broker
- show Seller's properties to Buyers represented by the Broker's firm and Seller agrees that Broker shall act as agent for both Seller and Buyer provided that Buyer consents to dual representation. Seller's and Buyer's consent should be acknowledged in a separate writing other than the purchase contract.

**THE UNDERSIGNED \_\_\_ BUYER(S) or \_\_\_ SELLER(S) ACKNOWLEDGE RECEIPT OF A COPY OF THIS DOCUMENT.**

\_\_\_\_\_  
SIGNED Mo/Da/Yr

\_\_\_\_\_  
SIGNED Mo/Da/Yr

\_\_\_\_\_  
FIRM NAME (Broker)

\_\_\_\_\_  
LICENSEE'S SIGNATURE Mo/Da/Yr

This sample form reflects the minimum requirements set forth in Arizona Administrative Code R4-34-101.3. and R4-34-303.A. regarding Agency Disclosure. This does not presume to include each and every law that could pertain to the individual needs of your company and/or clients. For such information, you should seek professional advice from a private source.

# Dispute Resolution Notification

Many States have a consumer assistance or dispute resolution program that homeowners may use to resolve problems with manufacturers, retailers, or installers concerning defects in their manufactured homes that render part of the home unfit for its intended use. Such State programs may include a process to resolve a dispute among a manufacturer, a retailer, and an installer about who will correct the defect.

In States where there is not a dispute resolution program that meets the federal requirements, the HUD Manufactured Home Dispute Resolution Program will operate. These are "HUD-administered States." The HUD Manufactured Home Dispute Resolution Program is not for cosmetic or minor problems in the home. You may contact the HUD Manufactured Housing Program Office at (202) 708-6423 or (800) 927-2891, or visit the HUD website at [www.hud.gov](http://www.hud.gov) to determine whether your State has a State program or whether you should use the HUD Manufactured Home Dispute Resolution Program. Contact information for State programs is also available on the HUD website.

If your State has a State program, please contact the State for information about the program, how it operates, and what steps to take to request dispute resolution. When there is no State dispute resolution program, a homeowner may use the HUD Manufactured Home Dispute Resolution Program to resolve disputes among the manufacturer, retailer, and installer about responsibility for the correction or repair of defects in the manufactured home that were reported during the 1-year period starting on the date of installation. Even after the 1-year period, manufacturers have continuing responsibility to review certain problems that affect the intended use of the manufactured home or its parts, but for which correction may no longer be required under federal law.

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BUYER'S NAME (please print)

---

BUYER'S SIGNATURE

---

DATE



**MOTOR VEHICLE DIVISION AND REGISTRATION APPLICATION**  
SOUTHEAST MESA OFFICE

When you sell your vehicle or otherwise transfer ownership, or end your lease, complete a Sold Notice at www.servicearizona.com.

DATE: 8/17/08  
AMT PD: [Redacted]  
INITIALS: [Redacted]

Plate Number: [Redacted] Tab Number: [Redacted] Unit Number: [Redacted] Arizona Brand: [Redacted]

Vehicle Identification Number: [Redacted] Make: REDMA Body Style: MH Year: 1987 Arizona Brand: [Redacted]

Previous Brand/State: [Redacted] Previous Brand/State: [Redacted] Previous Brand/State: [Redacted] Other States With Brands: [Redacted]

First Registered: [Redacted] Model: [Redacted] List Price: 009187 GVW: 1244 Fuel: [Redacted] Odometer Reading (no tenths): [Redacted] Actual:  B:  C:  Mobile Home V/L: [Redacted]

BARRY [Redacted] Legal Status: [Redacted] Driver License or EIN: [Redacted]

MESA AZ 85206-1335

Registration Expiration Date: [Redacted]

Owner Name: [Redacted] Mailing Address: [Redacted]

Residence Address of Owner or Lessee (if different from Mailing Address): [Redacted]

Name: [Redacted] Driver License or EIN: [Redacted] Mailing Address: [Redacted] Legal Status: [Redacted] Date: [Redacted]

Name: [Redacted] Driver License or EIN: [Redacted] Mailing Address: [Redacted] Legal Status: [Redacted] Date: [Redacted]

Name: [Redacted] Driver License or EIN: [Redacted] Mailing Address: [Redacted] Legal Status: [Redacted] Date: [Redacted]

Mobile Home Manufacturer: REDMAN HOMES Vehicle/Mobile Home Location: [Redacted]

Service Options: [Redacted] Date Vehicle Acquired: [Redacted]  Vehicle is specially constructed or reconstructed.  Vehicle will be rented without a driver (such as a rental car).

I consent to the release of personal information contained in my driver license and vehicle record. I understand that this is not a one-time consent that applies only to a specific individual or organization, but is instead a general consent that applies to all requests from any and all individuals or organizations for any purpose, until revoked by me in writing. Consent for a vehicle record applies to all owners.

I certify that the information above and any documentation that I submit in support of this application, is true and correct, and that the vehicle is free from liens, except those indicated above. I acknowledge that the odometer reading above is qualified by the seller and that it is not the responsibility of the Motor Vehicle Division to determine the accuracy of the odometer statement. I understand that vehicles registered for use in, or used to commute into, Air Quality Control areas (including greater metro Phoenix or Tucson) may be subject to emissions testing.

All Owners Sign Here [Redacted]

Fees  
TTL 7.00

I do hereby state that we hold this property as joint tenants and furthermore empower and authorize each other as attorney in fact to assign the certificate of title by his or her signature alone and thereby transfer, sell, mortgage or otherwise encumber the vehicle, or transfer license plates and/or fees in the same manner as though all joint owners had acted and signed.

Owners With "OR" Legal Status Also Sign Here [Redacted]

Batch/Office Number: 467M 08072008 386 Cat: [Redacted] Canceled Plate Number/State/Agent: [Redacted]  1  2 Plates

New Title Number: 467M008220003 New Film Reference Number: I220467M03 Type: [Redacted]

Prior Title Number: 467M008219034 State: AZ Prior Film Reference Number: I219467M14

11823411  
TOTAL 7.00

# ARIZONA CERTIFICATE OF TITLE



Inventory Control  
10360791

Vehicle Identification Number \_\_\_\_\_ Year 1971 Make RAMAD Model \_\_\_\_\_ Body Style MH  
 First Registered \_\_\_\_\_ List Price 005645 Mobile Home Manufacturer SKYLINE CORPORATION Unit Number 12260

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

Title Number \_\_\_\_\_ Issue Date 04172008 Film Number \_\_\_\_\_ Odometer Reading (in tenths) \_\_\_\_\_  
 Previous Title Number \_\_\_\_\_ State AZ Issue Date 04152008 Previous Film Number \_\_\_\_\_  
 \* A - Actual Mileage  
 B - Mileage in excess of the odometer mechanical limits  
 C - NOT Actual Mileage, WARNING ODOMETER DISCREPANCY

Arizona Brands \_\_\_\_\_

Previous Brand \_\_\_\_\_ State Previous Brand \_\_\_\_\_ State Previous Brand \_\_\_\_\_ State Other States With Brands \_\_\_\_\_  
 ADDITIONAL BRAND INFORMATION WILL BE PRINTED HERE IN THE FUTURE

Owners/Lessee(s) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Lienholders \_\_\_\_\_  
 FIRST LIEN- \_\_\_\_\_ LIEN DATE: 04092008  
 \_\_\_\_\_  
 \_\_\_\_\_

LIEN RELEASE			Acknowledged before me this date		Notary Public Signature	
Lienholder Name			Date	County	State	Commission Expires
Lien Amount	Lien Date	Lienholder Signature				

VOID WITHOUT EAGLE WATERMARK OR IF ALTERED OR ERASED

TRANSMITTAL AND AUDIT REPORT

NOV 11 1987

YOUNG PAI  
MVD County

Date 11-1-87

Prepared By  
Company

Contact Name

Dealer Name [REDACTED] Address [REDACTED] City & Zip Code [REDACTED] Dealer Lic. No. [REDACTED]

Owner Name	Title No.	TRP No.	Vehicle ID No.	Year	Plate No.	Amount Paid
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	1983	[REDACTED]	7.00
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	1984	[REDACTED]	7.00
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	1984	[REDACTED]	7.00
MOTOR VEHICLE DIVISION PRESBOTT						
Date: 11/2/87 Amt Pd: 235.00 Initials: AT # [REDACTED]						
Total						\$ 28.00



PURCHASER NAME(S)

P 664 764 000

RECEIPT FOR CERTIFIED MAIL  
NO INSURANCE COVERAGE PROVIDED

(See Reverse)

Sent to	Motor Vehicle Depart.
Street and No.	P.O. Box 709
P.O., State and ZIP Code	Florence, Arizona 85232
Postage	
Certified Fee	85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipts owing to whom and Date Delivered	90
Return Receipt showing to whom, date, and address of delivery	
TOTAL Postage and Fees	85.00
Postmark Date	NOV 2 1988 USPO

PS Form 3811, June 1985

POST OFFICE DATE STAMP

SENDER'S Complete all fields on each form and place in separate envelope with each form and return to the address on the return receipt card from being returned to you. The return receipt will be provided to the name of the returnee delivered to and the date of delivery. For additional fees that follow in any case are available. Consult postmaster for fees and check boxes for additional services requested.

1.  Show to whom delivered, date and address of delivery.

2. Article addressed to:  
Motor Vehicle Department  
P.O. Box 709  
Florence, Arizona 85232

3. Registered delivery  
4. Insured  
5. Restricted delivery

6. Signature - Addit  
7. Date of Delivery

DEC 1 1988

PS Form 3811, Feb. 1986

RETURN RECEIPT

Company Name and Address  
 1980  
 1980

Account Number  
 5 120 202

Shipping Record  
 5 120 202



**Motor Vehicle Division**  
**PURCHASER NAME(S)**  
 Phoenix AZ 85007

**Vehicle Information:**  
 Make: Chevrolet  
 Model: Camaro  
 Year: 1980  
 VIN: 1G1JC1225P210000000

From Address	To Address	City	State	Postal/ZIP Code	Country
Phoenix, AZ	Phoenix, AZ	Phoenix	AZ	85007	USA

Weight	Dimensions	Package Markings	Insurance
00	00		

Tracking Information	Additional Information
Tracking Number: [Redacted]	Additional Information: [Redacted]

When Using a Different Tracking Label, Check Receipt  
 Portion of That Label Only, Covering Printed Number

Other Information

1980  
 1980



BUYER'S ACCEPTANCE FORM

Your Dealership Name  
Your Address  
Your Town, AZ 85007

License Number:

DATE \_\_\_\_\_

I/We, \_\_\_\_\_,  
have purchased the manufactured home, which is described below, and which is located  
in \_\_\_\_\_, space number \_\_\_\_\_.

I/We acknowledge that I/we have received possession of the manufactured home.

MANUFACTURER SIZE \_\_\_\_\_  
MODEL \_\_\_\_\_ SERIAL NUMBER \_\_\_\_\_

NOTE: PLEASE X THE LINE THAT IS APPLICABLE

I/We also acknowledge that:

- I/We have received a properly signed off title and will apply for title transfer myself/ourselves.
- The Retailer/Broker is making application for title.
- The Retailer/Broker is filing for the Affidavit of Affixture.
- I/We have received the properly signed off Manufacturer's Certificate(s) of Origin.
- Title is being transfer by the lien holder (purchaser arranged financing), who is \_\_\_\_\_.

_____	_____	_____
Dealer Representative	Buyer	Date
	_____	_____
	Buyer	Date

THIS DOCUMENT MUST BE COMPLETED IN ITS ENTIRETY. IT MUST BE EXECUTED AT THE CLOSE OF THE SALE AND MUST BE SIGNED AND DATED IN THE BUYERS' OWN HANDWRITING. ONE CHOICE MUST BE INDICATED IN THE SECTION REGARDING HOW TRANSFER OF TITLE IS TO BE ACCOMPLISHED. THIS FORM MAY BE USED AS A RECEIPT FOR TITLE(S)/MCO(S) WHEN PURCHASER IS GIVEN THE TITLE(S) OR MCO(S) DIRECTLY OR ON A CASH SALE ONLY. DEALER IS TO RETAIN SUPPORTING EVIDENCE THAT TITLE/AFFIDAVIT OF AFFIXTURE HAS BEEN APPLIED FOR ON BEHALF OF THE PURCHASER(S) IF THIS FORM IS MARKED TO INDICATE THAT THE DEALER HAS TAKEN RESPONSIBILITY FOR DOING SAME.

BILL OF SALE FOR FACTORY-BUILT BUILDINGS WITHOUT TITLE(S)/MSO(S)

The purchased unit, a \_\_\_\_\_ (year), \_\_\_\_\_ (manufacturer),  
Serial number \_\_\_\_\_, is the type of factory-built building  
that does not have a title(s) or MSO/MCO(s) (Manufacturer's Statement of  
Origin/Manufacturer's Certificate of Origin).

I, \_\_\_\_\_, the Seller (owner/retailer), in  
consideration of the sum of \$ \_\_\_\_\_, received from  
the Buyer, on the \_\_\_\_\_ day of \_\_\_\_\_, (month) \_\_\_\_\_ (year),  
hereby sell to the Buyer, the unit described above, and warrant that right to possession  
and right to sell the vehicle are vested in the Seller.

\_\_\_\_\_  
Seller's Signature

\_\_\_\_\_  
Date

I, \_\_\_\_\_, the Buyer, acknowledge that I have received  
possession of the above described unit.

\_\_\_\_\_  
Buyer's Signature

\_\_\_\_\_  
Date

**MANUFACTURED HOME RETAIL INSTALLMENT CONTRACT AND SECURITY AGREEMENT (CONV. - FHA - VA) (SD)**

Date 8-12-99 **CONSUMER CREDIT DOCUMENT**

BUYER: \_\_\_\_\_  
 SELLER: \_\_\_\_\_  
 ASSIGNEE: \_\_\_\_\_

*Funded 8-13-99*

**FEDERAL TRUTH-IN-LENDING ACT DISCLOSURES**

ANNUAL PERCENTAGE RATE <small>(The cost of my credit as a yearly rate.)</small>	FINANCE CHARGE <small>(The dollar amount the credit will cost me.)</small>	Amount Financed <small>(The amount of credit provided to me or on my behalf.)</small>	Total of Payments <small>(The amount I will have paid after I have made all payments as scheduled.)</small>	Total Sale Price <small>(The total cost of my purchase on credit, including my down payment of)</small>
11.00 %	\$ 116721.83	\$ 48050.17	\$ 164772.00	\$ 5341.13 \$ 170113.13

My payment schedule will be:

Number of Payments	Amount of Payments	When Payments Are Due
360	457.70	Monthly beginning <b>9-15-99</b>

SECURITY: I am giving a security interest in:  
 The goods or property being purchased, N/A Real property located at N/A  
 FILING FEES: \$ 25.00 LATE CHARGE: If a payment is more than 15 days late, I will be charged \$ 5.00 or 5.00 % of the payment, whichever is LESS  
 PREPAYMENT: If I pay off early, I will not be charged a prepayment penalty.  
 ASSUMPTION: Someone buying my home may, subject to conditions, be allowed to assume the remainder of the Contract on the original terms.  
 See the Contract document below for any additional information about nonpayment, default, any required repayment in full before the scheduled date, and prepayment refunds and penalties.

**ITEMIZATION OF THE AMOUNT FINANCED**

1. Cash Sale Price (Including Taxes of)	\$ 2257.30	\$ 53363.30
2. Gross Trade-in	\$ .00	
Less Amount Given on Trade-in	\$ .00	
Net Trade-in	\$ .00	
Description: Make _____ Year _____ 0000 Size _____ 00 X 00		
3. Cash Down Payment	\$ 5341.13	
4. Total Down Payment	-	\$ 5341.13
5. Unpaid Balance of Cash Sale Price (1 - 4)	+ \$	48022.17
6. Paid to Public Officials	+ \$	25.00
7. Paid to Insurance Companies	+ \$	.00
8. Paid to Appraiser	+ \$	.00
9. a. Paid to _____ FOR POINTS	+ \$	951.40
b. Paid to _____ HANDLING FEE	+ \$	20.08
c. Paid to _____	+ \$	.00
d. Paid to _____	+ \$	.00
e. Paid to _____	+ \$	.00
f. Paid to _____	+ \$	.00
g. Paid to _____	+ \$	.00
10. Principal Balance (5 + 6 + 7 + 8 + 9 a-g.)	+ \$	49031.57
11. Prepaid Finance Charges	-	\$ 981.40
12. Amount Financed (10 - 11)	\$	48050.17

**PHYSICAL DAMAGE INSURANCE**  
 Physical Damage Insurance is required but I may obtain it anyone I want that is acceptable to you. If I get the insurance checked below from you or through you, I will pay you \$ .00 for insurance protection for a term of 00 years.  
 Comprehensive (\$ .00 deductible)  
 Flood  
 Liability  
 Other  
 Vendor's Single Interest

**OPTIONAL CREDIT LIFE AND DISABILITY INSURANCE**  
 Credit Life and Disability Insurance are not required to obtain credit and will not be provided unless I sign and agree to pay the additional cost.  
 The term of this insurance is 00 years.  
 Single Credit Life Insurance \$ .00  
 Joint Credit Life Insurance \$ .00  
 Single Credit Disability Insurance \$ .00  
 Total \$ .00  
 Signature of Buyer(s) Insured \_\_\_\_\_ Date \_\_\_\_\_

**CONTRACT AND SECURITY AGREEMENT**

1. DEFINITIONS: "I", "me", "my" means the Buyer(s). "You", "your" means the Seller and also the Assignee (after the Contract is assigned by Seller). "Manufactured Home" means the manufactured home and any other property described below and on page "Contract" or "Agreement" means this Retail Installment Contract and Security Agreement.

NEW OR USED	YEAR AND MAKE	MODEL	SERIAL NUMBER	SIZE
N	1999 LAYCO	XL2048A	[REDACTED]	28 X 48

66

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER AND MICRO PRINTING

No [REDACTED]

75-1552/12

PAY TEN THOUSAND SIX HUNDRED ELEVEN AND 17/100 DOLLARS

DATE AMOUNT

AUGUST 13, 1999 \$\*\*\*10,611.17

PRINTED

DETACH AND RETAIN THIS PORTION  
THE ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW  
IF NOT CORRECT PLEASE NOTIFY US PROMPTLY, NO RECEIPT DESIRED.

SERVICING CORPORATION

No [REDACTED]

DATE	DESCRIPTION	AMOUNT
8/13/99	PROCEEDS C - 13723	10611.17
	MANUFACTURER	.00
	PROCEEDS	10611.17
	SALES TAX	.00
	FLOOR PLAN PAYOFF	37411.00
	GRANDFATHERS FEE	28.00
	TITLE FEE	28.00
	INSURANCE PREMIUM	.00
	Customer Points	961.40
	1999 XL2848A 38627 [REDACTED]	
	( 2.00 ACQUISITION POINTS)	

SI NO. 31-00-011 (1/94) 250Wrap



**Manufactured Housing Distribution Worksheet**  
CENTRAL NATIONAL BANK & TRUST CO OF ENID

**PURCHASER ADDRESS**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 FLAGSTAFF, AZ 86004

**CUST NAME** \_\_\_\_\_  
**TRIAD ACCT #** \_\_\_\_\_  
**LENDER** \_\_\_\_\_

**CONTRACT DATE** 05/31/08  
**FIRST PAYMENT** 06/30/08  
**PONDING DATE** 06/03/08

LOAN ITEMIZATION

Selling Price	<u>\$54,768.00</u>
Sales Tax	<u>\$2,361.29</u>
Title & Prep	<u>\$7.00</u>
Insurance	<u>\$0.00</u>
Triad Insurance	<u>NO</u>
Extended Warranty	<u>\$0.00</u>
Triad Home Warranty	<u>NO</u>
Flood Certification	<u>\$0.00</u>
Down Payment	<u>\$2,900.00</u>
DOC Stamps	<u>\$0.00</u>
Amount To Finance	<u>\$54,236.29</u>
Flood Life Of Loan	<u>\$15.00</u>
Doc Prep Fee	<u>\$199.00</u>
BANK FEE	<u>\$100.00</u>
Note Amount	<u>\$54,550.29</u>

FUNDS DISTRIBUTION

Proceeds to:	<u>\$20,662.29</u>
_____	
FLAGSTAFF, AZ 86004	
_____	
Proceeds to: (Floor Plan)	<u>\$33,567.00</u>
TEXTRON	
_____	
_____	
Insurance	<u>\$0.00</u>
Triad Insurance	<u>NO</u>
DOC Stamps	<u>\$0.00</u>
Title & Prep AZ MOTOR VEH DIV	<u>\$7.00</u>
Home Buyers Warranty	<u>\$0.00</u>
Triad Home Warranty	<u>NO</u>
Flood To: Geotrac	<u>\$0.00</u>
Total Fees:	<u>\$7.00</u>
Grand Total	<u>\$54,236.29</u>
\$200.00 SPIFF TO DEALER	

\_\_\_\_\_

AB

A. U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
**SETTLEMENT STATEMENT**

Transnation Title Insurance Company  
 1750 S Railroad Springs Blvd  
 Suite 9  
 Flagstaff, AZ 86001

**FINAL**

B. TYPE OF LOAN  
 1.  FHA    2.  FHA  
 3.  CONV. UNINS  
 4.  VA    5.  CONV. INS

6. ESCROW FILE NUMBER: \_\_\_\_\_  
 7. LOAN NUMBER: \_\_\_\_\_  
 8. MORTGAGE INSURANCE CASE NUMBER: \_\_\_\_\_

NOTE: This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "P.G.C." were paid outside the closing; they are shown here for informational purposes and are not included in the totals.

D. NAME OF BORROWER: \_\_\_\_\_

ADDRESS OF BORROWER: \_\_\_\_\_  
 Flagstaff, AZ 86004

E. NAME OF SELLER: \_\_\_\_\_

ADDRESS OF SELLER: \_\_\_\_\_

F. NAME OF LENDER: American General Finance  
 ADDRESS OF LENDER: 1750 S Railroad Springs Blvd 2,  
 Flagstaff, AZ 86001

G. PROPERTY LOCATION: \_\_\_\_\_  
 \_\_\_\_\_  
 Coconino \_\_\_\_\_

H. SETTLEMENT AGENT: Transnation Title Insurance Company  
 PLACE OF SETTLEMENT: 1750 S Railroad Springs Blvd, Suite 9, Flagstaff, AZ 86001

I. SETTLEMENT DATE: 11/24/2006    PROPRATION DATE: 11/24/2006    FUNDING DATE: 11/26/2006

J. SUMMARY OF BORROWER'S TRANSACTION		K. SUMMARY OF SELLER'S TRANSACTION	
100. Gross Amount Due from Borrower		400. Gross Amount Due to Seller	
101. Contract Sales Price		401. Contract Sales Price	
102. Personal Property		402. Personal Property	
103. Settlement charges to Borrower (line 1403)	61,644.91	403.	
104. Payoff to National Bank of Ari	64,288.04	404.	
105.		405.	
Adjustments For Items Paid By Seller In Advance:		Adjustments For Items Paid By Seller In Advance:	
106. City/Town Taxes		406. City/Town Taxes	
107. County Taxes		407. County Taxes	
108. Assessments		408. Assessments	
109.		409.	
110.		410.	
111.		411.	
112.		412.	
113.		413.	
114.		414.	
115.		415.	
120. Gross Amount Due from borrower	125,932.95	420. Gross Amount Due to Seller	0.00
200. Amounts Paid by or on behalf of Borrower		500. Reduction in Amount Due to Seller	
201. Deposit of earned money		501. Excess deposit (see Instructions)	
202. Principal amount of new loan(s)	125,932.95	502. Settlement charges to Seller (line 1400)	0.00
203. Existing loan(s) taken subject to		503. Existing loan(s) taken subject to	
204. Cash Payment & Closing Costs		504. Payoff of first mortgage loan	
205.		505. Payoff of second mortgage loan	
206.		506.	
207.		507.	
208.		508.	
209.		509.	
Adjustments For Items Unpaid By Seller:		Adjustments For Items Unpaid By Seller:	
210. City/Town Taxes		510. City/Town Taxes	
211. County Taxes		511. County Taxes	
212. Assessments		512. Assessments	
213.		513.	
214.		514.	
215.		515.	
216.		516.	
217.		517.	
218.		518.	
219.		519.	
220. Total Paid By/For Borrower	125,932.95	520. Total Reductions In Amount Due Seller	0.00
300. Cash at Settlement from/to Borrower		600. Cash at Settlement to/from Seller	
301. Gross amount due from Borrower (line 120)	125,932.95	601. Gross amount due to Seller (line 420)	0.00
302. Less amount paid by/for Borrower (line 220)	125,932.95	602. Less reductions in amount due Seller (line 52)	0.00
303. Cash FROM/TO Borrower:	0.00	603. Cash TO/FROM Seller:	0.00

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I. SETTLEMENT CHARGES:		
<b>700. Total Sales/Broker's Commission:</b>		
Based on Price \$ @ % =		
Division of Commission (line 700) follows:		
701. \$ to	Paid from Borrower's Funds at Settlement	Paid from Seller's Funds at Settlement
702. \$ to		
\$ to		
703. Commission paid at settlement		
704.		
<b>800. Items Payable in Connection With Loan:</b>		
801. Loan Origination Fee		
802. Loan Discount Fee % to American General Finance	3,600.00	
803. Appraisal Fee to Action Appraisal	400.00	
804. Credit Report		
805. Lenders inspection Fee		
806. Mortgage insurance Application Fee		
807. Assumption Fee		
808. Tax Service Fee to ZC Sterling	59.00	
809. Customer insurance to American General Finance	1,109.95	
810.		
811.		
<b>900. Items Required By Lender To Be Paid in Advance:</b>		
901. Interest		
902. Mortgage Insurance Premium		
903. Hazard Insurance Premium		
904.		
905.		
<b>1000. Reserves Deposited With Lender:</b>		
1001. Hazard Insurance		
1002. Mortgage Insurance		
1003. City Property Taxes		
1004. County Property Taxes		
1005. Annual Assessments		
1006.		
1007.		
1008. Aggregate Adjustment months @ \$	0.00	
<b>1100. Title Charges:</b>		
1101. Settlement or closing fee to Transnation Title Insurance Company	75.00	
1102. Abstract or title search		
1103. Title examination		
1104. Title insurance binder		
1105. Document preparation		
1106. Notary Fees		
1107. Attorney's Fees		
(includes above item numbers: )		
1108. Title insurance		
(included above item numbers: )		
1109. Lender's coverage \$ 125,932.95 to Transnation Title Insurance Company	401.95	
1110. Owner's Coverage		
1111.		
1112. Tracking Fee to Transnation Title Insurance Company	50.00	
1113.		
1114. Express Mail to Transnation Title Insurance Company	20.00	
1117. Affidavit of Affixture to Transnation Title Insurance Company	60.00	
<b>1200. Government Recording and Transfer Charges</b>		
1201. Recording Fees: Deeds Mortgage & Release \$	60.00	
1202. City/County tax/stamps		
1203. State tax/stamps		
1204. City Transfer Tax		
1205. County Transfer Tax		
1206.		
1207.		
<b>1300. Additional Settlement Charges:</b>		
1301. Survey		
1302. Pest Inspection		
1303. Payoff to [REDACTED]	55,729.01	
1304.		
1305.		
1306.		
1307.		
1400. Total Settlement Charges (Enter on line 103, Section J -and- line 502, Section K)	61,644.91	0.00

