

UCC-1 Form

FILER INFORMATION

Full name: **ELICIA FERNALD**

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SEND ACKNOWLEDGEMENT TO

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Mailing Address: **480 TURNPIKE STREET**

City, State Zip Country: **SOUTH EASTON, MA 02375 USA**

DEBTOR INFORMATION

Org. Name: **EAST COAST DISPOSAL, LLC**

Mailing Address: **202 CHASE ROAD**

City, State Zip Country: **PORTSMOUTH, RI 02871 USA**

SECURED PARTY INFORMATION

Org. Name: **BRISTOL COUNTY SAVINGS BANK**

Mailing Address: **35 BROADWAY**

City, State Zip Country: **TAUNTON, MA 02780 USA**

TRANSACTION TYPE: STANDARD

COLLATERAL

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