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November 26, 2019 File No. 01.0172397

Massachusetts Department of Environmental Protection Northeast Regional Office Bureau of Waste Site Cleanup 205B Lowell Street Wilmington, MA 01887

Re: Tier I Classification Transfer
Haffner Realty Trust MCP Disposal Site
284 Winter Street
Haverhill, Massachusetts
Release Tracking Numbers (RTNs) 3-32792 and 3-32875

To Whom It May Concern:

On behalf of Boston Gas Company d/b/a National Grid (National Grid), GZA GeoEnvironmental, Inc. (GZA) has prepared this Tier Classification Transfer to document the change in the Responsible Party for the above-referenced disposal site (the "Site"). This submittal is intended to address the requirements of section 40.0560(8) of the Massachusetts Contingency Plan (MCP); a completed Bureau of Waste Site Cleanup (BWSC) transmittal form (BWSC107) is attached.

On March 30, 2015 Ramboll US Corporation, formerly known as Ramboll Environ, of Westford, Massachusetts (Ramboll) submitted a Release Notification Form (BWSC 101 Form) notifying the Massachusetts Department of Environmental Protection (MassDEP) of a release of oil to soil exceeding reportable concentration(s) and affecting more than two cubic yards and a release of oil to groundwater exceeding reportable concentration(s). MassDEP assigned RTN 3-32792 to the Site upon completion of the notification. An additional RTN (3-32875) was assigned on May 12, 2015 to address a 2-hour notification condition under the MCP, which was logged by MassDEP as a "sudden release" of 10 gallons of petroleum and as an "oil sheen on surface water". Ramboll made the notifications for both of these incidents on behalf of Haffner Realty Trust (HRT), the owner of the 284 Winter Street property. Ramboll has been conducting assessment and remediation activities under an Immediate Response Action (IRA) Plan at the Site since its submission on July 17, 2015. The objectives of the IRA Plan activities were to:

- Contain/mitigate the sheen and light, non-aqueous phase liquid (LNAPL) emanating from the Site into the Little River and prevent them from travelling/migrating downstream in the Little River;
- Monitor/mitigate the LNAPL that had been observed within certain groundwater monitoring wells;
- Identify tar-like material within a pipe adjacent to the Little River and attempt to identify the potential source of the material;
- Determine whether a potential release from the current petroleum underground storage tanks (USTs) could be the source of the sheen observed in the river;
- Determine whether the observed contamination in the subsurface of the Site could be contributing to the observed sheen; and,
- Determine whether Site conditions are present that could represent an Imminent Hazard (IH) and/or Substantial Release Migration (SRM) as defined in the Massachusetts Contingency Plan (MCP), associated with potential contamination in subsurface utilities at the Site.



Under the IRA, Ramboll provided oversight for the installation and maintenance containment booms within the Little River intended to control/mitigate sheens discharging from the base of the masonry retaining wall running along the western perimeter of the Site. A temporary boom was installed initially, followed by a semi-permanent boom which remains in place. Ramboll has also been gauging the monitoring wells at the Site for the presence of LNAPL and recovering product (where applicable) on a monthly basis. The IRA work has been documented in status reports submitted regularly between September 2015 and September 2019. Soil and groundwater sampling were also conducted and a Phase I Initial Site Investigation was submitted in April 2016 to address the MCP requirements for the two release incidents.

Since Ramboll submitted the IRA Plan in July 2015 the following MCP documents have been submitted:

- 1. September 11, 2015: IRA Status Report No. 1
- 2. March 13, 2016: IRA Status Report No. 2;
- 3. April 5, 2016: Phase I Initial Site Investigation;
- 4. May 4, 2016: Phase I Tier Classification Public Notification;
- 5. September 8, 2016: IRA Status Report No. 3;
- 6. March 7, 2017: IRA Status Report No. 4;
- 7. September 7, 2017: IRA Status Report No. 5;
- 8. March 6, 2018: IRA Status Report No. 6;
- 9. September 5, 2018: IRA Status Report No. 7;
- 10. March 7, 2019: IRA Status Report No.8;
- 11. April 8, 2019: Notification of Delay Response Action Deadline Form, under RTN 3-32875;
- 12. September 6, 2019: IRA Status Report No. 9; and
- 13. November 7, 2019: Notification of Delay Response Action Deadlines Form, under RTN 3-32792.

The April 2019 Notification of Delay in Compliance with Response Action Deadline submittal indicated that ongoing negotiations between HRT and National Grid (the successor company to a former owner of the property) were taking longer than originally anticipated. Therefore, a Phase II Complete Site Assessment (CSA) had not been completed by the original deadline of April 6, 2019. It is GZA's understanding that HRT did not initiate the Phase II work in the period following submittal of the Phase I report in April 2016 through the present. National Grid has assumed the role of Responsible/Potentially Responsible Party (RP/PRP) for the Site under the MCP.

It should also be noted that GZA has conducted environmental investigations at the Site on behalf of National Grid. These investigations included soil vapor sampling and laboratory analyses; a subsurface exploration program (test borings) and monitoring well installation; soil, groundwater, and LNAPL sampling and laboratory analyses.

National Grid and GZA understand that as part of the Tier Transfer from Haffner to National Grid, a Phase II CSA Report needs to be provided to MassDEP by April 6, 2020. Due to this restricted time frame, GZA is requesting that MassDEP waive the 30-day presumptive approval period that is typically required for a Tier Classification Transfer and authorize National Grid to begin supplemental assessment work upon submittal of this document.



If you have any questions, please contact the undersigned at (781) 278-3830 or e-mail at charles.lindberg@gza.com.

Very truly yours,

GZA GEOENVIRONMENTAL, INC.

161 2 94fl

Kyle F. Maxfield

Assistant Project Manager

Charles A. Lindberg

Gregg McBride, LSP Consultant/Reviewer

Charles A. Lindberg, LSP

Senior Principal

cc: Amy Willoughby (National Grid)



TIER CLASSIFICATION TRANSMITTAL FORM

Pursuant to 310 CMR 40.0500 (Subpart E)

BWSC 107

Release Tracking Number

| 3 | - |
|---|---|
| | |

32792

| A. | DISPOSAL SITE | LOCATION: | | | | |
|----------|--|---|--|--|--|--|
| 1.] | Disposal Site Name: | HAFFNER'S | | | | |
| 2. : | Street Address: | 284 WINTER STRE | ΈΤ | | | |
| 3. (| City/Town: | HAVERHILL | | | 4. ZIP Code: | 018300000 |
| 5. (| Coordinates: | Latitude: N | 42.77728 | Longitude: W | 71.08774 | - |
| В. | THIS FORM IS I | BEING USED | TO: (check a | ll that apply) | | |
| Г | 1. Submit a new T Check the tier clas | | | including a Tier Cla | assification Comp | oliance History (BWSC107B). |
| | a. Tier I | b. Tier | II | | | |
| | c. Check all T | Γier I criteria that | t apply, pursua | nt to 310 CMR 40.03 | 520(2): | |
| | time of Tie Concentration iii. An Imm iii. One or 40.0414(2) iv. One or Critical Ex | er Classification a tion set forth in 3 ninent Hazard is p more remedial a). more response a aposure Pathway | at concentration 310 CMR 40.0 present at the tictions are required to the ctions are required pursuant to 31 | ns equal to or exceed 360. The of Tier Classification as part of an Implified August 100 CMR 40.0414(3). | ing the applicable ation. mediate Response mediate Response | Action pursuant to 310 CMR Action to eliminate or mitigate a |
| | | - | J | | | Certification (BWSC107D) |
| | | - | | per 310 CMR 40.04 | 80. | |
| | If previously sub | mitted, provide o | | | | |
| Г | 3. Submit a Phase | e II Scope of Wo | | nm/dd/yyyy CMR 40.0834. | | |
| | If previously sub | _ | _ | | | |
| | | - | n | nm/dd/yyyy | | |
| Γ | 4. Submit a Phase | II Conceptual | Scope of Wor | k supporting a Tie | r Classification S | ubmittal. |
| Г | 5. Submit a Tier C Classification Co | | | • | Actions at a Tier C | Classified Site including the Tier |
| ~ | 6. Submit a Tier C | Classification Traduding the Tier C | nsfer Submitta | l for a change in pers | | Response Actions at a Tier d the Tier Classification |
| | Proposed effec | ctive date of tran | sfer : 12/2/2 | 2019 | | |
| | | | n | nm/dd/yyyy | | |



TIER CLASSIFICATION TRANSMITTAL FORM

Pursuant to 310 CMR 40.0500 (Subpart E)

BWSC 107

Release Tracking Number
3 - 32792

B. THIS FORM IS BEING USED TO: (cont.)

| 7. Submit a Revised Tier Classification Submittal. Check the revised Tier Classification Category. If the Tier Classification Category is not changing, indicate the current classification. |
|---|
| a. Tier I b. Tier II |
| c. Check all Tier I criteria that apply, pursuant to 310 CMR 40.0520(2): |
| i. Groundwater is located within an Interim Wellhead Protection Area, Zone II, or within 500 feet of a Private Water Supply Well, and there is evidence of groundwater contamination by an Oil or Hazardous Material at the time of Tier Classification at concentrations equal to or exceeding the applicable RCGW-1 Reportable Concentration set forth in 310 CMR 40.0360. |
| ii. An Imminent Hazard is present at the time of Tier Classification. |
| iii. One or more remedial actions are required as part of an Immediate Response Action pursuant to 310 CMR 40.0414(2). |
| iv. One or more response actions are required as part of an Immediate Response Action to eliminate or mitigate a Critical Exposure Pathway pursuant to 310 CMR 40.0414(3). |
| d. Check here if including an Eligible Person, Eligible Tenant, or Other Person Certification (BWSC107D) |
| 8. Provide a Notice that an additional Release Tracking Number(s) is (are) being linked to this Tier Classified Site (Primary RTN). Future response actions addressing the Release or Threat of Release notification condition associated with additional Release Tracking Numbers (RTNs) will be conducted as part of the Response Actions planned or ongoing at the Primary Site listed above. For a previously Tier Classified Primary Site, if there is a reasonable likelihood that the addition of the new secondary RTN(s) would change the classification of the site, a Revised Tier Classification Submittal must also be made. |
| Provide Release Tracking Number(s): a b |
| All future Response Actions must occur according to the deadlines applicable to the Primary RTN. Use only the Primary RTN when making future submittals for this site unless specifically relating to response actions started before the linking occurred |

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TIER CLASSIFICATION TRANSMITTAL FORM

Pursuant to 310 CMR 40.0500 (Subpart E)

BWSC 107

Release Tracking Number

- 32792

C. LSP SIGNATURE AND STAMP:

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and 309 CMR4.03(2), and (iii) the provisions of 309 CMR 4.03(3), to the best of my knowledge, information and belief,

- > if Section B of this form indicates that a **Tier Classification Submittal** is being submitted, this Tier Classification Submittal has been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;
- > if Section B of this form indicates that a **Phase I Completion Statement** is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) comply(ies) with the identified provisions of all orders, permits, and approvals identified in this submittal;
- > if Section B of this form indicates that a **Phase II Scope of Work** is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) comply(ies) with the identified provisions of all orders, permits, and approvals identified in this submittal;
- > if Section B of this form indicates that a **Tier Classification Extension Submittal** or a **Tier Classification Transfer Submittal** is being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

| 1. LSP#: | 6891 | | | |
|----------------|--------------|----------|---------------|--------------------------|
| 2. First Name: | CHARLES A | | 3. Last Name: | LINDBERG |
| 4. Telephone: | 781-278-3830 | 5. Ext.: | 6. Email: | CHARLES.LINDBERG@GZA.COM |
| 7. Signature: | | | | |
| 8. Date: | | | 9. LSP Stamp: | |
| | mm/dd/yyyy | | | 1 |
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TIER CLASSIFICATION TRANSMITTAL FORM

Pursuant to 310 CMR 40.0500 (Subpart E)

BWSC 107

Release Tracking Number

| - | - | 32792 |
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| D. | PERSON N | MAKINO | G SUBMITTA | AL: | | | | |
|-------------|---------------------------------|------------|---------------------------------------|---|----------|------------------|-------------------------|--|
| 1. 0 | Check all that | apply: | a. chang | ge in contact name | | b. change of ac | ldress | c. change in the person undertaking response actions |
| 2. 1 | Name of Orga | anization: | BOSTON | N GAS COMPANY D/B/A NA | ATIONAL | GRID | | |
| 3. 0 | Contact First | Name: | AMY | | | 4. Last Name | : WILLOUGHBY | (|
| 5. 5 | Street: | | 40 SYLVAN ROA | AD | | 6. Title: | PROGRAM M. | ANAGER, SIR NEW ENGLAND |
| 7. (| City/Town: | WALTHAI | М | 8. State: | MA | | 9. ZIP C | Code: 024511120 |
| 10. | Telephone: | 781-907- | 3644 | 11. Ext.: | | 12. Ema | il: amy.willou | ghby@nationalgrid.com |
| SI | RELATION ſE: ☑ 1. RP or P | RP 🗆 | OF PERSON a. Owner c. Other RP or I | MAKING SUBMIT b. Operator PRP Specify: | □ c. | | L ☐ Check ☐ d. Transpor | here to change relationship rter |
| l | 2. Fiduci | ary, Secu | red Lender or N | Municipality with Exer | mpt Sta | tus (as defined | by M.G.L. c. 2 | 21E, s. 2) |
| 1 | 3. Agenc | y or Publ | ic Utility on a l | Right of Way (as defin | ed by I | M.G.L. c. 21E, | s. 5(j)) | |
| J | 4. Any O | ther Pers | on Making Sub | mittal Specify R | Relation | ship: | | |
| | | | | | | | | |
| F. 3 | REQUIRE | D ATTA | CHMENT A | ND SUBMITTALS: | : | | | |
| Γ | | nd/or app | oroval(s) issued | on(s) on which this op by DEP or EPA. If the | | | | expject to any order(s), a statement identifying the |
| ~ | 2. Check he of any Phas | | | ef Municipal Officer a | and the | Local Board of | Health have b | een notified of the submittal |
| | and a cover | letter an | | notice is sent to the Cl | | | | ation Submittal is attached, Board of Health pursuant to |
| \Box | | | tify that the ow | ner of a Public Water | Supply | has been provi | ded written no | otice pursuant to 310 CMR |
| Γ | | er Classif | | on Submittal, check he chieved at the Disposal | | • | ement summa | rizing why a Permanent or |
| ~ | proposed cl | hange in 1 | person(s) under | | Actions | is attached. All | Response Act | zing the reasons for the tions must be completed by osal Site. |
| | | | non-updatable bwsc.edep@sta | | on this | form is incorre | ct, e.g., Releas | se Address/Location Aid. |

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8. Check here to certify that the LSP Opinion containing the material facts, data, and other information is attached.



TIER CLASSIFICATION TRANSMITTAL FORM

Pursuant to 310 CMR 40.0500 (Subpart E)

BWSC 107

Release Tracking Number

| - | 32792 |
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| G. CER | TIFICATION OF PERSON MAKING SUBMITTAL: | |
|---|--|---|
| transmitta material in that I am on whose | , attest under the pain and am familiar with the information contained in this submittal, included form, (ii) that, based on my inquiry of those individuals immediately information contained in this submittal is, to the best of my knowledge fully authorized to make this attestation on behalf of the entity legally are behalf this submittal is made am/is aware that there are significant per isonment, for willfully submitting false, inaccurate, or incomplete information. | responsible for obtaining the information, the and belief, true, accurate and complete, and (iii) responsible for this submittal. I/the person or entity nalties, including, but not limited to, possible fines |
| person(s) requireme employed person(s) estimated to proceed requirement for this su 40.0172 f | ting a Tier II Classification, Extension or Transfer, I also attest under to or entity(ies) on whose behalf this submittal is made has/have personal ents of M.G.L. c. 21E and 310 CMR 40.0000; (ii) based upon my inquid or engaged to render Professional Services for the disposal site which or entity(ies) on whose behalf this submittal is made, and my/that per disposal costs of necessary response actions, that/those person(s) or entity(ies) disposal with response actions for such site in accordance with M.G.L. c. 21 ents; and (iii) that I am fully authorized to make this attestation on beh ubmittal. I/the person(s) or entity(ies) on whose behalf this submittal if for notifying the Department in the event that I/the person(s) or entity(ey is/are unable to proceed with the necessary response actions. | ally examined and am/is familiar with the airy of the/those Licensed Site Professional(s) in is the subject of this Transmittal Form and of the rson's(s') or entity's(ies') understanding as to the shas/have the technical, financial and legal ability i.E, 310 CMR 40.0000 and other applicable alf of the person(s) or entity(ies) legally responsible is made is aware of the requirements in 310 CMR |
| 4. For: | BOSTON GAS COMPANY D/B/A NATIONAL GRID | 5. Date: |
| | (Name of person or entity recorded in Section D) | mm/dd/yyyy |
| ☐ 6. Ch | neck here if the address of the person providing certification is different | nt from address recorded in Section D. |
| 7. Street: | | |
| 8. City/To | own: 9. State: | 10. ZIP Code: |
| 11. Teleph | hone:12. Ext.:13. En | mail: |
| YI FOI | YOU ARE SUBJECT TO AN ANNUAL COMPLIANCE ASSURANCE EAR FOR THIS DISPOSAL SITE. YOU MUST LEGIBLY COMPLETE. RM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. YOU MAY BE PENALIZED FOR MISSING A R Stamp (DEP USE ONLY): | ETE ALL RELEVANT SECTIONS OF THIS IF YOU SUBMIT AN INCOMPLETE FORM, |
| | | |

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TIER CLASSIFICATION COMPLIANCE HISTORY

Pursuant to 310 CMR 40.0540 (Subpart E)

| BWS (| C 107B |
|--------------|--------|
|--------------|--------|

| Releas | e Tra | acking Number |
|--------|-------|---------------|
| 3 | - | 32792 |

A. DISPOSAL SITE COMPLIANCE HISTORY SUMMARY:

| \Box | 1. Check here if a Tier Classification Compliance History of the person listed in BWSC107, Section D, was previously |
|--------|---|
| | submitted, and there has been no change in that person's compliance history, or the person in Section D has no compliance |
| | history. If this box is checked, this section does not have to be completed. |

2. List all permits or licenses that have been issued by the Department that are relevant to this Disposal Site:

| Program | Permit Number | Permit Category | Facility ID |
|---|---------------|-----------------|-------------|
| a. Air Quality | | | |
| b. Hazardous Waste (M.G.L. c. 21C) | | | |
| c. Solid Waste | | | |
| d. Industrial Wastewater Management | | | |
| e. Water Supply | | | |
| f. Water Pollution Control/Surface Water | | | |
| g. Water Pollution Control/Groundwater | | | |
| h. Water Pollution Control/Sewer Connection | | | |
| i. Wetland & Waterways | | | |

3. List all other Federal, state or local permits, licenses, certifications, registrations, variances, or approvals that are relevant to this Disposal Site:

| Issuing Authority or Program, or Documentation Type | Identification Number | Date Issued mm/dd/yyyy |
|---|-----------------------|---------------------------|
| | | |
| | | |
| | | |
| | | |

✓ 4. Check here to certify that, if needed, a statement further describing the Compliance History of this Disposal Site is attached.

This statement must describe the compliance history of the person or entity named in BWSC107, Section D with the following: (1) DEP regulations; and (2) other laws for the protection of health, safety, public welfare and the environment administered or enforced by any other government agency. Such a statement should identify information such as: (1) actions relevant to the Disposal Site taken by the Department to enforce its requirements including, but not limited to, a Notice of Noncompliance (NON), Notice of Intent to Assess Civil Administrative Penalty (PAN), Notice of Intent to Take Response Action (NORA), and an administrative enforcement order; (2) administrative consent orders; (3) judicial consent judgements; (4) similar administrative actions taken by other Federal, state or local agencies; (5) civil or criminal actions relevant to the Disposal Site brought on behalf of the DEP or other Federal, state, or local agencies; and (6) any additional relevant information. For each action identified, provide the following information: (1) name of the issuing authority, type of action, identification number and date issued; (2) description of noncompliance cited; (3) current status of the matter; and (4) final disposition, if any.

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Release Tracking Number ION

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|--------|---------------|-------|
| 2 | _ | 32702 |

BWSC 107C

| TIER CLASSIFICATION | TRANSFEROR CERTIFICAT |
|-----------------------------|-----------------------|
| Pursuant to 310 CMR 40.0560 | (Subpart E) |

| Acted tracking Mulliber | | |
|-------------------------|---|-------|
| 3 | _ | 32792 |

| 1. Check all that apply: | a. change in contact | name \Box | b. change of ad | dress |
|--------------------------|---------------------------------|-------------------|-------------------|--|
| 2. Name of Organization: | HAFFNER REALTY TRUST | | | |
| 3. Contact First Name: | JOANNE | | 4. Last Name: | FOURNIER |
| 5. Street: | 575 OSGOOD STREET #2313 | | 6. Title: | TRUSTEE |
| 7. City/Town: NORTH A | NDOVER S | 8. State: MA | | 9. ZIP Code: 018450000 |
| 10. Telephone: 9786832 | 771 11. Ext | : | 12. Email: | |
| B. RELATIONSHIP T | O THE DISPOSAL SITI | E OF PERSON | N TRANSFER | RING A TIER CLASSIFICATION: |
| | | | | Check here to change relationship |
| ▼ 1. RP or PRP | a. Owner | erator \Box c. | Generator | d. Transporter |
| ~ 6 | e. Other RP or PRP Spe | ecify: ELIGIB | LE PERSON-21E | |
| ☐ 2. Fiduciary, Secu | red Lender or Municipality | with Exempt Sta | atus (as defined | by M.G.L. c. 21E, s. 2) |
| • | ic Utility on a Right of Way | • | ` | |
| | | | | s. 5(<i>))</i> |
| 4. Any Other Pers | on Making Submittal | Specify Relation | ıship: | |
| C CERTIFICATION | OF PERSON TRANSFE | RRING TIFE | CLASSIFIC | ATION: |
| c. centification | | | | |
| 1. I, | r with the information center | , attest und | er the pains and | penalties of perjury (i) that I have personally any and all documents accompanying this |
| | | | | onsible for obtaining the information, the |
| material information con | tained in this submittal is, to | the best of my l | knowledge and b | belief, true, accurate and complete, and (iii) |
| = | | | | nsible for this submittal. I/the person or entity, including, but not limited to, possible fines |
| | llfully submitting false, inac | _ | • | · · · · · · · · · · · · · · · · · · · |
| 2. By: | | | 3. Title: | TRUSTEE |
| | Signature | | | |
| 4. For: HAFFNER REALT | YTRUST | | 5. Date: | |
| (Nam | e of person or entity recorde | ed in Section A) | | mm/dd/yyyy |
| 6. Check here if the a | ddress of the person provide | ing certification | is different from | n address recorded in Section A. |
| 7. Street: | | | | |
| 8. City/Town: | | 9. State: | | 10. ZIP Code: |
| 11. Telephone: | 12. Ext.: | | 13. Email: | |

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