## Texas Department of Housing and Community Affairs MANUFACTURED HOUSING DIVISION

P. O. BOX 12489 Austin, Texas 78711-2489

(800) 500-7074, (512) 475-2200 FAX (512) 475-1109
Pursuant to the Texas Manufactured Housing Standards Act, Chapter 1201 of the Occupations Code Internet Address: www.tdhca.state.tx.us/mh/index.htm

## APPLICATION FOR STATEMENT OF OWNERSHIP AND LOCATION

BLOCK 1: Transac	tion Identification						
This application is for First time iss Revised SOI Location Grant Country Coun	cks):  For Control W  at mail) Re	or Department Use Only odes:  orm T: Y / N ounty Code: ght of Surv.: Y / N ind Zone: I / II stailer #: anufacturer #:					
BLOCK 2: Home In			· · · · · · · · · · · · · · · · · · ·				
Manufacturer Name: Crest Ridge Homes Inc. Address: 1000 Industrial Blvd. City, State, Zip: Breckenridge TX 76424 License Number: M00288					Mod of Manufactu otal Square Fe	re: 7-28-1994 et: 868	
Section 1: Label/	Seal Number 877	Serial Number	er	Weight 15740	Wind Zor Size*	* * NOTE: Size must be	
Section 2:				13740	16 <sub>X</sub> 56	dimensions (length and width) of the home as	
Section 3: Section 4:			X X			measured to the neurest ½ foot at the base of the home, exclusive of the tongue or	
BLOCK 3: Home Loc	<del></del>					other towing device.	
Was Home Moved?  Physical Location: 1	Yes No If ye 229 CR 420  Address	s, attach Form T – Notice of I	nstallation and co Rockdale.	TX	76567 766	577 Milam	
BLOCK 4: Ownership Information IF ownership changed date of transfer							
Name Corley  License # if Retailer:			(4b) Purchaser(s), Transferee(s), or Owner(s)  Name Ann L White License #				
Name			Name if Retailer:				
Mailing Address 1229 CR 420 City/State/Zip Rockdale TX 76	Mailing Address 522 Dennis City/State/Zip						
Pockdale TX 76567 Nondale, X7657 Round Rock TX 78664  Daytime Phone Number ( ) Daytime Phone Number ( )							
BLOCK 5: Right of Su	rvivorship (if no	box is checked, joint own	ers will NOT L				
<ul> <li>Husband and wi this day forward</li> </ul>	fe will be the only be held jointly a other than husba	check the applicable box to owners and agree that the nd in the event of death, should and wife, desire right of	below: Ownership of the	e above descrit	ed manufactu		
DIVIA							

BLOCK 6: Person	nal/Real Property Election - to be elected i	by purchaser(s) transf	arap(c) ar average						
☐ Personal Propert	y - Applicant elects to treat this home as persona	property. All documents	affecting title to the least the state of						
	Personal Property - Applicant elects to treat this home as personal property. All documents affecting title to the home will be filed in the records the department.  Real Property - I (we) elect to treat this home as real property and certify that I am (we are) entitled to make this election in accordance with Section 1201.2055 of the Occupations Code because (one box must be checked):								
I (We) understan	I (we) own the real property that the hom I (we) have a qualifying long-term lease that the home will not be considered to be real.	e is attached to.							
records of the county in which the home is located.  Legal description must be provided for real property:  35 acres Abigail Fokes Survey A-20 Milam County									
Texas									
DI CONTE									
BLUCK 7: Design	ated Use - to be designated by purchaser(s	s), transferee(s), or own	ier(s)						
□ <sub>XX</sub> Residential Use □ Non-Residentia	(as a dwelling) I - Check one of the following:								
	Business Use								
	□ Salvage								
BLOCK 8: Person	al Property Liens - Specify any liens, char	ges, or other encumbra	incas to be recorded as Al. GOY						
Date of First Lien:									
Name of First Lienholder:		Date of Second Lie							
Mailing Address:		Name of Second Lienholds							
City/State/ZIP:		Mailing Addres	s:						
Daytime Phone Number:		City/State/ZI							
	( ) -	Daytime Phone Numbe	( ) -						
BLOCK 9: Third P	arty Special Mailing Instructions - for con	ies requested by nave	ns other than owner or lienholder of record						
IF a certified conv. of	on SOI in the Market	ves requested by perso	Tassie Pendleton						
the owner or henhold	an SOL is to be mailed to anyone other than er of record (such as a closing agent), please	Name: Company:							
provide that mailing a	iddress here.	Street Address:	Botts Title Company 300 E First						
		City, State, Zip:	Gameron TX 76520						
BLOCK 10: Certific	cation and Notarization - The statements s	et forth herein are mo-							
		set forth herein are made under oath and are true and correct. (10b) Each purchaser/transferee or owner must sign, and							
A 3	signature and seal are required.	notary signature and seal are required.							
Si	ignature of seller/transferor	Signature of purchaser/transferee or owner							
Sworn and subscribed to	Defore me this 23 day of Soptember, 2014	Sworn and subscribed before me this 3 day of Soptimity, 2004							
and the	Signature of Wotary JENNY FREI	SigngranyFREIary							
	MY SOMMISSION EXPIRES April 16, 2008		MY COMMISSION EXPIRES April 6/2008						
The Carlot		Landan							
ឯខ្មែ	mature of seller/transferor	Signature of purchaser/transferee or owner							
Sworn and subscribed be	efore me thisday of, 20	Sworn and subscribed before me this day of, 20							
	Signature of Notary	Signature of Notary							
	SEAL	SEAL							