

**Exeter Board of Selectmen Meeting
Monday, February 8th, 2016, 7:00 p.m.
Nowak Room, Town Office Building
10 Front Street, Exeter, NH**

1. Call Meeting to Order
2. Public Comment
3. Minutes & Proclamations
 - a. Proclamations/Recognitions
 - b. Regular Meetings: January 25th, 2016
4. Appointments
5. Discussion/Action Items
 - a. New Business
 - i. 2016 Health Insurance Agreements
 - b. Old Business-
 - i. None
6. Regular Business
 - a. Tax, Water/Sewer Abatements & Exemptions
 - b. Permits & Approvals
 - c. Town Manager's Report
 - d. Selectmen's Committee Reports
 - e. Correspondence
7. Review Board Calendar
8. Non Public Session
9. Adjournment

Julie Gilman, Chairwoman
Exeter Selectboard

Posted: 2/5/16 Town Office, Town Website

Persons may request an accommodation for a disabling condition in order to attend this meeting. It is asked that such requests be made with 72 hours notice. If you do not make such a request, you may do so with the Town Manager prior to the start of the meeting. No requests will be considered once the meeting has begun.

AGENDA SUBJECT TO CHANGE

Draft Minutes

Exeter Board of Selectmen

January 25, 2016

1. Call Meeting to Order

Chairwoman Julie Gilman called the meeting to order at 7:00 pm in the Nowak Room of the Exeter Town Offices building. Other members present were Vice Chair Don Clement, Selectman Dan Chartrand, Selectwoman Nancy Belanger, and Selectwoman Anne Surman. Town Manager Russell Dean was also present.

2. Bid Openings/Awards

There were no Bid Openings or Awards.

3. Public Comment

There was no Public Comment.

4. Minutes and Proclamations

a. Proclamations/Recognitions.

There were no proclamations/recognitions.

b. Regular Meetings: January 11, 2016

Vice Chair Clement had an amendment to page 3, changing "Belanger" to "Surman" in a Motion. He had another amendment to that page changing "1609" to "1699".

Motion: A Motion was made by Selectman Chartrand and seconded by Selectwoman Belanger to approve the minutes of the January 11, 2016 BOS meeting, as amended by Vice Chair Clement, and as submitted by Nicole Piper. Motion carried – all in favor.

c. Budget/Bond Hearings: January 19, 2016

Vice Chair Clement had an amendment to page 5, striking the word "not" out of the second paragraph.

Motion: A Motion was made by Selectman Chartrand and seconded by Selectwoman Belanger to approve the minutes of the January 19, 2016 BOS Budget/Bond Hearings, as amended by Vice Chair Clement, and as submitted by Nicole Piper. Motion carried – all in favor.

d. Special Meeting: January 21, 2016

Vice Chair Clement had an amendment to page 2, adding the vote on a Motion to read "3-2 vote".

Motion: A Motion was made by Selectman Chartrand and seconded by Selectwoman Belanger to accept the minutes of the January 21, 2016 Special Meeting, as amended by Vice Chair Clement, and submitted by Russell Dean. Motion carried – all in favor.

5. Appointments

Motion: A Motion was made by Selectman Chartrand and seconded by Selectwoman Belanger to appoint Andrew Koff to the Conservation Commission as an alternate, with a term to expire April 30, 2017. Motion carried – all in favor.

6. Discussion/Action Items

a. New Business

i) Town Moderator Update: 2016 Elections

Paul Scafidi, Town Moderator, said they will be meeting for elections five times this year, so there is a lot going on. He showed a list of rules he will be following during the Deliberative Session, which is this Saturday, January 30. He let the voters know the protocol.

Andie Kohler, Town Clerk, said the filing period is now underway, and will end on January 29. She gave a list of multiple positions that will be ending this year, i.e. two BOS seats, a Swasey Parkway Trustee, and three Library Trustees. She reminded everyone that the Deliberative Session is this Saturday, January 30 at 9am at the High School. She said you will not be able to change parties at the Deliberative and there is still time to do an absentee vote. She urged voters to know what ballot they want. She said Tuesday, February 9 is Election Day from 7am-8pm at the Tuck Gym. Voters will need a photo ID. If you don't have an ID, you will need to fill out a CVA and get a picture taken. Chairwoman Gilman asked if a student ID will work. Ms. Kohler said it would. Mr. Scafidi said the student ID needs to be from NH only. Chairwoman Gilman asked who will be taking the photos. Mr. Scafidi said hopefully a BOS member will. Vice Chair Clement asked if an elected official can vouch for someone they know if they forgot their ID. Ms. Kohler said yes.

Mr. Scafidi said there will be a new traffic pattern at SST this year. He said they will be making it simpler to get in and out. There will be only one way in and one way out. There will be police there directing traffic. There will be spaces for handicapped. He showed a map of the area and explained the traffic pattern. He then showed a map of how the booths will be set up

in the Tuck Gym. There is an RSA that says voters must leave voting area after their vote is made. They will be opening the absentee ballots around 11am. Chairwoman Gilman asked what voters who are out of town on Election Day can do. Ms. Kohler said the voters have until the day before Election Day, at 5pm, to come in and fill out an absentee ballot.

ii) Downtown Sidewalks Project Update

Chairwoman Gilman said Jennifer Perry was present to give a recommendation for a contractor and a schedule.

Ms. Perry said they have been in conversations with Bell & Flynn to try to develop a cost for the project. They have given her a cost proposal. She said she is still working with them on the actual limits of the project, so she did not have a number to give the Board tonight. She wanted to make sure the Board was comfortable with Bell & Flynn as contractors. She put a memo in the packet which gives her reasons for recommending Bell & Flynn. She said B&F will be able to stick to the schedule which will start in the spring. They will be starting as early as possible, which will hopefully be the beginning of April. She said they are not allowing many days for bad weather. B&F is a local contractor, so they know the area well. She said DPW will be making special requests, and B&F will respect that. The DPW will make sure the cost is below the Warrant Article amount. Ms. Perry said B&F is the kind of contractor she knows she can work with.

Vice Chair Clement asked what the issued bond number is. Mr. Dean said it is \$580,000. Vice Chair Clement asked if they will know in the next couple of weeks what the full cost will be. Ms. Perry said yes, they will. Vice Chair Clement commented that it is nice that B&F are local. He said he has great confidence B&F can make needed adjustments for the good.

Selectwoman Surman asked if B&F is on notice of the brick sidewalks citizen's petition on this year's Warrant. Ms. Perry said she has not noticed them that that is pending. However, she said it would not delay the start of the project. She also thinks the project would still get done by June if they had to go with brick.

Selectman Chartrand thanked DPW for their work, and said he likes the compressed time period for this project.

Chairwoman Gilman asked about traffic disruptions. She asked Ms. Perry to come back and tell the Board what the traffic pattern will look like. Ms. Perry said they have already been looking at that extensively. She said she would come back with plans, and added that public participation is a huge part of this.

Motion: A Motion was made by Vice Chair Clement and seconded by Selectman Chartrand that the town, by extension the DPW, work with Bell & Flynn to develop a full cost proposal for the downtown sidewalk project which includes sidewalks, curbing, drainage, tree wells, and other accessories. Motion carried –all in favor.

iii) Citizen's Petitions Articles

Chairwoman Gilman said she would next run through the topics of the Citizen's Petitions. The first is from Robert Eastman and is about drone usage. She read this Petition and asked the Board for any comments. No one had any comments about this Petition.

The second Citizen's Petition is from Dan Chartrand and deals with the establishing a Charter Commission in Exeter. She read the Petition and asked for any comments. Jim Leslie, Exeter resident, said that he was previously elected to the Amesbury City Council, and he is happy this Petition is in the Warrant. However, he was concerned with how the Petition was worded, and read his recommended change to the wording. Selectman Chartrand said he took language from the NH RSA and that is why it is worded as it is. He said his drive with the Petition was to establish a Charter Commission. Mr. Leslie said he is excited about how this is going to go forward. Selectman Chartrand said he wants to see Exeter adopt a Charter. Selectwoman Surman asked about an information packet for voters, so they fully understand what they are voting for. Chairwoman Gilman said they voter's information packet will be available at the Deliberative Session.

Chairwoman Gilman went on to read the next Citizen's Petition which is titled NH Resolution Big Money out of Politics. She asked for any comments, of which there were none.

The next Citizen's Petition Chairwoman Gilman read was on Elderly Exemptions. Selectman Chartrand said there is a generous Elderly Exemption in the area, therefore he was against this.

Chairwoman Gilman next read the Citizen's Petition on the downtown sidewalks submitted by Joan Sullivan. Selectman Chartrand said the Board took this up during the Public Hearing for the budget and that the vote was 2-0-2.

The next Citizen's Petition was on travel lanes. Chairwoman Gilman read it. John Maull, who brought this Petition forward, said he brought it because he is interested in the safety of bicyclists and pedestrians. He gave a description/history of the travel lanes in the area. He said the way the lines are now encourages speeders because they are so wide and doesn't allow enough room for bikers or joggers. He said the town did it right on 111A going out to Brentwood, as there is three feet of travel lane out there. Chairwoman Gilman said the town does have a project to widen shoulders on Kingston Road going from Westside Drive to

Pickpocket. Mr. Maull said this project would be revenue neutral, as the lines need to be replaced almost every year anyways. Chairwoman Gilman said there is legislation to adopt Complete Streets. Mr. Maull said this Citizen's Petition could be a start.

iv) St. Vincent DePaul Proposal: Welfare Administration

Chairwoman Gilman said they would next discuss the proposal from St. Vincent DePaul regarding Welfare Administration. She said SVDP has proposed to take over service, as the town's Welfare Administrator retired last year.

Vice Chair Clement recused himself from the discussion, as his wife is the Vice President of the Board of Directors.

SVDP is asking for \$49,000/year to take care of the Welfare Administration for the town.

Cleo Castonguay, President of the Board of Directors for SVDP, spoke about this proposal. He said SVDP has hundreds of people in dire straits. He talked about things happening in a person's life that leaves them homeless and needing a little help. SVDP is open three days a week after 8pm. Mr. Castonguay said they have 192 agreements with agencies. He said SVDP has someone to help with Medicare/Medicaid, an oral hygienist, a doctor, a nurse, a social worker, etc. He assured the SVDP would be able to provide the citizens what they need. He said this proposal is so SVDP can help people get back on their feet. He told the Board a couple of stories of their work at SVDP.

Selectwoman Surman asked if SVDP worked closely with the town's prior Welfare Administrator. Mr. Castonguay said they talked on a daily basis and she was in their office 3-4 times a week. He said they worked together.

Chairwoman Gilman asked what the difference is between referring people to SVDP and just having SVDP as the Administrator. Mr. Castonguay said they just put on an addition at SVDP, which added four new offices. They are mostly all volunteers, and they need some professionals in there on a daily basis. SVDP costs \$4,867/week to operate. Last year they spent \$70,000 on direct assistance. He said they will fulfill the guidelines from the town and that they need someone there every day doing case management.

Selectman Chartrand said the town has relationships with other vendors, and asked what will happen to them. Mr. Castonguay said this new person would go in and collaborate so SVDP has all of the other agencies guidelines as well. He said everyone would work together.

Selectman Chartrand suggested the BOS have a work session with all the working organizations.

Vice Chair Clement spoke as a citizen, and said as a town, they are required to provide help to those in need. He said Mr. Castonguay's proposal is saying SVDP would become the town's Welfare Director under the town and state guidelines. SVDP would be a Welfare Director with a contract.

Selectwoman Surman said it is important to know this is a one-year term.

Chairwoman Gilman asked if the next action would be to have a work session.

Selectwoman Belanger said she would like to get a cost analysis of Sue Benoit's salary.

Chairwoman Gilman said they will have a work session and she would send out some dates for it.

b. Old Business

There was no Old Business.

7. Regular Business

a. Tax, Water/Sewer Abatements & Exemptions

Motion: A Motion was made by Selectwoman Belanger and seconded by Selectman Chartrand to approve abatement for map 85, lot 91 in the amount of \$2,811.95. Motion carried – all in favor.

Motion: A Motion was made by Selectwoman Belanger and seconded by Selectman Chartrand to approve a Veteran's Credit for map 70, lot 137 in the amount of \$500. Motion carried – all in favor.

Motion: A Motion was made by Selectwoman Belanger and seconded by Selectman Chartrand to approve a Veteran's Credit for map 73, lot 148 in the amount of \$500. Motion carried – all in favor.

The following two abatements and Intent to Cut came in and are recommended by the Town Manager for approval.

Motion: A Motion was made by Selectwoman Belanger and seconded by Selectman Chartrand to approve abatement for map 14, lot 76 in the amount of \$44.13, and waive the \$19.78 in accrued interest and costs. Motion carried- all in favor.

Motion: A Motion was made by Selectwoman Belanger and seconded by Selectman Chartrand to approve abatement for map 14, lot 77 in the amount of \$56.06 and waive the \$8.57 in accrued interest and costs. Motion carried- all in favor.

Motion: A Motion was made by Selectwoman Belanger and seconded by Vice Chair Clement to approve an Intent to Cut for map 49, lot 8 in the Henderson Swasey Town Forest. Motion carried – all in favor.

b. Permits & Approvals

A Motion was made by Selectman Chartrand and seconded by Selectwoman Belanger to approve the application for use of the Town Hall by Beth Dupell for the Ring in the Seasons 2016 on 12/2/16 – 12/4/16. Motion carried – all in favor.

c. Town Manager's Report

Mr. Dean spoke about the following for his Town Manager's Report:

- The Deliberative Session will be Saturday, January 30 at 9am at the High School
- The Attorney General's office has received the Water Purchase Agreement between Exeter and Stratham
- The town filed their annual report with EPA on the CSO Order and got good feedback
- Interim Chief Bill Shupe held a meet and greet at Logan's
- There is an "Economic Forecast" at the Exeter Inn on Wednesday at 8am
- There was another issue with the discharge of firearms at Rayne's Farm and the police were called. Mr. Dean reminded everyone that there are no firearms allowed at Rayne's Farm. He is thinking of putting together signage out there to that effect
- Last week he held an office meeting with tax exempt property owners and had a handful that came.

d. Selectmen's Committee Reports

Selectman Chartrand reported all BOS work.

Vice Chair Clement reported Healthy Lawns Clean Water met last week. Planning Board will meet this Thursday.

Selectwoman Belanger had no report.

Selectwoman Surman had no report.

Chairwoman Gilman reported HDC met and approved a sign for Travel & Nature.

e. Correspondence

The following correspondence were included in the packet:

- A letter from NHDES regarding Exeter Elms Campground Water System
- A letter from the NH Republican State Committee regarding a 91-A request. Mr. Dean said he did respond to this letter.
- NH Municipal Bulletin

8. Review Board Calendar

The BOS will next meet on Saturday, January 30 for the Deliberative Session.

9. Non-Public Session

A Motion was made by Selectman Chartrand and seconded by Selectwoman Belanger to move into a non-public session under 91-A:3 II a & b at 9:06pm. Motion carried –all in favor.

The Board emerged from non public session. Selectman Chartrand moved to seal the minutes. Selectman Clement seconded. Motion carried. Selectman Clement motioned to adjourn. Selectwoman Belanger seconded. The Board stood adjourned at 9:50 p.m.

Respectfully submitted,

Nicole Piper, Recording Secretary



September 17, 2015

Mr. Russell Dean
Town Manager
Town of Exeter
10 Front Street
Exeter, NH 03833

Dear Mr. Dean:

Enclosed you will find HealthTrust's updated Application and Membership Agreement ("Membership Agreement"), which will replace your group's current Application and Participation Agreement. Periodically, this agreement is revised and updated to incorporate needed changes and to improve the membership process. Enclosed is an outline of the updates and changes in the new version.

For January groups, the new Membership Agreement will be effective as of the start of the upcoming January Plan Year. The governing body of each Member must adopt the Certificate of Authorizing Resolution (Exhibit A of the Membership Agreement) prior to execution of the Membership Agreement. Adoption of the resolution and execution of the new Membership Agreement is required for membership and/or continued membership in HealthTrust and participation in its coverage lines.

Please return the signed Membership Agreement, together with the Certificate of Authorizing Resolution, as soon as possible, but no later than January 1, 2016. Until HealthTrust receives these materials, the existing Participation Agreement will remain in effect.

The new Membership Agreement no longer has addenda incorporated within the agreement for COBRA administrative services, retiree billing administrative services, or combination of Members for rating purposes. Under the new version, these items will be standalone agreements between the Member and HealthTrust. By having these services provided through separate, standalone agreements, it will make it administratively easier for any Member to add or drop these services without needing to amend the Membership Agreement.

If your group receives any of these services, also enclosed is the separate, standalone agreement for such services that will need to be executed and returned with the Membership Agreement. If your group is part of a combination of Members for rating purposes, please note that there is an additional resolution included in the Combination Agreement that your governing board must also adopt.

As background, an agreement to participate in HealthTrust, like the Membership Agreement, is required by RSA 5-B. In addition to the terms of the Membership Agreement, a Member's rights are governed by RSA 5-B and HealthTrust's Bylaws, as amended and in effect from time to time. Enclosed is a copy of the current HealthTrust Bylaws which sets out these issues in more detail.

Once we have received your signed documents, we will sign them and return a fully executed copy for your records. As always, feel free to contact your Benefits Advisor for more information or assistance with this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "David Frydman".

David Frydman
Interim Executive Director



Overview of HealthTrust's New Membership Agreement

While the entire agreement has been redrafted generally to make it clearer, what follows highlights changes/updates included in the new Membership Agreement:

- a. Updates all Members' agreements to reference HealthTrust, Inc. Many of the existing Participation Agreements still reference LGC or its LLC subsidiaries.
- b. Changes the agreement from a Participation Agreement to a Membership Agreement. The use of the term "participation" instead of "membership" is a vestige from the old organizational structure where groups were "members" of LGC but "participants" in the pools.
- c. Highlights Member's right to select/change coverages and/or services and describes how that is achieved by having an authorized representative execute the required coverage documents. (This is not new – it just highlights the issue more specifically.)
- d. Eliminates reference to the specific requirement that 75% of eligible employees must be enrolled in the group health plan(s) offered through HealthTrust, and replaces it with requiring compliance with any minimum participation requirements. This allows HealthTrust to adjust the minimum participation requirements in any coverage as needed, without amending the Membership Agreement.
- e. Highlights Member's right to vote at Annual Meeting and specifies current bylaw provision that the Member's governing body can appoint whomever they want to vote, but if they do not act, the group's top administrative official is authorized to vote.
- f. Highlights that Member's right to surplus is controlled by the Bylaws – Member acknowledges and agrees that rights to distribution of surplus are governed by the HealthTrust Bylaws, as amended from time to time. (This is not new – it just highlights the issue more specifically.)
- g. Provides that a Member's return of surplus may first be applied to cover any amounts that are unpaid and owed by the Member prior to HealthTrust's returning the balance to the Member. This new provision is intended to clarify this right.
- h. Includes Member's certification of safeguarding personal health information as needed for HIPAA purposes. Currently, this certification is in a separate certification – but it is better to be part of the Membership Agreement and has been included.
- i. Acknowledges Member's duty to comply with the Affordable Care Act (e.g. IRS filings).
- j. Continues to acknowledge Member's responsibility for COBRA and retiree coverage with references to additional services available from HealthTrust to assist Member with these obligations pursuant to separate agreements, instead of through incorporated addenda. Makes process of adding and dropping these services administratively easier for the Members and more efficient for HealthTrust.
- k. Establishes separate agreement for combination of Members for medical rating purposes, if applicable, instead of via incorporated addenda. This is administratively more efficient.
- l. Reference to HIPAA Portability Certificates eliminated as they are no longer used or required under HIPAA.
- m. Acknowledges that Member is bound by the provisions of the Membership Agreement, the HealthTrust Bylaws, Rules, any applicable Coverage Documents and policies, and any other agreements incident thereto, all as amended and in effect from time to time. This is not new. The new version makes this more explicit.

If this overview and the new Membership Agreement conflict, the new Membership Agreement controls.



HEALTHTRUST, INC.
APPLICATION AND MEMBERSHIP AGREEMENT

Town of Exeter

This Application and Membership Agreement (“Membership Agreement”) is made by and between Town of Exeter (“Applicant”) and HealthTrust, Inc., a New Hampshire voluntary corporation (“HealthTrust”), effective as of January 1, 2016 (“Effective Date”). This Membership Agreement sets forth the terms and conditions of Applicant’s membership and/or continuing membership in HealthTrust.

Preamble

HealthTrust is a pooled risk management program operating pursuant to RSA 5-B and offering its member political subdivisions the opportunity to participate in its Coverage Programs and related services including, but not limited to, group medical, dental, short-term disability, long-term disability, and life coverages.

Applicant is eligible and wishes to become or remain a Member of HealthTrust and participate in certain Coverage Programs offered by HealthTrust and therefore is entering this Membership Agreement.

Agreement

Applicant and HealthTrust hereby mutually agree as follows:

1. **Application.** Applicant applies for membership (including continuing membership if applicable) in HealthTrust for the provision of group medical and/or other benefit plans as may be selected by Applicant from time to time.
2. **Eligibility.** Applicant hereby represents and warrants to HealthTrust that Applicant is an entity eligible for membership in HealthTrust in accordance with the HealthTrust Bylaws.
3. **Contingent on Acceptance.** Applicant understands and agrees that its membership in HealthTrust is contingent on HealthTrust’s acceptance and execution of this Agreement.
4. **Governing Provisions.** Applicant shall be bound by the provisions of this Membership Agreement, the HealthTrust Articles of Incorporation, Bylaws, Rules, any applicable Coverage Documents, and any other agreements pursuant or incident thereto, all as amended and in effect from time to time (known collectively in the Bylaws as the “Operative Documents”). Applicant acknowledges receipt of the HealthTrust Bylaws.
5. **Member Rights.** As a Member, Applicant will have the rights provided in the Operative Documents including, without limitation, the right to participate in HealthTrust’s Coverage Programs and the right to vote for the HealthTrust Board of Directors at annual meetings of the Members. Applicant acknowledges that pursuant to the current HealthTrust Bylaws, the person serving as the top administrative official of Applicant, or his or her designee, shall be entitled to cast a vote on behalf of Applicant at any meetings of the Members of HealthTrust unless and until

Applicant's Governing Board appoints, by resolution, a different representative to cast such a vote prior to the meeting(s) to which the designation relates.

6. **Selection of Coverage Programs and Services.** Subject to the terms and conditions of the Operative Documents, Applicant may select and periodically change the Coverage Programs and related services in which Applicant participates without amending this Membership Agreement. Applicant's participation (or continuing participation) in any of the Coverage Programs and/or related services is subject to:

- (a) The proper and timely completion and execution by an authorized representative of Applicant of the documents, agreements, and forms for such participation as required by HealthTrust, and
- (b) The policies, procedures, guidelines and Operative Documents that apply to any selected coverages including, without limitation, any applicable minimum participation requirements for such Coverage Program.

7. **Contributions.** Applicant agrees to pay in a timely manner all Contributions required to participate in HealthTrust and/or the applicable Coverage Programs pursuant to the terms of the Operative Documents.

8. **Surplus.** Applicant hereby acknowledges and agrees that any distribution of surplus, or a Member's rights thereto, shall be governed by the applicable terms of the HealthTrust Bylaws and/or other Operative Documents, as they may be amended from time to time. Applicant further agrees that HealthTrust may first apply any surplus due to Applicant to pay any unpaid and overdue Contributions or other amounts owed by Applicant to HealthTrust prior to returning the balance remaining of such surplus to Applicant.

9. **Health Plan Coverage Program Responsibilities.**

- (a) Applicant acknowledges that, with respect to the group health (medical and/or dental) plan(s) offered to its Employees through HealthTrust, Applicant is responsible for complying with all applicable provisions of federal and state law governing such health plan(s) including, without limitation: (i) the continuation of coverage provisions set forth in Sections 2201 through 2208 of the Public Health Service Act ("COBRA"), (ii) the retiree medical coverage provisions set forth in New Hampshire RSA 100-A:50, and (iii) the Patient Protection and Affordable Care Act of 2010, as amended and implemented ("ACA").
- (b) To assist Applicant in satisfying certain of its COBRA coverage obligations, HealthTrust provides base COBRA services on behalf of Applicant pursuant to a separate COBRA administrative services agreement which Applicant must sign as a condition of participating in HealthTrust's medical and/or dental Coverage Programs. In addition, Applicant may elect to receive additional COBRA billing services offered by HealthTrust pursuant to the separate COBRA administrative services agreement.
- (c) To assist Applicant in satisfying certain of its retiree coverage obligations, HealthTrust may offer to provide and Applicant may elect and contract with HealthTrust to receive retiree billing services on behalf of Applicant pursuant to a separate retiree billing administrative services agreement.

10. **Provision of Information.** Applicant agrees to provide HealthTrust in a timely and accurate manner any and all information HealthTrust deems necessary or desirable with regard to HealthTrust's provision of the Coverage Programs and related services selected by Applicant, including but not limited to, all required eligibility and enrollment data.

11. **Safeguarding Personal Information.** HealthTrust may provide Applicant certain non-claims related information, including enrollment, billing, and payment information relevant to the administration of the medical and dental Coverage Programs in which Applicant participates. Some of this information may constitute protected health information, as defined by the Health Insurance Portability and Accountability Act of 1996, as amended and implemented. Examples of information HealthTrust may disclose to Members include: monthly invoices detailing coverage types and cost, payment and enrollment confirmation, and information necessary to assist Applicant in completing its IRS reporting required by the ACA. HealthTrust, at its discretion, also may provide Applicant with non-individually identifiable summary claims information in a manner consistent with state and federal law and applicable HealthTrust policies and procedures.

Applicant hereby certifies that with respect to any protected health information received from HealthTrust, Applicant will:

- (a) Safeguard the privacy and security of the information,
- (b) Not use or disclose the information beyond that which is necessary to administer the selected coverage(s),
- (c) Not use the information for employment-related actions or decisions, and
- (d) Restrict access to the information to only those individuals who require the information to administer the coverage(s).

Applicant also acknowledges and agrees that:

- (e) HealthTrust will only provide such information to those individuals specifically identified in HealthTrust's database as authorized to receive such information on behalf of Applicant,
- (f) HealthTrust does not share individually identifiable claims information unless authorized in writing by the covered person or otherwise permitted by applicable laws, and
- (g) HealthTrust reserves the right to decide what, if any, information is provided to Applicant.

12. **Term and Termination.** The term of Applicant's membership (or continuing membership) in HealthTrust under this Membership Agreement begins on the Effective Date. Applicant's participation in specific Coverage Program(s) shall begin on the effective dates for such coverage as indicated in the Coverage Documents executed by Applicant in order to participate in such coverage. Membership in HealthTrust and participation in any Coverage Program shall continue until such coverage is terminated or cancelled in accordance with the terms of the HealthTrust Bylaws, Coverage Documents and/or other Operative Documents.

13. Miscellaneous Provisions.

- (a) This Membership Agreement is governed by New Hampshire law and may only be modified by a written amendment signed by all applicable parties.
- (b) All capitalized terms utilized but not defined herein shall have the same meaning as set forth in the HealthTrust Bylaws.
- (c) Section headings contained in this Membership Agreement are solely for the purpose of reference, are not part of the agreement of the parties and shall not in any way affect the meaning or interpretation of this Membership Agreement.

14. Certificate of Authorizing Resolution. This Membership Agreement shall be accompanied by a certificate of authorizing resolution (or a copy of the resolution) of the Governing Body of Applicant in substantially the same form and content as contained in the attached Exhibit A that indicates Applicant has duly authorized its membership in HealthTrust in accordance with RSA 5-B and the execution and delivery of this Membership Agreement by the individual signing, which authorization is legally binding and remains in full force and effect as of the date hereof.

IN WITNESS WHEREOF, Applicant and HealthTrust have caused this Membership Agreement to be executed by their duly authorized officials:

For APPLICANT:

TOWN OF EXETER

Authorized Official Signature

Print Name

Title

Date

For HEALTHTRUST, INC.:

David Frydman
Interim Executive Director

Date

EXHIBIT A

CERTIFICATE OF AUTHORIZING RESOLUTION

I hereby certify to *HealthTrust, Inc.* ("HealthTrust"), that the following is a true copy of a resolution adopted by the Governing Body of Town of Exeter at a meeting duly held on _____ [Date].

RESOLVED: That Town of Exeter shall participate as a Member in the HealthTrust pooled risk management program for the provision of group medical and/or other benefit plans in accordance with the "Application and Membership Agreement" and NH RSA 5-B.

RESOLVED: That _____ [Name/Title] is hereby authorized and directed to execute and deliver to HealthTrust, on behalf of Town of Exeter, the "Application and Membership Agreement" in substantially the form presented to this meeting.

I further certify that the foregoing resolution remains in full force and effect without modification.

APPLICANT: TOWN OF EXETER

Date: _____

By: _____
Duly Authorized

Name: _____

Title: _____

HEALTHTRUST, INC.
RETIREE BILLING ADMINISTRATIVE SERVICES AGREEMENT

Town of Exeter

This Retiree Billing Administrative Services Agreement ("Retiree Billing Agreement") is made by and between Town of Exeter ("Member") and HealthTrust, Inc., ("HealthTrust") effective as of January 1, 2016 ("Effective Date").

Preamble

HealthTrust is a pooled risk management program operating pursuant to RSA 5-B and offering its member political subdivisions the opportunity to participate in its Coverage Programs and related services. HealthTrust and Member are parties to a separate Application and Membership Agreement ("Membership Agreement"). Member is participating in HealthTrust's group medical and/or dental Coverage Program(s) and will receive (or continue to receive) certain retiree billing administrative services offered by HealthTrust to its members in accordance with this Retiree Billing Agreement.

Agreement

Subject to the terms and conditions specified herein and in the Membership Agreement between the parties, the Member and HealthTrust hereby agree that HealthTrust shall provide (or continue to provide) retiree billing services described in Section 1 below ("Retiree Billing Services") on behalf of the Member with respect to all Retirees of the Member who are covered through HealthTrust's medical and dental Coverage Programs.

As used herein, "Retiree" means a person who is retired from active employment with the Member and who the Member has determined is eligible to continue medical and/or dental plan coverage with the Member pursuant to NH RSA 100-A:50 and/or the applicable rules of the Member and HealthTrust governing eligibility for Retiree coverage.

1. Retiree Billing Services.

HealthTrust shall provide the following Retiree Billing Services:

- a. Direct billing of the Member's covered Retirees on a monthly basis of the applicable contribution amounts due from the Retirees for their coverage through HealthTrust.
- b. Billing of the Member on a monthly basis of any contribution amounts due from the Member for coverage of its Retirees, including any contribution amounts due in excess of amounts received from the Retirees and the New Hampshire Retirement System ("NHRS").
- c. Collection of contribution amounts billed and due from Retirees and/or the Member.

- d. Collection and processing of NHRS subsidy and annuity deduction amounts for subsidy-eligible Retirees and Retirees who have elected payment of contributions by annuity deduction.
- e. Provision of monthly reports to the Member listing each Retiree who has been billed by HealthTrust, along with their medical and/or dental plan(s) and coverage type. A listing of the applicable coverage contribution amounts for the Member, the Retiree and NHRS also will be provided for each billing period.
- f. Notification of retirees of annual open enrollment.
- g. Notification of the Member regarding a Retiree's failure to pay billed contribution amounts prior to cancellation of the Retiree's coverage for nonpayment.
- h. Termination of Retiree coverage, pursuant to HealthTrust's rules and policies, as amended from time to time, for any of Member's Retirees due to non-payment of the applicable contributions due from such Retiree.

The Member understands and agrees that the Retiree Billing Services shall be performed by HealthTrust for all of the Member's Retirees who are covered through HealthTrust's medical and dental Coverage Programs.

Member understands and agrees that initial commencement of Retiree Billing Services requires at least 60 days advance notice to HealthTrust and the provision of all necessary information for commencement of such services.

No additional charge for Retiree Billing Services. There will be no additional charge to the Member or its Retirees for the Retiree Billing Services provided by HealthTrust under this Retiree Billing Agreement.

2. Member Responsibilities. As a condition of HealthTrust performing the Retiree Billing Services specified in Section 1 above, the Member agrees to perform the following responsibilities:

- a. Identification and enrollment of eligible Retirees who elect coverage through HealthTrust, and ongoing maintenance of such Retirees' enrollment changes until cancellation/termination of each Retiree's coverage.
- b. Upon first electing to receive Retiree Billing Services and whenever contribution rate changes occur, the Member shall complete and provide to HealthTrust a Retiree Contribution Allocation Table in the form provided by HealthTrust to the Member for such purpose or by another mutually agreed upon format, and otherwise assist with the transition of such Retiree Billing Services to HealthTrust.

- c. Pay the Member's portion of coverage contribution amounts on a monthly basis exactly as billed by HealthTrust. Any pending adjustments at the time of payment will be reflected on future bills.
- d. **Retain ultimate responsibility for payment to HealthTrust of coverage contribution amounts due from the Member's Retirees to the extent not otherwise paid by the Retirees or NHRS including, without limitation:**
 - i. **Reimbursement of HealthTrust for any amounts due from the Member's Retirees for their coverage through HealthTrust that remains unpaid and overdue. Member shall pay HealthTrust for such Retiree non-payment within 30 days of HealthTrust invoicing Member for the applicable amount(s) due and shall have sole responsibility for collecting any such amount(s) due from the Retiree.**
 - ii. **Reimbursement of HealthTrust for any amounts of subsidy and annuity deductions paid by NHRS toward Member's Retirees' coverage contributions that are subsequently retroactively recovered directly from HealthTrust by NHRS and not repaid in a timely manner by the Retiree(s). Member shall pay HealthTrust for any such NHRS retroactive recoveries that remain unpaid within 30 days of HealthTrust invoicing Member for the applicable amount(s) due and shall have sole responsibility for collecting any such amount(s) due from the Retiree. Member's responsibility to reimburse HealthTrust for any retroactive recovery by NHRS of subsidy or annuity paid on behalf of Member's Retirees shall continue even after Member no longer receives Retiree Billing Services, participates in HealthTrust's group medical and/or dental Coverage Program(s) or is a Member of HealthTrust.**
- e. Perform all applicable Retiree coverage obligations of the Member in accordance with NH RSA 100-A:50 and/or the Rules of HealthTrust and the Member governing coverage for Retirees other than the Retiree Billing Services provided by HealthTrust hereunder.
- f. Upon Member (or a subunit of Member) ceasing to participate in the medical and/or dental Coverage Programs offered through HealthTrust, to carry out the transition of Member's (or subunit's) covered Retirees out of their coverage through HealthTrust.
- g. Provide HealthTrust in a timely manner with any and all other information HealthTrust reasonably deems necessary or desirable with regard to HealthTrust's performance of Retiree Billing Services on behalf of the Member. HealthTrust reserves the right to request additional information from the Member at any time in order to satisfy HealthTrust's Retiree Billing Services obligations.

HealthTrust shall be entitled to rely on any information provided by the Member pursuant hereto as accurate, valid and complete, and shall not be responsible for errors, delays or additional costs resulting from the receipt of inaccurate, invalid, incomplete or untimely information.

3. Amendments to Services and Responsibilities. Member acknowledges that the Retiree Billing Services and related responsibilities herein are intended to assist the Member in satisfying its obligations under NH RSA 100-A:50. HealthTrust agrees to perform its Retiree Billing Services in accordance with a reasonable good faith interpretation of NH RSA 100-A:50 and HealthTrust's Rules governing coverage of Retirees. HealthTrust reserves the right to amend its Rules and procedures governing Retiree coverage and the services and responsibilities provided herein as it deems necessary or appropriate without amending this Retiree Agreement. HealthTrust will notify the Member of any changes in Retiree Billing Services that will materially affect the Member's responsibilities hereunder.

4. Other Terms and Conditions. HealthTrust and the Member further acknowledge and agree that:

- a. Retiree Billing Services will be performed by HealthTrust only with respect to Retirees of the Member who are covered under the medical and/or dental Coverage Programs offered by the Member through HealthTrust. In no event shall HealthTrust be responsible for providing any Retiree Billing Services with respect to Retirees of the Member who are covered under a medical or dental plan coverage option offered by the Member through another insurer or provider.
- b. Retirees who have their coverage cancelled for nonpayment of required contribution amounts may not be eligible for reinstatement to the Member's retiree coverage plan(s) through HealthTrust.
- c. The performance of Retiree Billing Services by HealthTrust on behalf of the Member does not and is not intended to make HealthTrust the plan sponsor, plan administrator or other fiduciary of the Member's group health plans for Retiree coverage obligations under any applicable law or regulation, and the Member will not identify or refer to HealthTrust as such.
- d. HealthTrust shall not have any obligation or liability under this Retiree Billing Agreement with respect to any Retiree Billing Services before the Effective Date or the Effective Date of the Application and Membership Agreement, or with respect to any Retiree coverage compliance obligations of the Member other than HealthTrust's Retiree Billing Service obligations under Section 1.
- e. All confidential information disclosed by the parties pursuant to this Retiree Billing Agreement will remain the exclusive and confidential property of the disclosing party. The receiving party will not disclose the confidential information of the disclosing party and will use at least the same degree of care in protecting the confidential information of the other party as it uses with respect to its own confidential information. The receiving party will limit access to confidential information to its employees and advisors with a need to know and will instruct such employees and advisors to keep such information confidential. Notwithstanding the foregoing, the receiving party may disclose confidential information to the extent

necessary to comply with any law, ruling, regulation or rule applicable to it or to the extent necessary to enforce its rights hereunder. HealthTrust also may disclose confidential information of the Member to the extent that disclosure of such information is required to perform its Retiree Billing Services obligations.

For purposes of this subsection (e), “confidential information” shall mean all information of a confidential or proprietary nature provided by the disclosing party to the receiving party for use in connection with the service obligations and responsibilities set forth in this Retiree Billing Agreement, but does not include (i) information that is already known by the receiving party without obligation of confidentiality; (ii) information that becomes generally available to the public other than as the result of disclosure by the receiving party in violation of this Retiree Billing Agreement; and (iii) information that becomes known to the receiving party from a source other than the disclosing party on a non-confidential basis.

- f. All capitalized terms utilized but not defined herein shall have the same meaning as set forth in the HealthTrust Bylaws.

5. Term and Termination.

- a. The term of this Retiree Billing Agreement shall commence on the Effective Date, and shall continue during the Member’s participation in HealthTrust’s medical and/or dental Coverage Program or until earlier terminated by either party with 30 days prior written notice to the other party.
- b. Notwithstanding anything contained herein, if the Member defaults in the performance of any of its responsibilities as set forth herein, HealthTrust may, upon written notice to the Member, terminate this Retiree Billing Agreement.
- c. Notwithstanding any other provision of this Retiree Billing Agreement or the Application and Membership Agreement, HealthTrust’s agreement and obligation to provide Retiree Billing Services on behalf of the Member as set forth herein shall automatically cease upon termination of the Member’s (or subunit’s) participation in HealthTrust’s medical and/or dental Coverage Programs, and HealthTrust shall not provide and shall not be obligated to provide any further services to the terminating Member (or subunit) pursuant hereto other than transition of Retiree billing administration to the Member or a successor administrator.
- d. Member’s contribution obligations pursuant to Sections 2 (c) and (d) shall survive termination of this Retiree Billing Agreement.

IN WITNESS WHEREOF, the Member and HealthTrust have caused this Retiree Billing Agreement to be executed by their duly authorized officials.

For the MEMBER:

TOWN OF EXETER

Duly Authorized

Print Name

Title

Date

For HEALTHTRUST, INC.:

David Frydman
Interim Executive Director

Date

HEALTHTRUST, INC.
COBRA ADMINISTRATIVE SERVICES AGREEMENT

Town of Exeter

This COBRA Administrative Services Agreement (“COBRA Agreement”) is made by and between Town of Exeter ("Member") and HealthTrust, Inc. (“HealthTrust”) effective as of January 1, 2016 (“Effective Date”).

Preamble

HealthTrust is a pooled risk management program operating pursuant to RSA 5-B and offering its member political subdivisions the opportunity to participate in its Coverage Programs and related services. HealthTrust and Member are parties to a separate Application and Membership Agreement (“Membership Agreement”). Member is participating in HealthTrust’s group medical and/or dental Coverage Program(s) and will receive (or continue to receive) certain COBRA administrative services offered by HealthTrust to its members in accordance with this COBRA Agreement.

Agreement

Subject to the terms and conditions specified herein and in the Membership Agreement between the parties, the Member and HealthTrust hereby agree that HealthTrust shall provide (or continue to provide) on behalf of the Member the base COBRA administrative services described below in Section 1 and, if elected, Section 2, with respect to all Employees of the Member who are covered under the medical and dental Coverage Programs offered by the Member through HealthTrust:

1. Base COBRA Administrative Services. HealthTrust shall provide the following base COBRA administrative services (“Base COBRA Services”):

- a. Delivery of an initial notice of COBRA continuation coverage rights to each employee (and spouse thereof) of the Member who become covered under the Member’s medical and/or dental plan(s) offered through HealthTrust upon their enrollment by the Member.
- b. Upon notification of HealthTrust by the Member of a COBRA qualifying event, HealthTrust shall provide each qualified beneficiary eligible for COBRA coverage with timely notice of his/her right to elect COBRA continuation coverage and the terms, conditions and election procedures for COBRA coverage.
- c. Provision of information, forms and support to the Member’s Benefits Administrator regarding administration of COBRA continuation coverage, including applicable notice, eligibility, enrollment and payment rules.
- d. Upon expiration of the maximum COBRA continuation period or notification of HealthTrust by the Member of a COBRA cancellation, HealthTrust shall notify the

affected COBRA beneficiary of (i) the termination of his/her COBRA continuation coverage due either to the expiration of the maximum COBRA continuation period or to an event causing early termination of COBRA coverage, and (ii) any rights of the COBRA beneficiary to convert to an individual health benefits plan coverage.

No Additional Charge for Base COBRA Services. There will be no additional charge to the Member or its COBRA beneficiaries for the Base COBRA Services provided by HealthTrust under this Section 1.

2. COBRA Billing Services. HealthTrust makes available to its Members on an elective basis the additional COBRA administrative services listed below related to direct billing of and collection of payment from COBRA beneficiaries (“COBRA Billing Services”).

If elected, in addition to the Base COBRA Services, HealthTrust shall provide the following additional COBRA Billing Services:

- a. Direct billing of the Member’s COBRA beneficiaries on a monthly basis of the applicable amounts due for their COBRA continuation coverage.
- b. Collection of amounts billed and due from COBRA beneficiaries in accordance with applicable COBRA rules.
- c. Direct enrollment of eligible qualified beneficiaries who elect COBRA continuation coverage, and ongoing maintenance of such beneficiary’s enrollment and membership changes until cancellation/termination of COBRA coverage.
- d. Provision of monthly reports to the Member listing COBRA beneficiaries who have been billed by HealthTrust, along with their medical and/or dental plan(s), coverage type and COBRA contribution amounts.
- e. Notification of COBRA beneficiaries at annual open enrollment of contribution rate change information.
- f. Termination of COBRA beneficiaries for nonpayment and notice of such termination to Member.

The Member understands and agrees that if COBRA Billing Services are elected, the billing services shall be performed by HealthTrust for all of the Member’s COBRA beneficiaries who are covered through HealthTrust.

Charges for COBRA Billing Services. The Member understands and agrees that HealthTrust will bill the COBRA beneficiary directly for his or her COBRA continuation coverage as follows:

- The applicable monthly contribution amount due for the COBRA continuation coverage selected by the COBRA beneficiary, and

- An administrative fee computed as 2% of the applicable monthly contribution amount as allowed by federal law.

The Member agrees that HealthTrust will retain the 2% administrative fee as its compensation for the COBRA Billing Services rendered by HealthTrust. There will be no other separate charge to the Member or its COBRA beneficiaries for the additional COBRA Billing Services provided by HealthTrust under this Section 2.

Member understands and agrees that initial commencement of COBRA Billing Services requires at least 60 days advance notice to HealthTrust and the provision of all necessary information for commencement of such services.

3. Member Responsibilities. As a condition of HealthTrust performing the Base COBRA Services and COBRA Billing Services (if elected) specified in Sections 1 and 2 above, the Member agrees to perform the following responsibilities:

- a. Make available to COBRA beneficiaries the same medical and dental plan coverage options through HealthTrust as are available to eligible active Employees of the Member.
- b. Upon the Member's initial participation in HealthTrust's health benefit programs, provide information to HealthTrust on the Member's then existing COBRA beneficiaries.
- c. Notify HealthTrust in a timely manner when Employees experience a COBRA qualifying event and provide HealthTrust with necessary forms and information in accordance with applicable COBRA administrative policies and procedures established by HealthTrust.
- d. Perform all COBRA compliance and administrative obligations of the Member with respect to its Employees other than those COBRA services provided by HealthTrust hereunder.
- e. Upon Member (or a subunit of Member) ceasing to participate in the medical and/or dental Coverage Programs offered through HealthTrust, to carry out the transition of Member's (or subunit's) COBRA beneficiaries and covered Employees out of their coverage through HealthTrust.
- f. Provide HealthTrust with at least 60 days advanced written notice of the Member's decision to elect to receive the COBRA Billing Services made available by HealthTrust and, in such event, assist with the transition of such COBRA Billing Services to HealthTrust.
- g. Provide HealthTrust in a timely manner with any and all other information HealthTrust reasonably deems necessary or desirable with regard to HealthTrust's performance of the Base COBRA Services and COBRA Billing Services (if elected) on behalf of the Member.

HealthTrust shall be entitled to rely on any information provided by the Member pursuant hereto as accurate, valid and complete, and shall not be responsible for errors, delays or additional costs resulting from the receipt of inaccurate, invalid, incomplete or untimely information.

HealthTrust reserves the right to request additional information from the Member at any time in order to satisfy HealthTrust's COBRA administrative service obligations. The Member agrees to provide any requested information to HealthTrust in a timely manner.

4. Amendments to Services and Responsibilities. HealthTrust and the Member acknowledge and agree that the COBRA services and responsibilities herein are intended to assist the Member in satisfying its obligations under federal COBRA law. HealthTrust agrees to perform its COBRA administrative services in accordance with a reasonable good faith interpretation of the applicable requirements of COBRA. HealthTrust reserves the right to amend its COBRA administrative procedures and policies and the services and responsibilities provided herein as it deems necessary or appropriate without amending this COBRA Agreement. HealthTrust will notify the Member of any changes that will materially affect either HealthTrust services or the Member's responsibilities.

5. Other Terms and Conditions. HealthTrust and the Member further acknowledge and agree that:

- a. The COBRA administrative services performed by HealthTrust hereunder will be performed only with respect to Employees of the Member who are covered under the medical and/or dental Coverage Programs offered by the Member through HealthTrust. In no event shall HealthTrust be responsible for providing any COBRA administrative services with respect to Employees of the Member who are covered under a medical or dental plan coverage option offered by the Member through another insurer or provider.
- b. The performance of COBRA administrative services by HealthTrust on behalf of the Member does not and is not intended to make HealthTrust the plan sponsor, plan administrator or other fiduciary of the Member's group health benefit plans for COBRA purposes under any applicable law or regulation, and the Member will not identify or refer to HealthTrust as such.
- c. HealthTrust shall not have any obligation or liability with respect to any COBRA administrative services described herein before the effective date of the Application and Membership Agreement or this COBRA Agreement, or with respect to any COBRA compliance obligations of the Member other than HealthTrust's administrative service obligations hereunder.
- d. All confidential information disclosed by the parties pursuant to this Agreement will remain the exclusive and confidential property of the disclosing party. The receiving party will not disclose the confidential information of the disclosing party and will use at least the same degree of care in protecting the confidential information of the other party as it uses with respect to its own confidential information. The receiving party will limit access to confidential information to its employees and advisors with

a need to know and will instruct such employees and advisors to keep such information confidential. Notwithstanding the foregoing, the receiving party may disclose confidential information to the extent necessary to comply with any law, ruling, regulation or rule applicable to it or to the extent necessary to enforce its rights hereunder. HealthTrust also may disclose confidential information of the Member to the extent that disclosure of such information is required to perform its COBRA administrative service obligations hereunder.

For purposes of this subsection (d), “confidential information” shall mean all information of a confidential or proprietary nature provided by the disclosing party to the receiving party for use in connection with the service obligations and responsibilities hereunder, but does not include (i) information that is already known by the receiving party without obligation of confidentiality; (ii) information that becomes generally available to the public other than as result of disclosure by the receiving party in violation of this Agreement; and (iii) information that becomes known to the receiving party from a source other than the disclosing party on a non-confidential basis.

- e. All capitalized terms utilized but not defined herein shall have the same meaning as set forth in the HealthTrust Bylaws.

6. Term and Termination.

- a. The term of this COBRA Agreement shall commence on the Effective Date, and shall continue during the Member’s participation in HealthTrust’s medical and/or dental Coverage Program or until earlier terminated by either party with 60 days prior written notice to the other party.
- b. Notwithstanding anything contained herein, if the Member defaults in the performance of any of its responsibilities hereunder, HealthTrust may, upon written notice to the Member, terminate this COBRA Agreement.
- c. Notwithstanding any other provision of the Membership Agreement or this COBRA Agreement, HealthTrust’s agreement and obligation to provide COBRA administrative services as set forth herein shall automatically cease upon termination of the Member’s (or subunit’s) participation in HealthTrust’s medical and/or dental Coverage Programs, and HealthTrust shall not provide and shall not be obligated to provide any further services with respect to the COBRA beneficiaries and covered Employees of the terminating Member (or subunit) pursuant hereto other than transition of COBRA administration to the Member or a successor COBRA administrator.

7. **Election of COBRA Billing Services (Section 2)** [check one of the two boxes below]:

- The Member hereby elects to receive the COBRA Billing Services described in Section 2 of this COBRA Agreement. The Member understands and agrees that HealthTrust will be charging COBRA beneficiaries an administrative fee of 2% of the applicable monthly contribution amount as allowed by federal law.

Only for Members initially electing COBRA Billing Services: If the Member has existing COBRA beneficiaries who are covered (or to be covered) through HealthTrust, the Member (**please initial below**):

____ **does**

____ **does not intend**

to transfer billing responsibilities for those beneficiaries to HealthTrust as of the effective date of HealthTrust's COBRA Billing Services. This paragraph is not applicable to Members renewing ongoing COBRA Billing Services.

- The Member elects not to receive COBRA Billing Services described in Section 2, at this time.

IN WITNESS WHEREOF, the Member and HealthTrust have caused this COBRA Agreement to be executed by their duly authorized officials.

For the MEMBER:

TOWN OF EXETER

Duly Authorized

Print Name

Title

Date

For HEALTHTRUST, INC.:

David Frydman
Interim Executive Director

Date

**HEALTHTRUST, INC.
AGREEMENT REGARDING COMBINATION OF MEMBERS
FOR RATING PURPOSES**

Exeter Housing Authority

Town of Exeter

This Agreement Regarding Combination of Members for Rating Purposes (“Combination Agreement”) is made by and between Exeter Housing Authority and Town of Exeter (“Combined Members”) and HealthTrust, Inc. (“HealthTrust”). This Combination Agreement is effective as of January 1, 2016 (“Effective Date”).

Preamble

HealthTrust is a pooled risk management program operating pursuant to RSA 5-B and offering its member political subdivisions the opportunity to participate in its Coverage Programs and related services. HealthTrust and each of the Combined Members are parties to separate Application and Membership Agreements (“Membership Agreement(s)").

Each entity comprising the Combined Members is a Member in HealthTrust and participating in the group medical Coverage Program. The Combined Members have requested that HealthTrust combine their Employees into a single group and utilize such Combined Members’ claims experience, Employee enrollment data and other relevant data for medical plan rating purposes. HealthTrust desires to fulfill the request of the Combined Members through this Combination Agreement.

Agreement

Now, therefore, in consideration of the mutual covenants contained herein and other consideration, HealthTrust and the Combined Members agree as follows:

1. **Rating Procedure.**

1.1 **Combined Rating of Members.** Upon initial implementation of the combined rating under this Combination Agreement, HealthTrust will combine the claims experience, enrollment data and other relevant data of the Employees of the Combined Members and will utilize its then standard rating formula and procedures in connection with the offering of the medical Coverage Program of HealthTrust to the Combined Members and their Employees, to produce rates for the Combined Members.

1.2 **Separate Members.** For all other purposes, each entity comprising the Combined Members shall be a separate Member in HealthTrust, as that term is defined in the Bylaws of HealthTrust (the “Bylaws”).

1.3 **Pool Year.** For the purposes of this Agreement a "Pool Year" shall mean the twelve

(12) consecutive months commencing on January 1 or July 1 of a calendar year.

2. Commencement of Combined Rating.

2.1 Effective Date of Combined Rating. The rates to be delivered by HealthTrust pursuant to this Combination Agreement shall commence as of the Pool Year beginning on the Effective Date and shall be renewed in accordance with HealthTrust procedures as of the beginning of each successive Pool Year thereafter for and during which the Combination Agreement is effective.

2.2 Conditions Precedent to Effectiveness of Agreement. Notwithstanding the foregoing Section 2.1, this Combination Agreement shall become effective only if the following items have been delivered to HealthTrust within the stated time periods:

- a. No later than one hundred and twenty (120) days prior to the Effective Date of this Combination Agreement, the Combined Members shall have delivered to HealthTrust a written request to enter into the combined rating arrangement provided for in this Combination Agreement.
- b. Prior to the Effective Date, the Combined Members shall have delivered to HealthTrust evidence of the approval of this Combination Agreement in accordance with its terms by the governing bodies of each of the Members comprising the Combined Members, substantially in the form of attached Addendum A. Each of the Combined Members also must have signed and delivered an Application and Membership Agreement which has been accepted by HealthTrust as evidenced by HealthTrust's execution thereof.

For the purposes of this Section 2 and this Combination Agreement, governing bodies shall have the same meaning as set forth in NH RSA 21:48. The approval of the governing bodies referred to and required by this Section shall be in writing and shall be in form and content satisfactory to HealthTrust. It is agreed that a certificate of resolution of the appropriate officer of each respective governing body shall be an acceptable form to HealthTrust for the purposes of this Section and this Combination Agreement.

3. Term.

3.1 Minimum Term of Combination. The Combined Members agree that as long as the Combined Members continue participation in HealthTrust's medical Coverage Program, they must remain so combined pursuant to this Combination Agreement for a minimum of two full, consecutive Pool Years (the "Minimum Term of Combination"). Thereafter, the Combined Members may continue this Combination Agreement or one or more of the Combined Members may terminate participation in the combined rating pursuant to Section 3.2.

If one or more of the Combined Members terminate participation in the combination before the end of the Minimum Term of Combination, such Member(s) shall be prohibited from participating in any Combination Agreement for the next two (2) full, consecutive Pool Years following the year of their termination.

- 3.2 **Termination.** The Combined Members agree that in addition to the Minimum Term of Combination they shall continue their participation in HealthTrust as a combination until at least the end of each Pool Year with respect to which the Combined Members accept renewal rates in accordance with HealthTrust procedures. A Combined Member that no longer intends to be part of the combination must provide HealthTrust with written notice of such termination at least twelve (12) months prior to the first day of the Pool Year for which the termination is to be effective.

If, upon the effective date of the termination of such combination by any Member or number of Members, there remains two (2) or more Members that comprise the Combined Members that have not delivered notices of termination to HealthTrust, then such non-terminating Members shall continue as new Combined Members under this Combination Agreement as if such continuing Combined Members were the only Members that are parties hereto.

Upon termination of a combination under this Combination Agreement, the terminating Combined Member(s) may continue their participation in HealthTrust but shall be rated in accordance with the then applicable procedures of HealthTrust.

4. **Representations and Warranties.** Each entity comprising the Combined Members represents and warrants to HealthTrust that each, respectively, and in combination, have the authority to enter, execute, deliver and perform this Combination Agreement.
5. **Not an Agreement for Coverage.** HealthTrust and the Combined Members acknowledge that this Combination Agreement is not and shall not be construed to be an agreement for continued participation in HealthTrust with regard to the provision of group health benefits except as otherwise provided herein or in any other written agreement between HealthTrust and a Combined Member that is duly authorized and in full force and effect.
6. **Application and Membership Agreement Required.** If there is not at the commencement of this Combination Agreement in existence an executed Application and Membership Agreement between HealthTrust and each of the Combined Members, respectively, such Application and Membership Agreement(s) shall be executed and delivered contemporaneously with delivery of this Combination Agreement to HealthTrust. A fully executed Application and Membership Agreement between HealthTrust and each of the Combined Members, respectively, is a condition precedent to the effectiveness of this Combination Agreement.
7. **Other Requirements for Participation.** Notwithstanding any other provision of this

Combination Agreement, the Combined Members shall be required to meet all of the requirements of HealthTrust for membership and continued membership in HealthTrust and participation and continued participation in the medical Coverage Program that are not directly in contravention of the contents of this Combination Agreement, including, without limitation, those requirements and conditions contained in the Bylaws and Operative Documents of HealthTrust, as they may be amended from time to time.

8. Defined Terms. Unless otherwise specifically indicated in this Combination Agreement, all capitalized terms utilized herein shall have the same meaning as set forth in the Bylaws.
9. Counterparts. This Combination Agreement may be executed in two (2) or more counterparts, each of which will be deemed an original and all collectively but one and the same agreement.

EXECUTED and AGREED TO by the duly-authorized representatives of the parties.

HEALTHTRUST, INC.

EXETER HOUSING AUTHORITY

By: _____

By: _____

Name: David Frydman

Name: _____

Title: Interim Executive Director,
duly authorized

Title: _____, duly authorized

Date: _____

Date: _____

TOWN OF EXETER

By: _____

Name: _____

Title: _____, duly authorized

Date: _____

ADDENDUM A

HEALTHTRUST, INC.

COMBINATION OF MEMBERS FOR RATING PURPOSES

CERTIFICATE OF AUTHORIZING RESOLUTION

I hereby certify to HealthTrust, Inc. ("HealthTrust") that the following is a true copy of a resolution adopted by the governing body of Town of Exeter at a meeting duly held on _____ [Date].

RESOLVED: That Town of Exeter shall participate in the combined rating arrangement for medical coverage offered by HealthTrust to Exeter Housing Authority and Town of Exeter. Further, that the "Agreement Regarding Combination of Members for Rating Purposes" between Town of Exeter, HealthTrust, and the other combining HealthTrust Member(s) (the "Combination Agreement") is hereby approved in the form presented to this meeting and that _____ [Name/Title] is/are hereby authorized and directed to execute and deliver to HealthTrust (i) an acknowledgement of the terms and (ii) a certificate of this resolution.

I further certify that the foregoing resolution remains in full force and effect without modification.

DATE

Authorized Official Signature

NAME: _____

TITLE: _____, duly authorized.

List for Selectmen's meeting February 8,2016

Abatements

Map/Lot	Location	Refund
68/6/611	6 Sterling Hill Lane 611	Denial
47/4/4	8 Continental Dt U-C	251.02
64/34	336 Water Street	326.91
63/268	20 Cass Street	186.44

Veteran's Credit

Map/Lot	Location	Credit Amount
21/31	19 Captains Way	500.00
11/18/1	19 Wood Ridge Lane	500.00
104/79/124	124 Exeter River Landing	500.00

Elderly Exemption

Map/Lot	Location	Exemption Amount
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Intent to Cut

Map/Lot	Location
46/1&3	Continental Drive



TOWN OF EXETER, NEW HAMPSHIRE

10 FRONT STREET • EXETER, NH • 03833-3792 • (603) 778-0591 • FAX 772-4709

www.exeternh.gov

February 3, 2016

Board of Selectmen
10 Front Street
Exeter, NH 03833

Re: Property Location: 120 Portsmouth Avenue
Map-Lot: 52-53

Dear Selectmen:

Please see the attached letter from Sean Murphy, Partner of Exeter Lumber. He is requesting a \$361.18 one-time pardon of interest paid on the 2015 TAX02 bill.

The 2015 TAX02 payment of \$18,371.02 made on February 2, 2016 consisted of \$48,009.84 in tax and \$361.18 in interest. The property taxes have been paid on time since 2012.

The property tax bills are mailed to the owner and address we have on file. It is the owner's responsibility to contact the Assessing Department to change their mailing address when they are away to ensure they receive future bills, notices, and correspondence in a timely manner.

Sincerely,

Linda A. Fecteau
Deputy Tax Collector

The Board of Selectmen approved/denied an interest waiver (refund) for \$361.18 during their February 8, 2016 meeting.

Nancy Belanger

Dan Chartrand

Don Clement

Julie Gilman

Anne Surman



120 Portsmouth Ave.
Exeter, NH 03833
Phone: (603) 772-5933
Fax: (603) 772-8405
www.exeterlumber.com

Date: 2/2/16

To: Town of Exeter – Board of Selectman

Re: Property Tax Interest forgiveness; Map Lot 52-53

Hi Julie,

Please excuse my bothering you, but we were recently sent notice of delinquent taxes for map lot 52-53 at Exeter Lumber. The reason for non-payment was incorrect address on file for billing. Historically bill have been sent to my father's home address in Hampton, and forwarded to us for payment. In this case, my father was in Florida so we were unaware of impromptu payment until delinquency notice went out. Payment was made same day as you'll see in attached receipt. You'll see our tax payments have always been paid on time, so we are hoping you can grant us a one-time pardon of interest. Your understanding much appreciated in this matter.

Thank you,

A handwritten signature in blue ink, appearing to read "SEAN MURPHY". The signature is stylized and includes a small upward-pointing arrow at the end.

Sean Murphy
Partner, Exeter Lumber
603-772-5933
SeanMurphy@exeterlumber.com

TOWN OF EXETER
10 FRONT STREET
EXETER, NH 03833

Statement Date: 1/26/2016

Phone: (603) 773-6108

NOTICE OF TAX DELINQUENCIES AND UNREDEEMED TAX LIENS

EXETER LUMBER
PROPERTIES LLC
4 JOHN STARK LN
HAMPTON, NH 03842

Interest Date: 2/29/2016

120 PORTSMOUTH AVE

Property ID: 52-53

Map Lot Unit: 52-53

According to my records the following tax accounts / tax liens remain unpaid:

Year/Type	Due Date	Bill #	Tax Due	Costs Due	Interest Due	Per Diem	Total Due This Bill
TAX0 2015 SECOND HALF TAX BILLING	12/03/2015	92,419	18,009.84	0.00	521.05	5.9210	18,530.89

Listed above are the outstanding balances due on the 2015 tax bills and prior tax bills not liened. Interest is calculated as of February 29, 2016. Please pay the total due listed for each bill by February 29, 2016 to avoid additional interest and costs. An Intent to Lien Notice will be mailed for the 2015 property taxes if payment is not received by February 29, 2016.

Payment may be made in person, mailed to Town of Exeter, Attn: Tax Collections, 10 Front Street, Exeter, NH 03833, or placed in the box next to the front door of the town office building. Please call the Tax Department (603) 773-6108 should you have any questions. Our office hours are 8:15 a.m. to 4:00 p.m. Monday through Friday.

PLEASE NOTE: Refer to the reverse side of this notice if you are currently in bankruptcy and subject to protections of the Automatic Stay provisions of Section 362 (a) of the Bankruptcy Code.

Linda Fecteau,
Deputy Tax Collector

Interest
\$ 361.18 as of
2/2/16

Run: 2/02/16
10:55AM

Property Billing Statement

Page: 1
cmitchell

TOWN OF EXETER

10 FRONT STREET
EXETER, NH 03833

(603) 773-6108

Ck # 6004
PAID
FEB 02 2016
Carole
TOWN OF EXETER

Summary of Account by Property

Interest Calculated as of: 2/02/2016

EXETER LUMBER
PROPERTIES LLC
4 JOHN STARK LN
HAMPTON, NH 03842

Map Lot: 52-53
PID: 52-53
Alt ID:
Location: 120 PORTSMOUTH AVE

Date	Activity	Chk#	Amount	Costs	Penalties	Interest	Rate	Per Diem	Total
Current Assessments									
Land:	838,500.00	Bldg:	622,800.00	CU:	0.00	Other:	0.00	Total:	1,461,300.00
Year: 2015	Total Assessment:		1,461,300.00	Exemptions:		Credits:			
Land:	838,500.00	CU:	0.00						
Bldg:	622,800.00	Other:	0.00						
Bill #:	92419	Date: 10/20/2015	Due: 12/03/2015	Year: 2015	Type: TAX02	Original Amnt:		18,009.84	
Balance Due:			18,009.84	0.00	0.00	361.18	12.00	5.9210	18,371.02
2015 Balance:			18,009.84	0.00	0.00	361.18		5.9210	18,371.02
Totals Parcel - 52-53			18,009.84	0.00	0.00	361.18		5.9210	18,371.02

Ben & Sarah Anderson
66 Newfields Road
Exeter, NH 03833

January 29, 2016

Mr. Russell Dean, Town Manager
Town of Exeter
10 Front Street
Exeter, NH 03833

Dear Mr. Russell,

Thank you for taking the time to meet with me this morning, and agreeing to investigate the interest charges reflected on my tax statement dated January 26, 2016.

This notice was received yesterday via USPS as part of a tax delinquency notice for the first half of the 2015 property for my 66 Newfields Road residence.

As described, a notice for this property tax was not received.

A notice for the second half was received, and promptly paid on November 11, 2016. A copy of the payment is attached. There was no indication of outstanding amounts reflected, providing no reason to believe our taxes were not in good standing order.

I moved to 66 Newfields Road three years ago with my wife, Sarah, and our two children. While our taxes are considerable, I have promptly paid any and all due amounts and continue to enjoy the services and quality of life they afford my family. These prompt and consistent payments are reflected on my account.

We are upstanding citizens who contribute to our community. Shortly after moving to Exeter, I joined and continue to serve on the Raynes Farm Stewardship Committee, while my wife provides free poetry and writing workshops/readings to the community at large.

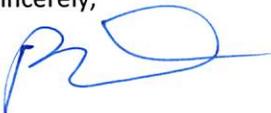
The interest charge of \$658.41 is a substantial amount for our family, and something that I ask be removed under these circumstances.

After we meet, I paid the full outstanding principal amount due prior to leaving Town Hall.

I appreciate your consideration, and taking the time to have this reviewed by the Exeter Board of Selectmen.

Should you need me to attend, or require additional information, please do not hesitate to contact me at any time on my cell, 603-244-0202.

Sincerely,



Ben Anderson

CC: Dan Chartrand, Board of Selectmen

Town Manager's Office

FEB - 3 2015

Received

**TOWN OF EXETER
10 FRONT STREET
EXETER, NH 03833**

Statement Date: 1/26/2016

Phone: (603) 773-6108

NOTICE OF TAX DELINQUENCIES AND UNREDEEMED TAX LIENS

ANDERSON BENJAMIN C
ANDERSON SARAH A
66 NEWFIELDS RD
EXETER, NH 03833

Interest Date: 2/29/2016

66 NEWFIELDS RD

Property ID: 24-29

Map Lot Unit: 24-29

According to my records the following tax accounts / tax liens remain unpaid:

Year/Type	Due Date	Bill #	Tax Due	Costs Due	Interest Due	Per Diem	Total Due This Bill
TAX0 2015 2015 FIRST HALF TAX BILLING	7/01/2015	81,265	<u>8,241.48</u>	0.00	658.41	2.7095	8,899.89

Listed above are the outstanding balances due on the 2015 tax bills and prior tax bills not liened. Interest is calculated as of February 29, 2016. Please pay the total due listed for each bill by February 29, 2016 to avoid additional interest and costs. An Intent to Lien Notice will be mailed for the 2015 property taxes if payment is not received by February 29, 2016.

Payment may be made in person, mailed to Town of Exeter, Attn: Tax Collections, 10 Front Street, Exeter, NH 03833, or placed in the box next to the front door of the town office building. Please call the Tax Department (603) 773-6108 should you have any questions. Our office hours are 8:15 a.m. to 4:00 p.m. Monday through Friday.

PLEASE NOTE: Refer to the reverse side of this notice if you are currently in bankruptcy and subject to protections of the Automatic Stay provisions of Section 362 (a) of the Bankruptcy Code.

Linda Fecteau,
Deputy Tax Collector



Delivered



Town of Exeter
*9419

Check #262937 was mailed to Town of Exeter for receipt by Nov 10, 2015.

Pay From *4868

Amount \$7,261.30

Withdraw On Nov 10, 2015

CHECK 



Memo 66 Newfields Road - Property Tax

Confirmation JTPLP-1P9SH

List for Selectmen's meeting Feb 8, 2016

Water / Sewer Department Abatement's

Approval suggestion

<u>Name</u>	<u>Location</u>	<u>Amount</u>
John Flynn Jr	20 Pine St.	\$1,231.07
Margaret Clark	24 Hampton Falls Rd.	\$119.39
Judith Wheeler	8A Wentworth St.	\$121.51

Disapproval suggestion

<u>Name</u>	<u>Location</u>	<u>Amount</u>
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Memo

Date: February 4, 2016

To: Russell Dean; Doreen Ravell

From: Michael Jeffers

RE: 8A Wentworth Street water & sewer bill (Leak Check 1/25/16; Abatement Request 1/28/16)

We received a request in January 2016, in reference to 8A Wentworth Street for high water and sewer usage on the water and sewer bill. The Town of Exeter did perform a leak check. On January 25, 2016, we performed the leak test at the 8A Wentworth Street residence by using dye strips to check the toilets. *The W/S Technicians didn't find any fixtures to be leaking, and there wasn't an indicated flow using the flow-finder from the meter head flow check.* On January 28, 2016, water usage data was downloaded from the new style meter register head that's able to collect the meter readings to provide data for graphical chart generation. The charts for this new data logging meter *did* show leak flags, and *did* indicate a leak 56 out of 96 days of data collection. There is a leak indicator icon on the meter register that displays a possible leak. The intermittent leak shows a flashing water faucet icon on the digital screen on the meter register, and the continuous leak shows a water faucet icon continuously on the digital screen on the meter register. The charts have indicated intermittent & continuous leaks. An Intermittent Leak is when water has been used for at least 50 of the 96 15-minute intervals during a 24-hr period, and a Continuous Leak which is when water has been used for all 96 15-minute intervals during a 24-hr period. We do recommend abatement.

To grant abatement, the problem of excessive usage requires not only identifying the problem but also the documented correction of the problem. The intent of Selectmen's Policy 08-30 is to establish a one-time abatement, during any ten-year period, for up to half of the excess water consumption above normal consumption, due to an accidental, unpreventable water release. Selectmen's Policy 08-30 Line #1 partially states "In order to qualify for abatement, a customer's excess consumption must exceed the greater of 100% or 35,000 gallons above their normal average consumption. The customer must also prove that the deficiency responsible for leakage has been repaired or corrected", which the customer does meet the criteria, but has not provided proof of the repair or correction. DPW does recommend abatement due to *Selectmen's Policy 08-30 Adjustment Determination Procedure line #4* which states in the event the abnormally high consumption has occurred due to "unpredictable leakage" not caused by customer negligence, ignorance or unfortunate circumstances, as determined by Town staff and the Water & Sewer Advisory Committee, the Town shall consider granting a one-time abatement, per

account, during any ten-year period, up to half of the water consumption above normal consumption. The abatement calculation may consider compensation from any other sources, including insurance policy claims, etc. Normal consumption will be the average of at least the previous three years' consumption history (for similar billing periods) unless deemed otherwise by the Committee. The Committee reserves the right to grant adjustments on water use or sewer use or both. If an abatement is granted, DPW has calculated the abatement, and the Water & Sewer bill should be reduced by \$121.51 dollars, for a new bill total of \$214.09, according to the Selectmen's Policy 08-30 abatement calculations.

Town of Exeter
Water/Sewer Abatement Request & Receipt Form

Please Print:

Full Name: Judith Wheeler
Mailing Address: 8A Wentworth St
Exeter, NH 03833
Service/Property Address: Same as above

Today's Date: 1/28/2016
Account Number: 323243000
Route Number: _____
Phone Number: 603-772-9084

Utility Abatement Requested for: Water _____ Sewer _____ Water & Sewer X
Date of Bill: 1/29/16 Billing Period from 10/21/15 to 1/21/16 Amount of Bill: \$335.60

Owner's reason for the abatement request (Please be as specific as possible): ***I am an elderly home owner on a fixed income. My son in law fixed my broken toilet in December 2015.***

Judith L. Wheeler
Signature of Applicant

1/28/2016
Date

Do not write below this line

Receipt Portion

Reviewed by: Matthew Berube Date of Review: 2/4/16
Comments: _____

Dept. of Public Works Recommendation: Disapprove X Approve

W/S Advisory Committee Recommendation: Disapprove Approve

Board of Selectmen Recommendation: Disapprove Approve

Abatement Amount: \$ 121.51

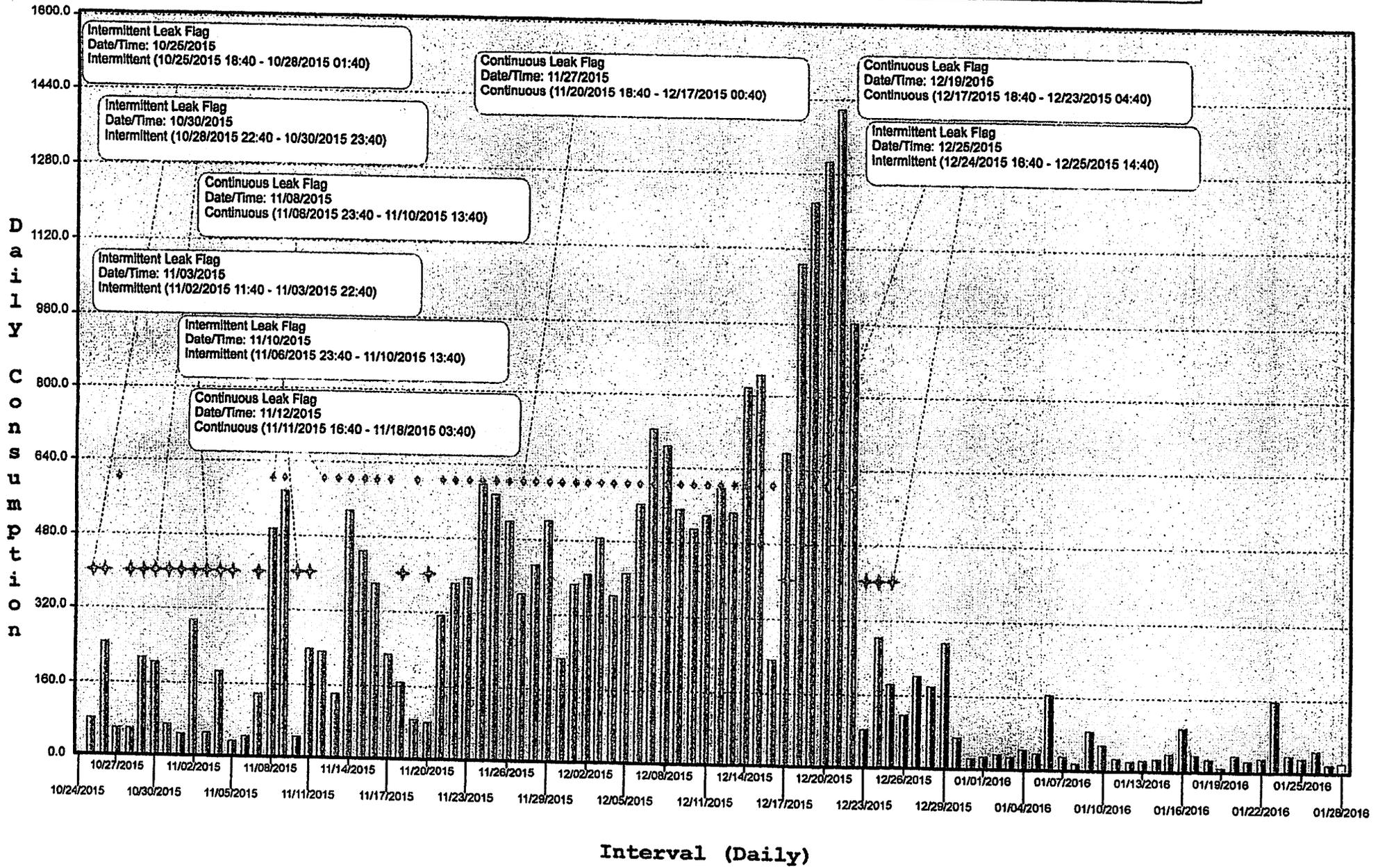
New bill total: \$ 214.09

BOS Approval/Disapproval Signature: _____ Date: _____

N_SIGHT R900 Report
E-Coder R900I Data Logging Report

MIU#: 1834730210 Acct: Unknown Mtr #: 1834730210 Addr: 8A WENTWORTH STREET for 10/24/2015 through 01/28/2016, WATER, 5/8" - 1" T-10, GALLONS

● Minor Reverse Flow Flag
* Major Reverse Flow Flag
✦ Intermittent Leak Flag
◇ Continuous Leak Flag



8A Wentworth Street

Total Usage= 27,520 gallons
Previous 3 year 1st-Q usage average- (4,070 + 3,630 + 3,100) / 3= 3,600 gallons
Excess above average- 23,920 gallons
Half of Excess gets abated- 11,960 gallons

What is Due vs Abatement?

Due

Half of excess	11,960	
Prev 1st-Q usage average	<u>3,600</u>	
	15,560	billable gallons

Tier 1--2015 rates

Water	15,560 gal * \$5.72/1000 gal =	\$89.00
Sewer	15,560 gal * \$4.44/1000 gal =	\$69.09
		<u>\$158.09</u>

Total due= \$158.09

Abatement

Total water/sewer bill = \$335.60 - \$56.00 \$279.60 less service fees & certified mailing

Abate = \$279.60 - \$158.09= \$121.51

Abate = \$121.51

New Bill Total with service fees added back

\$158.09 + \$56.00= **\$214.09**

Run: 2/04/16 7:28AM

Meter History

Page: 1

Start Date 1/01/2013

Town of Exeter

PrintMeterHist

End Date 12/31/2099

Name: WHEELER JUDITH L

Acct#: 000323243000

Loc: 8A WENTWORTH STREET

Meter# 98958722

Read Date	Prev Read	Reading	Usage	Est
6/06/2013	282,100	283,500	1,400	N
4/22/2013	278,700	282,100	3,400	N
1/17/2013	275,600	278,700	3,100	N
Meter Total:			7,900	

Meter# 1834730210

Read Date	Prev Read	Reading	Usage	Est
1/21/2016	40,520	68,040	27,520	N
10/21/2015	31,840	40,520	8,680	N
7/21/2015	25,720	31,840	6,120	N
4/21/2015	22,700	25,720	3,020	N
1/21/2015	18,630	22,700	4,070	N
10/22/2014	15,130	18,630	3,500	N
7/23/2014	11,810	15,130	3,320	N
4/22/2014	9,050	11,810	2,760	N
1/23/2014	5,200	9,050	3,850	N
10/25/2013	1,570	5,200	3,630	N
7/19/2013	0	1,570	1,570	N
Meter Total:			68,040	
Acct Total			75,940	



**TOWN OF EXETER
WATER AND SEWER COLLECTION**

10 FRONT STREET
EXETER, NH 03833-2792
For Billing Questions: (603)773-6157 7:00am -3:00 pm
EMAIL: watersewerbilling@exeternh.gov

**FOR PAYMENT QUESTIONS
(603) 773-6108
8:15 AM - 4:00 PM**

Note to Residents:

NEW 2012 WATER & SEWER RATES EFFECTIVE AS OF APRIL 2012

Water

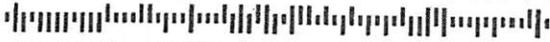
Tier 1: \$5.72 per 1,000 gallons of use up to 29,999.
Tier 2: \$6.21 per 1,000 gallons of use 30,000 to 194,999.
Tier 3: \$6.67 per 1,000 gallons of use 195,000 and above.
Service Fee: \$28.00 per quarter (no change).

Sewer

Tier 1: \$4.44 per 1,000 gallons of use up to 29,999.
Tier 2: \$5.23 per 1,000 gallons of use 30,000 to 194,999.
Tier 3: \$5.62 per 1,000 gallons of use 195,000 and above.
Service Fee: \$28.00 per quarter (no change).

540 1 AV 0.388

P:540 / T:3 / S:



WHEELER JUDITH L
8A WENTWORTH ST
EXETER NH 03833-2022



BILL DETAILS 92 Days of Water Usage Previous Read Date: 10/21/2015 - Read Date: 01/21/2016

ACCOUNT NO.	BILLING PERIOD	BILLING CYCLE	METER READINGS		USAGE
			PREVIOUS	PRESENT	
323243000	10/21/2015 - 01/21/2016	Quarterly	40520	68040	27520

Your average daily use was 299.13 gallons
BILL DATE:
01/29/2016

WATER CONSUMPTION	5.720		157.41
WATER SERVICE FEE		\$	28.00
SEWER CONSUMPTION	4.440		122.19
SEWER SERVICE FEE		\$	28.00

BILLED TO:

SERVICE ADDRESS:
8A WENTWORTH STREET

Last Payment: \$144.19 made 11/09/2015

TOTAL CURRENT CHARGES	\$	335.60
PREVIOUS BALANCE	\$	0.00

**12% ANNUAL INTEREST CHARGED
IF NOT PAID BY DUE DATE.**

TOTAL AMOUNT DUE \$ 335.60

OWNER is liable for all water bills even if not received & OWNER is responsible for preventing service pipes & meter from freezing during cold weather.
All water passing through meter will be charged, whether used, wasted, irrigation system malfunction or lost by leakage.
If we are unable to gain access to meter, or if meter is not working properly, an estimated bill will be mailed.
FAILURE to make payment may result in disconnection of service.

PLEASE SEPARATE REMITTANCE STUB AT THIS PERFORATION AND RETURN WITH PAYMENT



**TOWN OF EXETER
WATER AND SEWER COLLECTION**
10 FRONT STREET
EXETER, NH 03833-2792

REMITTANCE STUB

SERVICE LOC: 8A WENTWORTH STREET
BILL#: 117631
ACCOUNT NO.: 323243000
AMOUNT DUE BY 02/29/2016 : \$335.60

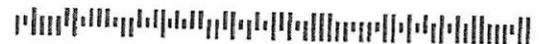
MAKE CHECKS PAYABLE TO: TOWN OF EXETER
Please include your account number on your check.

AMOUNT ENCLOSED

\$

CHECK HERE FOR ADDRESS CHANGES AND COMPLETE REVERSE SIDE.

WHEELER JUDITH L
8 A WENTWORTH ST
EXETER, NH 03833



TOWN OF EXETER
WATER AND SEWER COLLECTION
PO BOX 9520
MANCHESTER NH 03108-9520

24 0000117631 0000033560 6

Town of Exeter



Water/Sewer Abatement Request Form

Please Print:

Full Name: Judith L. Wheeler
Mailing Address: 8 A Wentworth St.
Service/Property Address: Exeter, N.H.
03833

Today's Date: January 28-16
Account Number: 323243000
Route Number: 33
Phone Number: 772-3084

Utility Abatement Requested for: Water Sewer _____ Water & Sewer _____
Date of Bill: _____ Billing Period from _____ to _____ Amount of Bill: \$ _____

Owner's reason for the abatement request (Please be as specific as possible):
I am an elderly home owner on
a fixed income. My son in law fixed my broken
toilet in Dec 2015.

Signature of Applicant
Judith L. Wheeler

Date
January 28-16

Signature of Billing Office

Date

Do not write below this line

Reviewed by: _____ Date of Review: _____

Comments: _____

Total Usage= _____ gallons
-Q -year Average- (_____ + _____ + _____) / _____ = _____ gallons
Excess above average- _____ gallons
Half of Excess gets abated- _____ gallons

Due
Remaining excess- _____ gal -yr average- _____ gal Billable usage- _____ gal
Tier 1-- rates
water _____ gal * \$ _____ /1000 gal = \$ _____
sewer _____ gal * \$ _____ /1000 gal = \$ _____
Tier 3-- rates
water _____ gal * \$ _____ /1000 gal = \$ _____
sewer _____ gal * \$ _____ /1000 gal = \$ _____

Tier 2-- rates
water _____ gal * \$ _____ /1000 gal = \$ _____
sewer _____ gal * \$ _____ /1000 gal = \$ _____

Total due= _____

Recommendation: _____ Disapprove _____ Approve Amount: \$ _____

Approval/Disapproval Signature: _____ Date: _____

If you disagree with the decision of the Department of Public Works & the Finance Department, you may appeal to the Town of Exeter Board of Selectmen. If you wish to appeal, please sign below and return this form to the Finance Department at 10 Front Street.

Signature of Applicant

Date

Town of Exeter
Water/Sewer Abatement Request & Receipt Form

Please Print:

Full Name: Margaret Clark
Mailing Address: 24 Hampton Falls Rd
Exeter, NH 03833
Service/Property Address: Same as above

Today's Date: 1/9/2016
Account Number: _____
Route Number: _____
Phone Number: 603-772-9536

Utility Abatement Requested for: Water _____ Sewer _____ Water & Sewer X
Date of Bill: 11/30/15 Billing Period from 8/19/15 to 11/18/15 Amount of Bill: \$384.37

Owner's reason for the abatement request (Please be as specific as possible): *I would be very happy to get an abatement; at 81 years old it is hard to have another bill; due to an undetected leak in the toilet; was not working right for 3 months; I have been a customer for 40 years in Exeter; I am 81 years old, and didn't know there was a water problem*

Margaret Clark
Signature of Applicant

1/9/2016
Date

Do not write below this line

Receipt Portion

Reviewed by: Matthew Berube Date of Review: 1/25/16
Comments: _____

Dept. of Public Works Recommendation: Disapprove X Approve

~~W/S Advisory Committee Recommendation: Disapprove Approve~~

Board of Selectmen Recommendation: Disapprove Approve

Abatement Amount: \$ 119.39

New bill total: \$ 264.98

BOS Approval/Disapproval Signature: _____ Date: _____

Memo

Date: January 25, 2016

To: Russell Dean; Doreen Ravell

From: Michael Jeffers 

RE: 24 Hampton Falls Road water & sewer bill (Leak Check 12/8/15; Abatement Request 1/9/16)

We received a request in January 2016, in reference to 24 Hampton Falls Road for high water and sewer usage on the water and sewer bill. The Town of Exeter did perform a leak check. On December 8, 2015, we performed the leak test at the 24 Hampton Falls Road residence. *The W/S Technicians did find 1 toilet to be leaking, and there was an indicated flow using the flow-finder from the meter head flow check.* On December 8, 2015 water usage data was downloaded from the new style meter register head that's able to collect the meter readings to provide data for graphical chart generation. The charts for this new data logging meter *did* show leak flags, and *did* indicate a leak 96 out of 96 days of data collection. There is a leak indicator icon on the meter register that displays a possible leak. The intermittent leak shows a flashing water faucet icon on the digital screen on the meter register, and the continuous leak shows a water faucet icon continuously on the digital screen on the meter register. The charts have indicated intermittent & continuous leaks. An Intermittent Leak is when water has been used for at least 50 of the 96 15-minute intervals during a 24-hr period, and a Continuous Leak which is when water has been used for all 96 15-minute intervals during a 24-hr period. **We do recommend abatement.**

To grant abatement, the problem of excessive usage requires not only identifying the problem but also the documented correction of the problem. The intent of Selectmen's Policy 08-30 is to establish a one-time abatement, during any ten-year period, for up to half of the excess water consumption above normal consumption, due to an accidental, unpreventable water release. Selectmen's Policy 08-30 Line #1 partially states "In order to qualify for abatement, a customer's excess consumption must exceed the greater of 100% or 35,000 gallons above their normal average consumption. The customer must also prove that the deficiency responsible for leakage has been repaired or corrected", which the customer does meet the criteria, but has not provided proof of the repair or correction. DPW does recommend abatement due to Selectmen's Policy 08-30 Adjustment Determination Procedure line #4 which states in the event the abnormally high consumption has occurred due to "unpredictable leakage" not caused by customer negligence, ignorance or unfortunate circumstances, as determined by Town staff and the Water & Sewer Advisory Committee, the Town shall consider granting a one-time abatement, per account, during any ten-year period, up to half of the water consumption above normal

consumption. The abatement calculation may consider compensation from any other sources, including insurance policy claims, etc. Normal consumption will be the average of at least the previous three years' consumption history (for similar billing periods) unless deemed otherwise by the Committee. The Committee reserves the right to grant adjustments on water use or sewer use or both. If an abatement is granted, DPW has calculated the abatement, and the Water & Sewer bill should be reduced by \$119.39 dollars, for a new bill total of \$264.98, according to the Selectmen's Policy 08-30 abatement calculations.

24 Hampton Falls Road

Total Usage= 32,060 gallons

Previous 4 year 4th-Q usage average- $(10,390 + 5,720 + 9,600 + 10,600) / 4 = 9,078$ gallons

Excess above average- 22,982 gallons

Half of Excess gets abated- 11,491 gallons

What is Due vs Abatement?

Due

Half of excess	11,491	
Prev 4th-Q usage average	9,078	
	<hr/>	
	20,569	billable gallons

Tier 1--2015 rates

Water	20,569 gal * \$5.72/1000 gal =	\$117.65
Sewer	20,569 gal * \$4.44/1000 gal =	\$91.33
		<hr/>
		\$208.98

Total due= \$208.98

Abatement

Total water/sewer bill =	\$384.37 - \$56.00	\$328.37 less service fees & certified mailing
Abate =	\$328.37 - \$208.98=	\$119.39
	Abate =	\$119.39

New Bill Total with service fees added back

\$208.98 + \$56.00=	\$264.98
---------------------	-----------------



**TOWN OF EXETER
WATER AND SEWER COLLECTION**

10 FRONT STREET
EXETER, NH 03833-2792
For Billing Questions: (603)773-6157 7:00am -3:00 pm
EMAIL: watersewerbilling@exeternh.gov

**FOR PAYMENT QUESTIONS
(603) 773-6108**

8:15 AM - 4:00 PM

Note to Residents:

NEW 2012 WATER & SEWER RATES EFFECTIVE AS OF APRIL 2012

Water

Tier 1: \$5.72 per 1,000 gallons of use up to 29,999.
Tier 2: \$6.21 per 1,000 gallons of use 30,000 to 194,999.
Tier 3: \$6.67 per 1,000 gallons of use 195,000 and above.
Service Fee: \$28.00 per quarter (no change).

Sewer

Tier 1: \$4.44 per 1,000 gallons of use up to 29,999.
Tier 2: \$5.23 per 1,000 gallons of use 30,000 to 194,999.
Tier 3: \$5.62 per 1,000 gallons of use 195,000 and above.
Service Fee: \$28.00 per quarter (no change).

219 1 AV 0.388

P:219 / T:1 / S:



CLARK MARGARET
24 HAMPTON FALLS RD
EXETER NH 03833-4711



BILL DETAILS 91 Days of Water Usage

Previous Read Date: 08/19/2015 - Read Date: 11/18/2015

ACCOUNT NO.	BILLING PERIOD	BILLING CYCLE	METER READINGS		USAGE
			PREVIOUS	PRESENT	
131369200	08/19/2015 - 11/18/2015	Quarterly	12850	44910	32060

Your average daily use was 352.31 gallons

BILL DATE:

11/30/2015

BILLED TO:

WATER CONSUMPTION	5.720		\$	171.59
WATER CONSUMPTION	6.210		\$	12.80
WATER SERVICE FEE			\$	28.00
SEWER CONSUMPTION	4.440		\$	133.20
SEWER CONSUMPTION	5.230		\$	10.78
SEWER SERVICE FEE			\$	28.00

SERVICE ADDRESS:

24 HAMPTON FALLS ROAD

Last Payment: \$205.04 made 09/08/2015

TOTAL CURRENT CHARGES \$ 384.37

PREVIOUS BALANCE \$ 0.00

**12% ANNUAL INTEREST CHARGED
IF NOT PAID BY DUE DATE.**

TOTAL AMOUNT DUE \$ 384.37

OWNER is liable for all water bills even if not received & OWNER is responsible for preventing service pipes & meter from freezing during cold weather.
All water passing through meter will be charged, whether used, wasted, irrigation system malfunction or lost by leakage.
If we are unable to gain access to meter, or if meter is not working properly, an estimated bill will be mailed.
FAILURE to make payment may result in disconnection of service.

PLEASE SEPARATE REMITTANCE STUB AT THIS PERFORATION AND RETURN WITH PAYMENT

REMITTANCE STUB



**TOWN OF EXETER
WATER AND SEWER COLLECTION**

10 FRONT STREET
EXETER, NH 03833-2792

SERVICE LOC: 24 HAMPTON FALLS ROAD

BILL#: 114266

ACCOUNT NO.: 131369200

AMOUNT DUE BY 12/31/2015 : \$384.37

MAKE CHECKS PAYABLE TO: TOWN OF EXETER

Please include your account number on your check.

AMOUNT ENCLOSED

\$

CHECK HERE FOR ADDRESS CHANGES AND COMPLETE REVERSE SIDE.

CLARK MARGARET
24 HAMPTON FALLS ROAD
EXETER, NH 03833



TOWN OF EXETER
WATER AND SEWER COLLECTION
PO BOX 9520
MANCHESTER NH 03108-9520

24 0000114266 0000038437 0

Meter History

Start Date

Town of Exeter

PrintMeterHist

End Date 12/31/2099

Name: CLARK MARGARET

Acct#: 000131369200

Loc: 24 HAMPTON FALLS ROAD

Meter# 0077640684

Read Date	Prev Read	Reading	Usage	Est
4/09/2013	492,200	497,580	5,380	N
2/19/2013	481,600	492,200	10,600	N
11/19/2012	472,000	481,600	9,600	N
8/17/2012	454,250	472,000	17,750	N
5/11/2012	441,450	454,250	12,800	N
2/10/2012	432,050	441,450	9,400	N
11/09/2011	421,450	432,050	10,600	N
8/10/2011	410,350	421,450	11,100	N
5/11/2011	403,700	410,350	6,650	N
2/10/2011	394,050	403,700	9,650	N
11/10/2010	384,950	394,050	9,100	N
8/12/2010	370,250	384,950	14,700	N
5/12/2010	355,950	370,250	14,300	N
2/16/2010	339,800	355,950	16,150	N
10/29/2009	329,700	339,800	10,100	N
7/28/2009	324,450	329,700	5,250	N
6/02/2009	313,950	324,450	10,500	N
3/17/2009	295,100	313,950	18,850	N
10/31/2008	0	29,510	9,700	
7/31/2008	0	28,540	10,900	
4/30/2008	0	27,450	11,400	
1/31/2008	0	26,310	12,250	
7/30/2007	0	24,175	6,900	
4/30/2007	0	23,485	12,750	
1/31/2007	0	22,210	12,550	
10/31/2006	0	20,955	15,600	
7/31/2006	0	19,395	15,250	
4/30/2006	0	17,870	8,900	
4/30/2006	0	25,085	9,100	
1/31/2006	0	16,980	12,350	
10/31/2005	0	15,745	15,650	
7/30/2005	0	14,180	26,850	
1/31/2005	0	11,495	17,000	
1/11/2005	0	9,795	1,695	

Meter Total: 401,325

Meter# 1834525011

Read Date	Prev Read	Reading	Usage	Est
5/27/2015	59,090	60,910	1,820	N
5/19/2015	49,890	59,090	9,200	N
2/18/2015	43,010	49,890	6,880	N
11/19/2014	32,620	43,010	10,390	N
8/20/2014	25,850	32,620	6,770	N
5/20/2014	20,610	25,850	5,240	N
2/20/2014	14,390	20,610	6,220	N
11/19/2013	8,670	14,390	5,720	N

Run: 1/13/16 9:01AM

Meter History

Page: 2

Start Date

Town of Exeter

PrintMeterHist

End Date 12/31/2099

8/20/2013	3,540	8,670	5,130	N
5/17/2013	0	3,540	3,540	
		Meter Total:	60,910	

Meter# 1850300743

Read Date	Prev Read	Reading	Usage	Est
11/18/2015	12,850	44,910	32,060	N
8/19/2015	0	12,850	12,850	
		Meter Total:	44,910	
		Acct Total	507,145	

I would be very
to get an
abatement

Town of Exeter



at 21 years old
it is hard to
have another
bill

Water/Sewer Abatement Request Form

Please Print:

Full Name: MARGARET CLARK Today's Date: Jan 9, 2016
Mailing Address: 24 Hampton Falls Rd Account Number: _____
Service/Property Address: _____ Route Number: _____
Phone Number: 772-9536

Utility Abatement Requested for: Water Sewer Water & Sewer
Date of Bill: _____ Billing Period from _____ to _____ Amount of Bill: \$ _____

Owner's reason for the abatement request (Please be as specific as possible):

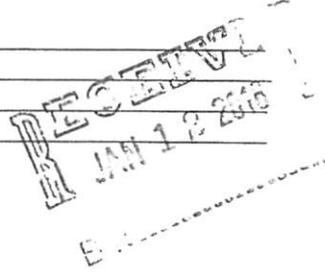
I have been a customer for
40 years in Exeter. At any 21 years
old - I didn't know there was a

Signature of Applicant: water problem Date: Jan 9, 2016
Signature of Billing Office: _____ Date: _____

Do not write below this line

Reviewed by: _____ Date of Review: _____
Comments: _____

Total Usage= _____ gallons
-Q- year Average- (_____ + _____ + _____) / _____ = _____ gallons
Excess above average- _____ gallons
Half of Excess gets abated- _____ gallons



Due
Remaining excess- _____ gal -yr average- _____ gal Billable usage- _____ gal
Tier 1-- rates
water _____ gal * \$ _____ /1000 gal = \$
sewer _____ gal * \$ _____ /1000 gal = \$
Tier 2-- rates
water _____ gal * \$ _____ /1000 gal = \$
sewer _____ gal * \$ _____ /1000 gal = \$
Tier 3-- rates
water _____ gal * \$ _____ /1000 gal = \$
sewer _____ gal * \$ _____ /1000 gal = \$
Total due= _____

Recommendation: _____ Disapprove _____ Approve Amount: \$ _____

Approval/Disapproval Signature: _____ Date: _____

If you disagree with the decision of the Department of Public Works & the Finance Department, you may appeal to the Town of Exeter Board of Selectmen. If you wish to appeal, please sign below and return this form to the Finance Department at 10 Front Street.

Signature of Applicant _____ Date _____

Due to a undetected
leak in the toilet. Leak
was not working
right for three Month
I'm 81 years old +
I didn't know a problem
margaret Clark



TOWN OF EXETER

13 NEWFIELDS ROAD • EXETER, NH 03833 • www.exeternh.org

X Margaret Clark
Signature

Meter Re-read/Leak Check Form

Date: 12/8/15 10:00 Meter Tech: Gary Lord

Remote Re-read only _____ Meter & Remote Re-read _____ Leak Check _____

Owner: Margaret Clark Address: 24 Hampton Falls Rd

Meter						
Badger	M-15	M-25	M-40	M-70	M-120	Other _____
Neptune	<u>3/4"</u>	1.0"	1.5"	2.0"		Other _____

Current Meter Reading: _____

Current Remote Reading: _____

Previous Meter Reading: _____

Previous Remote Reading: _____

Difference: _____

Difference: _____

Last Reading Date: _____

Days Between Readings: _____

Meter Usage GPD: _____

Remote Usage GPD: _____

Remote Reading Lead or Lag: _____

Meter Head Reading by: _____

Result of Meter Head Flow Check: Flow No Flow _____

Check Toilets for Leaks: Yes No # of Leaks Found: 1

Any Known water lose due to leaks or repairs? What? Yes No

upstairs toilet leaks

Any Increase or Change in Occupants/Service? What? Yes No

Does Customer have a : Pool Lawn Sprinkler Garden Other

Customer called on: _____ No Ans: _____ Left Message: _____
Customer called on: _____ No Ans: _____ Left Message: _____

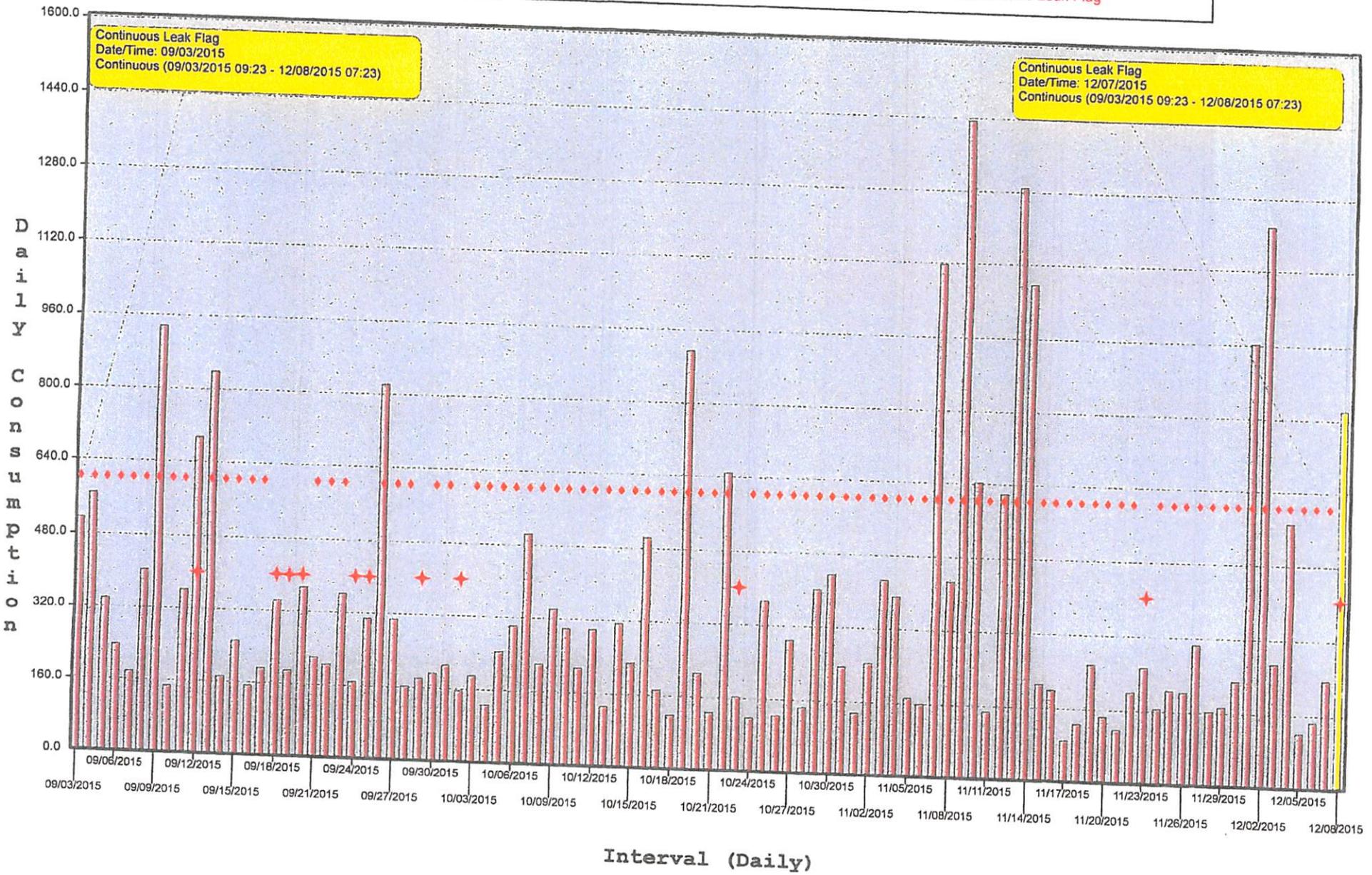
White: W/S Office

Yellow: Billing Office

Pink: Customer

N_SIGHT R900 Report
E-Coder R900i Data Logging Report
MIU#: 1850300743 Acct: Unknown Mtr #: 1850300743 Addr: 24 HAMPTON FALLS ROAD for 09/03/2015 through 12/08/2015, WATER, 5/8" - 1" T-10, GALLONS

Minor Reverse Flow Flag Major Reverse Flow Flag Intermittent Leak Flag Continuous Leak Flag



*All time intervals are represented in standard time.

N_SIGHT R800 Rep.
Data Logging Report Daily
Meter Combination: WATER, 5/8" - 1" T-10, GALLONS

MIU ID: 1850300743
Interval Date Range: 09/03/2015 - 12/09/2015

Interval Read Date	Interval Reading	Interval Consumption	Minor Backflow	Major Backflow	Intermittent Leak	Continuous Leak
09/03/2015	18088.6	516.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/04/2015	18708.0	566.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/05/2015	19047.8	339.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/06/2015	19278.6	232.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/07/2015	19457.0	177.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/08/2015	19860.6	403.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/09/2015	20791.6	931.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/10/2015	20939.4	146.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/11/2015	21302.4	362.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/12/2015	21874.0	692.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/13/2015	22826.4	835.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/14/2015	23002.8	171.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/15/2015	23249.7	249.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/16/2015	23391.7	153.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/17/2015	23598.8	193.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/18/2015	23848.5	342.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/19/2015	24128.9	187.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/20/2015	24489.3	373.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/21/2015	24717.2	217.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/22/2015	24922.6	204.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/23/2015	25286.3	362.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/24/2015	25452.7	166.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/25/2015	25740.8	305.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/26/2015	26570.7	819.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/27/2015	26862.5	305.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/28/2015	27043.5	162.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/29/2015	27218.7	179.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
09/30/2015	27405.0	190.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/01/2015	27626.0	210.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/02/2015	27780.8	156.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/03/2015	27972.2	180.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/04/2015	28097.2	125.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/05/2015	28339.7	242.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/06/2015	28614.7	301.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/07/2015	29142.9	503.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/08/2015	29363.4	218.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/09/2015	29703.0	339.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/10/2015	28983.2	295.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/11/2015	30206.0	214.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*All time intervals are represented in standard time.

N_SIGHT R900 Rep.
Data Logging Report Daily
Meter Combination: WATER, 5/8" - 1" T-10, GALLONS
MIU ID: 1850300743
Interval Date Range: 09/03/2015 - 12/08/2015

Interval Read Date	Interval Reading	Interval Consumption	Minor Backflow	Major Backflow	Intermittent Leak	Continuous Leak
10/12/2015	30507.0	296.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10/13/2015	30639.5	130.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/14/2015	30949.4	310.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/15/2015	31176.4	226.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/16/2015	31678.6	502.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/17/2015	31849.7	171.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/18/2015	31948.2	115.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/19/2015	32875.7	910.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/20/2015	33083.2	210.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/21/2015	33212.0	125.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/22/2015	33859.8	646.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/23/2015	34019.8	160.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/24/2015	34137.4	117.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/25/2015	34507.6	371.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/26/2015	34630.8	122.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/27/2015	34918.9	287.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/28/2015	35062.1	143.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/29/2015	35354.0	400.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/30/2015	35895.4	433.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10/31/2015	36129.6	233.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/01/2015	36265.4	135.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/02/2015	36507.5	242.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/03/2015	36932.0	424.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/04/2015	37322.9	390.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/05/2015	37494.5	172.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/06/2015	37647.5	159.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/07/2015	38768.2	1114.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/08/2015	39194.4	426.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/09/2015	40620.7	1428.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/10/2015	41264.6	642.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/11/2015	41441.6	146.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/12/2015	42029.6	618.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/13/2015	43182.8	1285.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/14/2015	44388.8	1073.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/15/2015	44595.2	210.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/16/2015	44797.6	197.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/17/2015	44887.1	89.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/18/2015	44997.1	126.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11/19/2015	45266.7	254.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*All time intervals are represented in standard time.

N_SIGHT R900 Rep.

Data Logging Report Daily

MIU ID: 1850300743

Meter Combination: WATER, 5/8" - 1" T-10, GALLONS

Interval Date Range: 09/03/2015 - 12/08/2015

Interval Read Date	Interval Reading	Interval Consumption	Minor Backflow	Major Backflow	Intermittent Leak	Continuous Leak
11/20/2015	45406.0	143.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11/21/2015	45526.4	117.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11/22/2015	45724.4	198.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11/23/2015	45971.9	252.2	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
11/24/2015	46099.4	166.0	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
11/25/2015	46338.8	205.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11/26/2015	46549.2	201.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11/27/2015	46853.3	302.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11/28/2015	47015.5	163.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11/29/2015	47187.8	172.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11/30/2015	47370.1	227.5	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
12/01/2015	48256.2	957.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12/02/2015	49588.1	1214.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12/03/2015	49851.1	266.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12/04/2015	50422.2	568.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12/05/2015	50541.8	120.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12/06/2015	50688.2	144.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12/07/2015	50811.0	232.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12/08/2015	51738.6	816.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*All time intervals are represented in standard time.

Town of Exeter
Water/Sewer Abatement Request & Receipt Form

Please Print:

Full Name: John W Flynn Jr
Mailing Address: 54 Deep Meadows
Exeter, NH 03833
Service/Property Address: 20 Pine Street
Exeter, NH 03833

Today's Date: 1/11/2016
Account Number: 232371800
Route Number: _____
Phone Number: 603-234-9420

Utility Abatement Requested for: Water _____ Sewer _____ Water & Sewer X
Date of Bill: 1/9/16 Billing Period from 9/16/15 to 12/15/15 Amount of Bill: \$3,098.27

Owner's reason for the abatement request (Please be as specific as possible): ***Irrigation has been shut off; water leak detected and shut off; will be repaired or eliminated in the Spring***

Michael Gilmore-603-583-3270
Signature of Applicant

1/11/2016
Date

Do not write below this line

Receipt Portion

Reviewed by: Matthew Berube Date of Review: 1/25/16
Comments: _____

Dept. of Public Works Recommendation: _____ Disapprove _____ X Approve

~~W/S Advisory Committee Recommendation: _____ Disapprove _____ Approve~~

Board of Selectmen Recommendation: _____ Disapprove _____ Approve

Abatement Amount: \$ 1,231.07

New bill total: \$ 1,867.20

BOS Approval/Disapproval Signature: _____ Date: _____

Memo

Date: January 25, 2016

To: Russell Dean; Doreen Ravell

From: Michael Jeffers 

RE: 20 Pine Street water & sewer bill (Abatement Request 1/16/16)

We received a request in January 2016, in reference to 20 Pine Street for high water and sewer usage on the water and sewer bill. The Town of Exeter did not perform a leak check at this time, or download any data from the meter. **We do recommend abatement.** The next step would be to remove the old meter for testing (per customer request), and install a new meter. *Please note that tested older meters typically read lower than actual usage, a new meter more accurately records usage meaning water bills increase slightly.*

To grant abatement, the problem of excessive usage requires not only identifying the problem but also the documented correction of the problem. The intent of Selectmen's Policy 08-30 is to establish a one-time abatement, during any ten-year period, for up to half of the excess water consumption above normal consumption, due to an accidental, unpreventable water release. Selectmen's Policy 08-30 Line #1 partially states "In order to qualify for abatement, a customer's excess consumption must exceed the greater of 100% or 35,000 gallons above their normal average consumption. The customer must also prove that the deficiency responsible for leakage has been repaired or corrected", which the customer does meet the criteria, but has not provided proof of the repair or correction. DPW does recommend abatement due to Selectmen's Policy 08-30 Adjustment Determination Procedure line #4 which states in the event the abnormally high consumption has occurred due to "unpredictable leakage" not caused by customer negligence, ignorance or unfortunate circumstances, as determined by Town staff and the Water & Sewer Advisory Committee, the Town shall consider granting a one-time abatement, per account, during any ten-year period, up to half of the water consumption above normal consumption. The abatement calculation may consider compensation from any other sources, including insurance policy claims, etc. Normal consumption will be the average of at least the previous three years' consumption history (for similar billing periods) unless deemed otherwise by the Committee. The Committee reserves the right to grant adjustments on water use or sewer use or both. **If an abatement is granted, DPW has calculated the abatement, and the Water & Sewer bill should be reduced by \$1,231.07 dollars, for a new bill total of \$1,867.20, according to the Selectmen's Policy 08-30 abatement calculations.**

20 Pine Street

Total Usage= 264,030 gallons
Previous 2 year 4th-Q usage average- (87,880 + 30,770) /2= 59,325 gallons
Excess above average- 204,705 gallons
Half of Excess gets abated- 102,353 gallons

What is Due vs Abatement?

Due

Half of excess	102,353	
Prev 4th-Q usage average	59,325	
	<hr/>	161,678 billable gallons

Tier 1--2015 rates

Water	29,999 gal * \$5.72/1000 gal =	\$171.59
Sewer	29,999 gal * \$4.44/1000 gal =	\$133.20
		<hr/>
		\$304.79

Tier 2--2015 rates

Water	131,679 gal * \$6.21/1000 gal =	\$817.73
Sewer	131,679 gal * \$5.23/1000 gal =	\$688.68
		<hr/>
		\$1,506.41

Total due= \$1,811.20

Abatement

Total water/sewer bill = \$3,098.27 - \$56.00 \$3,042.27 less service fees & certified mailing

Abate = \$3,042.27 - \$1,811.20= \$1,231.07

Abate = \$1,231.07

New Bill Total with service fees added back

\$1,811.20 + \$56.00= **\$1,867.20**

Town of Exeter



Water/Sewer Abatement Request Form

Please Print:

Full Name: JOHN W. FLYNN JR
Mailing Address: 54 Deep Meadows Exeter, N.H. 03833
Service/Property Address: 20 Pine St Exeter, N.H. 03833

Today's Date: 1-11-16
Account Number: 232371800
Route Number:
Phone Number: 603-234-9420

Utility Abatement Requested for: Water Sewer Water & Sewer
Date of Bill: 1-9-16 Billing Period from 9-16-15 to 12-15-15 Amount of Bill: \$ 3,098.27

Owner's reason for the abatement request (Please be as specific as possible):
Irrigation has been shut off, water leak detected and shut off. Will be repaired or eliminated in spring. Michael

Signature of Applicant: [Signature] 603-583-3270 cell

Date: 1-11-16 - [Signature]
Chez's Landscaping, LLC
Date

Signature of Billing Office

Do not write below this line

Reviewed by: Date of Review:
Comments:

Total Usage= gallons
-Q year Average- (+ +) / = gallons
Excess above average- gallons
Half of Excess gets abated- gallons

Due
Remaining excess- gal -yr average- gal Billable usage- gal
Tier 1-- rates
water gal * \$ /1000 gal = \$
sewer gal * \$ /1000 gal = \$
Tier 2-- rates
water gal * \$ /1000 gal = \$
sewer gal * \$ /1000 gal = \$
Tier 3-- rates
water gal * \$ /1000 gal = \$
sewer gal * \$ /1000 gal = \$
Total due=

Recommendation: Disapprove Approve Amount: \$

Approval/Disapproval Signature: Date:

If you disagree with the decision of the Department of Public Works & the Finance Department, you may appeal to the Town of Exeter Board of Selectmen. If you wish to appeal, please sign below and return this form to the Finance Department at 10 Front Street.

Signature of Applicant

Date

Meter History

Start Date

Town of Exeter

PrintMeterHist

End Date 12/31/2099

Name: FLYNN MARILYN E REV TR
FLYNN MARILYN E TRUSTEE

Acct#: 000232371800

Loc: 20 PINE STREET

Meter# 86031251

Read Date	Prev Read	Reading	Usage	Est
4/10/2013	3,143,400	3,144,800	1,400	N
3/25/2013	3,138,000	3,143,400	5,400	N
→ 12/20/2012	3,138,000	3,138,000	0	N
EM 4/9/19/2012	3,138,000	3,138,000	0	N
5/18/2012	3,138,000	3,138,000	0	N
3/19/2012	3,138,000	3,138,000	0	N
12/19/2011	3,103,500	3,138,000	34,500	N
9/19/2011	3,066,500	3,103,500	37,000	N
6/20/2011	3,061,900	3,066,500	4,600	N
3/21/2011	3,060,100	3,061,900	1,800	N
12/20/2010	3,030,900	3,060,100	29,200	N
9/20/2010	2,980,900	3,030,900	50,000	N
6/21/2010	2,968,100	2,980,900	12,800	N
3/16/2010	2,960,000	2,968,100	8,100	N
1/06/2010	2,911,100	2,960,000	48,900	N
9/08/2009	2,847,200	2,911,100	63,900	N
6/24/2009	2,788,000	2,847,200	59,200	N
4/27/2009	2,744,800	2,788,000	43,200	
11/30/2008	0	2,744,800	50,100	
8/31/2008	0	2,694,700	60,100	
5/31/2008	0	2,634,600	28,600	
2/29/2008	0	2,606,000	12,300	
11/30/2007	0	2,593,700	46,900	
8/31/2007	0	2,546,800	79,000	
5/31/2007	0	2,467,800	18,600	
2/28/2007	0	2,449,200	14,200	
11/30/2006	0	2,435,000	23,300	
8/31/2006	0	2,411,700	66,600	
5/31/2006	0	2,345,100	20,400	
2/28/2006	0	2,324,700	17,700	
11/30/2005	0	2,307,000	33,600	
8/31/2005	0	2,273,400	51,000	
5/31/2005	0	2,222,400	11,700	
2/28/2005	0	2,210,700	32,500	

Meter Total: 966,600

Meter# 1834635963

Read Date	Prev Read	Reading	Usage	Est
12/15/2015	477,510	741,540	264,030	N
9/16/2015	402,080	477,510	75,430	N
6/16/2015	382,640	402,080	19,440	N
3/18/2015	347,550	382,640	35,090	N
→ 12/17/2014	259,670	347,550	87,880	N
9/17/2014	190,590	259,670	69,080	N
6/18/2014	135,060	190,590	55,530	N
3/18/2014	121,340	135,060	13,720	N

Run: 1/25/16 1:41PM

Meter History

Page: 2

Start Date

Town of Exeter

PrintMeterHist

End Date 12/31/2099

→ 12/19/2013	90,570	121,340	30,770	N
9/23/2013	26,280	90,570	64,290	N
6/18/2013	0	26,280	26,280	
		Meter Total:	741,540	
		Acct Total	1,708,140	



**TOWN OF EXETER
WATER AND SEWER COLLECTION**

10 FRONT STREET
EXETER, NH 03833-2792
For Billing Questions: (603)773-6157 7:00am -3:00 pm
EMAIL: watersewerbilling@exeternh.gov

**FOR PAYMENT QUESTIONS
(603) 773-6108
8:15 AM - 4:00 PM**

Note to Residents:

NEW 2012 WATER & SEWER RATES EFFECTIVE AS OF APRIL 2012

Water

Tier 1: \$5.72 per 1,000 gallons of use up to 29,999.
Tier 2: \$6.21 per 1,000 gallons of use 30,000 to 194,999.
Tier 3: \$6.67 per 1,000 gallons of use 195,000 and above.
Service Fee: \$28.00 per quarter (no change).

Sewer

Tier 1: \$4.44 per 1,000 gallons of use up to 29,999.
Tier 2: \$5.23 per 1,000 gallons of use 30,000 to 194,999.
Tier 3: \$5.62 per 1,000 gallons of use 195,000 and above.
Service Fee: \$28.00 per quarter (no change).

297 1 AV 0.388

P:297 / T:2 / S:



FLYNN MARILYN E REV TR
FLYNN MARILYN E TRUSTEE
54 DEEP MDWS
EXETER NH 03833-4102

BILL DETAILS 90 Days of Water Usage Previous Read Date: 09/16/2015 - Read Date: 12/15/2015

ACCOUNT NO.	BILLING PERIOD	BILLING CYCLE	METER READINGS		USAGE
			PREVIOUS	PRESENT	
232371800	09/16/2015 - 12/15/2015	Quarterly	477510	741540	264030

Your average daily use was 2933.67 gallons
BILL DATE:
12/30/2015

BILLED TO:
FLYNN MARILYN E REV TR

SERVICE ADDRESS:
20 PINE STREET

Last Payment: \$880.52 made 11/04/2015

WATER CONSUMPTION	5.720	\$	171.59
WATER CONSUMPTION	6.210		1,024.65
WATER CONSUMPTION	6.670		460.44
WATER SERVICE FEE			28.00
SEWER CONSUMPTION	4.440		133.20
SEWER CONSUMPTION	5.230		862.95
SEWER CONSUMPTION	5.620		387.95
SEWER SERVICE FEE			28.00
INTEREST			0.04

TOTAL CURRENT CHARGES \$ 3,096.78
PAST DUE \$ 1.45

**12% ANNUAL INTEREST CHARGED
IF NOT PAID BY DUE DATE.**

TOTAL AMOUNT DUE \$ 3,098.27

OWNER is liable for all water bills even if not received & OWNER is responsible for preventing service pipes & meter from freezing during cold weather.
All water passing through meter will be charged, whether used, wasted, irrigation system malfunction or lost by leakage.
If we are unable to gain access to meter, or if meter is not working properly, an estimated bill will be mailed.
FAILURE to make payment may result in disconnection of service.

PLEASE SEPARATE REMITTANCE STUB AT THIS PERFORATION AND RETURN WITH PAYMENT



**TOWN OF EXETER
WATER AND SEWER COLLECTION**
10 FRONT STREET
EXETER, NH 03833-2792

REMITTANCE STUB

SERVICE LOC: 20 PINE STREET
BILL#: 116006
ACCOUNT NO.: 232371800
AMOUNT DUE BY 01/29/2016 : \$3,098.27

MAKE CHECKS PAYABLE TO: TOWN OF EXETER
Please include your account number on your check.

CHECK HERE FOR ADDRESS CHANGES AND COMPLETE REVERSE SIDE.

AMOUNT ENCLOSED

\$

FLYNN MARILYN E REV TR
FLYNN MARILYN E TRUSTEE
54 DEEP MEADOW
EXETER, NH 03833

TOWN OF EXETER
WATER AND SEWER COLLECTION
PO BOX 9520
MANCHESTER NH 03108-9520

24 0000116006 0000309827 2

2017-2018 NHMA Legislative Policy Process

NHMA's legislative policy process to establish policies for the 2017-2018 biennium will begin in the spring of 2016. There will be three policy committees, each consisting of 15-20 local official members, with an NHMA Board member serving as chair. Volunteers for the committees will be solicited from NHMA member municipalities through NewsLink, the *Legislative Bulletin*, *Town & City* magazine, and a direct communication to each member town and city. Appointments to the committees will be made by the Chair of the Board and confirmed by the Board.

The first meeting of the committees will be on Friday, April 8, 2016, at the NHMA offices; this will serve as an orientation and an opportunity to coordinate future meeting dates. Meeting rooms have been reserved every Monday and Friday from April 8 through May 27, which is the date by which the policy committees must complete their work. Officials from member municipalities will be invited to submit policy suggestions to be reviewed by the committees, with a deadline of Friday, April 22, for submitting policy proposals.

The three policy committees are:

- Finance and Revenue,
- Infrastructure, Development, and Land Use, and
- General Administration and Governance.

The **Finance and Revenue Committee** will cover budgeting, revenue, tax exemptions, current use, assessing, tax collection, retirement issues, education funding.

The **Infrastructure, Development, and Land Use Committee** will cover solid/hazardous waste, transportation, land use, environmental regulation, housing, utilities, code enforcement, economic development.

The **General Administration and Governance Committee** will cover elections, Right to Know matters, labor, town meeting, charters, welfare, public safety.

There are always issues that overlap committee duties; they can be assigned to the committee with a lighter workload or can be reviewed by both committees.

The policy committees will review policy proposals submitted by local officials and affiliate group members, as well as proposals generated by committee members. The committee process will allow for in-depth review and discussion of policy suggestions in order that all aspects of the proposal, both positive and negative, will be examined.

Each committee should approve two or three "Action Recommendation" items, which would be drafted by staff for introduction in the 2017-2018 session. Each committee may also approve a number of "Priority Recommendations," which may be developed into legislation depending on staff resources and other factors. A maximum of 12 Action and Policy Recommendations may be approved by each committee. The committees may also make Standing Policy Recommendations, which are not included in the policy limitation.

Committee recommendations must be completed no later than 27 for printing in *Town & City* magazine and for submission to NHMA member municipalities sufficiently in advance of the Legislative Policy Conference that floor policies may be submitted and that each member municipality may determine how to exercise its vote on the policy recommendations at the Legislative Policy Conference.

At the Legislative Policy Conference, scheduled for September 23, 2016, each member municipality may cast one vote. All policy recommendations must receive a 2/3 vote of those present and voting to be adopted.



EXETER PUBLIC WORKS DEPARTMENT

13 NEWFIELDS ROAD • EXETER, NH • 03833-4540 • (603) 773-6157 • FAX (603) 772-1355
www.exeternh.gov

January 29, 2016

Mr. Eric Skoglund
NH Department of Environmental Services
Drinking Water and Groundwater Bureau
29 Hazen Drive
P.O. Box 95
Concord, NH 03302-0095

RE: Letter of Deficiency #DWGB 15-024

Dear Mr. Skoglund:

The Town of Exeter water system is working to address total trihalomethanes (TTHM) maximum contaminant level (MCL) violations. This letter is submitted in response to our meeting on December 2, 2015, where we discussed the TTHM violations, the importance of timely return to compliance, and the substance of the October 5, 2015, TTHM evaluation report prepared by Weston & Sampson. The Town agreed to submit a progress report, including a schedule of actions planned, by January 30, 2016, which is the purpose of this letter.

Since the December 2nd meeting, the Town of Exeter staff and water treatment plant operators have continued to meet on an almost weekly basis, to develop a schedule and approach that will provide us with better information about source water organic content, optimization of organics removal, and other improvements to the plant and distribution system operations. Also, in response to the December 2nd meeting, the Town has added \$35,000 into the proposed 2016 water budget to assist with the efforts outlined below.

Task 1. Take Surface Water Treatment Off-line for Upgrades 2/16 - 4/18/2016 (~2 months)

The following improvements are planned to address known surface water treatment plant (SWTP) short comings. We recognize that not all refinements will have a significant impact on TTHM reduction, but will contribute to overall improvement of treatment plant operation and process control.

- 1.1 Rebuild/modify in-line UV 254 TOC monitor, add better strainer or coarse filter to reduce suspended solids which clog the unit quickly. A bench top UV 254 spectrophotometer has already been purchased and is being used by the treatment plant operators.
- 1.2 Clean/rebuild both clarifier flow meters (new DP cells), which should help correct known clarifier flow imbalances.
- 1.3 Relocate sodium hydroxide chemical feed point to end of clearwell, just prior to finished water pump suction. Lower pH increases chlorine efficiency and decreases needed chlorine dosage.
- 1.4 Relocate raw water pH probe to pre-chemical feed location.

- 1.5 Install new second pH probe downstream of all chemical feed points
- 1.6 Install static mixer in raw water inlet pipe downstream of primary coagulant, caustic and bicarbonate feeds
- 1.7 Add more reservoir aeration lines and utilize existing Roots blower in recycle building.
- 1.8 Keep Al+++ floc in suspension prior clarifier transfer pumps-prevent channel solids sedimentation/sludge blanket formation. Add mixers (air, pumps, other) or straight pipe to last chamber in channels necessary for clarifier flush volume.
- 1.9 Install a dual "V" notch splitter box replacement at headworks (clarifier building) to assure 50/50 flow distribution to both channels.

Task 2. Conduct SWTP On-line Piloting **4/18 - 10/14/16 (~6 months)**

With the ability to utilize the groundwater treatment plant to meet the majority of the demand, the plan is to minimize the flow through the SWTP to less than 385 gpm during 10 hour day shift only (0.23 MGD). Piloting will be conducted on both surface water sources (Dearborn Brook Reservoir and Exeter River).

- 2.1 Retain consultant with strong treatment plant chemistry experience (e.g., Lenny MacKoul of Aquagenics, or Barbara Cook of Weston & Sampson) to assist/advise in on-line piloting.
- 2.2 Jar test other primary coagulants, in addition to PC 605.
- 2.3 Conduct bi-weekly TOC and/or TTHM samples.
- 2.4 Pilot different chemical feed points/separation distances.
- 2.5 Develop disinfectant dosage guidelines based on contact time tables.

Task 3. Assess Results of On-line Piloting **10/30/16**

Complete review and assessment of the piloting, improvements and results to date. If April to October 2016 trending does not indicate SWTP potential for return to TTHM compliance, consider alternative approaches to do so, such as chloramination as secondary disinfectant in the distribution system and/or air stripping of chloroform/TTHM at treatment plant site

- 3.1 Make recommendations for alternatives for consideration for 2017, if needed
- 3.2 Submit to NHDES for review

Task 4. Distribution System TTHM Reduction/Optimization **6/30/16**

Review storage tank operational levels (fill and draw setpoints) to maximize tank turnover and decrease retention time. Operate new tank mixers. Develop operational guidelines for distribution system optimization prior to onset of warm weather.

Other important considerations for the ultimate reduction of disinfection by-products (DBPs) in the Town of Exeter water system are the recent completion of the new Lary Lane Groundwater Treatment Plant (GWTP) and Lary Lane, Gilman and Stadium Wells. The GWTP is now on-line and capable of producing up to 1.58 MGD. This is sufficient flow to meet low season demand and much of the peak day demand. The treated well water quality will significantly decrease TTHMs and will be monitored closely during this first year of new plant operation. The Town is also embarking on the search for additional groundwater sources and development.

Page 3 of 3
Mr. Eric Skoglund
January 29, 2016

At the conclusion of each task, the Town of Exeter will provide a written summary of the work completed and the findings. If additional work is needed for that task a schedule will also be submitted to NHDES.

We appreciate the assistance of NHDES through this challenging issue and support to bring the Exeter water system back into full compliance.

Sincerely,

Town of Exeter, New Hampshire

A handwritten signature in black ink that reads "Jennifer R. Perry". The signature is written in a cursive style with a large initial "J".

Jennifer R. Perry, P.E.
Public Works Director

cc: Russell Dean, Town Manager
Michael Jeffers, Water/Sewer Managing Engineer
Paul Roy, Water Treatment Plant Operations Supervisor
Matt Berube, Water/Sewer Engineering Technician