NAME CHANGE AND/OR PERMIT TRANSFER FOR WASTEWATER DISCHARGE PERMIT

Alaska Department of Environmental Conservation
Division of Water

For department use only:
Date received: _____
DROPS entry: _____
Entered by: _____

A. ACTION TO BE PERFORMED

☐ Name change / Effective or Scheduled Date:

☑ Transfer of Permit / Schedule Date: 09/02/2010

B. PREVIOUS INFORMATION

DEC Permit or Authorization No.: AKG520040

Previous Business Name: Pelican Seafoods Shore Based Plant

Facility Physical Address: Street: 1 Salmon Way
City: Pelican State: AK Zip: 99832

C. NEW INFORMATION

New Business Name: Pelican Seafoods Shore Based Plant

Responsible Party City of Pelican

Mailing Address: Street (PO Box): PO Box 737
City: Pelican State: AK Zip: 99832
Phone: 907-735-2202 Fax (optional): 907-735-2258 Email: patricia@pelicancity.org

Facility Contact

Mailing Address: Street (PO Box):
City: State: Zip:
Phone: Fax (optional): Email:

Billing Contact

Mailing Address: Street (PO Box):
City: State: Zip:
Phone: Fax (optional): Email:

Will the name change or transfer of ownership result in a change in the character of pollutants being discharged or a new or increased discharge not addressed by current permit conditions?

☐ No
☐ Yes (attach explanation)

D. SIGNATURE REQUIRED FOR NAME CHANGE

I hereby authorize the above referenced name change

Name of Responsible Party (Print) _____ Title _____

Signature of Responsible Party _____ Date _____

E. SIGNATURES REQUIRED FOR TRANSFER OF PERMIT

PREVIOUS OWNER: I hereby acknowledge the pending transfer of the above referenced permit.

Name of Responsible Party (Print) _____ Title _____

Signature of Responsible Party _____ Date _____

NEW OWNER:

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

City of Pelican Patricia Phillips
Name of Responsible Party (Print)

Mayor, City of Pelican
Title

Patricia Phillips
Signature of Responsible Party

8-27-2014
Date

CC

A L A S K A

2010-001113-0

Recording Dist: 103 - Sitka
9/7/2010 3:51 PM Pages: 1 of 2

RETURN RECORDED DOCUMENT TO:
Paul H. Grant
217 Second St., Ste. 204
Juneau, AK 99801
907-586-2701

Sitka Recording District

CLERK'S DEED

This Clerk's Deed is executed by the Clerk of Court at Sitka, Alaska pursuant to the Judgment of Foreclosure in Case No. 1SI-10-133-CI, dated August 17, 2010. This deed conveys to the Grantee, the City of Pelican, Alaska, whose mailing address is PO Box 737, Pelican, Alaska 99832, all legal and equitable interests in the following described real estate located in the Sitka Recording District, First Judicial District, State of Alaska:

Block 17, Lots 1 and 2, and Pelican Seafoods Subdivision Lots 1 and 4, USS 2819, Pelican, First Judicial District, Sitka Recording District, Alaska.

DATED this 2 day of ~~August~~ Sept., 2010.

Janie Calhoun

Clerk of the Superior Court
First Judicial District at Sitka

ACKNOWLEDGMENT

STATE OF ALASKA)
: ss.
FIRST JUDICIAL DISTRICT)

THIS IS TO CERTIFY that on this 2nd day of September, 2010 personally appeared before me Janie Calhoun to me known to be the Clerk of Court described in and who executed the foregoing Clerk's Deed and acknowledged that he/she signed the same pursuant to the Judgment of Foreclosure in Case No. 1SI-10-133-CI, dated August 17, 2010 in his/her official capacity as Clerk of Courts.

GIVEN UNDER MY HAND and official seal the day and year last above written.

Notary Public, State of Alaska
My Commission Expires: 10/ 07/ 10

SEAL OF THE TRIAL COURTS STATE OF ALASKA FIRST JUDICIAL DISTRICT

CERTIFICATION

I certify that on 2 day of Sep 10
a true copy of this do was placed
in attorney's box/mailed to the following:
P. Grant *, E. Bahrt *
Ed Bahrt + Associates *
By X

I certify that this is a full, true and correct copy of an original document on file in the Alaska Trial Courts at Sitka.
Signed and sealed this 2 day of Sept 10
by Janie Calhoun
Clerk