



30 SOUTH ROAD • FARMINGTON, CT 06032 • TELEPHONE: (860) 415-8400

NHPUC 15JAN16PM2:03

RETURN TO: ACSTAR Insurance Company
30 South Road
Farmington, CT 06032

Please execute Bond Release as indicated below and return the original by mail and fax a copy of the executed Bond Release to ACSTAR at 860-404-5394, attention Diane Plante

BOND RELEASE

The undersigned by these presents, does for itself and its successors and assigns, unconditionally releases and discharges ACSTAR Insurance Company of and from all causes of action and all past and present claims and/or liability now or hereinafter arising under Bond No. F21968 in the amount of \$100,000.00 issued for Glacial Natural Gas, Inc. This release shall cause this bond to be null and void and terminate any obligation of ACSTAR Insurance Company under the bond.

In witness whereof, the undersigned has caused these presents to be signed by its duly authorized agent on the ___ day of ___, 20__.

Witness: _____
(Please print or type name)

Obligee: New Hampshire Public Utilities Commission
By: _____ (Signature)
(Please print or type name)
(Title)
Telephone No.: _____

NOTARY

STATE OF _____)
) ss:
COUNTY OF _____)

On this ___ day of _____ 20____, before me personally appeared _____, who acknowledged himself to be the _____ of _____, a corporation, and that he, being authorized to do so, executed the foregoing Release for the purposes therein contained by signing the name of the corporation by himself as _____.

Notary Public: _____
My Commission Expires: _____



30 South Road, Farmington, CT 06032 860-415-8400

If the New Hampshire Public Utilities Commission does not complete bond releases, please indicate below the statute of limitations on prior liability or the tail the bond carries for prior liability for the Surety company:

Bond No. F21968 was cancelled by the New Hampshire Public Utilities Commission on _____ (effective date of cancellation in New Hampshire Public Utilities Commission records)

The liability on Bond No. F21968 will cease on _____ (insert date or information on statute of limitations) from the date of cancellation.

Thank you so very much for providing this information.

Signature

Name Title

Date

Phone

Witnessed By:

Signature

Name & Title