

Allenstown Sewer Commission

35 Canal Street  
Allenstown, NH 03275

# Invoice

Date	Invoice #
1/31/2012	02262835

<b>Bill To</b>
Enpro Services, Inc C/O PSNH 12 Mulliken Way Newburyport, MA 01950

<b>Terms</b>
Due 25th of month

Serviced	Quantity	Ticket #	Description	Rate	Class	Amount
1/19/2012	32.95	33561	Per ton Effluent disposal charge	7.19	Effluent	236.91
1/20/2012	29.04	33563	Per ton Effluent disposal charge	7.19	Effluent	208.80
1/20/2012	33.22	33562	Per ton Effluent disposal charge	7.19	Effluent	238.85
1/21/2012	33.69	33565	Per ton Effluent disposal charge	7.19	Effluent	242.23
1/21/2012	33.36	33564	Per ton Effluent disposal charge	7.19	Effluent	239.86
1/22/2012	33.48	33567	Per ton Effluent disposal charge	7.19	Effluent	240.72
1/22/2012	33.22	33566	Per ton Effluent disposal charge	7.19	Effluent	238.85
1/23/2012	33.58	33569	Per ton Effluent disposal charge	7.19	Effluent	241.44
1/23/2012	33.16	33568	Per ton Effluent disposal charge	7.19	Effluent	238.42
1/23/2012	33.56	33641	Per ton Effluent disposal charge	7.19	Effluent	241.30
1/24/2012	33.17	33643	Per ton Effluent disposal charge	7.19	Effluent	238.49
1/24/2012	33.24	33642	Per ton Effluent disposal charge	7.19	Effluent	239.00
1/26/2012	33.27	33645	Per ton Effluent disposal charge	7.19	Effluent	239.21
1/26/2012	33	33646	Per ton Effluent disposal charge	7.19	Effluent	237.27
1/28/2012	33.21	33647	Per ton Effluent disposal charge	7.19	Effluent	238.78
1/31/2012	33.34	33648	Per ton Effluent disposal charge	7.19	Effluent	239.71
1/31/2012	33.25	33649	Per ton Effluent disposal charge	7.19	Effluent	239.07
1/31/2012	33.16	33650	Per ton Effluent disposal charge	7.19	Effluent	238.42
				<b>Total</b>		\$4,277.33

APPENDIX D - SEPTAGE DISCHARGE PERMIT APPLICATION

ALLENSTOWN WASTEWATER TREATMENT FACILITY

35 Canal St. Allenstown, NH 03275 Tel. (603) 485-5600 Fax# (800) 859-0081

Company Name: ENPRO Services Inc.

Address: 12 Mulliken Way, Newburyport MA. 01950

Mailing Address: Same

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Tel.: 978-465-1595 Fax: 978-465-2050

E-Mail Address: \_\_\_\_\_

Check box if you want monthly invoice and statement emailed.

Name of Business Owner: Bruce A. Irving III

Mailing Address of Owner: 12 Mulliken Way

City/State: Newburyport MA Zip Code: 01950

Owners Telephone Number: 978-465-1595

Insurance Company: Ferdinando Insurance Associates Inc.

Policy Number: ECP01527313-10  
(Attach Certificate of Insurance)

State Septage Hauler Permit Number: N/A

Expiration Date: 4-1-2012

IN CONSIDERATION OF THE GRANTING OF A SEPTAGE DISCHARGE PERMIT THE UNDERSIGNED HEREBY CERTIFIES:

1. That I am familiar with the information contained in this application and, that to the best of my knowledge and belief, such information is true, complete, and accurate.
2. That I have received a copy of, read, and understand all provisions of the Suncook Wastewater Treatment Facility Septage Regulations.
3. That my agents, my employees, assigns, and I will comply with all provisions of the Allenstown Sewer Use Ordinance.

[Signature]  
Signature of Business Owner

12/22/11  
Date

NOTICE:

ALL FEES PAID ARE NON-REFUNDABLE.  
DO NOT DELIVER SEPTAGE UNTIL YOU RECEIVE YOUR SEPTAGE DISCHARGE PERMIT.

***** THIS SECTION FOR OFFICIAL USE ONLY *****			
Permit Fee Paid \$ <u>50<sup>00</sup> ✓ #58003</u>	Received By: <u>AM</u>	Date <u>12/27/11</u>	
Application approved: <u>[Signature]</u>	<u>1/4/12</u>	Permit # <u>39</u>	
Superintendent, SWTF	Date		