

Brownfields Program  
File Room Document Transmittal Sheet

Your Name: Shirley Liggins  
Project ID: 0903205011  
Facility Name: Pond Road LF  
Document Group: Brownfields Agreement (BFA)  
Document Type: Notice of Brownfields Property - Unsigned (NBPU)  
Description: verification Unsigned BFA was received by PD  
Date of Doc: 6/4/2012  
Author of Doc: Shirley Liggins

**File Room Use Only**

Date Recieved by File Room:

Date Scanned:

Month	Day	Year
06	28	2012

0903205011

Scanner's Initials: *pal*

09032-05-11

7008 0500 0001 4785 0809

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**OFFICIAL USE**

Postage \$		Pond Rd BFA
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Postmark  
Here

Mrs. Sonia Gribble  
Tri-State Scrap Metal, Inc.  
79 Pond Road  
Asheville, NC 28806

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Sonia Gribble</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Mrs. Sonia Gribble Tri-State Scrap Metal, Inc. 79 Pond Road Asheville, NC 28806</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label) <u>7008 0500 0001 4785 0809</u></p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

