SECTION IV. LEGAL NOTIFICATIONS AND AGREEMENTS

(1) "NOTICE OF FILING" REQUIREMENTS: The permit applicant must notify certain parties that this permit application is being filed with DES and provide proof thereof with this application. The notice is referred to as a "notice of filing." Read the following instructions to determine how to properly complete this requirement. See also attached template for preparing the required letters.

What information must the "notice of filing" contain?

As a minimum, the "notice of filing" must contain all of the "core" information, shown in the checklist below. In addition to providing the "core" information, there are instances where additional information must be included. The additional information is identified in Table IV-1 (see page 9 of this form).

- ☑ A statement that an application for a standard solid waste management facility permit is scheduled to be filed with DES, including the anticipated filing date;
- ☑ Facility identification and location, including facility name, street address and municipality;
- ☑ The name(s) and mailing address(es) of the applicant, facility owner, facility operator and property owner;
- ☑ A description of the activity(s) for which a permit is being sought, including, but not necessarily limited to:
  - ☑ The type(s) of waste management activities to be undertaken at the facility.
  - ☑ The quantity and type(s) of waste to be received by the facility.
  - ☑ The quantity and type(s) of waste to be stored at the facility.
  - ☑ The quantity and type(s) of waste to be processed or treated at the facility.
  - ☑ The facility service area.
  - ☑ The facility service type.
  - ☑ The facility life expectancy.
  - ☑ Other information required to accurately describe the scope and nature of the proposed activity(s).
  - ☑ The estimated date of facility construction and operation.
- ☑ Identification of the locally accessible place where a complete copy of the application will be placed by the applicant, on or before the date the application is actually filed with DES, for review by abutters and other interested persons during the application review process.
- ☑ Name, title, mailing address and telephone number of the individual associated with the applicant who will respond to inquiries about the application during the application review process.
- ☑ Name, title, mailing address and telephone number of the individual at DES who may be contacted regarding the application (call the DES-P&DRS at 603 271-2925 to obtain this information).
- ☑ Description of the application processing provisions as specified by the Solid Waste Rules, Env-Sw 304. (The description must be detailed sufficiently as to inform the notice recipient of the basic process steps and schedule. To satisfy this requirement, you may provide a "permit application process flow chart," available from the DES-P&DRS by request).
- ☐ If the application includes a request for a waiver to any rule, a statement so indicating and specifically citing the rule(s).

Who must be notified?

Notification must be provided to the host municipality, the host solid waste management district, and all abutters. In some cases, certain other entities must also be notified. Use Table IV-1 (see page 9) to determine whom you must notify. Use the columns at the far right-hand side of the table to track the requirements.

How do I supply notice?

Each notice of filing must be sent by certified mail, return receipt requested, or delivered in hand, in which case the recipient's signature must be obtained on a statement that acknowledges receipt.

Send or deliver the notice no more than 30 days prior to the date you will file the application with DES.

What do I submit with this application?

To show proof of providing notification, you must submit the following with this application:

- ☑ List of persons/parties requiring notification (use Table IV-1 on page 9)
- ☑ Copy(s) of the notification letter(s)
- ☑ Signed receipts by the recipients

(2) REQUIREMENTS RELATING TO LEGAL AGREEMENTS: If the applicant and the property owner are not the same at the time you file this application, you must submit information in this section of the application demonstrating that the applicant has the legal right to occupy and use the property for the purposes stated in this application. If the applicant already owns the property, check here: ☑

TABLE IV-1			TRACKING CHECKLIST (for use by applicant)		
Send "Notice of Filing" to...	**When...**	**Include...**	**Check Here if Applicable**	**Date Sent**	**Date Rec'd**
Host Municipality If a town, address to town clerk and selectmen If a city, address to city clerk and mayor and city council If an unincorporated place, address to county commissioners	Required for every application. Send within 30 days before filing application with DES.	All "core" information listed on page IV-1 of this application form and provide copy of permit application with the notice.	☒		
Host Solid Waste Management District Address to the District Chairperson For assistance in identifying the correct district and mailing address, contact the DES P&DRS at (603) 271-2925	Required for every application. Send within 30 days before filing application with DES.	All "core" information listed on page IV-1 of this application form and provide copy of permit application with the notice.	☐		
Affected local entity, as defined by RSA 485-C:2,X Contact the DES Water Division at (603) 271-0688 to identify the correct "local entity" and mailing address	Required when a facility is located in a groundwater protection area classified as GAA or GA-1 pursuant to RSA 485-C. Send notice within 30 days before filing application with DES.	Provide copy of permit application with the notice. Include the following statement in the notice in addition to all of the "core" information listed on page IV-1 of this application form: "The subject facility is located in a groundwater protection area classified as GAA or GA-1 pursuant to RSA 485-C. Therefore, as required by RSA 485-C:14, DES will suspend action on the application for 30 days following the filing to allow the municipality and the affected local entity to submit written recommendations concerning the proposed project. A copy of the application is enclosed for review and comment. Please send written comments to DES-WMD, PO Box 95, Concord, NH 03302-0095".	☐		
NH Fish & Game Dept. Endangered Species Coordinator 11 Hazen Drive Concord, NH 03302 Telephone: (603) 271-3017 NH Dept. of Resources & Economic Development Natural Heritage Inventory 172 Pembroke Road P.O. Box 1856 Concord, NH 03302-1856 Telephone: (603) 271-3623	When siting a facility within an area of threatened or endangered species. Send notice within 30 days before filing application with DES.	Provide a copy of permit application with the notice. Include the following statement in the notice in addition to all of the "core" information listed on page 7 of this application form: "The subject facility has a potential effect on a threatened or endangered species. Therefore, as required by NH Solid Waste Rule Env-Sw 303.09, you are hereby requested to provide written comments concerning the adequacy of the application relative to protecting threatened and endangered species. A copy of the permit application is enclosed for review and comment. To assure proper consideration of your concerns, if any, please submit written comments direct to the DES-WMD, P.O. Box 95, Concord, NH 03302-0095 within the next 30 days."	☐		

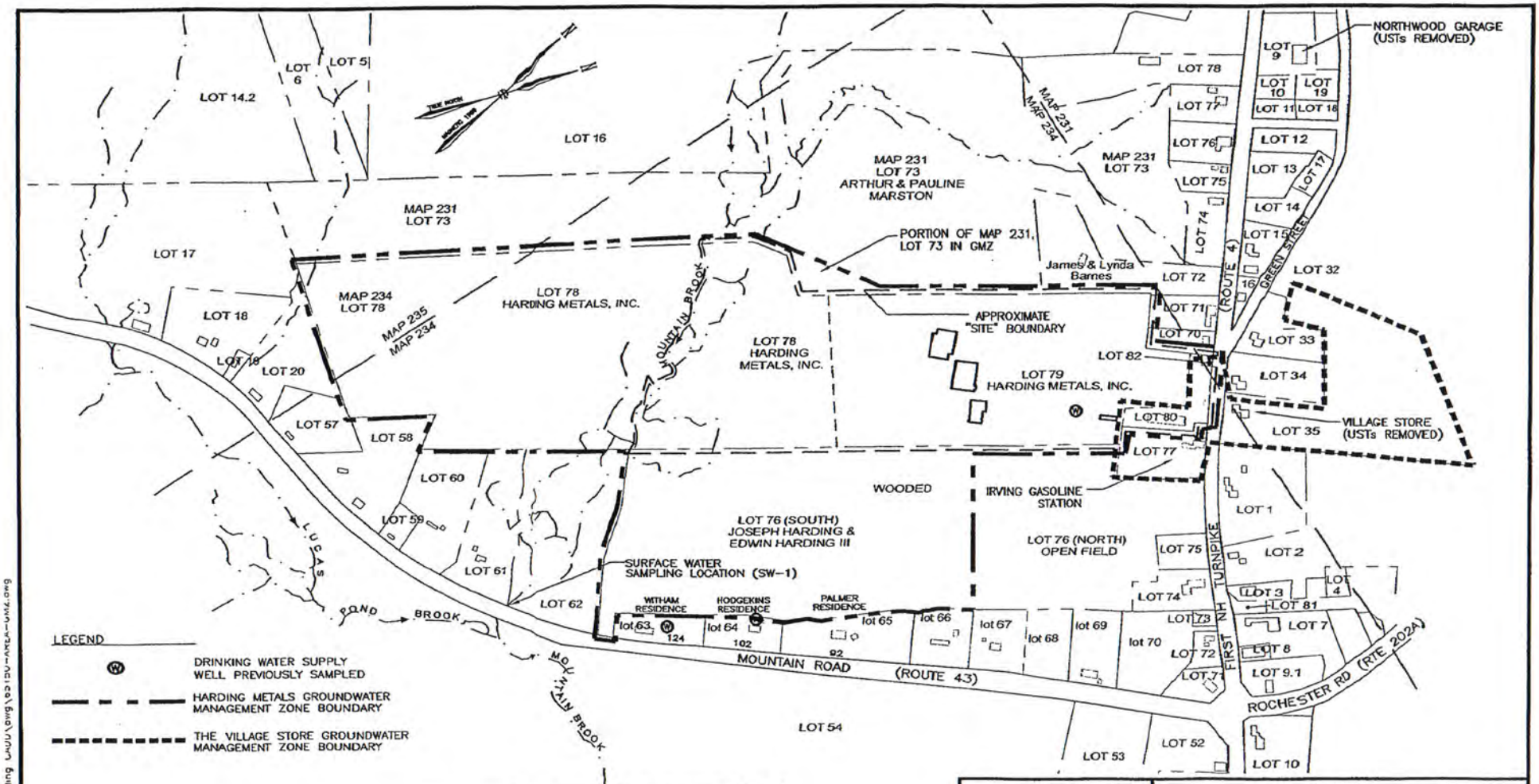
TABLE IV-1			TRACKING CHECKLIST (For use by applicant)		
Send "Notice of Filing" to...	**When...**	**Include...**	**Check Here if Applicable**	**Date Sent**	**Date Rec'd**
Federal Aviation Administration NE Region, ANE-600 12 New England Executive Park Burlington, MA 01803 Telephone: (781) 238-7612	Required when siting a facility which will manage putrescible waste within the protective radius of an airport, as follows: ➢ Within 10,000 feet (3,048 meters) of any airport runway used by turbojet aircraft -or- ➢ Within 5,000 feet (1,524 meters) of any airport runway used by only piston-type aircraft Send notice within 30 days before filing application with DES.	All "core" information listed on page IV-1 of this application form and a copy of permit application with the notice. Include the following statement in the notice: "The subject facility proposes to manage putrescible waste within the protective radius of an airport, as specified by NH Solid Waste Rule Env-Sw 1002.04(c). Therefore, as required by NH Solid Waste Rule Env-Sw 303.10, you are hereby requested to provide written comments concerning the adequacy of the application relative to minimizing the risk of attracting birds that may be hazardous to aircraft. A copy of the permit application is enclosed for review and comment. To assure proper consideration of your concerns, if any, please submit written comments direct to the DES-WMD, PO Box 95, Concord, NH 03302-0095 within the next 30 days."	☐		
Rivers Coordinator NH Dept. of Environmental Services 29 Hazen Drive/PO Box 95 Concord, NH 03302-0095 Telephone: (603) 271-3503 and Chairman of the applicable Local River Management Advisory Committee established pursuant to RSA 483:8. Contact the P&DRS at (603) 271-2925 to obtain name and mailing address of the appropriate chairman or find on the Internet at www.des.nh.gov/rivers	Required when the facility may affect any river or segment designated under RSA 483. Send notice within 30 days before filing the application with DES.	All "core" information listed on page IV-1 of this application form and a copy of permit application with the notice. Include the following statement in the notice: "The subject facility has a potential effect on a designated river. Therefore, as required by NH Solid Waste Rule Env-Sw 303.11 and RSA 483, you are hereby requested to provide written comments concerning the adequacy of the application relative to satisfying the requirements of RSA 483. A copy of the permit application is enclosed for review and comment. To assure proper consideration of your concerns, if any, please submit written comments direct to the DES-WMD, PO Box 95, Concord, NH 03302-0095 within the next 30 days."	☐		
NH Dept. of Justice/Office of Attorney General Environmental Protection Bureau 33 Capitol Street Concord, NH 03301 Telephone: (603) 271-3679	Required when filing an application that subjects the applicant to a background/performance history investigation pursuant to Env-Sw 316. Does not apply to applicants that are public entities, such as a municipality, a solid waste management district, or state agency. Send notice before filing application with DES.	Provide completed Business Concern Disclosure and Personal History Disclosure Forms with the notice, as required by Env-Sw 316. See also Section X of this form. Include the following statement in the notice in addition to all of the "core" information listed on page IV-1 of this application form: "As specified by New Hampshire Solid Waste Rule Env-Sw 316, the required Business Concern and Personal History Disclosure Forms have been completed for the subject permit application and are transmitted herewith to your office for processing as part of the subject permit application."	☒		

TABLE IV-1

Send "Notice of Filing" to...	When...	Include...	TRACKING CHECKLIST (For use by applicant) Check Here if Applicable	Date Sent	Date Rec'd
Abutters, meaning any person who owns property adjacent to, or across a road, or stream from the property on which a solid waste facility may be permitted. In addition, if the applicant or owner of the facility site owns any abutting parcel of land, a "notice of filing" must be sent to the owner(s) of the next parcel(s) not owned by the applicant or facility site owner. For your convenience, list all such parties below and use the "tracking/checklist" columns at the far right-hand side of this table to document the dates the notice was sent and received.	Required for every application. Send notice within 30 days before filing application with DES.	All "core" information listed on page IV-1 of this application form.	☒		
TAX MAP & LOT NUMBERS	**ABUTTER NAME & MAILING ADDRESS**				
See Attached Spreadsheet					

Map	Lot	Letter	Size	Name	Street	City	State	Zip
235	17	Yes	7.4	Denise Pointe	195 Mountain Ave	Northwood	NH	03261
235	18	Yes	2.8	David Hayes	192 Mountain Ave	Northwood	NH	03621
235	19	No						
235	20	Yes	2.6	John Rule	178 Mountain Ave	Northwood	NH	03261
234	57	Yes	1.7	John Schaudel	168 Mountain Ave	Northwood	NH	03261
234	58	Yes	4.25	Edward Hanrahan	154-156 Mountain Ave	Northwood	NH	03261
234	59	No						
234	60	Yes	2.7	Michael Edgecomb	142 Mountain Ave	Northwood	NH	03261
234	61	Yes	2.3	Paula Idzik	140 Mountain Ave	Northwood	NH	03261
234	62	Yes	6.9	Sean Manning	132 Mountain Ave	Northwood	NH	03261
234	63	Yes	0.99	Cheryl Higgins	124 Mountain Ave	Northwood	NH	03261
234	64	Yes	1.03	Ernest Hodgkins	102 Mountain Ave	Northwood	NH	03261
234	65	Yes	2.24	Richard Palmer	92 Mountain Ave	Northwood	NH	03261
234	66	Yes	1.27	John Carrerio	76 Mountain Ave	Northwood	NH	03261
234	67	Yes	1.35	George Max	60 Mountain Ave	Northwood	NH	03261
234	68	Yes	1.28	David Neal	P.O. Box 69	Northwood	NH	03261
234	69	Yes		Robert Deschuteneer	44 Mountain Ave	Northwood	NH	03261
234	70	Yes	2.1	Town of Northwood	818 1st NH TRNPK	Northwood	NH	03261
234	71	No	0.49	Town of Northwood	818 1st NH TRNPK	Northwood	NH	03261
234	72	No	0.5	Radical Vegan Foods	159 1st NH TRNPK	Northwood	NH	03261
234	73	Yes	0.15	Northwood Masonic Hall	161 1st NH TRNPK	Northwood	NH	03261
234	74	Yes	1.15	Mark Farrell	167 1st NH TRNPK	Northwood	NH	03261
234	75	No	0.81	Edso & Joe Harding				
234	76	No	36	Edso & Joe Harding				
234	77	Yes	1.8	Cobalt Properties NH Corp.	55 Union St. Suite 700	St. John	NB CAN	E2L 5B7
234	78	No	38	Harding Metals, Inc.				
234	79	No	20.2	Harding Metals, Inc.				
234	80	No	1.1	Harding Metals, Inc.				
231	70	Yes	0.65	Shawn MacDonald	205 1st NH TRNPK	Northwood	NH	03261
231	71	Yes	0.95	Thomas & Cheryl Loukola	207 1st NH TRNPK	Northwood	NH	03261
231	72	Yes	3.5	Vincenzo Porecella	209 1st NH TRNPK	Northwood	NH	03261
231	73	Yes	47	Marston Family Revocable Trust	25 Upper Deerfield Rd	Northwood	NH	03261

231	34	Yes	Linda Wright	194 1st NH TRNPK	Northwood	NH	03261
231	35	Yes	Elias Ververidis	188 1st NH TRNPK	Northwood	NH	03261



NOTES:

1. THIS SITE AREA PLAN WAS DEVELOPED FROM TOWN OF NORTHWOOD ASSESSORS MAPS 231, 234 AND 235, A POTENTIAL RECEPTOR MAP AND GMZ BY ENGLE ENVIRONMENTAL SERVICES, INC. DATED 1/22/09 AND SITE OBSERVATIONS BY NOBIS ENGINEERING, INC.

2. THE LOCATIONS OF SITE FEATURES DEPICTED HEREON ARE APPROXIMATE AND FOR ILLUSTRATIVE PURPOSES ONLY.

3. ALL DEVELOPED PROPERTIES SHOWN ARE ASSUMED TO HAVE PRIVATE WATER SUPPLY WELLS.

Nobis
Engineering a Sustainable Future
Nobis Engineering, Inc.
18 Chenell Drive
Concord, NH 03301
T(603) 224-4182
www.nobiseng.com
Client-Focused, Employee-Owned

FIGURE 2

SITE AREA AND
GMZ BOUNDARY PLAN
HARDING METALS, INC.
42 HARDING DRIVE
NORTHWOOD, NEW HAMPSHIRE

DRAWN BY:	ML	APPROVED BY:	TB
PROJECT:	65150.04	MAY 2013	

J:\65150 Harding Metals\Harding GMZ\dwg\65150-AREA-GMZ.dwg

Recyclers of Scrap & Precious Metals

HARDING

METALS, INC

December 29, 2014

Certified Mail
Return Receipt

Re: Solid Waste Permit Application
Harding Metals, Inc

Dear: **Abutting Property Owner**

Pursuant to the requirements of RSA 149-M and the New Hampshire Solid Waste Rules, you are hereby notified that application is being made to the New Hampshire Department of Environmental Services to obtain a Standard Permit for a Solid Waste Collection / Storage / Transfer Facility, for the Harding Metals Facility located at 42 Harding Drive in Northwood, NH 03261. The application is scheduled to be filed on 12/30/2014.

In 1992 Harding Metals, Inc was issued a Temporary Permit for a Solid Waste Management Facility by NHDES, but with recent rule changes has been directed to obtain a new Standard Operating Permit.

There will not be any changes in the materials handled at Harding Metals. We will still accept ferrous and non-ferrous scrap metals for recycling. The maximum quantity of material that can be received annually is 75,000 tons. The maximum quantity of material to be stored at the facility includes 6600 tons of stock piled materials that typically do not require processing (mostly ferrous) stored in the Back Yard area of the facility and 5,000 tons of materials that require processing (mostly non-ferrous).

The facility will continue to receive recyclable materials from its customers that are both residential and commercial from the surrounding New England Area. Harding Metals, Inc is a recycling facility, unlike most other permitted facilities that have to plan for closure because of limited waste disposal capacity; our facility's life expectancy is indefinite.

For additional information about the facility, you may contact me at the address and telephone number indicated on the letterhead. In addition, a copy of the permit application will be available at the following locations for public review through the permit application process.

Harding Metals Inc.
42 Harding Drive
Northwood, NH 03261

Northwood Town Offices
Route 4
Northwood, NH 03261

NHDES Offices
29 Hazen Drive
Concord, NH 03301

The New Hampshire Solid Waste Rules specify specific procedures for review and issuance/denial of a permit application. The procedures involve a series of steps, which are depicted on the enclosed flow-chart. If you have questions about the permit application review process, or wish to comment on the subject application, please contact Douglas Kemp, Waste Management Specialist at the NHDES. His phone number is (603)-271-2924

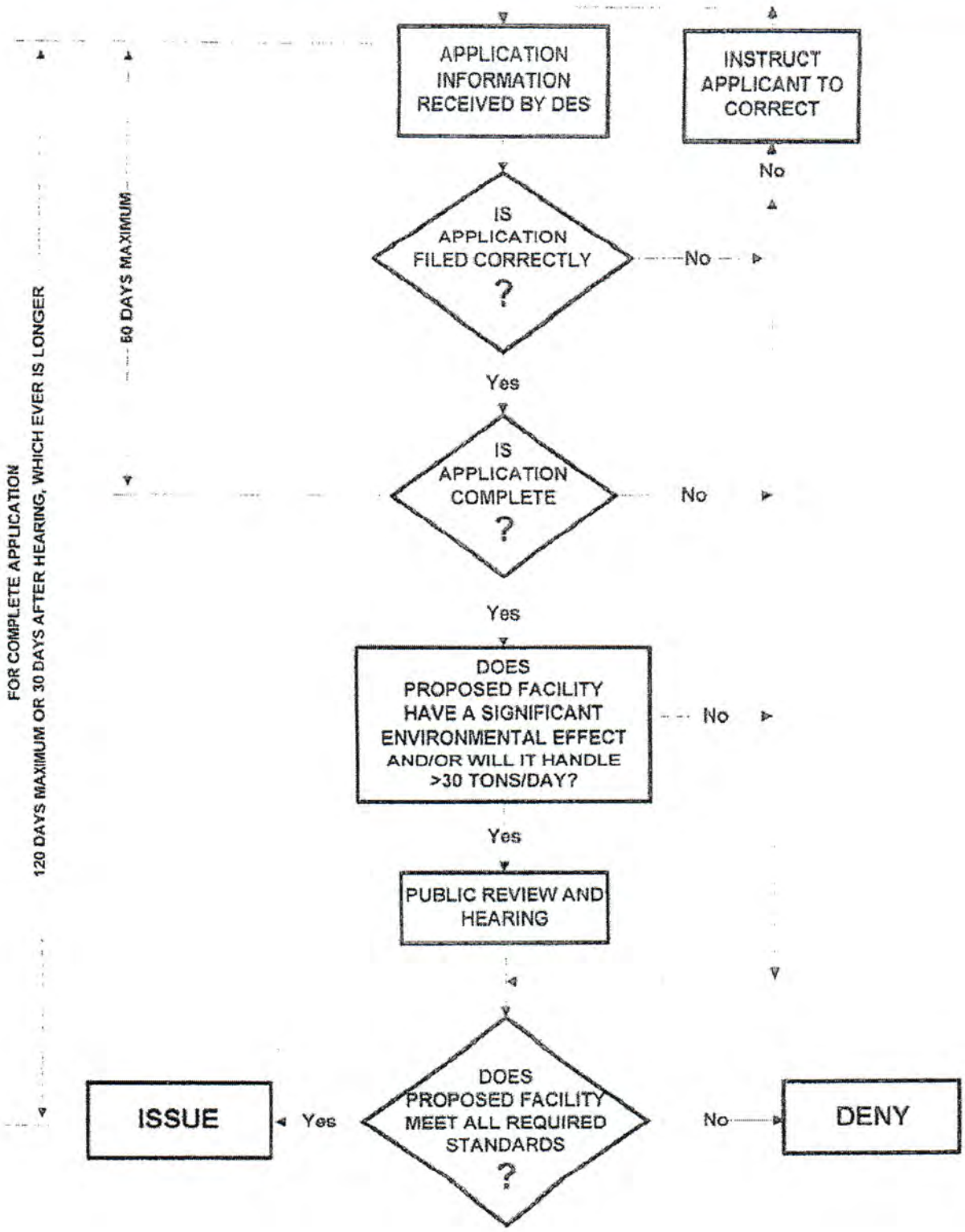
Sincerely,

Kevin Campbell
HR Manager – Harding Metals, Inc.

encl: Permit Process Flowchart

STANDARD PERMIT APPLICATION PROCESSING PROVISIONS AS PROVIDED IN PARTS Env-Sw 303 - 305 OF THE *NEW HAMPSHIRE SOLID WASTE RULES*

Environmental Services



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Rule
178 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6199

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Vincenzo Porecella
209 1st NH TRNPK
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6175

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sean Manning
132 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6168

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard Palmer
92 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6151

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David Neal
P.O. Box 69
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6144

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Town of Northwood
818 1st NH TRNPK
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6137

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cobalt Properties NH Corp.
55 Union St. Suite 700
St. John, NB CAN E2L 5B7

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 6120

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David Hayes
192 Mountain Ave
Northwood, NH 03621

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6113

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Schaudel
168 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6106

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Michael Edgecomb
142 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6090

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cheryl Higgins
124 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6083

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Denise Pointe
195 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2150 0005 2718 0361

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Carrerio

76 Mountain Ave

Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6076

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert Deschuteneer

44 Mountain Ave

Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6069

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Northwood Masonic Hall

161 1st NH TRNPK

Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6052

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Shawn MacDonald
205 1st NH TRNPK
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6045

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marston Family Revocable Trust
25 Upper Deerfield Rd
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6038

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Edward Hanrahan
154-156 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6021

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Paula Idzik
140 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6014

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mark Farrell
167 1st NH TRNPK
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2150 0005 2718 0378

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ernest Hodgkins
102 Mountain Ave
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6007

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Thomas & Cheryl Loukola

207 1st NH TRNPK

Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number
(*Transfer from service label*) 7012 0470 0002 3805 5987

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

George Max

60 Mountain Ave

Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number
(*Transfer from service label*) 7012 0470 0002 3805 5994

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Linda Wright
194 1st NH TRNPK
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6199

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Elias Ververidis
1st NH TRNPK
Northwood, NH 03261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7012 0470 0002 3805 6205

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7012 0470 0002 3805 6083

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To
Cheryl Higgins
Street, Apt. N or PO Box No
124 Mountain Ave
City, State, Zi
Northwood, NH 03261
PS Form 380 See Reverse for Instructions

7012 0470 0002 3805 6014

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To
Paula Idzik
Street, A or PO B
140 Mountain Ave
City, Sta
Northwood, NH 03261
PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6090

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To
Michael Edgecomb
Street, Ap or PO Bo
142 Mountain Ave
City, Stat
Northwood, NH 03261
PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6038

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To
Marston Family Revocable Trust
Street, or PO
25 Upper Deerfield Rd
City, St
Northwood, NH 03261
PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6175

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To
Vincenzo Porecella
Street, Apt. N or PO Box N
209 1st NH TRNPK
City, State, Z
Northwood, NH 03261
PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 5987

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

Sent To
Thomas & Cheryl Loukola
Street, Apt. No or PO Box No.
207 1st NH TRNPK
City, State, Zi
Northwood, NH 03261
PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6182

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here DEC 29 2014

Sent To: John Rule
Street, Apt. or PO Box: 178 Mountain Ave
City, State: Northwood, NH 03261

PS Form 3800, August 2006 See Reverse for Instructions

7006 2150 0005 2718 0361

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Denise Pointe
Street, Apt. or PO Box: 195 Mountain Ave
City, State, Z: Northwood, NH 03261

PS Form 380

7012 0470 0002 3805 6113

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

DEC 29 2014
Postmark Here

Sent To: David Hayes
Street, Apt. or PO Box: 192 Mountain Ave
City, State: Northwood, NH 03621

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6106

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here DEC 29 2014

Sent To: John Schaudel
Street, Apt. or PO Box: 168 Mountain Ave
City, State: Northwood, NH 03261

PS Form 3800, August 2006 See Reverse for Instructions

7013 1710 0000 4507 2666

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®

Postage	$ 5.60
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 11.60

Postmark Here

Sent To: NH DEPT OF JUSTICE ATTORNEY GENERAL
Street, Apt. No.; or PO Box No.: ENV. Protection Bureau
City, State, ZIP+4: 33 CAPITAL ST CONCORD NH 03301

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6021

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here DEC 29 2014

Sent To: Edward Hanrahan
Street, Apt. or PO Box: 154-156 Mountain Ave
City, State: Northwood, NH 03261

PS Form

7012 0470 0002 3805 6168

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Sean Manning
Street, Apt. or PO Box: 132 Mountain Ave
City, State: Northwood, NH 03261

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6007

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here
DEC 29 2014

Sent To: Ernest Hodgkins
Street, Apt. or PO Box: 102 Mountain Ave
City, State: Northwood, NH 03261

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6151

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Richard Palmer
Street, Apt. or PO Box: 92 Mountain Ave
City, State: Northwood, NH 03261

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6199

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Linda Wright
Street, Apt. or PO Box: 194 1st NH TRNPK
City, State: Northwood, NH 03261

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6076

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: John Carrerio
Street, Apt. or PO Box: 76 Mountain Ave
City, State: Northwood, NH 03261

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 3805 6045

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Shawn MacDonald
Street, Apt. or PO Box: 205 1st NH TRNPK
City, State: Northwood, NH 03261

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0002 05 6120

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Cobalt Properties NH Corp.
Street, Apt. or PO Box: 55 Union St. Suite 700
City, State, ZIP: St. John, NB CAN E2L 5B7

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2150 0005 2718 0378

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Mark Farrell
Street, Apt. No.; or PO Box No.: 167 1st NH TRNPK
City, State, ZIP+4: Northwood, NH 03261

PS Form 3800, August 2006 — See Reverse for Instructions

7012 0470 0002 3805 6052

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Northwood Masonic Hall
Street, Apt. or PO Box: 161 1st NH TRNPK
City, State, ZIP: Northwood, NH 03261

PS Form 3800, August 2006 — See Reverse for Instructions

7012 0470 0002 3805 6137

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Town of Northwood
Street, Apt. or PO Box: 818 1st NH TRNPK
City, State, ZIP: Northwood, NH 03261

PS Form 3800, August 2006 — See Reverse for Instructions

7012 0470 0002 3805 6069

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: Robert Deschuteneer
Street, Apt. or PO Box: 44 Mountain Ave
City, State, ZIP: Northwood, NH 03261

PS Form 3800, August 2006 — See Reverse for Instructions

7012 0470 0002 3805 6144

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: David Neal
Street, Apt. or PO Box: P.O. Box 69
City, State, ZIP: Northwood, NH 03261

PS Form 3800, August 2006 — See Reverse for Instructions

7012 0470 0002 3805 5994

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here

Sent To: George Max
Street, Apt. or PO Box: 60 Mountain Ave
City, State, Zip: Northwood, NH 03261

PS Form 3800, August 2006 — See Reverse for Instructions

7012 0470 0002 3805 6205

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	$ .49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.49

Postmark Here
DEC 2 3 2014

Sent To: Elias Ververidis
Street, Apt. or PO Box: 1st NH TRNPK
City, State, Zip: Northwood, NH 03261

PS Form 3800, August 2006 — See Reverse for Instructions

Recyclers of Scrap & Precious Metals

HARDING

METALS, INC

December 29, 2014

Certified Mail
Return Receipt

NH Dept of Justice / Office of Attorney General
Environmental Protection Bureau
33 Capital Street
Concord, NH 03301

Re: Solid Waste Permit Application
Harding Metals, Inc

TO: NH Dept of Justice / Office of Attorney General

Pursuant to the requirements of RSA 149-M and the New Hampshire Solid Waste Rules, you are hereby notified that application is being made to the New Hampshire Department of Environmental Services to obtain a Standard Permit for Solid Waste Collection / Storage / Transfer Facility, for the Harding Metals Facility located at 42 Harding Drive in Northwood, NH 03261. Because of this application you are receiving a Personal History Disclosure Form for Edwin K Harding III and Joseph J Harding and a Business Concern Disclosure Statement for Harding Metals, Inc. The application is scheduled to be filed on 12/30/2014.

In 1992 Harding Metals, Inc was issued a Temporary Permit for a Solid Waste Management Facility by NHDES, but with recent rule changes has been directed to obtain a new Standard Operating Permit.

There will not be any changes in the materials handled at Harding Metals. We will still accept ferrous and non-ferrous scrap metals for recycling. The maximum quantity of material that can be received annually is 75,000 tons. The maximum quantity of material to be stored at the facility includes 6600 tons of stock piled materials that typically do not require processing (mostly ferrous) stored in the Back Yard area of the facility and 5,000 tons of materials that require processing (mostly non-ferrous).

The facility will continue to receive recyclable materials from its customers that are both residential and commercial from the surrounding New England Area. Harding Metals, Inc is a recycling facility, unlike most other permitted facilities that have to plan for closure because of limited waste disposal capacity; our facility's life expectancy is indefinite.

For additional information about the facility, you may contact me at the address and telephone number indicated on the letterhead. In addition, a copy of the permit application will be available at the following locations for public review through the permit application process.

Harding Metals Inc.
42 Harding Drive
Northwood, NH 03261

Northwood Town Offices
Route 4
Northwood, NH 03261

NHDES Offices
29 Hazen Drive
Concord, NH 03301

The New Hampshire Solid Waste Rules specify specific procedures for review and issuance/denial of a permit application. The procedures involve a series of steps, which are depicted on the enclosed flow-chart. If you have questions about the permit application review process, or wish to comment on the subject application, please contact Douglas Kemp, Waste Management Specialist at the NHDES. His phone number is (603)-271-2924

Sincerely,

Kevin Campbell
HR Manager – Harding Metals, Inc.

encl: Permit Process Flowchart
1 Completed Personal History Disclosure Forms for Edwin K Harding III
1 Completed Personal History Disclosure Form for Joseph J Harding
1 Completed Business Concern Disclosure Statement for Harding Metals, Inc.

Recyclers of Scrap & Precious Metals

HARDING

METALS, INC

December 30, 2014

Hand Delivered
Signed Receipt for Delivery

Town of Northwood
818 1st NH TRNPK
Northwood NH, 03261

Re: Solid Waste Permit Application
Harding Metals, Inc

TO: Town of Northwood

Pursuant to the requirements of RSA 149-M and the New Hampshire Solid Waste Rules, you are hereby notified that application is being made to the New Hampshire Department of Environmental Services to obtain a Standard Permit for Solid Waste Collection / Storage / Transfer Facility, for the Harding Metals Facility located at 42 Harding Drive in Northwood, NH 03261. Because of this application you are receiving a copy of the Standard Permit Application for public review and for your records. The application is scheduled to be filed with NHDES on 12/30/2014.

In 1992 Harding Metals, Inc was issued a Temporary Permit for a Solid Waste Management Facility by NHDES, but with recent rule changes has been directed to obtain a new Standard Operating Permit.

There will not be any changes in the materials handled at Harding Metals. We will still accept ferrous and non-ferrous scrap metals for recycling. The maximum quantity of material that can be received annually is 75,000 tons. The maximum quantity of material to be stored at the facility includes 6600 tons of stock piled materials that typically do not require processing (mostly ferrous) stored in the Back Yard area of the facility and 5,000 tons of materials that require processing (mostly non-ferrous).

The facility will continue to receive recyclable materials from its customers that are both residential and commercial from the surrounding New England Area. Harding Metals, Inc is a recycling facility, unlike most other permitted facilities that have to plan for closure because of limited waste disposal capacity; our facility's life expectancy is indefinite.

For additional information about the facility, you may contact me at the address and telephone number indicated on the letterhead. In addition, a copy of the permit application will be available at the following locations for public review through the permit application process.

Harding Metals Inc.
42 Harding Drive
Northwood, NH 03261

Northwood Town Offices
Route 4
Northwood, NH 03261

NHDES Offices
29 Hazen Drive
Concord, NH 03301

The New Hampshire Solid Waste Rules specify specific procedures for review and issuance/denial of a permit application. The procedures involve a series of steps, which are depicted on the enclosed flow-chart. If you have questions about the permit application review process, or wish to comment on the subject application, please contact Douglas Kemp, Waste Management Specialist at the NHDES. His phone number is (603)-271-2924

Sincerely,

Kevin Campbell
HR Manager – Harding Metals, Inc.

encl: Permit Process Flowchart
Completed Standard Permit Application