



NWA UTILITY SERVICES, INC
PO Box 9299 Fayetteville, AR 72703
Office 479-530-5926 Fax 479-925-7217
www.nwautilityservices.com

Arkansas Department of Environmental Quality
5301 Northshore Dr
North Little Rock AR 72118-5317

Water Division Permits Branch

Attn: Jamal Solaimanian

Please see the enclosed paperwork to process the transfer of Permit 4890-WR-1 from Eagle Creek Holdings to Legacy Estates Homeowners Association, Inc.

Additionally, I have included the paperwork for the deficiencies noted on the Bethel Oaks Subdivision Permit 4875-WR-3. I had emailed these documents to Katherine McWilliams on Nov 6, 2017 and told her I would also be sending them via Fed Ex.

Thank you very much

A handwritten signature in black ink, appearing to read 'K Bartlett', is written over the typed name.

Kathryn Bartlett
Internal Operations Manager
NWA Utility Services, Inc.

PERMIT TRANSFER FORM

Please select one of the following options:

- A. Permittee (legal name) change B. Facility name change C. Responsible official name change
- A B C A & B A & C B & C A & B & C

PERMIT NUMBER: 4890-WA-1

I. CURRENT PERMITTEE INFORMATION

Permittee (legal name): Eagle Creek Holdings, LLC
 Facility Name: Legacy Estates
 Responsible Official Name (see Section IV below): Ryan Russell
 Is the permittee identified above, the owner of the facility? Yes No
 If you mark No, please list the name of the owner: Legacy Estates Homeowners Assoc. Inc

II. NEW PERMITTEE INFORMATION

Permittee (legal name): Legacy Estates Homeowners Association, Inc.
 Facility Name (if different from Permittee Name): Legacy Estates
 Is the permittee identified above, the owner of the facility? Yes No
 If you mark No, please list the name of the owner: _____

Responsible Official Name (see Section IV below): Ryan Russell

Official Title of Responsible Officer: HOA President

E-mail: guythatbuyshouses@gmail.com

Owner Type:

Permittee Address: PO Box 8835 STATE PARTNERSHIP
 Permittee City: Fayetteville FEDERAL CORPORATION*
 Permittee State: AR Zip: 72702 SOLE PROPRIETORSHIP

Permittee Telephone No.: (479) 460-6177

Is the new permittee registered with the Arkansas Secretary of State? Yes No

If yes, please provide the full name of corporation if different than the legal permittee name listed above. _____

Facility Mailing Address: PO Box 8835 Facility City: Fayetteville
 Facility State: AR Zip: 72702

Facility Contact Person Name: Ryan Russell Contact Person Title: HOA President
 Telephone Number: (888) 502-1555 Fax Number: _____ E-mail: _____

Invoice Contact Person: Ryan Russell City: Fayetteville
 Invoice Mailing Address: PO Box 8835 State: AR Zip: 72702
 Invoice Mailing Address: _____ Telephone: (888) 502-1555

Cognizant Official Name: Kenneth Gregory Cognizant Official Title: Plant Operator
 Telephone Number: (479) 790-3813 Fax Number: _____ E-mail: Ken@aquatechsys.com

PERMIT TRANSFER FORM

III. OWNERSHIP CHANGE AGREEMENT

Please note you must complete this Section (III.) only if the permit has a new owner or a new ownership.

Please specify the closing date for this transaction: August 23, 2017

Current Permittee (Seller): Eagle Creek Holdings, LLC

Signature of Responsible Corporate Officer: _____
Title of Responsible Corporate Officer: Member
Printed Name of Responsible Corporate Officer: Ryan Russell
Date: October 30, 2017

New Permittee (Buyer): Legacy Estates Homeowners Association, Inc.

Signature of Responsible Corporate Officer: _____
Title of Responsible Corporate Officer: HOA President
Printed Name of Responsible Corporate Officer: Ryan Russell
Date: October 30, 2017

Disclosure Statement:

Disclosure Statement must be submitted for new permittee. Disclosure Statement is not required for Stormwater Permits.

Is Disclosure Statement enclosed: Yes No

Financial Assurance:

Please note that if Financial Assurance is required for the current permittee then the new permittee may have to provide new Financial Assurance before the permit maybe transferred..

Land Use Contract:

For land application permits you must submit a new land use contracts for all the sites permitted under the current permit for land application. The new land use contract must be signed by the new permittee and land owner.

IV. CERTIFICATION OF NEW PERMITTEE

"I certify that the cognizant official designated in this Permit Transfer Form (Section II) is qualified to act as a duly authorized representative under the provisions of 40 CFR Part 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports signed by the applicant. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

In addition, I certify that there will be no operational changes that warrant a permit modification. (Please note that if there are changes that warrant a permit modification, then you must submit a complete application, updated plans, design calculations and specifications, and the permit modification fee along with this Ownership Change Form. The transfer may be made effective prior to permit modification.)

Typed or Printed Name: Ryan Russell
Signature: _____

Title: HOA President
Date: October 30, 2017

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DISCLOSURE STATEMENT

Instructions for the Completion of this Document:

- A. Individuals, firms or other legal entities with no changes to an ADEQ Disclosure Statement, complete items 1 through 5 and 18.
- B. Individuals who never submitted an ADEQ Disclosure Statement, complete items 1 through 4, 6, 7, and 16 through 18.
- C. Firms or other legal entities who never submitted an ADEQ Disclosure Statement, complete 1 through 4, and 6 through 18.

If Not Submitting by ePortal, Mail Original to:

ADEQ

DISCLOSURE STATEMENT

[List Proper Division(s)]

5301 Northshore Drive

North Little Rock, AR 72118-5317

1. APPLICANT: (Full Name)	Legacy Estates Homeowners Association, Inc.
2. MAILING ADDRESS (Number and Street, P.O.Box Or Rural Route):	P.O. Box 8835
3. CITY, STATE, AND ZIP CODE:	Fayetteville, AR 72702

4a. Applicant Type:
<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Corporate or Other Entity
4b. Reason for Submission:
<input checked="" type="checkbox"/> Permit <input type="checkbox"/> License <input type="checkbox"/> Certification <input type="checkbox"/> Operational Authority
<input type="checkbox"/> New Application <input checked="" type="checkbox"/> Modification <input type="checkbox"/> Renewal Application (If no changes from previous disclosure statement, complete number 5 and 18.)
4c. Division:
<input type="checkbox"/> Air <input checked="" type="checkbox"/> Water <input type="checkbox"/> Hazardous Waste <input type="checkbox"/> Regulated Storage Tank <input type="checkbox"/> Mining <input type="checkbox"/> Solid Waste

5. Declaration of No Changes:
The violation history, experience and credentials, involvement in current or pending environmental lawsuits, civil and criminal, have not changed since the last Disclosure Statement that was filed with ADEQ on _____

6. Describe the experience and credentials of the Applicant, including the receipt of any past or present permits, licenses, certifications or operational authorization relating to environmental regulation. (Attach additional pages, if necessary.)

Formerly issued permit for
this facility as Eagle Creek Holdings, LLC

7. List and explain all civil or criminal legal actions by government agencies involving environmental protection laws or regulations against the Applicant * in the last ten (10) years including:

1. Administrative enforcement actions resulting in the imposition of sanctions;
2. Permit or license revocations or denials issued by any state or federal authority;
3. Actions that have resulted in a finding or a settlement of a violation; and
4. Pending actions.

(Attach additional pages, if necessary.)

NONE

* Firms or other legal entities shall also include this information for all persons and legal entities identified in sections 8-16 of this Disclosure Statement.

8. List all officers of the Applicant. (Add additional pages, if necessary.)

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

9. List all directors of the Applicant. (Add additional pages, if necessary.)

NAME: Ryan Russell TITLE: HOA President

STREET: 694 E Bowen Blvd

CITY, STATE, ZIP: Fayetteville AR 72703

NAME: Keith Marrs TITLE: HOA Vice President

STREET: PO Box 605

CITY, STATE, ZIP: Farmington AR 72730

NAME: Jacob Keen TITLE: HOA Secretary Treasurer

STREET: 314 W Emma St

CITY, STATE, ZIP: Springdale AR 72764

10. List all partners of the Applicant. (Add additional pages, if necessary.)

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

11. List all persons employed by the Applicant in a supervisory capacity or with authority over operations of the facility subject to this application.

NAME: Ken Gregory TITLE: Plant Operator Employed by

STREET: PO Box 9299 NWA Utility Services

CITY, STATE, ZIP: Fayetteville, AR 72703 INC.

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

12. List all persons or legal entities, who own or control more than five percent (5%) of the Applicant's debt or equity.

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NONE

13. List all legal entities, in which the Applicant holds a debt or equity interest of more than five percent (5%).

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NAME: _____ TITLE: _____
STREET: _____
CITY, STATE, ZIP: _____

NONE

14. List any parent company of the Applicant. Describe the parent company's ongoing organizational relationship with the Applicant.

NAME: _____
STREET: _____
CITY, STATE, ZIP: _____

Organizational Relationship: _____

NONE

15. List any subsidiary of the Applicant. Describe the subsidiary's ongoing organizational relationship with the Applicant.

NAME: _____
STREET: _____
CITY, STATE, ZIP: _____

Organizational Relationship: _____

NONE

16. List any person who is not now in compliance or has a history of noncompliance with the environmental laws or regulations of this state or any other jurisdiction and who through relationship by blood or marriage or through any other relationship could be reasonably expected to significantly influence the Applicant in a manner which could adversely affect the environment.

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

NONE

NAME: _____ TITLE: _____

STREET: _____

CITY, STATE, ZIP: _____

17. List all federal environmental agencies and any other environmental agencies outside this state that have or have had regulatory responsibility over the Applicant.

NONE

18. VERIFICATION AND ACKNOWLEDGEMENT

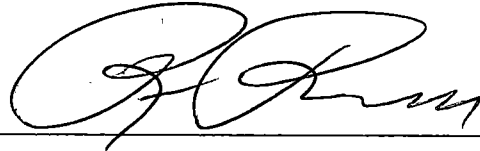
The Applicant agrees to provide any other information the director of the Arkansas Department of Environmental Quality may require at any time to comply with the provisions of the Disclosure Law and any regulations promulgated thereto. The Applicant further agrees to provide the Arkansas Department of Environmental Quality with any changes, modifications, deletions, additions or amendments to any part of this Disclosure Statement as they occur by filing an amended Disclosure Statement.

DELIBERATE FALSIFICATION OR OMISSION OF RELEVANT INFORMATION FROM DISCLOSURE STATEMENTS SHALL BE GROUNDS FOR CIVIL OR CRIMINAL ENFORCEMENT ACTION OR ADMINISTRATIVE DENIAL OF A PERMIT, LICENSE, CERTIFICATION OR OPERATIONAL AUTHORIZATION.

COMPLETE THIS SECTION ONLY IF SUBMITTING OTHER THAN BY EPORTAL:

I, Ryan Russell, certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violation.

APPLICANT
SIGNATURE:



TITLE:

POA President

DATE:

11/3/17

Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

Permittee (Legal) Name: Legacy Estates Home Owners Association, Inc.
 Facility Name: Legacy Estates Subdivision
 Permit No. : 4890-WR-1

Section A – Information Requiring Engineering Certification

Part I – Operating and Maintenance Expenses

	Units/Year	Unit Cost	Annual Cost	5-Year Cost ¹
Operating Expenses				
Operating Labor ²	12	350.00	4,200.00	22,260.00
Electricity ³	12	230.00	2760.00	14,628.00
Supplies & Chemicals	6	100.00	600.00	3,180.00
Analytical Testing	12	185.00	2,220.00	11,766.00
Generator Fuel				
Other				
Maintenance Expenses				
Maintenance Labor ²				1,000.00 Sludge Removal
Parts & Supplies				1,000.00 Replacement Parts
Other				
Administrative Expenses				
Administrative Labor ²				
Customer Fee Collection				
Insurance & Bonding				
Consulting and Legal Fees				
Interest Expenses				
Property Taxes				
Permit Fees			500.00	2,650.00
Other Miscellaneous Expenses Mowing of dripfield	7	450.00	3,150.00	16,695.00
TOTAL				73,179.00

¹ Assuming no inflation data are available, assume an inflation rate of 3% in years two through five and multiply the annual cost by 5.3 to estimate the five-year cost.

² Labor costs must include fringe benefits and payroll taxes.

³ For existing facilities, include historical data if they are representative of future operations. For new facilities, show the electricity consumption calculations in kilowatt hours (kWh).

Part II – Capital Expenditures

- The wastewater treatment plant (WWTP) must be examined by a Professional Engineer registered in the State of Arkansas to determine all necessary capital expenditures, system

Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

Part III – Financial Plan

A financial plan that demonstrates to the Department's satisfaction the permittee's ability to operate and maintain the WWTP for five (5) years must be prepared. This plan should also include a comprehensive connection summary listing the number of connections and types of connections based on Appendix B of the Arkansas Department of Health Rules and Regulations Pertaining to Onsite Wastewater Systems. The summary should include the number of existing connections and an estimated number of new connections for the next five (5) years. *The financial plan must be attached to this document.*

Part IV – Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name of AR Professional Engineer: Mark C. Johnson

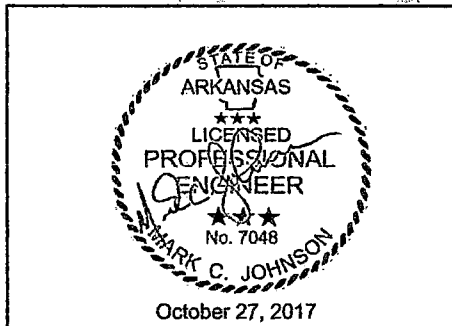
Registration License Number: PE No. 7048

Signature of AR Professional Engineer: *M.C. Johnson*

Date: October 27, 2017 Telephone Number: 479-751-8733

E-mail: mjohnson@engineeringservices.com Fax Number: 479-751-8746

Stamp of AR Professional Engineer



Nonmunicipal Domestic Sewage Treatment Works Trust Fund Requirement Form

Section B – Service Area Information and Certification of Compliance

Part I – Legal Description

A legal description of the service area *must be attached to this document*. This requirement may be satisfied by providing a plat for the area served by the non-municipal domestic sewage treatment works.

Part II – Potable Water Sources

A list of the sources of the potable water for the service area *must be attached to this document*.

Washington Water Authority

Part III – Certification of Compliance

Has the permit applicant complied with all local zoning ordinances, local planning authority regulations, local permitting requirements, and any other applicable local regulations necessary for the construction and operation of this facility?

Yes _____

No _____

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name of Permittee Responsible Official: Ryan Russell

Signature of Permittee Responsible Official: [Signature]

Date: Oct 30, 2017 Telephone Number: (888) 502-1555

E-mail: _____ Fax Number: _____

guythatbuyshouses@gmail.com

ENGINEERING SERVICES INC.

1207 S. Old Missouri Rd. • P.O. Box 282 • Springdale, Arkansas 72765-0282

Ph: 479-751-8733 • Fax: 479-751-8746

Part II – Capital Expenditures –

The Legacy Estates Wastewater Treatment Facility has been in operation for less than two years. At the time of this writing there were 26 occupied homes out of the approximate 115 developable lots or homes that the treatment facility will ultimately serve. At this time there are no planned or foreseeable expansions and/or improvements.



Brian J. Moore, P.E.
President

Tim J. Mays, P.E.
Vice President

Jason Appel, P.E.
Secretary / Treasurer

Jerry W. Martin
Chairman of the Board

Consulting Engineers and Surveyors

www.engineeringservices.com

FINANCIAL PLAN FOR LONG TERM OPERATIONS AND MAINTENANCE

As per the terms of the contract executed between the Eagle Creek Holdings and Legacy Estates Utility, a NWA Utility Services company; this facility has secured long term operations and maintenance for the facility. The following pertinent language is defined in the terms of the executed agreement. This agreement will modified naming Legacy Estates Home Owners Association, Inc as the OWNER and will be executed upon completion of the permit transfer.

This agreement (this "Agreement") is entered into as of this 1st day of May, 2016 by and between EAGLE CREEK HOLDINGS LLC, an Arkansas corporation ("OWNER") and LEGACY ESTATES UTILITY, LLC, an Arkansas limited liability company ("UTILITY").

WHEREAS, OWNER is the governing authority of that real estate subdivision that is described on Exhibit A-1, attached hereto (the "Subdivision");

WHEREAS, OWNER desires to retain UTILITY to operate and maintain the wastewater treatment plant that is located in the subdivision described in Exhibit A-2 (the "Plant") in accordance with Applicable Laws and this Agreement; and

WHEREAS, UTILITY is willing to provide said services in exchange for that compensation that is referenced herein.

3. *Operations and Maintenance Consideration. In consideration for the performance of the Operations and Maintenance Services, OWNER does hereby agree to pay UTILITY the fee in the sum of \$1,500.00 per month during the term of this Agreement. UTILITY reserves the right to increase this fee by an amount necessary to pay costs associated with any subsequently enacted or required Health Department, Department of Environmental Quality, or other federal, state, county, city or local rule or regulation, and/or by any other objectively demonstrable increase in the operation of the Plant. Notwithstanding the foregoing, this fee does not include compensation to UTILITY for performance by UTILITY of any additional services that are not outlined herein. UTILITY will reduce the fee due by the OWNER by \$50.00 per customer that UTILITY bills directly as per Item 2(e) of this Agreement.*

4. *Term; Extension. This Agreement shall have an initial term beginning on the date hereof and expiring on May 1, 2026. This Agreement may be extended thereafter for one (1) additional ten (10) year term should the parties hereto subsequently so agree in writing.*

CONNECTION SUMMARY

YEAR	NUMBER OF RESIDENTIAL CONNECTIONS	MONTHLY SEWER RATE	ANNUAL REVENUE	DEVELOPER CONTRIBUTION	TOTAL ANNUAL REVENUE	CAPITAL RESERVE RETAINED ANNUALLY
2017	26	50.00	15,600.00	2400.00	18,000.00	1800.00
2018	55	50.00	33,000.00	0	33,000.00	3300.00
2019	80	50.00	48,000.00	0	48,000.00	4800.00
2020	105	50.00	63,000.00	0	63,000.00	6300.00
2021	110	50.00	66,000.00	0	66,000.00	6600.00

YXNN



PO Box 848 | Fayetteville, AR 72702 | 800.521.6144 | www.ozarksecc.com

Reduce the clutter with electronic billing. Visit www.ozarksecc.com/ezbilling for more.

Statement Date	10/25/2017
Account Number	268946001
Payment Due	11/13/2017

Service Summary	
Previous Balance	217.36
Payment(s) Received	-217.36
Balance Forward	0.00
Current Charges	230.23
Total Amount Due	\$230.23

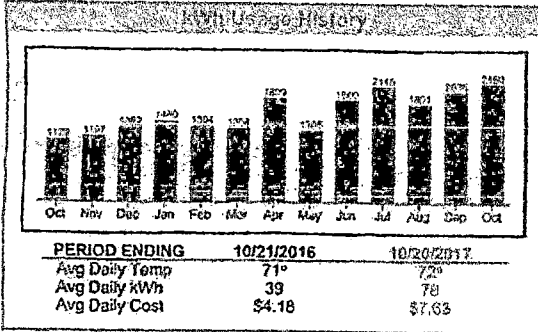
1955 1 AB 0.400 C-8 S 1955
EAGLE CREEK HOLDINGS LLC P-16
814 W EMMA AVE
SPRINGDALE AR 72764-4424



Account Number: 268946001

Phone Number: (479) 466-6177

Account Number	Service From	To	Days	Readings Previous	Readings Present	Usage	Rate	Service Address Location Number
4765375	09/22/2017	10/20/2017	28	29300	31480	2180	5A1	13154 RANDOLPH RD 18221283



Current Service Detail	
Balance Forward	0.00
Customer Charge	22.00
Energy Charge	2180 kWh @ 0.0699000 195.98
Fuel Cost Adj	2180 kWh @ -0.0043930 -9.58
Debt Cost Adj	2180 kWh @ 0.0024170 5.27
Washington County Tax	2.67
Arkansas State Tax	13.89
Total Charges	230.23
Total Amount Due 11/13/2017	\$230.23
<small>\$4.99 late charge applies after 5 p.m. on 11/13/2017</small>	

Partial due from HOA.



Please check if returning information on the reverse side.



Your account. Your Ozarks.
Pay your bill and get up-to-date information about your account, including daily usage readings and payment history with the MyOzarks mobile app.

Visit www.ozarksecc.com/MyOzarks for more information.

Sending us a check?

Did you know we offer a bank draft payment option? Stop worrying about due dates and misplaced bills. Call 1-800-521-6144 for more information.

Want to pay by credit card?

Pay your bill quickly and securely with our automated phone system, available 24/7. Call 1-855-386-9904 to make a payment.

Account Number	268946001
Location Number	18221283
Total Due 11/13/2017	\$235.16
Amount 11/13/2017 Payment	\$235.16

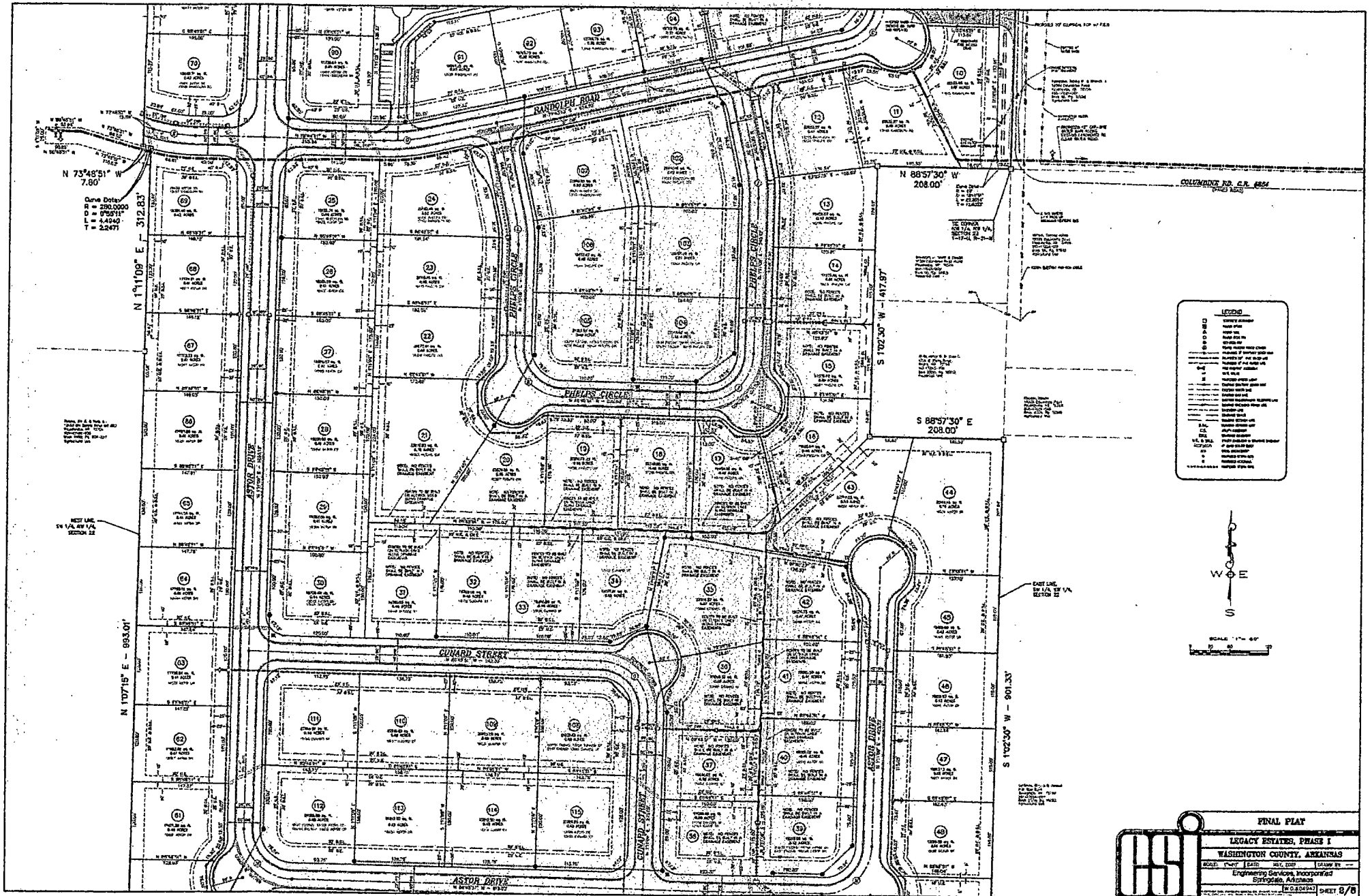
EAGLE CREEK HOLDINGS LLC



OZARKS ELECTRIC COOPERATIVE 18
PO BOX 22114
TULSA OK 74121-9948



6026894600100000000023023



FINAL PLAN
LEGACY ESTATES, PHASE I
WASHINGTON COUNTY, ARKANSAS
 DATE: 08/15/11
 ENGINEER: [Signature]
 PROJECT: Legacy Estates, Phase I
 SPRINGFIELD, ARKANSAS
 SHEET 8/8

AUTHORIZATION OF DIRECTORS
LEGACY ESTATES HOMEOWNERS ASSOCIATION, INC.


The undersigned being all of the members of the Board of Directors (the "Members") of Legacy Estates Homeowners Association, Inc., an Arkansas non-profit corporation (the "Association") as of this 23rd day of August, 2017, hereby ratify and adopt the following:

WHEREAS, on or about August 23rd, 2017, Association and Eagle Creek Holdings, LLC, an Arkansas limited liability Association, executed a Facility Donation Agreement (the "Donation Agreement") with respect to certain real property located in Washington County, Arkansas, more particularly described as follows: *Lot 101, Legacy Estates, Phase 1, as per plat of said subdivision on file in the Office of the Circuit Clerk and Ex-Officio Recorder of Washington County, Arkansas, in plat book 23 at page 303* (the "Real Property"); and


BE IT RESOLVED, that Ryan Russell, as President of the Association, is hereby authorized and directed to execute, deliver and acknowledge such instruments and documents and other such essential acts, as may be required or necessary to complete the conveyance of the Real Property in accordance with the Donation Agreement.

The Members hereby certify that they constitute all of the members of the Board of Directors of the Association and that their signatures are true and correct.

IN WITNESS WHEREOF, the undersigned have executed this Authorization as of the day and year first above written.



Ryan Russell (Aug 23, 2017)
Ryan Russell



Keith Marrs (Aug 23, 2017)
Keith Marrs



Jacob Keen

File# 2017-00027689

This Instrument Prepared by:
Kenneth N. Hall
Quattlebaum, Grooms & Tull PLLC
4100 Corporate Center Drive, Suite 310
Springdale, Arkansas 72762

SPECIAL WARRANTY DEED

Eagle Creek Holdings, LLC, an Arkansas limited liability company ("Grantor"), for and in consideration of Ten Dollars (\$10.00) and other good and valuable consideration, in hand paid by Legacy Estates Homeowners Association, Inc., an Arkansas non-profit corporation ("Grantee"), the receipt and adequacy of which is hereby acknowledged, does hereby grant, bargain, sell and convey unto Grantee, and unto its successors and assigns, the following described real property in Washington County, Arkansas, to-wit:

Lot 101, Legacy Estates, Phase 1, as per plat of said subdivision on file in the office of the Circuit Clerk and Ex-Officio Recorder of Washington County, Arkansas, in Plat Book 23 at Page 303.

TO HAVE AND TO HOLD such real property unto Grantee and Grantee's, successors and assigns forever and ever with all tenements, appurtenances, and hereditaments thereunto belonging, and all fixtures, structures, and improvements situated thereon. Grantor will forever warrant and defend the title to such real property against all lawful claims against Grantor or encumbrances created by Grantor but against no other claims or encumbrances of any kind.

EXECUTED this 23rd day of August, 2017.

GRANTOR:

Eagle Creek Holdings, LLC

By: Jacob M. Keen - Homecraft of NWIA, LLC
Name: Jacob M. Keen for Homecraft of NWIA, LLC
Title: Manager

Grantee hereby certifies under penalty of false swearing that the legally correct amount of documentary stamps have been placed on this instrument. Exempt or no consideration paid if none shown.

Wald Title as Agent
[Grantee or Grantee's Agent]
Address: 1575 S. Pianalto Rd
Springdale, AR 72762

Waco 1707541-107

ACKNOWLEDGEMENT

STATE OF ARKANSAS

COUNTY OF WASHINGTON

On this day, before me, a Notary Public, duly commissioned, qualified and acting, with and for said County and State, appeared in person the within named Jacob M. Keen, to me well known, who stated and acknowledged that he is the Manager of Eagle Creek Holdings, LLC, an Arkansas limited liability company, and has so signed, executed and delivered said foregoing instrument for the consideration, uses and purposes therein mentioned and set forth.

IN TESTIMONY WHEREOF, I have hereunto set my hand and official seal this 23rd day of August, 2017.

Rhonda Hall
Notary Public

My Commission Expires:

June 27, 2027
(SEAL)





STATE OF ARKANSAS
 DEPARTMENT OF FINANCE AND ADMINISTRATION
 MISCELLANEOUS TAX SECTION
 P.O. BOX 896, LITTLE ROCK, AR 72203-0896

Affidavit of Compliance



File Number: 1707541-107

Grantee: LEGACY ESTATE HOMEOWNERS ASSOC., INC.
Mailing Address: 13158 RANDOLPH RD
 FAYETTEVILLE AR 727030000

Grantor: EAGLE CREEK HOLDINGS, LLC
Mailing Address: 1575 S. PIANALTO RD
 SPRINGDALE AR 727620000

Property Purchase Price: \$0.00
Tax Amount: \$0.00

County: WASHINGTON
Date Issued: 09/07/2017
Affidavit ID: 160116736

The grantee/grantor claims the following exemption to the Real Estate Transfer Tax:

An instrument conveying land between corporations, partnerships, limited liability companies, or other business entities or between a business entity and its shareholder, partner, or member incident to the organization, reorganization, merger, consolidation, capitalization, asset distribution, or liquidation of a corporation, partnership, limited liability company, or other business entity.

Washington County, AR
 I certify this instrument was filed on
 9/8/2017 8:30:17 AM
 and recorded in REAL ESTATE

File# 2017-00027689
 Kyle Sylvester - Circuit Clerk

I certify under penalty of false swearing that documentary stamps or a documentary symbol in the legally correct amount has been placed on this instrument

Grantee or Agent Name (printed): Legacy Estate Homeowners Assoc., Inc.
Grantee or Agent Name (signature): By: Waco Title As Agent Date: 9/7/17
Address: _____
City/State/Zip: _____

FedEx

Express



FedEx carbon-neutral envelope shipping

Align top of FedEx Express® shipping label here

ORIGIN ID:ROGA (479) 925-7217

NWA UTILITY SERVICES INC
8533 APPLE GLN

ROGERS, AR 72756
UNITED STATES US

SHIP DATE: 06NOV17
ACTWGT: 0.50 LB
CAD: 006994899/SSFE1822

BILL CREDIT CARD

Part # 156297-435 R172 09/15 00

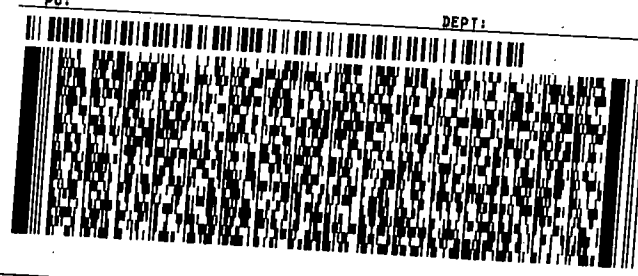
TO WATER DIVISION PERMITS BRANCH
ARKANSAS DEPT OF ENVIRONMENTAL QUAL
5301 NORTHSORE DR

NORTH LITTLE ROCK AR 72118

(479) 630-5928

REF:

DEPT:



FedEx Express



TRK# 0201 7883 5348 7105

TUE - 07 NOV 3:00P
STANDARD OVERNIGHT

X2 LITA

72118
AR-US LIT



Envelope

RT 177
ST 6
1 15:00
A 7105
11.07