



OFFICIAL RECORDS OF
PINAL COUNTY RECORDER
LAURA DEAN-LYTTLE

Recording Requested by:
First American Title Insurance Company

When recorded mail to:
Mark Lindstedt
Box 145
Lamond, AB TOL 1G0

DATE/TIME: 01/06/09 1413
FEE: \$16.00
PAGES: 2
FEE NUMBER: 2009-001204

JAN 2 2009

SPECIAL WARRANTY DEED

Escrow No. **483-5122018 (scj)**

For the consideration of TEN AND NO/100 DOLLARS, and other valuable considerations, I or we,

Meritage Homes of Arizona, Inc., an Arizona corporation formerly known as Hancock-MTH Communities, Inc., an Arizona Corporation, the GRANTOR does hereby convey to

Mark Lindstedt, a married man as his sole and separate property, the GRANTEE

The following described real property situate in, **Pinal County, Arizona** with the title being conveyed to the grantee as set forth in the attached acceptance by the grantee:

LOT 1523, OF PHASE 2, BLOCK F OF MISSION ROYALE, ACCORDING TO THE PLAT OF RECORD IN THE OFFICE OF THE COUNTY RECORDER OF PINAL COUNTY, ARIZONA, RECORDED IN CABINET G, SLIDE 15.

Subject To: Existing taxes, assessments, liens, encumbrances, covenants, conditions, restrictions, rights of way and easements of record.

And the GRANTOR binds itself and its successors to warrant the title as against its acts and none other, subject to the matters set forth.

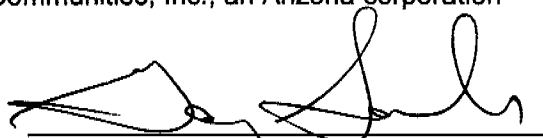
DATED: December 11, 2008

Warranty Deed - continued

~~SEE ACCEPTANCE ATTACHED HERETO~~

~~AND BY REFERENCE MADE A PART HEREOF.~~

Meritage Homes of Arizona Inc., an Arizona corporation formerly known as Hancock-MTH Communities, Inc., an Arizona corporation


By: Gary Sorrels, Vice President of Sales

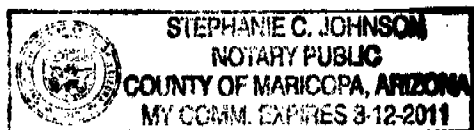
STATE OF AZ)
County of Maricopa) ss.

On 12.11.08, before me, the undersigned Notary Public, personally appeared **Gary Sorrels, Vice President of Sales**, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

My Commission Expires: 3.12.11


Notary Public



AFFIDAVIT OF PROPERTY VALUE

1. ASSESSOR'S PARCEL NUMBER(S) (primary parcel number):
 Primary Parcel: 505-90-0940 6
 BOOK MAP PARCEL SPLIT LETTER

Does this sale include any parcels that are being split / divided?

Check one: Yes ☐ No ☒

How many parcels, other than the Primary Parcel, are included in this sale?

Please list the additional parcels below (no more than four):

(1) _____ (3) _____
 (2) _____ (4) _____

2. SELLER'S NAME AND ADDRESS:

Meritage Homes of Arizona, Inc.
 17851 N. 85th St, 3rd Floor
 Scottsdale, AZ 85255

3. (a) BUYER'S NAME AND ADDRESS:

Mark Lindstedt
 Box 145
 Lamond, AB TOL 1G0

(b) Are the Buyer and Seller related: Yes ☒ No ☒
 If yes, state relationship: _____

4. ADDRESS OF PROPERTY:

2567 East Santa Maria Drive
 Casa Grande, AZ 85294

5. MAIL TAX BILL TO:

Mark Lindstedt
 Box 145
 Lamond, AB TOL 1G0

6. PROPERTY TYPE (for Primary Parcel): **NOTE: Check Only One Box**

- | | |
|--|--|
| a. <input type="checkbox"/> Vacant Land | f. <input type="checkbox"/> Commercial or Industrial Use |
| b. <input checked="" type="checkbox"/> Single Family Residence | g. <input type="checkbox"/> Agricultural |
| c. <input type="checkbox"/> Condo or Townhouse | h. <input type="checkbox"/> Mobile or Manufactured Home |
| d. <input type="checkbox"/> 2-4 Plex | i. <input type="checkbox"/> Other Use, Specify: _____ |
| e. <input type="checkbox"/> Apartment Building | |

7. RESIDENTIAL BUYER'S USE: If you checked **b, c, d, or h** in Item 6 above, please check **one** of the following:

☒ To be occupied by owner or family member. ☐ To be rented to someone other than family member.

See reverse side for definition of a "family member."

8. NUMBER OF UNITS: _____

For Apartment Properties, Motels, Hotels,
 Mobile Home Parks, RV Parks, Mini-Storage Properties, etc.

COUNTY OF RECORDATION: **PINAL**

FEE NO: **2009-001204**

RECORD DATE: **01/06/09**

Validation Codes:

(e) ASSESSOR: _____ (f) DOR _____

ASSESSOR'S USE ONLY

Verify Primary Parcel in Item 1: _____

Use Code: _____ Full Cash Value: \$ _____

10. TYPE OF DEED OR INSTRUMENT (Check Only One Box):

- | | |
|--|---|
| a. <input type="checkbox"/> Warranty Deed | d. <input type="checkbox"/> Contract or Agreement |
| b. <input checked="" type="checkbox"/> Special Warranty Deed | e. <input type="checkbox"/> Quit Claim Deed |
| c. <input type="checkbox"/> Joint Tenancy Deed | f. <input type="checkbox"/> Other |

11. SALE PRICE: **187,000.00** **00**

12. DATE OF SALE (Numeric Digits): **12/08**
 Month Year

(For example: 03 / 05 for March 2005)

13. DOWN PAYMENT: \$ **37,400** **00**

14. METHOD OF FINANCING:

- | | |
|--|--|
| a. <input type="checkbox"/> Cash (100% of Sale Price) | e. <input checked="" type="checkbox"/> New loan(s) from Financial institution: |
| b. <input checked="" type="checkbox"/> Exchange or trade | (1) <input checked="" type="checkbox"/> Conventional |
| c. <input type="checkbox"/> Assumption of existing loan(s) | (2) <input type="checkbox"/> VA |
| d. <input checked="" type="checkbox"/> Seller Loan (Carryback) | (3) <input type="checkbox"/> FHA |
| | f. <input type="checkbox"/> Other financing; Specify: _____ |

15. PERSONAL PROPERTY (see reverse side for definition):

(a) Did the Sale Price in Item #11 include Personal Property that Impacted the Sale Price by .5% or more? Yes _____ No ☒

(b) If Yes, provide the dollar amount of the Personal Property:

\$ **00** AND

briefly describe the
 Personal Property: _____

16. PARTIAL INTEREST: If only a partial ownership interest is

being sold, briefly describe the partial interest: _____

17. PARTY COMPLETING AFFIDAVIT (Name, Address, Phone):

First American Title Insurance Company
 17851 North 85th Street, Suite 140
 Scottsdale, AZ 85255

\483-5122018 (scj) Phone (480)342-7030

18. LEGAL DESCRIPTION (attach copy if necessary):

LOT 1523; OF PHASE 2, BLOCK F OF MISSION ROYALE, ACCORDING TO THE PLAT OF RECORD IN THE OFFICE OF THE COUNTY RECORDER OF PINAL COUNTY, ARIZONA, RECORDED IN CABINET G, SLIDE 15.

THE UNDERSIGNED BEING DULY SWORN, ON OATH, SAYS THAT THE FOREGOING INFORMATION IS A TRUE AND CORRECT STATEMENT OF THE FACTS PERTAINING TO THE TRANSFER OF THE ABOVE DESCRIBED PROPERTY.

Signature of Seller/Agent

State of Ariz, County of Maricopa

Subscribed and sworn to before me on this

2001 day of January, 09

Notary Public Rachel T. Kelly

Notary Expiration Date 11/19/09

Signature of Buyer/Agent

State of Ariz, County of Maricopa

Subscribed and sworn to before me on this

2nd day of January, 09

Notary Public Rachel T. Kelly

Notary Expiration Date 11/19/09

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