

# ENCUMBRANCES DISCLOSURE



Seller: AgStar Financial Services - Garland Lumber

Customer Number: ~~116681~~ 116681

Effective Date of Disclosure: October 21, 2013

Lot or Item(s) #	Encumbrance description (e.g. mortgage, lien, lease, etc.)	Amount	Whom to contact for more information	Purple Wave use only:
	NO LIENS - BANK OWNED PROPERTY			

Seller verifies the completeness and accuracy of the foregoing information to the best of Seller's knowledge.

Seller Signature: 

Martha S. Harthiel  
Senior Lending Services Officer  
Agstar Financial Services, ACA

(print additional pages as needed)



Seller: AgStar Financial Services - Garland Lumber Customer Number: ~~116681~~ 116681

[illegible]

*This Exhibit 1 is transmitted pursuant to the terms and conditions of an Umbrella Auction Agreement between Seller and Purple Wave, Inc., as the same is amended from time to time. That Agreement is incorporated herein by reference as if fully set forth in this Exhibit 1.*

Seller's Signature: M. M. H. H. H. H.

Page 1 of 1

Seller's Signature: \_\_\_\_\_  
Name Printed: Martha S. Harthel

Name Printed: Marissa S. Smith  
Title: senior lending services officer  
AgStar Financial Services, ACA  
Copyright © 2011

10/22/13

# SPECIAL SETTLEMENT INSTRUCTIONS

(print additional pages as needed)



Seller: AgStar Financial Services - Garland Lumber

Customer Number: 116681

Auction Date: 131217NOCEN

I instruct Purple Wave, Inc., to disburse the net proceeds from auction of my Property as follows:

## Payee #1

Payee Name: AgStar Financial Services  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

This Payee should receive (choose one):

- a) \$ \_\_\_\_\_ flat amount, if less than total proceeds
- b) % \_\_\_\_\_ net proceeds from all Property
- c) % \_\_\_\_\_ net proceeds from Lot # \_\_\_\_\_
- d) All net proceeds from Lot# \_\_\_\_\_
- e) \$ ALL proceeds from Lot # ALL, less  
Expenses As Approved

## Payee #1 Wire Instructions

Bank Name: Agri Bank, FCB  
ABA Routing Number: 096016972  
Account Name: AgStar Financial Services  
Account Number: 362409688

## Payee #2

Payee Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

This Payee should receive (choose one):

- a) \$ \_\_\_\_\_ flat amount, if less than total proceeds
- b) % \_\_\_\_\_ net proceeds from all Property
- c) % \_\_\_\_\_ net proceeds from Lot # \_\_\_\_\_
- d) All net proceeds from Lot# \_\_\_\_\_
- e) \$ \_\_\_\_\_ proceeds from Lot # \_\_\_\_\_

## Payee #2 Wire Instructions

Bank Name: \_\_\_\_\_  
ABA Routing Number: \_\_\_\_\_  
Account Name: \_\_\_\_\_  
Account Number: \_\_\_\_\_

Seller Signature: Marty [Signature]  
Sr. Lending Services Officer  
AgStar Financial Services, LLC

Date: 10/22/13

→ will send the wire instructions form as attachment.

#116681  
131217 NOCEN

**AGSTAR FINANCIAL SERVICES INCOMING WIRE INSTRUCTIONS**

**Receiver Bank:** AgriBank, FCB

**Receiver ABA:** 096016972

**Beneficiary Account Type:** Checking

**Beneficiary Account Number:** 362408688

**Beneficiary Name:** AgStar Financial Services

**For Further Credit to:** Customer name: Garland Lumber

**Account Number:** Loan number: 353-2331851-403

**Customer Address** (if available):

**Notes:** Auction Proceeds

Please contact Martha Hartfiel with questions at 715-688-9574.  
Thank you for your help with this matter.

Sincerely,

*Martha S. Hartfiel*  
Senior Lending Services Officer  
AgStar Financial Services





# Auction Planning Form

## HOW TO USE THIS FORM

This form is used to guide the listing of items on purplewave.com. Complete this form for each location in which items are located. A completed copy of this form is required for listing items on purplewave.com.

INTERNAL USE

CUSTOMER: 116681  
LEAD: Ross RATE: 4%  
JOB CODE: 131217NBLCN

## LOCATION OF ITEMS

Complete location information. Check the box if you do not want company or full address published to purplewave.com

Company/Department \_\_\_\_\_ Address 396 County Road  
City WESTBROOK State MAINE Zipcode 04092

Do NOT publish company/department to purplewave.com ☐

Do NOT publish full address to purplewave.com ☐

## QUESTIONS ABOUT THE ITEMS SHOULD BE DIRECTED TO:

Complete contact information. Check the box if the information can be published to purplewave.com.

Name(s) Ross Schochenmayer  
Email(s) ross @ purplewave.com  
Phone(s) 612-834-9836

Publish to website?



## QUESTIONS ABOUT INSPECTION SHOULD BE DIRECTED TO:

Complete contact information. Check the box if the information can be published to purplewave.com.

Same as above ☐  
Name(s) Armand Richard  
Email(s) armand.richard @ northax.com  
Phone(s) 207-773-3777

Publish to website?



## INSPECTION DETAILS (check all that apply)

☒ Inspections are by appointment only

☐ Inspections are during the following dates and times:

Notes \_\_\_\_\_  
\_\_\_\_\_

Date:	Times:
Date:	Times:
Date:	Times:

Same as above ☒

## QUESTIONS ABOUT LOAD-OUT SHOULD BE DIRECTED TO:

Complete contact information. Check the box if the information can be published to purplewave.com.

Name(s) \_\_\_\_\_  
Email(s) \_\_\_\_\_  
Phone(s) \_\_\_\_\_

Publish to website?



## LOAD-OUT DETAILS (check all that apply)

☒ Load-out is by appointment only

☐ Load-out is available during the following dates and times:

Notes \_\_\_\_\_  
\_\_\_\_\_

Date:	Times:
Date:	Times:
Date:	Times:

Can you provide...? (check all that apply)

Load-out assistance? ☐

Vehicle start assistance? ☐

Forklift? ☐

Loading dock? ☐

Items must be removed by 14 Days  
Minimum is 7 days from the date of the auction.  
Default is 14 days after the auction.

## PAID INVOICES SHOULD BE SENT TO:

List any additional people to receive paid invoices at the end of the auction (location contact above is included by default)

Email ☒ \_\_\_\_\_ Fax: \_\_\_\_\_  
Name: \_\_\_\_\_ Email: ross @ purplewave.com Fax: \_\_\_\_\_  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

# LISTING SHEET

INTERNAL USE	
CUSTOMER:	116681
PROCESSED:	Ross
JOB CODE:	131217 NOCEN
LEAD:	Ross RATE: 4%

ICN	Title?	Description	Nominate
ES178	No	2005 MORBARK 2755 FLAIL CHIPPER/ESTON	10
		- SN - 2755-3-101	
		- MAIN POWER UNIT - CAT 3412	
		- 760 HP	
		- SN - BDT03547	
		- AUXILIARY POWER UNIT	
		- 360 HP	
		- SN - BCX01825	
		- MORLIFT 500 KNUCKLE BOOM - GRAPPLE - 22'	
		- SN - 878-231	REALTY
		- CHAPPEN - DELT DRIVE	
		- 83"	
		- 3-KNIFE	
		- CHA SIZE - 3/4"	
		- ESPAN FLUID HEATING SYSTEM	
		- For Fuel And Hydraulic Oil	
		- Operating Condition Unknown	
		- 3 FLAIL SYSTEM	
		- ENCLOSED OPERATOR CAB	
		- Joystick Control	
		- FLAIL + CHAPPEN Motor Controls	
		- AC + HEATER	
		- REA DOT - PN - R9757-0-24	
		- 24 Volt	
		- WET CLUTCH SYSTEM For CHAPPEN	
		- SKYCON BEAL Air Compressor - GAS Powered	
		- Model - VL-743H	
		- SN - 5-79-R04	
		- HONDA GX340 - 11 HP	
		- 30' Air Hose	
		- WORK LIGHTS	
		- TRIAXLE SELF CONTAINED Unit	
		- 295/75R22.5	

APP

6-WAY ADJUSTABLE SEAT  
EMERGENCY SHUT DOWN

## READ AND UNDERSTAND

1. PW only: Complete Internal Use section on every listing sheet
2. Be legible and accurate. Leave a blank line between descriptions.
3. Write assigned ICN. Stay in sequence. \* ICN if you break sequence.
4. Mark the Title? box if the item requires title confirmation.
5. Describe item thoroughly. Format description as it will appear on the website.
6. Enter a number between 1-10 (10=highest) in the Nominate column to nominate asset for marketing.



# LISTING SHEET

INTERNAL USE	
CUSTOMER:	116681
PROCESSED:	Ross
JOB CODE:	131277NOCLW
LEAD:	Ross
RATE:	4%

ICN	Title?	Description	Nominate
		- GROSS WEIGHT - 120,960#	
		- LENGTH - 55'	
		- HEIGHT - 13' 6" - Folded	
		- WIDTH - 11' - 11" - Folded	
		- TRAILER CAPACITY - 67500 lb SUSPENSION	
		- FUEL TANK - 310 GAL	
		- Hydraulic Oil Tank - 200 GAL	
		- Hydraulic Oil Tank - Flail - 130 GAL	
		- Flail Details	
		- 27" x 55" OPENING	
		- 3 TOP FEED ROLLERS	
		- 5 BOTTOM FEED ROLLERS	
		- SIDE CONVEYOR FOR TRUCK LOADING - 60	1/2 W
		- CHIPPEN DETAILS	x 23' L
		- 27" DIAMETER CHIPPEN CHAMF	
		- DIRT SEPARATOR	
		- DISCHARGE SPOUT TO LOAD TRUCKS	
		- FRONT + REAR TRAILER STABILIZERS	
		- Broken Trailer LIGHTS	
		- UNKNOWN HOURS ON ENGINES	
		- WORK PLATFORMS - Bent + Broken	
		- SIDE CONVEYOR HAS WELDS, BENT METAL SECTIONS	
		- BATTERIES NEED TO BE REPAIRED - 1 NEW	
		- WELDS ON CHIPPEN HOUSING	
		- CUSTOMER REBUILT CHIPPEN SPOUT	
		- ADDED CHIPPEN SPOUT SUPPORT	
		- Auxillary Engine - GAUGES DO NOT WORK BY MOTOR - WORK IN CAB	
		- Flail #2 - STARTUP SWITCH TOUCHY	
		- Flail #3 - DOES NOT HOLD IN NEUTRAL	
		- WORK LIGHTS DO NOT ALL WORK	

## READ AND UNDERSTAND

1. PW only: Complete Internal Use section on every listing sheet
2. Be legible and accurate. Leave a blank line between descriptions.
3. Write assigned ICN. Stay in sequence. \* ICN if you break sequence.
4. Mark the Title? box if the item requires title confirmation.
5. Describe item thoroughly. Format description as it will appear on the website.
6. Enter a number between 1-10 (10=highest) in the Nominate column to nominate asset for marketing.

- LEFT SIDE BROKEN 6 IN IN CAB

# MORBARK

## EQUIPMENT LOAD COMPLETION REPORT

CUSTOMER: \_\_\_\_\_ CONTACT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ PO # \_\_\_\_\_ WO # \_\_\_\_\_ COMPLETION DATE 10-8-04

MACHINE MODEL: 2755 FLAIL CHIPARVESTOR SERIAL NUMBER: 2755-3-101

MAIN POWER UNIT: CAT 3412ETA (760 HP) SERIAL NUMBER BDT03547

AUXILIARY POWER UNIT: CAT C-10 (365 HP) SERIAL NUMBER: BCX01825

LOADER:MODEL: 500 S\N: 878-231 W.O: 45463

CHIPPER:MODEL: 83" S\N: 101 W.O: 45094 NO. KNIVES: 3 CHIP SIZE: 1"

OPTIONS: ESPAR HEATER LIGHT PACKAGE CANADIAN LIGHT BAR 3 FLAIL REV FAN WET CLUTCH  
JOYSTICK CONTROL A/C HEAT COMBO WCB CAB

### ITEMS SHIPPED LOOSE:

1. 1- KNIFE GAUGE	8.
2. 1- BABBIT KIT WITH SOCKET	9.
3. 1- CHIPPER WRENCH	10.
4. 1- 3/4" IMPACT WITH SOCKEY	11.
5. 1- BLOW GUN	12.
6. 1- 30' AIR HOSE	13.
7.	14.

PARTS\OPER.MANUALS: X ENGINE MANUALS: \_\_\_\_\_ CHECK SHEETS X

### ITEMS BACK ORDER:

1.	3.
2.	4.

COMMENTS: \_\_\_\_\_

REGIONAL MANAGER: \_\_\_\_\_ DATE : \_\_\_\_\_

PRODUCT MGR: \_\_\_\_\_ DATE: \_\_\_\_\_

DELIVERD BY: \_\_\_\_\_ SHIP DATE: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_ RECEIVING DATE: \_\_\_\_\_