

**AGENDA**  
**CHICHESTER BOARD OF SELECTMEN**  
**December 15, 2020**  
**ZOOM MEETING**  
**6:30pm**

IN LIGHT OF THE COVID 19 (CORONA VIRUS) SOCIAL DISTANCING ADVICE MADE BY THE GOVERNOR AND CDC, THE TOWN OF CHICHESTER FOLLOWING A DECLARATION OF EMERGENCY BY THE SELECT BOARD CHAIRPERSON, IS PROVIDING A MEETING PARTICIPATION VIA TELEPHONE CONFERENCE FOR YOUR SAFETY.

If you would like to participate in the telephone conference, please call this number from home: + 1 301 715 8592 and enter this code: **Meeting ID: 820 6708 3403 & Passcode: 485150** Follow along using a digital copy from our website at: ChichesterNH.org. We will also be streaming the meeting as a webinar which you join by going to this link : <https://us02web.zoom.us/j/82067083403?pwd=N1BEVktUNVZqNG5YWnoyOVQ2cVhuZz09>  
Please reach out to Jodi Pinard with any questions or concerns @ Email:[jpinard@chichesternh.org](mailto:jpinard@chichesternh.org)

**Appointments**

**General Business/Board Discussion**

- Encumbrances
- Approval of Invoices – Government Vehicle Maintenance Fund
- Abatements
- Food Pantry Donation

**Outstanding Items:**

**Non-Public Session – If Needed**

91A:3 II (b) - The hiring of any person as a public employee.

91-A:3 II (c) - Matters which, if discussed in public, would likely adversely affect the reputation of any person, other than a member of the public body itself, unless such person requests an open meeting.

**ADJOURNMENT**

INTEROFFICE MEMORANDUM

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TO: Trustees of the Trust Funds

FROM: Jodi Pinard, Town Administrator

SUBJECT: Reimbursement Request

DATE: December 16, 2020

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Please reimburse the following amounts out of the following Government Vehicle Maintenance Expendable Trust

I have attached invoices.

Cummings Northeast	\$1,630.63
Lakes Region Fire	\$ 572.20
Lakes Region Fire	\$2,080.26
Sugarloaf Ambulance	\$ 520.00
Lakes Region Fire	\$4,715.81
Lakes Region Fire	\$5,837.61
Liberty International	\$5,564.92
<b>Total</b>	<b>\$20,921.43</b>

If you have any questions, please let me know.

Thank you  
Jodi

**Town of Chichester**  
**Account QuickReport**  
 January 1 through December 10, 2020

Type	Date	Num	Name	Memo	Split	Amount
<b>4199-00 · Other General Government</b>						
<b>4199-20 · Capital Reserve Projects</b>						
<b>4199-29 · Gov't Vehilce Expen Trust Fund</b>						
Bill	01/28/2020	w5-8802	Cummins Northeast,...		2020 · Account...	1,630.63
Bill	02/11/2020	29907	Lakes Region Fire A...		2020 · Account...	572.20
Bill	02/11/2020	29946	Lakes Region Fire A...		2020 · Account...	2,080.26
Bill	03/05/2020		Sugarloaf Ambulanc...		2020 · Account...	520.00
Bill	04/20/2020	30130	Lakes Region Fire A...	to be taken o...	2020 · Account...	4,715.81
Bill	04/20/2020	30132	Lakes Region Fire A...	to be taken o...	2020 · Account...	5,837.61
Bill	10/20/2020		Liberty International ...		2020 · Account...	5,564.92
Total 4199-29 · Gov't Vehilce Expen Trust Fund						20,921.43
Total 4199-20 · Capital Reserve Projects						20,921.43
Total 4199-00 · Other General Government						20,921.43
<b>TOTAL</b>						<b>20,921.43</b>



Payment terms are 30 days from invoice date unless otherwise agreed upon in writing. Remit to:  
 Cummins Sales and Service  
 P.O. Box 419404  
 Boston, MA 02241-9404

CONCORD NH BRANCH  
 12 INTEGRA DRIVE  
 CONCORD, NH 03301-  
 (207)510-2233

\*\*\*REPRINT\*\*\*

<b>INVOICE NO</b>
W5-8802
REMIT TO: P.O. Box 419404 Boston, MA 02241-9404

**BILL TO**

TOWN OF CHICHESTER NH  
 ACCOUNTS PAYABLE  
 54 MAIN ST  
 CHICHESTER, NH 03258-6508

**OWNER**

TOWN OF CHICHESTER NH  
 54 MAIN ST  
 CHICHESTER, NH 03258-6508  
 AUSTIN . - 603 387-1361

PAGE 1 OF 1

\*\*\* CHARGE \*\*\*

DATE	CUSTOMER ORDER NO.	DATE IN SERVICE	ENGINE MODEL	PUMP NO.	EQUIPMENT MAKE
20-JAN-2020	ENGINE1	17-DEC-2012	ISL9 CM2250		HME
CUSTOMER NO.	SHIP VIA	FAIL DATE	ENGINE SERIAL NO.	CPL NO.	EQUIPMENT MODEL
509553		07-JAN-2020	73450653		SFO
REF. NO.	SALESPERSON	PARTS DISP.	MILEAGE/HOURS	PUMP CODE	UNIT NO.
8771	OG401		10623 / 0		ENGINE 1

QUANTITY ORDERED	BACK ORDERED	QUANTITY SHIPPED	PART NUMBER	DESCRIPTION	PRODUCT CODE	UNIT PRICE	AMOUNT
OSN/MSN/VIN		44KFT6488CWZ22337					
COMPLAINT		C/S CHECK ENGINE LIGHT ESTIMATE TO REPLACE DOSING UNIT					
1		1	2880299	CONNECTOR,MALE	CECO	30.75	30.75
2		2	DEF002	DEF	E3-OTHER	18.58	37.16
1		1	5506866	KIT,SERVICE	CECO	6.36	6.36
1		1	63197-18	DEF TANK	E3-OTHER	529.36	529.36

PARTS:	603.63
PARTS COVERAGE CREDIT:	0.00CR
TOTAL PARTS:	603.63
SURCHARGE TOTAL:	0.00
LABOR:	864.60
LABOR COVERAGE CREDIT:	0.00CR
TOTAL LABOR:	864.60
MISC.:	162.40
MISC. COVERAGE CREDIT:	0.00CR
TOTAL MISC.:	162.40
ELECTRONIC TOOLING FEE	50.00
HAZ WASTE DISPOSAL	43.23
SHOP SUPPLIES	69.17

APPROVED

ACCT # \_\_\_\_\_

DATE: 1-20-20

AUTH: *[Signature]*

TAX EXEMPT NUMBERS:

*PLEASE USE  
 VEHICLE REPAIR  
 FUND. THANK-YOU  
 -ED*

LOCAL 0.00

Billing Inquiries? Call (877)480-6970 or email CBSNortheast.Receivables@cummins.com

THERE ARE ADDITIONAL CONTRACT TERMS ON THE REVERSE SIDE OF THIS DOCUMENT, INCLUDING LIMITATION ON WARRANTIES AND REMEDIES, WHICH ARE EXPRESSLY INCORPORATED HEREIN AND WHICH PURCHASER ACKNOWLEDGES HAVE BEEN READ AND FULLY UNDERSTOOD.

SUB TOTAL: 1,630.63  
 TOTAL TAX: 0.00

TOTAL AMOUNT: US \$ 1,630.63

AUTHORIZED BY (print name) \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

# Lakes Region Fire Apparatus Inc.

P.O. Box 970  
W. Ossipee, NH 03890

# INVOICE

Invoice Number: 29907  
Invoice Date: Jan 28, 2020  
Page: 1

*Duplicate*

Voice: 603-323-7117  
Fax: 603-323-7447

Bill To:
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

Ship to:
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

Customer ID	Customer PO	Payment Terms	
CHICHESTER	E-1	Net 10 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	LRFA Deliver		2/7/20

Quantity	Item	Description	Unit Price	Amount
		NOTE: ON SIGHT SERVICE FOR THE FOLLOWING REPAIRS. 10,610. Miles. 743. Hours. 151. Pump hrs. VIN # 44KFT6488CWZ22337 A. Customer complaint of street side dump chute opens intermittently. 1. Investigate cause, suspect rear control switch. 2. Removed and discarded switch. 3. Installed new switch. 4. Problem persisted, investigate further into control circuit. 5. Inspected wiring harness and air solenoids under body. 6. Found recently replaced solenoid pack operating properly. 7. Found water seeping along wires into relays for dump chute. 8. Disassembled and checked for corrosion,		
		Subtotal		Continued
		Sales Tax		Continued
		Total Invoice Amount		Continued
		Payment/Credit Applied		572.20
		<b>TOTAL</b>		<b>Continued</b>

Check/Credit Memo No: 31297

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

**INVOICE**

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Invoice Date: Jan 28, 2020  
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CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

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CHICHESTER	E-1	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		2/7/20

Quantity	Item	Description	Unit Price	Amount
		none found. 9. Reassembled relay with die electric grease. 10. Relocate and secure relays in place clear of contamination. 11. Test run to confirm repair. B. Customer complaint of check engine light on dash is illuminated. 1. Connect Cummins Insite, found active fault code 3574- After market 1 diesel exhaust fluid pressure data valid but below normal operating range. 2. Customer had recent repairs performed at Cummins. 3. Will be repaired under warranty at Cummins. 4. Return unit to service.		
108.00	OS	ONSITE SERVICE CHARGE	1.00	108.00
3.00	14AWGBUTT	14 AWG BUTT SHRINK CONN	1.22	3.66
1.00	55016-06 TOGGLE SWIT	TOGGLE SWITCH 55016	5.54	5.54
1.00	MISCSHOP	MISC SHOP SUPPLY, COVERS EPA	5.00	5.00
Subtotal				Continued
Sales Tax				Continued
Total Invoice Amount				Continued
Payment/Credit Applied				572.20
<b>TOTAL</b>				<b>Continued</b>

Check/Credit Memo No: 31297

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Invoice Number: 29907  
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Ship to:
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Customer ID	Customer PO	Payment Terms	
CHICHESTER	E-1	Net 10 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	LRFA Deliver		2/7/20

Quantity	Item	Description	Unit Price	Amount
5.00	SERVICE LABOR-FIRE:	CHARGE FOR OIL & FILTER DISPOSAL, MISC LUBES AND MATERIALS TECHNICIAN TIME BILLED	90.00	450.00
Subtotal				572.20
Sales Tax				
Total Invoice Amount				572.20
Payment/Credit Applied				572.20
<b>TOTAL</b>				<b>0.00</b>

Check/Credit Memo No: 31297

Sugarloaf Ambulance / Rescue Vehicles  
 411 U S Route 2 East  
 Suite A  
 Wilton, Maine 04294

# INVOICE

Date	Invoice #
3/5/2020	5674

**PAID**  
**03/28/2020**

Bill To
Chichester Fire Department 22 Main Street Chichester, New Hampshire 03234

S.O. No.	P.O. No.
AMS	

Item	Qua...	Description	Rate	Amount
Date of Service		2/27/2020 UNIT# MILES; 30793	0.00	0.00
Oxygen Solenoid	1	-O2 SOLENOID LEAKING, INSTALLED NEW SOLENOID. LEAK TESTED AND TESTED SOLENOID OPERATION Oxygen solenoid	275.00	275.00
Travel time	5	Per hour	30.00	150.00
Labor	1	Per hour	95.00	95.00
<b>Total</b>				<b>\$520.00</b>



# Lakes Region Fire Apparatus Inc.

P.O. Box 970  
W. Ossipee, NH 03890

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Invoice Number: 29946  
Invoice Date: Feb 6, 2020  
Page: 1

*Duplicate*

Voice: 603-323-7117  
Fax: 603-323-7447

Bill To:
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

Ship to:
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

Customer ID	Customer PO	Payment Terms	
CHICHESTER	E3	Net 10 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	LRFA Deliver		2/16/20

Quantity	Item	Description	Unit Price	Amount
		36,563.1 Miles. 3,106.4 Engine Hours. E-ONE Build # 19488. VIN # 4ENRAAA87X1009488. A. Fabricate and install hose well cover on front bumper. 1. Fabricate aluminum diamond plate cover. 2. Drill cover and gravel shield for hinge, gas pistons mounts, and latch. 3. Install stainless steel hinge and brackets for gas pistons. 4. Install latch and cut gravel shield for latch engagement. 5. Install trim seal on edge of cover. 6. Install seal material over hinge area to prevent weather from entering.  B. Power steering oil leak. 1. Investigate cause, found steering assist cylinder on curb side is leaking. 2. Cleaned area and test ran to locate		
Subtotal				Continued
Sales Tax				Continued
Total Invoice Amount				Continued
Payment/Credit Applied				2,080.26
<b>TOTAL</b>				<b>Continued</b>

Check/Credit Memo No: 31297

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

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Page: 2

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<b>Ship to:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	E3	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		2/16/20

Quantity	Item	Description	Unit Price	Amount
		source of leak.		
		3. Eliminated the hoses and fittings as the cause, the cylinder head seals are leaking.		
		4. Remove hoses and cap lines.		
		5. Remove cylinder for rebuild.		
		NOTE: Rebuild consisted of hone, polish, and reseal.		
		6. Install cylinder and connect hoses and fittings.		
		7. Add make up oil, jack axle off from floor to allow bleeding air from system.		
		8. Bled all air from system, adding oil as needed.		
		9. Test drive to confirm proper operation.		
		10. Recheck oil level.		
		11. Return unit to service.		
1.00	ALH 101S SS RH	RH SS LOCK	57.75	57.75
1.00	G7	GASKET FOR 101S	1.73	1.73
2.00		819-5588 LIFT SUPPORTS	54.29	108.58
1.00		FREIGHT	42.57	42.57
2.00	735-1899	BRACKET WITH STUD	8.06	16.12
Subtotal				Continued
Sales Tax				Continued
Total Invoice Amount				Continued
Payment/Credit Applied				2,080.26
<b>TOTAL</b>				<b>Continued</b>

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Customer ID	Customer PO	Payment Terms	
CHICHESTER	E3	Net 10 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	LRFA Deliver		2/16/20

Quantity	Item	Description	Unit Price	Amount
10.00	10-24NUTLOCKNYLONSS	10-24 NYLON LOCK NUT STAINLESS	0.17	1.70
10.00	10-24WASHERFLATSS	10-24 FLAT WASHER SS	0.08	0.80
4.00	10-24X1TRUSSHEAD	10-24 X 1 TRUSS HEAD	0.19	0.76
6.00	10-24X3/4PHMSSS	# 10 STAINLESS PAN HEAD SCREW 3/4	0.18	1.07
2.00	735-1896	BALL JOINT STUD	5.93	11.86
4.00	5/16WASHERFLATSS	5/16 FLAT WASHER SS	0.06	0.24
4.00	5/16WASHERFENDER	5/16 WASHER FENDER	0.21	0.85
2.00	5/16NYLOCKSS	5/16 NYLOCKNUT SS	0.19	0.38
6.00	1/4X3/4SSTRUSS	1/4 X 3/4 S.S TRUSS	0.23	1.38
3.00	1/4X2TRUSS	1/4 X2 TRUSS SCREW STAINLESS	0.72	2.16
10.00	1/4 NYLOCK SS	1/4 NYLOCK NUT SS	0.18	1.80
8.00	TL 6375 TRIM LOCK	TRIM LOCK B3 X 1/4	5.14	41.12
1.00	GREASEFITTING1/4-28	GREASEFIT1/4-28- SHORT1986491	1.88	1.88
2.00	CPIN1/8X13/4	1/8 X 13/4 COTTER PIN	0.27	0.54
1.00		OUTSIDE SERVICE- HONED, POLISHED, REPACKED WITH NEW SEAL KIT & TESTED	338.41	338.41
5.00	15W40	15W40 MOTOR OIL- OILZUM	3.71	18.56
1.00	MISCSHOP	MISC SHOP SUPPLY, COVERS EPA CHARGE FOR OIL & FILTER DISPOSAL, MISC LUBES AND MATERIALS	5.00	5.00
Subtotal				Continued
Sales Tax				Continued
Total Invoice Amount				Continued
Payment/Credit Applied				2,080.26
<b>TOTAL</b>				<b>Continued</b>

Check/Credit Memo No: 31297

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

**INVOICE**

Invoice Number: 29946  
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Page: 4

*Duplicate*

Voice: 603-323-7117  
Fax: 603-323-7447

<b>Bill To:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Ship to:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	E3	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		2/16/20

Quantity	Item	Description	Unit Price	Amount
15.00	SERVICE LABOR-FIRE:	TECHNICIAN TIME BILLED	95.00	1,425.00
Subtotal				2,080.26
Sales Tax				
Total Invoice Amount				2,080.26
Payment/Credit Applied				2,080.26
<b>TOTAL</b>				<b>0.00</b>

Check/Credit Memo No: 31297

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

**INVOICE**

Invoice Number: 30130  
Invoice Date: Apr 14, 2020  
Page: 1

Voice: 603-323-7117  
Fax: 603-323-7447

<b>Bill To:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Ship to:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	New Rescue	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		4/24/20

Quantity	Item	Description	Unit Price	Amount
		SEE WORK SUPPLEMENT.		
1.00	OUTLET STRIP	6 RECEPTACLE OUTLET STRIP	22.60	22.60
4.00	1/4X3/4SSPHEAD	1/4 X 3/4 SCREW PH SS	0.26	1.04
1.00	FUSEHOLDER78156B	6 CIRCUIT FUSE HOLDER W/COVER	34.99	34.99
1.00	15071300UX0988	8 POS TERMINAL JUMPER BLOCK	2.53	2.53
6.00	FUSE10ATC	10 ATC FUSE- RED	0.69	4.14
1.00	14AWG5/16RING	14 AWG 5/16RING	0.38	0.38
1.00	1/4X11/4BOLTSS	1/4 X 1 1/4 BOLT	0.26	0.26
1.00	GREASECHASSIS	CHASSIS GREASE	5.16	5.16
1.00	PARLASTIC	PARLASTIC ALUM CAULKING-#153	11.96	11.96
4.00	8X1/2PHSMSS	8 X 1/2 STAINLESS SHEET METAL SCREW STAINLESS	0.08	0.31
1.00	38832-31	HME windshield washer bulk head fitting 90 deg	5.86	5.86
2.00	201220	HME LRG WASHER NOZZLE	4.55	9.10
3.00	WINDSHIELDWASHERH	WASHER HOSE	0.82	2.45
1.00	38832-27L	LEFT SIDE WIPER MOTOR	157.20	157.20
5.00	NUTSERT1/4-20	1/4-20 NUT SERT	1.13	5.65
2.00	1156	BULB	0.70	1.40
2.00	1/4X11/2SSSTRUSSHD	1/4 X 11/2 TRUSSHEAD SCREW STAINLESS	0.47	0.94

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
<b>TOTAL</b>	<b>Continued</b>

Check/Credit Memo No:

**Lakes Region Fire Apparatus Inc.**

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CHICHESTER	New Rescue	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		4/24/20

Quantity	Item	Description	Unit Price	Amount
4.00	1/4X3/4SSTRUSS	1/4 X 3/4 S.S TRUSS	0.28	1.11
4.00	1/4 NYLOCK SS	1/4 NYLOCK NUT SS	0.18	0.71
4.00	NUTSERT1/4-20	1/4-20 NUT SERT	1.13	4.52
1.00		Maine Oxy (Hydro Six Tanks)	448.50	448.50
1.00	MISCSHOP	MISC SHOP SUPPLY, COVERS EPA CHARGE FOR OIL & FILTER DISPOSAL, MISC LUBES AND MATERIALS	5.00	5.00
42.00	SERVICE LABOR-FIRE:	TECHNICIAN TIME BILLED	95.00	3,990.00

Subtotal	4,715.81
Sales Tax	
Total Invoice Amount	4,715.81
Payment/Credit Applied	
<b>TOTAL</b>	<b>4,715.81</b>

Check/Credit Memo No:

*RESCUE 2  
WARRANT  
ARTICLE*

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

**INVOICE**

Invoice Number: 30132  
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Page: 1

Voice: 603-323-7117  
Fax: 603-323-7447

Duplicate

<b>Bill To:</b>
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<b>Ship to:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	R2 HME	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		4/24/20

Quantity	Item	Description	Unit Price	Amount
		6,463.0 Miles. 1,033.1 Hours. Vin: 44KFT42897WZ21209 A. Remove cascade system from old rescue 1. Disconnect air lines from control panel & cylinders and remove 2. Remove control panel 3. Disassemble and reassemble rear walk in compartment 4. Remove cascade cylinders(note cylinders out of Hydro) 5. Remove Booster pump 6. Unbolt and remove fill station B. Install cascade system in new truck 1. Provide and install new air lines drill body as needed for routing and protect 2. Modify and mount control panel to top of fill station 3. Mount cylinders between coffin boxes and fabricate removable/ hinged walk on cover		
		Subtotal		Continued
		Sales Tax		Continued
		Total Invoice Amount		Continued
		Payment/Credit Applied		
		<b>TOTAL</b>		<b>Continued</b>

Check/Credit Memo No:

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
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Invoice Number: 30132  
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*Duplicate*

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Fax: 603-323-7447

<b>Bill To:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Ship to:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	R2 HME	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		4/24/20

Quantity	Item	Description	Unit Price	Amount
		4. Fab shelf and mount booster		
		5. Wire power from circuit breaker panel		
		6. install fill station and controls in L1		
		7. Note see additional items not included in Quote #80176 on invoice # 30130		
5.00	5/16X1FINEGR8	5/16 X 1 FINE GR8 BOLT-SS	0.41	2.04
27.00	5/16WASHERFLATSS	5/16 FLAT WASHER SS	0.06	1.62
8.00	5/16WASHERLOCKSS	5/16 STAINLESS LOCKWASHER	0.11	0.88
21.00	5/16NYLOCKSS	5/16 NYLOCKNUT SS	0.19	3.99
1.00	5/16X2SSBOLT	5/16 X 2 SS BOLT	0.46	0.46
16.00	5/16X1SSBOLT	5/16 X 1 SS BOLT	0.47	7.52
5.00	5/16X3/4SSBOLT	5/16 X 3/4 SS BOLT	0.34	1.70
2.00	5/16X3/4FINSS	5/16 X 3/4 FINE SS BOLT	0.34	0.68
2.00	5/16X11/4BOLTSS	5/16 X 1 1/4 BOLT STAINLESS	0.40	0.80
4.00	5/16WASHERFENDER	5/16 WASHER FENDER	0.21	0.85
1.00	5/16X2SSBOLT	5/16 X 2 SS BOLT	0.46	0.46
4.00	63001-1	ANGLE SHELF BRACKET	6.02	24.08
7.00	63017-5	RETAINING PLATE	6.90	48.30
2.00	10-24X3/4THMSSS	10-24 X 3/4 TRUSS HEAD MACHINE SCREW STAINLESS STEEL	0.11	0.21
2.00	10-24X1/2MSPHSS	10-24 X 1/2 STAINLESS MACHINE	0.15	0.30
Subtotal				Continued
Sales Tax				Continued
Total Invoice Amount				Continued
Payment/Credit Applied				
<b>TOTAL</b>				<b>Continued</b>

Check/Credit Memo No:



**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

**INVOICE**

Invoice Number: 30132  
Invoice Date: Apr 14, 2020  
Page: 3

Voice: 603-323-7117  
Fax: 603-323-7447

Duplicate

<b>Bill To:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Ship to:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	R2 HME	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		4/24/20

Quantity	Item	Description	Unit Price	Amount
2.00	10-32X1/2PHMSSS	SCREW PAN HEAD 10-32 X 1/2 STAINLESS MACHINE	0.13	0.26
8.00	1/4X1SSBOLT	SCREW PAN HEAD 1/4 X 1 SS BOLT	0.26	2.04
4.00	1/4X1SSTHEAD	1/4 X 1 TRUSSHEAD SCREW STAINLESS	0.32	1.28
8.00	1/4X3/4SSTRUSS	1/4 X 3/4 S.S TRUSS	0.28	2.24
23.00	1/4X3/4SSPHEAD	1/4 X 3/4 SCREW PH SS	0.26	5.98
1.00	1/4X3/4SSBOLT	1/4 X 3/4 SS BOLT	0.23	0.23
39.00	1/4 NYLOCK SS	1/4 NYLOCK NUT SS	0.18	7.02
39.00	1/4WASHERFLATSS	1/4 FLAT WASHER STAINLESS	0.07	2.73
12.00	1/4WASHERFENDERS	1/4" STAINLESS FENDER WASHER	0.17	2.04
2.00	1/4NUTSS	1/4STAINLESS NUT	0.19	0.38
4.00	1/4X11/4SSTHEAD	1/4 X 11/4 TRUSSHEAD SCREW STAINLESS	0.34	1.36
19.00	3/8WASHERFLAT	3/8 FLAT WASHER	0.23	4.37
3.00	3/8X11/2BOLT	3/8 X 1 1/2 BOLT	0.60	1.80
4.00	3/8X11/4SSBOLT	3/8 X 11/4 SS BOLT	0.55	2.20
2.00	3/8NUT	3/8 NUT COARSE THREAD	0.17	0.34
5.00	3/8NYLOCK NUTSS	3/8 NYLOCK SS	0.28	1.40
3.00	7/16WASHERFLAT	7/16 FLAT WASHER	0.48	1.44
3.00	1/2WASHERFLAT	1/2 WASHER FLAT	0.48	1.44

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
<b>TOTAL</b>	<b>Continued</b>

Check/Credit Memo No:

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

**INVOICE**

Invoice Number: 30132  
Invoice Date: Apr 14, 2020  
Page: 4

Duplicate

Voice: 603-323-7117  
Fax: 603-323-7447

<b>Bill To:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Ship to:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	R2 HME	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		4/24/20

Quantity	Item	Description	Unit Price	Amount
1.00		20A 3 WIRE RECEPTACLE	16.19	16.19
1.00		20A 3 WIRE PLUG	20.79	20.79
2.00		20A CIRCUIT BREAKER	9.08	18.16
1.00	OUTLETBOX 4X2	4 X 2 OUTLET BOX	2.66	2.66
1.00	COVEROUTLETSELFCLC	SELF CLOSING OUTLET COVER	9.64	9.64
1.00	LT9051/2LT90DEG	1/2 90 DEG NM L/T CONN	2.09	2.09
1.00	LT5-1/2 LTCONNECTOR	1/2 NM L/T STRAIGHT CONN	2.41	2.41
2.00	CONDUIT1/2PVC	1/2 PVC CONDUIT	1.13	2.26
2.00	12AWGBUTTSHRINK	BUTT CONNECTOR 12 AWG	1.55	3.09
1.00	1001	HOOKLOK- PAIR	28.01	28.01
1.00	GROMMET3/4X11/4	3/4 X 11/4 GROMMET	4.34	4.34
2.00	TL100B3X3/16	TRIM LOCK 3/16	0.73	1.46
1.00		13317 HOM 20 A. CIRCUIT BREAKER	12.95	12.95
8.00	71D34	#8- 3/4" TEK SCREW	0.10	0.80
8.00	5/8WASHERFLAT	5/8 WASHER FLAT	0.90	7.20
2.00	1/2X2"BOLT	1/2 X 2 BOLT GR-8	1.42	2.85
2.00	ANGLE1/4X3X2ALUM	3 X 2 X1/4 ALUM ANGLE	4.53	9.06
4.00	MDC12	3/4 ID VINYL COATED STEEL CLAMP-MED DUTY	1.26	5.03
1.00	EXH CLAMP2	EXHAUST CLAMP 2" 35335	2.14	2.14
5.00		AC80049-14 HOSE 6000	114.05	570.25
Subtotal				Continued
Sales Tax				Continued
Total Invoice Amount				Continued
Payment/Credit Applied				
<b>TOTAL</b>				<b>Continued</b>

Check/Credit Memo No:

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

# INVOICE

Invoice Number: 30132  
Invoice Date: Apr 14, 2020  
Page: 5

*Duplicate*

Voice: 603-323-7117  
Fax: 603-323-7447

<b>Bill To:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Ship to:</b>
CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	R2 HME	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		4/24/20

Quantity	Item	Description	Unit Price	Amount
1.00		FREIGHT	23.15	23.15
4.00	71E12	#10-1/2" TEK SCREW	0.40	1.60
1.00	UMVS-1116-11	11"-16" VARIABLE STRAP	31.41	31.41
2.00	FOOTMAN LOOP	FOOTMAN LOOPAH 6411-G ZN	1.72	3.44
12.00	NUTSERT1/4-20	1/4-20 NUT SERT	1.13	13.56
10.00		AC70080- RACK, DOT-1, WALL/ W/ONE CLAMP SET (4-48" SECTION WITH 10 CLAMPS)	29.30	293.00
6.00		AC70085- CHANNEL, SLOTTED, 1 5/8 X 1 5/8 X12"	27.30	163.80
5.00		AC40066F- COLLAR, CRASH, DOT/ISO CYL VALVE PROTECTOR, 2400/4500/6000 YELLOW	38.53	192.65
1.00		AC20161- CAP, 7500 JIC #4 ST	3.85	3.85
1.00		FREIGHT	96.69	96.69
1.00	PARLASTIC	PARLASTIC ALUM CAULKING-#153	11.96	11.96
1.00	8-32X1PHMSSS	8-32X1 PANHEAD MACHINE SCREW S	0.18	0.18
1.00	10-24WASHERFLATSS	10-24 FLAT WASHER SS	0.08	0.08
4.00	PLATE14GASS	14 GA SS SHEET	11.64	46.55
19.00	PLATE3/16ALUMDIAMON	3/16 ALUMINUM DIAMOND PLATE SHEET	10.07	191.33
5.00	PLATE1/8ALUMDIAMON	1/8 ALUMINUM DIAMOND PLATE	7.82	39.10

Subtotal	Continued
Sales Tax	Continued
Total Invoice Amount	Continued
Payment/Credit Applied	
<b>TOTAL</b>	<b>Continued</b>

Check/Credit Memo No:

**Lakes Region Fire Apparatus Inc.**

P.O. Box 970  
W. Ossipee, NH 03890

**INVOICE**

Invoice Number: 30132  
Invoice Date: Apr 14, 2020  
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CHICHESTER FIRE DEPARTMENT 54 MAIN ST. CHICHESTER, NH 03258

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CHICHESTER	R2 HME	Net 10 Days	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	LRFA Deliver		4/24/20

Quantity	Item	Description	Unit Price	Amount
10.00	ANGLE1/8 1X1ALUM	1 X 1 X 1/8 ALUMINUM ANGLE	1.17	11.66
4.00	TUBE1/8X1X1ALUM	1 X 1 X 1/8 ALUM TUBE	1.55	6.19
1.00	HINGE2"	2" HINGE A804 -PER 6'	47.66	47.66
36.00	TL 4100 TRIM LOCK	TRIM LOCK - 1/8 EDGE TOP BULB	1.07	38.34
1.00		569-0314 SNAP IN COVER	1.09	1.09
1.00	MISCSHOP	MISC SHOP SUPPLY, COVERS EPA CHARGE FOR OIL & FILTER DISPOSAL, MISC LUBES AND MATERIALS	14.00	14.00
39.50	SERVICE LABOR-FIRE:	TECHNICIAN TIME BILLED	95.00	3,752.50
Subtotal				5,837.61
Sales Tax				
Total Invoice Amount				5,837.61
Payment/Credit Applied				
<b>TOTAL</b>				<b>5,837.61</b>

Check/Credit Memo No:

RESCUE 2  
WARRANT  
ARTICLE

CUSTOMER #: 4369

72340



TOWN OF CHICHESTER  
ACCOUNTS PAYABLE  
54 MAIN STREET  
CHICHESTER, NH 03258

INVOICE

1400 SOUTH WILLOW STREET 132 PIERCE ROAD  
MANCHESTER, NH 03103-4024 BARRINGTON, NH 03825  
PHONE: (603) 623-8873 PHONE: (603) 905-9036  
PHONE: (800) 562-3814 PHONE: (800) 256-5423

HOME: CONT: 603-798-5350  
BUS: 603-798-5350 CELL: 603-219-1041

PAGE 1

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SERVICE ADVISOR: 531 PATRICK J COURNAME

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
7695-HR	05	INTERNATIONAL 7400	1HTWDAAR65J053095		97475/97498	T1758	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO.	RATE	PAYMENT	INV DATE
28SEP04 DD			23:30 07OCT21	TRK1	0.00	CHG	19OCT20
B.O. OPENED	READY	OPTIONS: STK:5J053095 ENG:2019760 DT					
07:41 07OCT20	13:43 19OCT20						

LINE OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
-------------	------	------	-------	------	-----	-------

A PERFORM NH STATE INSPECTION  
CAUSE: PERFORM NH STATE INSPECTION  
ST: PERFORM NH STATE INSPECTION  
525 CORSON, ELI P LIC#: N  
CNAV 1.00

PARTS: 0.00 LABOR: 89.95 OTHER: 0.00 TOTAL LINE A: 89.95

97475 10/9/2020 PERFORMED STATE INSPECTION FOUND STEER AXLE BRAKES ON PASSENGER SIDE BELOW 1/4 AND DRIVER SIDE IS AT MINIMUM. PASSENGER REAR SLACK ADJUSTER BROKEN. ABS LIGHT IS ON PLOW LIGHT MARKER ON DRIVER SIDE INOP. DRIVER REAR RED SIDE MARKER INOP. PASSENGER LUG NUTS RUST STREAKING WILL NEED TO TORQUE TO CONFIRM TIGHT (BROKEN RE RIM). DRIVER STEER AXLE WHEEL BEARING EXCESS PLAY. SEATBELT MOUNTING BOLT NOT HOLDING STRAP AND IS NOT PROPER GRADE. CONFIRMED ALL REPAIRS AND ISSUED STICKER NUMBER 2100924858 OUT MILES 97486

B DIAG ABS LIGHT

1 DIAG AND REPAIR  
525 CORSON, ELI P LIC#: N  
CNAV 5.00

1 CR47691 SEAL-WHEEL	47.60	39.47	39.47
1 3566966C1 GASKET 5/8 STUD 8 HOLE 7 INCH ON CENTER	10.39	7.81	7.81
1 BX801551 TRANSMITTER, ABS	176.48	77.83	77.83
2 ISNMMM5021 UTILTY CLOTH ROLL 1-1/2 X 50YD S400	0.99	0.43	0.86
2 ISNMMM7747 PRIMER PREP SCUFF- 4.75 X 15 M	2.07	0.90	1.80
4 BDTC24706 CABLETIE 15 1/2" 3/16"	1.25	0.65	2.60
1 104361 75W90 GEAR OIL MOBIL QT	16.31	11.33	11.33
7 144423H NUT CAN USE 414089C1	6.77	5.02	35.14

COMP INSTALL LAPTOP AND RETRIEVE CODES

525 CORSON, ELI P LIC#: N  
CNAV 1.00

PARTS: 176.84 LABOR: 799.95 OTHER: 0.00 TOTAL LINE B: 976.79

97475 10/9/2020 ABS LIGHT ON. LEFT REAR SENSOR SHORTED TO GROUND.

NO WARRANTIES: THE COMPANY DISCLAIMS ANY AND ALL WARRANTIES EXPRESS OR IMPLIED INCLUDING BUT NOT LIMITED TO WARRANTIES OF FITNESS FOR A PARTICULAR PURPOSE AND WARRANTIES OF MERCHANTABILITY FOR THE PARTS AND SERVICE PROVIDED HEREUNDER. THE COMPANY SHALL NOT BE LIABLE FOR ANY CONSEQUENCES INSTALLING FROM THE USE OF THE PRODUCTS FOR ANY UNINTENDED PURPOSE. ANY AND ALL WARRANTIES PROVIDED BY THE MANUFACTURER OF ANY PARTS PROVIDED TO THE CUSTOMER HEREUNDER RUN SOLELY AND DIRECTLY FROM THE MANUFACTURER TO THE CUSTOMER AND THE COMPANY DOES NOT HAVE ANY LIABILITY INCURRED.

TERMS: DUE AND PAYABLE BY 10TH OF FOLLOWING MONTH. 1.5% FINANCE CHARGE ON ALL OVERDUE ACCOUNTS.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

CUSTOMER #: 4369

72340



TOWN OF CHICHESTER  
ACCOUNTS PAYABLE  
54 MAIN STREET  
CHICHESTER, NH 03258

INVOICE

1400 SOUTH WILLOW STREET  
MANCHESTER, NH 03103-4024  
PHONE: (603) 623-8873  
PHONE: (800) 562-3814

132 PIERCE ROAD  
BARRINGTON, NH 03826  
PHONE: (603) 905-9036  
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HOME: CONT: 603-798-5350  
BUS: 603-798-5350 CELL: 603-219-1041

PAGE 2

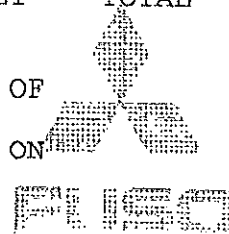
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SERVICE ADVISOR: 531 PATRICK J COURNANE

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG	
7695-HR	05	INTERNATIONAL 7400	1HTWDAAR65J053095		97475/97498	T1758	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO. NO.	RATE	PAYMENT	INV. DATE
28SEP04 DD			23:30 07OCT21	TRK1	0.00	CHG	19OCT20
R.O. OPENED	READY	OPTIONS: STK:5J053095 ENG:2019760 DT					
07:41 07OCT20	13:43 19OCT20						

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL

LEFT REAR SPEED SENSOR SPEED DROPS OUT. ALL CODES LISTED ARE ACTIVE THERE IS HEAVY DIRT/SALT BUILD-UP ON THIS SIDE OF THE AXLE RECOMMEND PULLING TIRES AND DRUM TO CHECK THE SENSOR. CHECKED WIRE NO EVIDENCE OF CHIPPING OHM PINS TO SENSOR THEY ARE READING 6K OHMS AND SHOULD BE READING 15-25 K OHMS SENSOR IS OUT OF SPEC TRIED REMOVING WITH TIRES TRUCK SENSOR IS STUCK WILL NEED TO REMOVE TIRES AND DRUM TO REPLACE SENSOR LOTS OF SALT/DIRT BUILD-UP ON AXLE, HUB ASSEMBLY AND BRAKES. CHISELED OFF BUILDUP TO REMOVE PARTS. THERE WAS LOTS HEAVY CAKED ON DIRT/SALT. 10/12/2020 CLEANED SPINDLE, REPLACED SENSOR AND SECURED WIRES. REPLACED BRAKES. ADJUSTED AND ROAD TESTED. ABS LIGHT OFF AND NO CODES. REPAIR COMPLETE



C FUEL FILTER LIGHT ON DASH  
1 PMA SERVICE REQUIRED  
525 CORSON, ELI P LIC#: N  
CNAV 0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE C: 0.00

97475 NEEDS SERVICE WITH FUEL FILTERS

D DRIVERS SEATBELT NOT SECURED FIX OR REPLACE IF NECESSARY  
1 REPAIR  
525 CORSON, ELI P LIC#: N  
CNAV 0.60

1 3711355C93 BELT, BUCKLE, AIR SEAT, W/TET 162.95 143.04 143.04  
1 3554364C2 BOLT 14.08 10.42 10.42

PARTS: 153.46 LABOR: 78.00 OTHER: 0.00 TOTAL LINE D: 231.46

97475 10/9/2020 CONFIRMED BELT BUCKLE IS MISSING PARTS NEED TO BE REPLACED. INSTALLED NEW BELT BUCKLE CONFIRMED IT IS WORKING PROPERLY. REPAIR COMPLETE

E DIAG GEAR SHIFT LEVER IT HAS TOO MUCH MOVEMENT  
1 DIAG AND REPAIR  
525 CORSON, ELI P LIC#: N  
CNAV 2.50

325.00 325.00

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TERMS: DUE AND PAYABLE BY 10TH OF FOLLOWING MONTH. 1.5% FINANCE CHARGE ON ALL OVERDUE ACCOUNTS.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

CUSTOMER #: 4369

72340



INTERNATIONAL TRUCKS

TOWN OF CHICHESTER  
ACCOUNTS PAYABLE  
54 MAIN STREET  
CHICHESTER, NH 03258

INVOICE

1400 SOUTH WILLOW STREET 132 PIERCE ROAD  
MANCHESTER, NH 03103-4024 BARRINGTON, NH 03825  
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PAGE 3

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SERVICE ADVISOR: 531 PATRICK J COURNANE

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG	
7695-HR	05	INTERNATIONAL 7400	1HTWDAAR65J053095		97475/97498	T1758	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO	RATE	PAYMENT	INV DATE
28SEP04 DL			23:30 07OCT21	TRK1	0.00	CHG	19OCT20
R.O. OPENED	READY	OPTIONS: STK:5J053095 ENG:2019760_DT					
07:41 07OCT20	13:43 19OCT20						

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
1	FULK3376	KIT,O RING & WASHER			8.72	5.37	5.37
1	FUL2538	RETAINER MAIN DRIVE GEAR BRG			3.51	2.16	2.16
1	FUL2536	SPRING			6.22	3.83	3.83
1	FULK2973	HOUSING KIT SHIFT TOWER			187.61	115.45	115.45
1	25523R1	NUT			2.43	1.80	1.80
1	FUL18299	PIN 18299RTO			1.95	1.20	1.20
1	FUL6541	PIN OK			22.91	14.10	14.10
1	FUL4305125	LEVER TRAN SHIFT			313.85	193.14	193.14
1	FULK3376	KIT,O RING & WASHER			8.72	5.37	5.37
PARTS: 342.42 LABOR: 325.00 OTHER: 0.00					TOTAL LINE E:		667.42

97475 10/9/2020 CUSTOMER STATES LOTS OF PLAY IN SHIFTER. CLEANED DIRT AND DEBRIS FROM TOP OF SHIFT TOWER REMOVED BOOT AND INSPECTED. FOUND EXCESSIVE PLAY IN BUSHINGS BELOW SHIFTER. THE SHIFT TOWER AT THE TOP OF TRANS NEEDS TO BE REPLACED. NOTE THIS PROBLEM CAN BE CAUSED OVER TIME WHEN THE SHIFTER IS USED AS AN ARM REST. REMOVED SHIFTER TOWER AND CLEANED GASKET SURFACES. ASSEMBLED SHIFT TOWER WITH NEW BUSHINGS. ADJUSTED SHIFTER. REPAIR COMPLETE.

\*\*\*\*\*

F DIAG POWER STEERING LEAK  
1 DIAG AND REPAIR

525 CORSON, ELI P LIC#: N			
CNAV 1.50		195.00	195.00
1 3558153C94 RESRVOIR		235.02	193.19
1 FLTPSF32 POWER STEERING FLUID 32OZ. (FLEETRITE)		9.38	7.75
PARTS: 200.94 LABOR: 195.00 OTHER: 0.00		TOTAL LINE F: 395.94	

97475 10/9/2020 FOUND OIL LEAKING FROM RESERVOIR. DIRT CHAFFED THROUGH CLAMP AND RESERVOIR NEEDS NEW RESERVOIR. 10/13/2020 REPLACED RESERVOIR FILLED WITH FLUID. REPAIR COMPLETE

\*\*\*\*\*

G INSPECT AIR SYSTEM OIL IN TANKS  
1 DIAG AND REPAIR

525 CORSON, ELI P LIC#: N			
CNAV 1.50		195.00	195.00

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TERMS: DUE AND PAYABLE BY 10TH OF FOLLOWING MONTH. 1.5% FINANCE CHARGE ON ALL OVERDUE ACCOUNTS.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

CUSTOMER #: 4369

72340



TOWN OF CHICHESTER  
ACCOUNTS PAYABLE  
54 MAIN STREET  
CHICHESTER, NH 03258

INVOICE

1400 SOUTH WILLOW STREET 132 PIERCE ROAD  
MANCHESTER, NH 03103-4024 BARRINGTON, NH 03825  
PHONE: (603) 623-8873 PHONE: (603) 905-9036  
PHONE: (800) 562-3814 PHONE: (800) 256-5423

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HOME: CONT:603-798-5350  
BUS: 603-798-5350 CELL:603-219-1041

SERVICE ADVISOR: 531 PATRICK J COURNANE

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
7695-HR	05	INTERNATIONAL 7400	1HTWDAAR65J053095		97475/97498	T1758	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
28SEP04 DD			23:30 07OCT21	TRK1	0.00	CHG	19OCT20
R.O. OPENED	READY	OPTIONS: STK:5J053095 ENG:2019760_DT					
07:41 07OCT20	13:43 19OCT20						

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
1	FLTAD9477	AD	IP	AIR DRYER	318.25	249.13	249.13
PARTS: 249.13 LABOR: 195.00 OTHER: 0.00					TOTAL LINE G:		444.13
97475 10/9/2020 FOUND OIL IN TANKS. CHECKED AIR COMPRESSOR SUPPLY LINE NO OIL IN LINE. RECOMMEND DRAINING, CLEANING TANKS, AND SERVICING AIR DRYER. REPLACED AIR DRYER ASSEMBLY AND DRAINED TANKS. REPAIR COMPLETE							

H\*\* REPLACE FRONT BRAKES  
1 REPLACE

525 CORSON, ELI P LIC#: N  
CNAV 3.00

1 A28828PKWHT21		390.00	390.00
WHEEL, STEEL, 22.5X8.25, 2-HH WHITE, 800LB	231.08	179.23	179.23
1 CR4537958 GASKET C30-3009 GOOD DEAL	1.69	1.40	1.40
2 XK4034715QP KIT, SHOES	299.94	132.79	265.58
CORE CHARGE C		96.00	96.00
2 ZBR3687X DRUM DS ONLY FOR PDC ORDER PN 2010238C1	219.75	174.19	348.38
2 FLTAHVBC14KK BRAKE CLEAN, HIGH VOC	2.96	2.75	5.50
2 104361 75W90 GEAR OIL MOBIL QT	16.31	11.33	22.66
2 FLTAHVBC14KK BRAKE CLEAN, HIGH VOC	2.96	2.75	5.50
1 CR4537958 GASKET C30-3009 GOOD DEAL	1.69	1.40	1.40
1 CR43764 SEAL SPA # 1352**** CAN USE ZAR43763	42.11	34.92	34.92
-2 XK4034715QP CORE RETURN	48.00	48.00	-96.00

SUBL REPLACE DAMAGED RIM PO#B41890  
CNAV

PARTS: 864.57 LABOR: 390.00 OTHER: 64.80	TOTAL LINE H:	1319.37
97475 10/13/2020 REPLACED WORN FRONT BRAKES. NOTES THERE WAS A LOT DIRT/SALT TO CLEAN OFF. FOUND THE WHEEL HAD CRACKS BETWEEN 4 LUG HOLES. WHEEL NEEDS TO BE REPLACED IT IS ABOUT TO HAVE A CATASTROPHIC FAILURE. REPLACED WITH NEW WHEEL. REPAIR COMPLETE		

I\*\* REPLACE REAR BRAKES

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TERMS: DUE AND PAYABLE BY 10TH OF FOLLOWING MONTH. 1.5% FINANCE CHARGE ON ALL OVERDUE ACCOUNTS.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	



CUSTOMER #: 4369

72340



TOWN OF CHICHESTER  
ACCOUNTS PAYABLE  
54 MAIN STREET  
CHICHESTER, NH 03258

INVOICE

1400 SOUTH WILLOW STREET 132 PIERCE ROAD  
MANCHESTER, NH 03103-4024 BARRINGTON, NH 03825  
PHONE: (603) 623-8873 PHONE: (603) 906-9036  
PHONE: (800) 562-3814 PHONE: (800) 256-5423

HOME: CONT: 603-798-5350  
BUS: 603-798-5350 CELL: 603-219-1041

PAGE 5

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SERVICE ADVISOR: 531 PATRICK J COURNANE

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
7695-HR	05	INTERNATIONAL 7400	1HTWDAAR65J053095		97475/97498	T1758	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
28SEP04 DD			23:30 07OCT21	TRK1	0.00	CHG	19OCT20
R.O. OPENED	READY	OPTIONS: STK: 5J053095 ENG: 2019760_DT					

07:41 07OCT20 13:43 19OCT20

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
1	REPLACE						
				525 CORSON, ELI P LIC#: N			
				CNAV 3.00			
2	ELTPMG2L4707Q23			SHOE KIT, 4707 PREMIUM	59.80	390.00	390.00
				CORE CHARGE C		49.96	99.92
1	R803055			ADJUSTER		48.00	48.00
1	R810005LW			KIT SLACK PINS	164.36	72.77	72.77
					7.19	3.18	3.18
PARTS: 223.87 LABOR: 390.00 OTHER: 0.00					TOTAL LINE I: 613.87		
97475 10/13/2020 REPLACE REAR BRAKES, ANCHOR PINS, BUSHINGS, SHOES							
, LH SLACK ADJUSTER TORQUE TIRES AND ADJUSTED BRAKES. NOTE: LEFT REAR							
BRAKES REPLACED ON LINE B ABS REPAIR							
*****							
J**	PERFORM LEVEL 3 A SERVICE						
	PMA3 PERFORM LEVEL 3 A SERVICE						
	525 CORSON, ELI P LIC#: N						
	CNPM 2.80						
	LUBE3 CHASSIS GREASE						
1	FS19684E			FILTER DONP550657	27.36	10.00	10.00
1	1842639C92			OIL FILTER EXPLIFE DT466-HE570		16.16	16.16
				LF9025			
34	B1540Q			15W40 ENGINE OIL	83.43	45.68	45.68
					6.00	3.50	119.00
PARTS: 180.84 LABOR: 248.16 OTHER: 10.00					TOTAL LINE J: 439.00		
97475 10/13/2020 PERFORMED PMA SERVICE							
*****							
K**	ADDITIONAL ITEMS NOT INCLUDED IN MENU SERVICE PRICE						
	ADD ADDITIONAL ITEMS NOT INCLUDED IN MENU SERVICE PRICE						
	525 CORSON, ELI P LIC#: N						
	CNAV 0.00						
1	1871904C91			KIT, PLUG	61.13	0.00	0.00
						45.12	45.12
PARTS: 45.12 LABOR: 0.00 OTHER: 0.00					TOTAL LINE K: 45.12		
97475 ADD ITEMS NOT COVERED UNDER MENU PRICING							
*****							
L**	DIAG AND REPAIR LIGHTS						

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TERMS: DUE AND PAYABLE BY 10TH OF FOLLOWING MONTH. 1.5% FINANCE CHARGE ON ALL OVERDUE ACCOUNTS.

DESCRIPTION	TOTALS
LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	
MISC. CHARGES	
TOTAL CHARGES	
LESS INSURANCE	
SALES TAX	
PLEASE PAY THIS AMOUNT	

CUSTOMER #: 4369

72340



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ACCOUNTS PAYABLE  
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HOME: CONT: 603-798-5350  
BUS: 603-798-5350 CELL: 603-219-1041

SERVICE ADVISOR: 531 PATRICK J COURNANE

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG	
7695-HR	05	INTERNATIONAL 7400	1HTWDAAR65J053095		97475/97498	TL1758	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO	RATE	PAYMENT	INV DATE
28SEP04 DD			23:30 07OCT21	TRK1	0.00	CHG	19OCT20
R/O OPENED	READY	OPTIONS: STK:5J053095 ENG:2019760_DT					

07:41 07OCT20 13:43 19OCT20

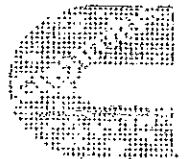
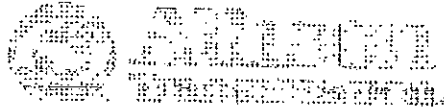
LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
1	DTAG						
525 CORSON, ELI P LIC#: N CNAV 1.50							
1	TL10202R			2-1/2"	2.73	195.00	195.00
1	FLT1157			BULB	0.24	2.12	2.12
1	TL94902			PLUG	2.19	0.18	0.18
3	BDT18600			TERMINAL SPLICE	5.27	1.70	1.70
1	BDT23631			H S TUBING W/LIN 3/16" X 6 BLACK	6.29	2.79	2.79
1	BDT23635			HEAT SHRINK	7.00	3.33	3.33
1	GRO68130			PIGTAIL	9.60	3.00	3.00
PARTS:				21.87			
				LABOR:	195.00		
				OTHER:	0.00		
				TOTAL LINE L:			216.87

97475 10/14/2020 REAR MARKER AND LH PLOW LIGHT MARKER OUT. TESTED WIRING FOR REAR MARKER. REAR MARKER IS WORKING AFTER SPLICING A NEW PIGTAIL AND BULB. TESTED WIRING FOR PLOW LIGHT AND FOUND BROKEN WIRE. REPAIRED BROKEN WIRE FOR PLOW LIGHT AND CONFIRMED REPAIR. REPAIRS COMPLETE

\*\*\*\*\*

CUSTOMER PAY SHOP CHARGE FOR REPAIR ORDER 125.00

ORDER FILLER



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TERMS: DUE AND PAYABLE BY 10TH OF FOLLOWING MONTH. 1.5% FINANCE CHARGE ON ALL OVERDUE ACCOUNTS.

DESCRIPTION	TOTALS
LABOR AMOUNT	2906.06
PARTS AMOUNT	2459.06
GAS, OIL, LUBE	10.00
SUBLET AMOUNT	64.80
MISC. CHARGES	125.00
TOTAL CHARGES	5564.92
LESS INSURANCE	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	5564.92

**TOWN OF CHICHESTER  
NOTICE OF ABATEMENT & REFUND**

Date: December 10, 2020

By vote of the Board of Selectmen/Assessors, upon the application of:

Name: Steven Chase  
Kathleen Chase

Address: 84 Branch Turnpike Unit #28  
Concord, NH 03301

Re: Map 2 Lot 84 and Map 2 Lot 82

The Board of Selectmen have abated the following amount of \$252.00 in property taxes for Map 2 Lot 84 as well any additional interest for the above property for property tax year 2020.

The Board of Selectmen have abated the following amount of 886.00 in property taxes for Map 2 Lot 82 as well any additional interest for the above property for property tax year 2020.

Reason: This was approved in July but the Tax Collector asked the monetary amounts to be abated.

\_\_\_\_\_, Chairman

\_\_\_\_\_

\_\_\_\_\_

Board of Selectmen

---

The abatement refund will be applied to your outstanding taxes pursuant to RSA 76:17-d as follows:

Amount of Payment Applied:	\$0.00
Type & Year of Tax Credit:	Property 2020
For Property Located at:	Chichester, NH
Remaining Amount for Refund:	\$0.00
Interest (if any)	<u>\$0.00</u>
	<u>\$0.00</u>

Please contact the Tax Collector's Office to determine any remaining outstanding balances of taxes due.

Copies to: Tax Collector – Original, Taxpayer – Copy, Selectmen's Office-Bookkeeper – Copy,  
Abatement File – Copy, Property Card File - Copy

**TOWN OF CHICHESTER  
NOTICE OF ABATEMENT & REFUND**

Date: July 7, 2020

By vote of the Board of Selectmen/Assessors, upon the application of:

Name: Steven Chase  
Kathleen Chase

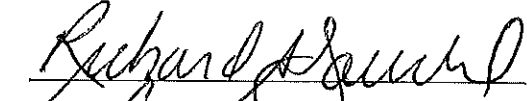
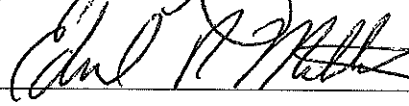

Address: 84 Branch Turnpike Unit #28  
Concord, NH 03301

Re: Map 2 Lot 84 & Map 2 Lot 82

The Board of Selectmen have abated the following amount of \$21,500 in assessed value for Map 2 Lot 84 interest for property tax year 2020.

The Board of Selectmen have abated the following amount of \$75,656 in assessed value for property tax year 2020. - map 2 Lot 82

Reason: The lot merger request was filed late and did not get entered into the system prior to the first bills.

  
\_\_\_\_\_, Chairman  
  
\_\_\_\_\_  
  
\_\_\_\_\_

Board of Selectmen

---

The abatement refund will be applied to your outstanding taxes pursuant to RSA 76:17-d as follows:

Amount of Payment Applied:	\$0.00
Type & Year of Tax Credit:	Property 2020
For Property Located at:	Chichester, NH
Remaining Amount for Refund:	\$0.00
Interest (if any)	<u>\$0.00</u>
	<u>\$0.00</u>

Copies to: Tax Collector – Original, Taxpayer – Copy, Selectmen’s Office-Bookkeeper – Copy,  
Abatement File – Copy, Property Card File - Copy

**TAX COLLECTOR'S PROPERTY TAX SUPPLEMENT WARRANT  
STATE OF NEW HAMPSHIRE**

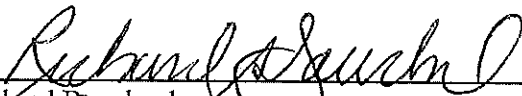
Merrimack ss.

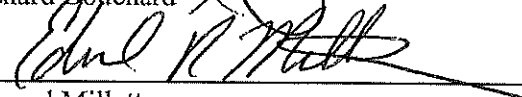
**TO: Evelyn Pike, Collector of Taxes for Chichester, New Hampshire in said county.**


In the name of the State you are hereby directed to collect the property taxes committed to you, amounting to the sum of Five Hundred Eighty Eight Dollars and Fifty Cents (\$588.50) and with interest at eight (8%) percent per annum on all sums not paid thirty (30) days after the bills are mailed.

And we further order you to remit all monies collected to the Town Treasurer, or to the Town Treasurer's designee as provided by RSA 41:29, VI, at least on a weekly basis, or daily whenever tax receipts total One Thousand Five Hundred Dollars (\$1,500.00) or more.

Given under our hands at Chichester, New Hampshire, this Sixteenth day of June in 2020.

  
Richard Bouchard

  
Edward Millette

  
Jason Weir

Board Of Selectmen  
Chichester, New Hampshire

Owner	PID & Location	Amount
CHASE, STEVEN C. & KATHLEEN M. CHASE, JUSTIN C. 361 DOVER ROAD  CHICHESTER, NH 03258	000002 000083 000000  361 DOVER ROAD	<b>\$588.50</b>
Reason: LOT MERGER NOT ENTERED		

Chichester  
2020P02 Negative Tax Bills

The following properties are parcels for which the invoice from the first property tax warrant of the year exceeded the property's total tax liability for the year. These scenarios arise, for example, when, between the first and the second invoices, either the assessment decreased significantly, a credit or exemption was added to the property, or the property was marked as exempt. You should review these parcels with the Tax Collector to determine whether, based on if the first invoice was paid or not, either the Selectmen should issue the taxpayer a refund or the first invoice should be abated.

Map	Lot	Sub	Owner	Land Use
000002	000082	000000	CHASE, STEVEN C & KATHLEEN M	CI
000002	000084	000000	CHASE, STEVEN C & KATHLEEN M	CI
000003	000067	00000C	KENNEALLY, THOMAS	CUUH

Second Bill  
-886.00  
-252.00  
-37.00

*To Be abated*

*refund needed*

*Sodil*

*11/19/20*



Town of Chichester  
Tax Collector's Office  
54 Main Street  
Chichester, NH 03258-6508

**TOWN OF CHICHESTER  
NOTICE OF ABATEMENT & REFUND**

Date: December 10, 2020

By vote of the Board of Selectmen/Assessors, upon the application of:

Name: Gary Storrs  
Susan Storrs

Address: 1572 South Hill Road  
Williams Town, VT 05679

Re: Map 4 Lot 156 – 131RV

The Board of Selectmen have abated the following amount of \$23.00 in property taxes as well any additional interest for the above property for property tax year 2020.

Reason: This camper was registered prior to April 1<sup>st</sup>, 2020

\_\_\_\_\_, Chairman

\_\_\_\_\_

\_\_\_\_\_

Board of Selectmen

---

The abatement refund will be applied to your outstanding taxes pursuant to RSA 76:17-d as follows:

Amount of Payment Applied:	\$0.00
Type & Year of Tax Credit:	Property 2020
For Property Located at:	Chichester, NH
Remaining Amount for Refund:	\$0.00
Interest (if any)	<u>\$0.00</u>
	<u>\$0.00</u>

Please contact the Tax Collector's Office to determine any remaining outstanding balances of taxes due.

Copies to: Tax Collector – Original, Taxpayer – Copy, Selectmen's Office-Bookkeeper – Copy,  
Abatement File – Copy, Property Card File - Copy

This is a temporary registration and must be kept in your vehicle until you receive your permanent registration in the mail. If you are renewing your vehicle, your old registration must be kept with this temporary registration. You may use this temporary registration to have your vehicle inspected.

**Vehicle Information**

Plate(s)	Model Year	Make	Model	VIN	New Exp	Transaction Date	Temporary Registration Expires	Fee
ARL369	16	PROW	TL	5SFPB3529GE315720	04/2020	2019-04-03	2019-04-13	\$ 52.00
Total Paid								\$ 52.00

**Payment Information**

<b>Credit Card Type:</b>	MasterCard
<b>Last four of Credit Card:</b>	5343
<b>Cardholder:</b>	SUSAN M STORRS
<b>Confirmation Number:</b>	1554301341127
<b>Date of Transaction:</b>	2019-04-03 10:22:21
Your credit card statement will show a charge from "VT DMV" for this payment.	

Temporary registration expires 10 days from the date of issue. Any alterations will void the temporary registration. Temporary registration is valid for inspection, if needed. Stickers will be mailed to you and should arrive in 4 - 6 business days.

**If renewing multiple vehicles, print a copy of this receipt for each vehicle!**

Contact Us - <http://dmv.vermont.gov/contact>

Visit our Facebook page - <https://www.facebook.com/VermontDMV>

Gary + Susan Storrs  
1572 South Hill Road  
Williams Town VT, 05679

\$23.00

131 RV



This is a temporary registration and must be kept in your vehicle until you receive your permanent registration in the mail. If you are renewing your vehicle, your old registration must be kept with this temporary registration. You may use this temporary registration to have your vehicle inspected.

**Vehicle Information**

Plate(s)	Model Year	Make	Model	VIN	New Exp	Transaction Date	Temporary Registration Expires	Fee
ARL369	16	PROW	TL	5SFPB3529GE315720	04/2021	2020-04-29	2020-05-09	\$ 52.00
							Total Paid	\$ 52.00

**Payment Information**

<b>Credit Card Type:</b>	MasterCard
<b>Last four of Credit Card:</b>	5343
<b>Cardholder:</b>	Susan M Storrs
<b>Confirmation Number:</b>	1588193967925
<b>Date of Transaction:</b>	2020-04-29 16:59:27
Your credit card statement will show a charge from "VT DMV" for this payment.	

Temporary registration expires 10 days from the date of issue. Any alterations will void the temporary registration. Temporary registration is valid for inspection, if needed. Stickers will be mailed to you and should arrive in 4 - 6 business days.

**If renewing multiple vehicles, print a copy of this receipt for each vehicle!**

Contact Us - <http://dmv.vermont.gov/contact>

Visit our Facebook page - <https://www.facebook.com/VermontDMV>

**TOWN OF CHICHESTER  
NOTICE OF ABATEMENT & REFUND**

Date: December 10, 2020

By vote of the Board of Selectmen/Assessors, upon the application of:

Name: Harry Dumont  
Ann Dumont

Address: 16376 SW Three Wood Way  
Indiantown, FL 34956-3662

Re: Map 4 Lot 156 – 42RV

The Board of Selectmen have abated the following amount of \$95.00 in property taxes as well any additional interest for the above property for property tax year 2020.

Reason: This camper was registered prior to April 1<sup>st</sup>, 2020

\_\_\_\_\_, Chairman

\_\_\_\_\_

\_\_\_\_\_

Board of Selectmen

---

The abatement refund will be applied to your outstanding taxes pursuant to RSA 76:17-d as follows:

Amount of Payment Applied: \$0.00

Type & Year of Tax Credit: Property 2020

For Property Located at: Chichester, NH

Remaining Amount for Refund: \$0.00

Interest (if any) \$0.00

\$0.00

Please contact the Tax Collector's Office to determine any remaining outstanding balances of taxes due.

Copies to: Tax Collector – Original, Taxpayer – Copy, Selectmen's Office-Bookkeeper – Copy,  
Abatement File – Copy, Property Card File - Copy

TOWN OF CHICHESTER  
TAX COLLECTOR  
54 MAIN ST  
CHICHESTER, NH 03258  
Temp - Return Service Requested

**CAMPER ABATEMENT**  
**SENT BY EMAIL ON 11/30/2020**

DUMONT, HARRY  
DUMONT, ANN  
16376 SW THREE WOOD WAY  
INDIANTOWN, FL 34956-3662

**2020 CHICHESTER PROPERTY TAX -- BILL 2 OF 2**

Invoice: 2020P02005401  
Billing Date: 11/19/2020  
Payment Due Date: 12/21/2020  
Amount Due: \$ 95.00

8% APR Charged After 12/21/2020

COVID 19 Hours: Monday 8:30 -4 Tuesday, Wednesday & Thursday 8:30 to 2

Property Owner	
Owner: DUMONT, HARRY DUMONT, ANN	
Tax Rates	Assessments
County: \$ 2.63	Taxable Land: 0
School: \$ 13.08	Buildings: 4,100
Town: \$ 5.56	Total: 4,100
State Education: \$ 1.91	

Total Tax Rate: \$ 23.18	Net Value: 4,100
--------------------------	------------------

Property Description		
Map: 000004	Lot: 000156	Sub: 0042RV
Location: 78 DOVER ROAD Acres: 0.000		
Summary Of Taxes		
Total Tax:		\$ 95.00
- First Bill:		\$ 0.00
- Abated/Paid:		\$ 0.00
- Veteran Credits:		\$ 0.00

Amount Due By 12/21/2020: **\$ 95.00**

**2020 CHICHESTER PROPERTY TAX -- BILL 2 OF 2**

Mailed To:  
DUMONT, HARRY  
DUMONT, ANN  
16376 SW THREE WOOD WAY  
INDIANTOWN, FL 34956-3662

TOWN OF CHICHESTER  
MON 8:30 TO 4, TUES 8:30 TO 2 & 4 TO 7  
WED & THUR 8:30 TO 2  
603-798-5350  
Tax Collector: Evelyn Pike

Owner: DUMONT, HARRY  
DUMONT, ANN  
Location: 78 DOVER ROAD  
Map: 000004 Lot: 000156 Sub: 0042RV  
Invoice: 2020P02005401

Amount Due By 12/21/2020: **\$ 95.00**

Remit To:  
TOWN OF CHICHESTER  
TAX COLLECTOR  
54 MAIN ST  
CHICHESTER, NH 03258  
Temp - Return Service Requested

PAY ONLINE AT: [chichester.nhtaxkiosk.com](http://chichester.nhtaxkiosk.com)

RETURN THIS PORTION WITH PAYMENT

REMITTED AMOUNT: \_\_\_\_\_

## FLORIDA VEHICLE REGISTRATION

PLATE **NSUG50**      DECAL **01249202**      Expires **Midnight Sat 7/30/2022**

YR/MK	2015/WINO	BODY	CA		Reg. Tax	45.20	Class Code	62
VIN	54CB12227F1N10929			TITLE	137835799		Tax Months	24
Plate Type	RGS	NET WT	36'		County Fee	6.00	Back Tax Mos	0
					Mail Fee	0.75	Credit Class	
DL/BEID	D553361502700				Sales Tax		Credit Months	0
Date Issued	6/11/2020	Plate Issued	2/20/2020		Voluntary Fees			
					Grand Total	51.95		

**HARRY ARTHUR DUMONT**  
16376 SW THREE WOOD WAY  
INDIANTOWN, FL 34956

## IMPORTANT INFORMATION

1. The Florida license plate must remain with the registrant upon sale of vehicle.
2. The registration must be delivered to a Tax Collector or Tag Agent for transfer to a replacement vehicle.
3. Your registration must be updated to your new address within 30 days of moving.
4. Registration renewals are the responsibility of the registrant and shall occur during the 30-day period prior to the expiration date shown on this registration. Renewal notices are provided as a courtesy and are not required for renewal purposes.
5. I understand that my driver license and registrations will be suspended immediately if the insurer denies the insurance information submitted for this registration.

RGS - SUNSHINE STATE

**TOWN OF CHICHESTER  
NOTICE OF ABATEMENT & REFUND**

Date: December 10, 2020

By vote of the Board of Selectmen/Assessors, upon the application of:

Name: Dennis Sahr  
Kathy Sahr

Address: 703 Palmetto Drive  
Davenport, FL 33897

Re: Map 4 Lot 156 – 61RV

The Board of Selectmen have abated the following amount of \$67.00 in property taxes as well any additional interest for the above property for property tax year 2020.

Reason: This camper was registered prior to April 1<sup>st</sup>, 2020

\_\_\_\_\_, Chairman

\_\_\_\_\_

\_\_\_\_\_

Board of Selectmen

---

The abatement refund will be applied to your outstanding taxes pursuant to RSA 76:17-d as follows:

Amount of Payment Applied: \$0.00

Type & Year of Tax Credit: Property 2020

For Property Located at: Chichester, NH

Remaining Amount for Refund: \$0.00

Interest (if any) \$0.00

\$0.00

Please contact the Tax Collector's Office to determine any remaining outstanding balances of taxes due.

Copies to: Tax Collector – Original, Taxpayer – Copy, Selectmen's Office-Bookkeeper – Copy,  
Abatement File – Copy, Property Card File - Copy

TOWN OF CHICHESTER  
 TAX COLLECTOR  
 54 MAIN ST  
 CHICHESTER, NH 03258  
 Temp - Return Service Requested

SAHR, DENNIS  
 SAHR, KATHY  
 703 PALMETTO DRIVE  
 DAVENPORT, FL 33897

**2020 CHICHESTER PROPERTY TAX -- BILL 2 OF 2**

Invoice: 2020P02016405  
 Billing Date: 11/19/2020  
 Payment Due Date: 12/21/2020  
 Amount Due: \$ 67.00

8% APR Charged After 12/21/2020

COVID 19 Hours: Monday 8:30 -4 Tuesday, Wednesday & Thursday 8:30 to 2

Property Owner		Assessments	
Owner: SAHR, DENNIS		Taxable Land:	0
SAHR, KATHY		Buildings:	2,900
Total:		Total:	2,900
Tax Rates			
County:	\$ 2.63		
School:	\$ 13.08		
Town:	\$ 5.56		
State Education:	\$ 1.91		

Property Description		
Map: 000004	Lot: 000156	Sub: 0061RV
Location: 78 DOVER ROAD Acres: 0.000		
Summary Of Taxes		
Total Tax:		\$ 67.00
- First Bill:		\$ 0.00
- Abated/Paid:		\$ 0.00
- Veteran Credits:		\$ 0.00

Amount Due By 12/21/2020: **\$ 67.00**

Total Tax Rate: \$ 23.18 Net Value: 2,900

**2020 CHICHESTER PROPERTY TAX -- BILL 2 OF 2**

TOWN OF CHICHESTER  
 MON 8:30 TO 4, TUES 8:30 TO 2 & 4 TO 7  
 WED & THUR 8:30 TO 2  
 603-798-5350  
 Tax Collector: Evelyn Pike

Mailed To:  
 SAHR, DENNIS  
 SAHR, KATHY  
 703 PALMETTO DRIVE  
 DAVENPORT, FL 33897

Owner: SAHR, DENNIS  
 SAHR, KATHY  
 Location: 78 DOVER ROAD  
 Map: 000004 Lot: 000156 Sub: 0061RV  
 Invoice: 2020P02016405

Amount Due By 12/21/2020: **\$ 67.00**

Remit To:  
 TOWN OF CHICHESTER  
 TAX COLLECTOR  
 54 MAIN ST  
 CHICHESTER, NH 03258  
 Temp - Return Service Requested

PAY ONLINE AT: [chichester.nhtaxkiosk.com](http://chichester.nhtaxkiosk.com)

RETURN THIS PORTION WITH PAYMENT

REMITTED AMOUNT: \_\_\_\_\_

INSTRUCTIONS FOR ATTACHING DECAL

1. Clean area where new annual decal is to be affixed.
2. Peel decal from this document.
3. Affix decal in the upper right corner of license plate.

IMPORTANT INFORMATION

Section 316.613, Florida Statutes, requires every operator of a motor vehicle transporting a child in a passenger car, van, automobile or pickup truck registered in this state and operated on the highways of this state, shall, if the child is 5 years of age or younger, provide the protection of the child by properly using a crash-tested, federally approved child restraint device. For children aged through 3 years, such restraint device must be a separate carrier or a vehicle manufacturer's integrated child seat. For children aged 4 through 5 years, For limited exceptions, see s. 316.613, F.S.

S. 320.0605, F.S., requires the registration certificate, or true copy of a rental or lease agreement, issued for any motor vehicle to be in the possession of the operator or carried in the vehicle while the vehicle is being used or operated on roads of this state.

S. 320.02 and 627.733, F.S., requires personal injury protection and property damage liability to be continuously maintained throughout the registration period. Failure to maintain the mandatory coverage may result in the suspension of your driver license and registration.

Mail To:  
**KATHARINE E SAHR, DENNIS A SAHR**  
 703 PALMETTO DR  
 DAVENPORT, FL 33897-3685

Important note: If you cancel the insurance for this vehicle, immediately return the license plate from this registration to a Florida driver license or tax collector office or mail it to: DHSMV, Return Tags, 2900 Apalachee Parkway, Tallahassee, FL 32399. Surrendering the plate will prevent your driving privilege from being suspended.

CO/AGY 5 / 4 T# 1073869760  
 B# 1180109

FLORIDA VEHICLE REGISTRATION

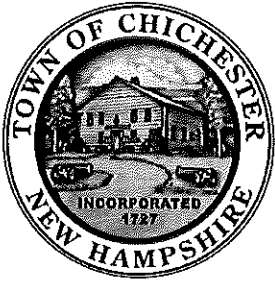
PLATE **LBH78** DECAL **00436487** Expires **Midnight Wed 2/17/2021**

YR/MK	2018/OROR	BODY	CA	Reg. Tax	73.20	Class Code	62
VIN	58TCH0BV5J3J3230	NET WT	42'	Int. Reg.	6.00	Tax Months	24
Plate Type	RGS			County Fee		Back Tax Mos	
DL/FEID	S60050505570			Mail Fee		Credit Class	I
Date Issued	2/21/2019	Plate Issued	2/21/2019	Sales Tax		Credit Months	
		TRANSFER:	X	Voluntary Fees		Grand Total	79.20

IMPORTANT INFORMATION

1. The Florida license plate must remain with the registrant upon sale of vehicle.
2. The registration must be delivered to a Tax Collector or Tag Agent for transfer to a replacement vehicle.
3. Your registration must be updated to your new address within 30 days of moving.
4. Registration renewals are the responsibility of the registrant and shall occur during the 30-day period prior to the expiration date shown on this registration. Renewal notices are provided as a courtesy and are not required for renewal purposes.
5. I understand that my driver license and registrations will be suspended immediately if the insurer denies the insurance information submitted for this registration.

**KATHARINE E SAHR, DENNIS A SAHR**  
 703 PALMETTO DR  
 DAVENPORT, FL 33897-3685



# Town of Chichester

## Office of the Selectmen

54 Main Street  
Chichester, New Hampshire 03258  
(603) 798-5350 Fax (603) 798-3170  
www.chichesternh.org

### Selectmen

Richard Bouchard, Chairman  
Edward Millette  
Jason Weir

### Administration

Jodi Pinard, Town Administrator  
Kristy Willey, Administrative Assistant

December 15, 2020

Pursuant to RSA 31:19, the Board of Selectmen shall accept and authorize the expenditure of unanticipated funds in the amount of:

\$50.00 received from Jane & Gary Zimmerman in memory of George & Rose Sawtelle  
\$150.00 received from Catherine Edmundailey  
\$50.00 received from Richard Phelps & Gail Laker-Phelps  
\$500.00 received from William & Margaret Haskett  
\$100.00 received from Lakeside Trading, LLC.

in support of the food pantry. It shall be the responsibility of the Town of Chichester to maintain an accurate record of all funds, detailing their expenditure, and that such records shall be made available upon request.

Motion made by \_\_\_\_\_

Motion seconded by \_\_\_\_\_

Motion passes / fails (circle one)

### Certificate of Vote

We, the undersigned officer of the Town of Chichester, hereby certify that a vote was taken on the above action at a duly noticed meeting of the Board of Selectmen on December 8, 2020.

\_\_\_\_\_  
Richard Bouchard

\_\_\_\_\_  
Edward Millette

\_\_\_\_\_  
Jason Weir



## Contract with Independent Contractor with Confidentiality Agreement

Independent Contractor agreement made on \_\_\_\_\_ (date), between Sanders Searches, LLC of P. O. Box 373, Newmarket, NH 03857, referred to herein as *Contractor*; and Town of Chichester (*Municipality*), an incorporated city, town or unincorporated location organized and existing under the laws of the State of New Hampshire, with its principal office located at 54 Main St., (Mail: same) Chichester, Merrimack, NH 03258 (street address, city, county, state, zip code), referred to herein as *Municipality*.

Whereas, *Municipality* operates at the address set forth above, and *Municipality* desires to have the following services performed in order to comply with New Hampshire Chapter 80 laws relative to identifying mortgagees for the purpose of notification of liens and or impending deeding to said *Municipality* and

Whereas, *Contractor* agrees to perform these services for *Municipality* under the terms and conditions set forth in this Contract.

Now, therefore, for and in consideration of the mutual covenants contained in this agreement, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

1. **Description of Work**

The work to be performed by *Contractor* includes all services generally performed by *Contractor* in *Contractor's* usual line of business, including, but not limited to, the following: searches, by property owner, of indices of the County Registry of Deeds; *Municipality* shall provide the list of properties to be searched within THREE (3) days after the execution of new liens or ninety (90) days prior to the impending deed date (at least 60 days prior to notice mailing date) regarding any properties eligible for tax deeding. *Contractor* shall provide a written report to *Municipality* as soon as possible so that the deadlines for notification can be met.

2. **Payment**

*Municipality* will pay *Contractor* for the work to be performed under this Contract as specified below based upon the Projected Number of Searches requested **\$1,100.00**. Each Search shall be charged at the Per Parcel Search Rate listed below. The Projected Number of Searches listed below is based on the previous year's actual number of liens. It is strictly a best guesstimate number and *Contractor* and *Municipality* understand it could fluctuate unexpectedly higher or lower. 12% APR will be added to invoices over 30 days old.

Per Parcel Search Rate:	\$20.00	
Projected Number of Searches:	55	
Level of Service:	Searches ONLY	
<b>PROJECTED CONTRACT AMOUNT</b>	<b>\$1,100.00</b>	(update fee not included)
<b>30% Due Upon Contract Signing:</b>	<b>\$275.00</b>	
Update Fee of searches over 30 days old	\$5.00 search only or \$8.00 w/notice typed	
<b>Balance due within 30 days of receipt of Final Invoice</b>		

3. **Relationship of Parties**

The parties intend that an independent contractor-Municipality relationship will be created by this Contract. *Municipality* is interested only in the results to be achieved, and the conduct and control of the work will lie solely with *Contractor*. *Contractor* is not to be considered an agent or employee of *Municipality* for any purpose. *Municipality* is not responsible for withholding, and shall not withhold, FICA or taxes of any kind from any payments which it owes *Contractor*, and the employees of *Contractor* are not entitled to any of the benefits that *Municipality* provides for *Municipality's* employees. It is understood that *Contractor* is free to contract for similar services to be performed for other Municipalities while under contract with *Municipality*.

4. **Employees of Contractor**

*Contractor* shall be solely responsible for paying all FICA and other taxes, workers' compensation, unemployment compensation, medical insurance, life insurance, paid vacations, paid holidays, pension, profit sharing and other benefits for the *Contractor* and his employees, servants and agents, if any.

5. **Liability**

*Contractor* will carry, for the duration of this Contract, errors and omissions insurance and proof of same shall be provided to the *Municipality* upon request. *Contractor* agrees to indemnify, defend and hold harmless *Municipality* for any and all liability or loss arising in any way out of the performance of this Contract.

6. **Duration**

Either party may cancel this Contract on 14 days' written notice; otherwise, the Contract shall remain in force through December 31, 2021. Said notice shall be delivered in person or by certified, return receipt mail through the United States Postal Service. Provided, however, that if the *Municipality* has provided *Contractor* with a list of property searches to be performed in accordance with this Contract prior to the issuance of any notice of cancellation, the *Contractor* shall complete the searches and provide to the *Municipality* the report thereon and the *Municipality* shall pay *Contractor* therefor. In the event of cancellation of this Contract prior to delivery of a list of properties to be searched any prepayment made by the *Municipality* to the *Contractor* shall be refunded.

7. **Confidentiality**

*Contractor* agrees that: (a) all knowledge and information that *Contractor* may receive from *Municipality* or from its employees or other *Contractors* of *Municipality*, or by virtue of the performance of services under and pursuant to this Agreement, relating to the identification of mortgagees related to liened properties such as property owner information belong to *Municipality* or to those with whom *Municipality* has contracted regarding such information; and (b) all information provided by *Contractor* to *Municipality* in reports of work done, together with any other information acquired by or as direct result of employment as a *Contractor* by *Municipality* and during the term of such employment, shall be regarded by *Contractor* as strictly confidential and held by *Contractor* in confidence, and solely for *Municipality's* benefit and use, and shall not be used by *Contractor* or directly or indirectly disclosed by *Contractor* to any person whatsoever except to *Municipality* or with *Municipality's* prior written permission. Any information considered to be public, such as the recording of executed liens at the County Registry of Deeds, shall be exempt from this clause.

8. **No Waiver**

The failure of either party to this Agreement to insist upon the performance of any of the terms and conditions of this Agreement, or the waiver of any breach of any of the terms and conditions of this Agreement, shall not be construed as subsequently waiving any such terms and conditions, but the same shall continue and remain in full force and effect as if no such forbearance or waiver had occurred.

9. **Governing Law**

This Agreement shall be governed by, construed, and enforced in accordance with the laws of the State of New Hampshire.

10. **Notices**

Any notice provided for or concerning this Agreement shall be in writing and shall be deemed sufficiently given when sent by certified or registered mail if sent to the respective address of each party as set forth at the beginning of this Agreement.

11. **Mandatory Arbitration**

Any dispute under this Agreement shall be required to be resolved by binding arbitration of the parties hereto. If the parties cannot agree on an arbitrator, each party shall select one arbitrator and both arbitrators shall then select a third. The third arbitrator so selected shall arbitrate said dispute. The arbitration shall be governed by the rules of the American Arbitration Association then in force and effect.

12. Entire Agreement

This Agreement shall constitute the entire agreement between the parties and any prior understanding or representation of any kind preceding the date of this Agreement shall not be binding upon either party except to the extent incorporated in this Agreement.

13. Modification of Agreement

Any modification of this Agreement or additional obligation assumed by either party in connection with this Agreement shall be binding only if placed in writing and signed by each party or an authorized representative of each party.

14. Assignment of Rights

The rights of each party under this Agreement are personal to that party and may not be assigned or transferred to any other person, firm, corporation, or other entity without the prior, express, and written consent of the other party.

In this contract, any reference to a party includes that party's heirs, executors, administrators, successors and assigns, singular includes plural and masculine includes feminine.

WITNESS our signatures as of the \_\_\_\_\_ of \_\_\_\_\_, 20\_\_.

Chichester  
(Name of Municipality)

Sanders Searches, LLC.

Jane Sanders  
Jane Sanders, Member/Manager

\*By: \_\_\_\_\_  
(Printed name & Office in Municipality)

\_\_\_\_\_  
(Signature of Officer)

By: \_\_\_\_\_  
(Signature of Officer & Office)

By: \_\_\_\_\_  
(Signature of Officer & Office)

By: \_\_\_\_\_  
(Signature of Officer & Office)

By: \_\_\_\_\_  
(Signature of Officer & Office)

\*Town/City Manager, Chair of Select Board, or other authorized officer



HOUSTON SPECIALTY INSURANCE COMPANY
POLICY DECLARATIONS
TITLE AGENTS, ABSTRACTORS AND ESCROW AGENTS
ERRORS AND OMISSIONS LIABILITY INSURANCE

POLICY NUMBER: TEO1002375-00
RENEWAL OF POLICY: New

Named Insured & Mailing Address:
Sanders Searches LLC FKA Jane Sanders Searches
PO Box 373
Newmarket, NH 03857

Broker Name & Mailing Address:
Peachtree Special Risk Brokers, LLC
303 Corporate Center Drive
Stockbridge, GA 30284

Policy Period: From 02/03/2020 to 02/03/2021 at 12:01 A.M. Eastern Time

This policy is issued by the insurance company listed above (herein "Company").

THIS POLICY IS A CLAIMS MADE AND REPORTED POLICY WHICH COVERS ONLY CLAIMS FIRST MADE
AGAINST THE INSURED AND REPORTED TO THE COMPANY DURING THE POLICY PERIOD.
PLEASE READ THIS POLICY CAREFULLY.

RETROACTIVE DATE

02/03/2010

PRIOR AND PENDING LITIGATION DATE

02/03/2020

LIMITS OF INSURANCE

Each Claim \$ 500,000
Aggregate Limit \$ 1,000,000

RETENTION

Each & Every Claim \$ 5,000

LOCATIONS

1 Lee Hook Rd, Newmarket, NH 03857

PREMIUM

Total Premium

HOUSTON SPECIALTY INSURANCE COMPANY  
POLICY DECLARATIONS  
TITLE AGENTS, ABSTRACTORS AND ESCROW AGENTS  
ERRORS AND OMISSIONS LIABILITY INSURANCE

NOTICES

Notices to Insurance  
Company:

Notice of Claim or Potential Claim:  
Claims Department - HIIG  
HIIGProClaims@HIIG.com  
888-321-0714

All other notices:  
VP Legal - HIIG  
800 Gessner, Suite 600  
Houston, TX 77024

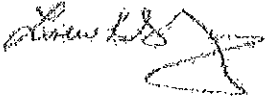
IN CONSIDERATION OF THE PAYMENT OF THE PREMIUMS, AND SUBJECT TO ALL THE TERMS, CONDITIONS AND EXCLUSIONS OF THIS POLICY, WE AGREE TO PROVIDE THE INSURED WITH THE INSURANCE AS STATED IN THIS POLICY.

THESE DECLARATIONS, TOGETHER WITH THE COMPLETED AND SIGNED APPLICATION FOR THIS POLICY INCLUDING INFORMATION FURNISHED IN CONNECTION THEREWITH, AND THE COVERAGE FORM AND ANY ENDORSEMENTS ATTACHED HERETO, CONSTITUTE THE ABOVE NUMBERED INSURANCE POLICY.

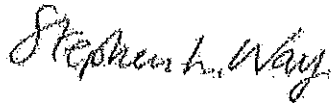
The company issuing this policy has not been licensed by the state of New Hampshire and the rates charged have not been approved by the commissioner of insurance. If the company issuing this policy becomes insolvent, the New Hampshire insurance guaranty fund shall not be liable for any claims made against the policy. (RSA §405:24).

The company issuing this policy has not been licensed by the state of New Hampshire and the rates charged have not been approved by the commissioner of insurance. If the company issuing this policy becomes insolvent, the New Hampshire insurance guaranty fund shall not be liable for any claims made against this policy.

In witness whereof, this company has caused this policy to be signed by its President and Secretary but if required by state law, the policy shall not be valid unless countersigned by an authorized representative of the Company.



SECRETARY SIGNATURE



PRESIDENT SIGNATURE

# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

**1** Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**Jane B. Sanders**

**2** Business name/disregarded entity name, if different from above  
**Sanders Searches LLC**

**3** Check appropriate box for federal tax classification; check only one of the following seven boxes:  
 Individual/sole proprietor or single-member LLC  
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶  
 C Corporation  
 S Corporation  
 Partnership  
 Trust/estate  
 Other (see instructions) ▶  
 Note: For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

**4** Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
 Exempt payee code (if any) \_\_\_\_\_  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_  
(Apply to accounts maintained outside the U.S.)

**5** Address (number, street, and apt. or suite no.)  
**PO Box 373**

**6** City, state, and ZIP code  
**Newmarket, NH 03857**

**7** List account number(s) here (optional)

Requester's name and address (optional)

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 9. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

			-				
--	--	--	---	--	--	--	--

Note: If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

or

Employer identification number

4	7	-	1	4	6	5	7	2	3
---	---	---	---	---	---	---	---	---	---

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct (taxpayer) identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here: Signature of U.S. person ▶ *Jane B. Sanders*

Date ▶ *Nov. 7, 2017*

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.  
**Future developments.** Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/w9](http://www.irs.gov/w9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing this filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
- Certify that you are not subject to backup withholding; or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.