USPS TRACKING#



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

9590 9402 2105 6132 7319 24

United States Postal Service Sender: Please print your name, address, and ZIP+4® in this box®

STATE OF NEW HAMPSHIRE

STATE OF NEW HAMPSHIRE

DEPT OF ENVIRONMENTAL SERVICES
29 HAZEN DRIVE
CONCORD NH 03302

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SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kushal Pal Kuhlon Kahlon LLC PO Box 476 Chocurua, NH 0381

9590 9402 2105 6132 7319 24

99110092

2. Article Number (Transfer from service label)

7016 1970 0000 4865 4125

| COMPLE | TE TH | IS SECTI | ON ON | DELIN | /ERY |
|-------------------------|-------|----------|-------|-------|------|
| A STATE OF THE STATE OF | | | | | |

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name

C. Date of Delivery

TI No

D. Is delivery address different from item 1? If YES, enter delivery address below:

NOV 03 2017

Oil Remediation & Compliance Bureau

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery

☐ Certified Mail®
☐ Certified Mail Restricted Delivery

☐ Collect on Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

ormed Mail

id Mail Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted

Delivery

Return Receipt for

 □ Return Receipt for Merchandise
 □ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

estate a

4000/

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt