Entry #: 558072

10/22/2021 01:33 PM UNIFORM COMMERCIAL CODE

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FEE: \$40.00 BY: NBT BANK, NA - LOAN OPERATIONS

Jerry Houghton, Tooele County, Recorder

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS	
A. NAME & PHONE OF CONTACT AT FILER (optional)	
B. E-MAIL CONTACT AT FILER (optional)	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
l —	
NBT Bank, NA	
52 South Broad St.	
Norwich NY 13815	

l	File with: TOOELE County, UT	UT FIXTURE	THE ABOVE SPACE IS	FOR FILING OFFICE USE	ONLY
			ify, or abbreviate any part of the Det rmation in item 10 of the Financing S		
	1a. ORGANIZATION'S NAME				
OR	1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	IAL NAME ADDITIONAL NAME(S)/INITIAL		SUFFIX
	Lister	Andre	No	ah	
1¢.	MAILING ADDRESS	CITY	STAT	E POSTAL CODE	COUNTRY
66	684 OLD MILL RD	TOOELE	UI U	84074	
OR	2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	ME ADDIT	IONAL NAME(S)/INITIAL(S)	SUFFIX
2c. l	MAILING ADDRESS	CITY	STATI	POSTAL CODE	COUNTRY
66	84 OLD MILL RD	TOOELE	UT	84074	
	SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNO 3a. ORGANIZATION'S NAME NBT Bank, NA	R SECURED PARTY): Provide or	ly <u>one</u> Secured Parly name (3a or 3b)	•	•
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	ME ADDIT	IONAL NAME(S)/INITIAL(S)	SUFFIX
3c. I	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
52	South Broad St	Norwich	NY	13815	USA
4. 0	COLLATERAL: This financing statement covers the following collateral:				

All Solar Equipment; all attachments, accessories, tools, batteries, parts, supplies, replacements of and additions to all or any portion of the Solar Equipment; all claims of any type or nature, including warranty claims related to the Solar Equipment or the Installation Agreement; all rebates and incentives that are payable as a result of installing the Solar Equipment except for such rebates and incentives which have been assigned to your Installer, all your rights, title, interests, and remedies under all agreements, books, records, statements and documentation and other general intangibles relating to the Collateral (including, without limitation, the Installment Agreement), all consideration received from the operation, collection, sale or other disposition of any property that constitutes Collateral, including any payment received from any insurer arising from any loss, damage or destruction of any Collateral and any other payment received as a result of possessing all or any portion of the Collateral all supporting obligations; and all products and proceeds of and all accessions to, substitutions and replacements for and rents, profits and products of, each of the foregoing and proceeds of any insurance, indemnity, warranty or guaranty payable to you from time to time with respect to any of the foregoing.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative					
6a. Check only if applicable and check only one box:		6	b. Check <u>only</u> if applicable a	and check <u>only</u> one box:	
Public-Finance Transaction Manufactured-Home	Transaction A Debtor is a Tran	nsmitting Utility	Agricultural Lien	Non-UCC Filing	
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Less	sor Consignee/Consignor	Seller/Buyer	Bailee/Bailor	Licensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:					
269 Special	lty Lending				

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement because Individual Debtor name did not fit, check here	ent; if line 1b was left blank	1		
98. ORGANIZATION'S NAME]		
OR 9b. INDIMDUAL'S SURNAME Lister				
FIRST PERSONAL NAME Andre		1		
ADDITIONAL NAME(S)/INITIAL(S) Noah	SUFFIX	THE ABOVE SPACE	IS FOR FILING OFFIC	E USE ONLY
 DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor do not omit, modify, or abbreviate any part of the Debtor's name) and enter 		in line 1b or 2b of the Financing	Statement (Form UCC1) (use exact, full name;
10e. ORGANIZATION'S NAME OR 10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
10c. MAILING ADDRESS 6684 OLD MILL RD	TOOELE	STATE UT	POSTAL CODE 84074	COUNTRY
11. ADDITIONAL SECURED PARTY'S NAME or AS	SSIGNOR SECURED PARTY	'S NAME: Provide only <u>one</u> na	me (11a or 11b)	
OR 11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ONAL NAME(S)/INITIAL(S)	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 REAL ESTATE RECORDS (if applicable) 15. Name and address of a RECORD OWNER of real estate described in item 1.	covers timber to be	be cut covers as-extracted collateral is filed as a fixture filing		
(if Debtor does not have a record interest):	6684 OLD MILL	RD TOOELE, UT 84 ection: Municipality ID: 9-0-0104		

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Lister , Andre – Deed

THE FOLLOWING DESCRIBED TRACT(S) OF LAND IN THE CITY OF STANSBURY PARK, COUNTY OF TOOELE AND STATE OF UTAH:

LOT 104, GATEWAY NEIGHBORHOOD PHASE 2A-2 SUBDIVISION OF TOOELE COUNTY,

ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE AND OF RECORD IN THE

TOOELE COUNTY RECORDER'S OFFICE.

APN: 13-049-0-0104