

3489469 BK 8058 PG 37 E 3489469 B 8058 P 37-38 RICHARD T. MAUGHAN DAVIS COUNTY, UTAH RECORDER 7/27/2022 8:12:00 AM FEE \$40.00 Pgs: 2 DEP eCASH REC'D FOR NBT BANK NA

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

I OLLOW IND INCOTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) Hannah Flynn 607-337-6082				
B. E-MAIL CONTACT AT FILER (optional) SungageUCC@nbtbank.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
NBT Bank, NA UT F	FIXTURE			
52 South Broad St.				
Norwich, NY 13815 File with: DAVIS Co	ounty, UT			
11				
<u> </u>	THE ABOVE	SPACE IS FO	R FILING OFFICE USE O	NLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full				
	he Individual Debtor information in item 10 of th	e Financing Sta	tement Addendum (Form UCC	1Ad)
1a. ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Hammer	Robert			
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2852 S 2000 W	Syracuse	UT	84075	USA
 DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name will not fit in line 2b, leave all of item 2 blank, check here. 	name; do not omit, modify, or abbreviate any p the Individual Debtor information in item 10 of th			
28. ORGANIZATION'S NAME		or marking one	and resemble to the second	
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	USA
A CECUPED DADENIC AND THE CONTRACT OF THE CONT				CDA
 SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURING OR OF ASSIGNOR OR OF ASSIG	ED PARTY): Provide only one Secured Party na	me (3a or 3b)		
NBT Bank, NA				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
		, ,		
3c. MAILING ADDRESS 52 South Broad St	Norwich	NY	POSTAL CODE 13815	USA
	Norwich	IN I	13013	USA
 COLLATERAL: This financing statement covers the following collateral: 				
All Solar Equipment; all attachments, accessories, tools, b				
any portion of the Solar Equipment; all claims of any type				
Equipment or the Installation Agreement; all rebates and i Equipment except for such rebates and incentives which h				te
and remedies under all agreements, books, records, statem				
the Collateral (including, without limitation, the Installme				
collection, sale or other disposition of any property that co				
insurer arising from any loss, damage or destruction of an				
possessing all or any portion of the Collateral all supporting				ons
to, substitutions and replacements for and rents, profits an				
insurance, indemnity, warranty or guaranty payable to you	i from time to time with respect	to any of t	ne toregoing.	
5. Check only if applicable and check only one box: Collateral is held in a Trust (s			red by a Decedent's Personal F	
6a. Check only if applicable and check only one box:	_	Bb. Check only	f applicable and check only one	
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility	Agricul	tural Lien Non-UCC I	Filing

Consignee/Consignor

Seller/Buyer

962

Bailee/Bailor

Licensee/Licensor

Lessee/Lessor

269 Specialty Lending

7. ALTERNATIVE DESIGNATION (if applicable):

8. OPTIONAL FILER REFERENCE DATA:

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

because Individual Debtor name did not fit, check here		1			
9a. ORGANIZATION'S NAME					
OR 9b. INDIVIDUAL'S SURNAME Hammer		-			
FIRST PERSONAL NAME Robert		1			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE	SDACE	S FOR FILING OFFICE U	ISE ONLY
 DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name do not omit, modify, or abbreviate any part of the Debtor's name) and enter the 					
10a. ORGANIZATION'S NAME					
10b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(SylNITIAL(S)					SUFFIX
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY USA
11. ADDITIONAL SECURED PARTY'S NAME or ASSIG	NOR SECURED PARTY	"S NAME: Provide on	ly <u>one</u> nam	e (11a or 11b)	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	FIRST PERSONAL NAME ADDITIONAL NAME			SUFFIX
11c. MAILING ADDRESS	CITY	*	STATE	POSTAL CODE	COUNTRY
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) Solven and address of a RECORD OWNER of real estate described in item 16	14. This FINANCING STAT covers timber to be 16. Description of real estat	cut covers as-	extracted (collateral X is filed as a f	ixture filing