



Buyer #1 or Entity JAMIE CRUISES, LLC
 SSN or FID _____
 Property Location 1815 Rt. 100, WARREN, VT 05674
 Date of Closing 2-12-2009



A. SELLER(S) INFORMATION

BLACK OUT ON TOWN COPY ONLY

Individual SELLER #1 Federal ID Number _____ Individual SELLER #2 Social Security Number _____
 Individual SELLER #1 Social Security Number _____ Individual SELLER #2 Federal ID Number _____

Entity SELLER #1 Name _____

Individual SELLER #1 Last Name LACASSE First Name CAROLE Initial _____
 Entity SELLER #1 or Individual SELLER #1 Mailing Address Following Transfer (Number and Street or Road Name) _____
1049 Crosstown Rd.
 City or Town BERLIN State VT Zip Code 05602

Individual SELLER #2 Last Name LACASSE First Name ANDRE Initial _____
 Individual SELLER #2 Mailing Address Following Transfer (Number and Street or Road Name) _____
1049 Crosstown Rd
 City or Town BERLIN State VT Zip Code 05602

TOTAL number of SELLERS _____ If more than 2, attach Form 172-S.

B. BUYER(S) INFORMATION

BLACK OUT ON TOWN COPY ONLY

Individual BUYER #1 Social Security Number _____ International address checkbox _____
 Individual BUYER #2 Social Security Number _____

Entity BUYER #1 Name _____

Individual BUYER #1 Last Name _____ First Name _____ Initial _____
 Entity BUYER #1 or Individual BUYER #1 Mailing Address Following Transfer (Number and Street or Road Name) _____
117 E HOLYUM STREET
 City or Town DEFOREST State WI Zip Code 53532

Individual BUYER #2 Last Name _____ First Name _____ Initial _____
 Individual BUYER #2 Mailing Address Following Transfer (Number and Street or Road Name) _____
 City or Town _____ State _____ Zip Code _____

TOTAL number of BUYERS _____ If more than 2, attach Form 172-B.

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C. PROPERTY LOCATION
 Number and Street or Road Name 1815 Rt. 100 Seasons Unit 201 Fnt 49
 City or Town WARREN State VT Zip Code 05674

D. DATE OF CLOSING
02 12 2009
 M M D D Y Y Y Y

E. INTEREST IN PROPERTY - Write the number from the list U% enter % Interest here
 1. Fee Simple 3. Undivided 1/2 Interest 4. Time-Share 7. Easement/Right 8. Other _____
 2. Life Estate 4. Undivided ___% Interest 6. Lease 8. Other _____

F. LAND SIZE (Acres or fraction thereof) _____
G. SPECIAL FACTORS If sale was between family members, enter number from list below: 1. Husband/Wife 2. Parent/Child 3. Grandparent/Grandchild 4. Other _____
 Check if development rights have been conveyed _____

H. FINANCING: Conventional/Bank _____ Owner Financing _____ Other _____

I. TYPE OF BUILDING CONSTRUCTION AT THE TIME OF TRANSFER (Check all that apply)
 1. None 5. Farm Buildings 9. Store
 2. Factory 6. Multi-Family with Dwelling Units Transferred 10. Residential New Construction
 3. Single Family Dwelling 7. Mobile Home 11. Other _____
 4. Seasonal Dwelling 8. Condominium with ___ Units Transferred

J. SELLER'S USE OF PROPERTY BEFORE TRANSFER (Enter number from list) Check if property was rented BEFORE transfer
 1. Primary Residence 4. Timberland 7. Commercial
 2. Open Land 5. Operating Farm 8. Industrial
 3. Secondary Residence 6. Government Use 9. Other TIMESHARE

K. BUYER'S USE OF PROPERTY AFTER TRANSFER (Enter number from list) Check if property will be rented AFTER transfer
 1. Primary Residence 4. Timberland 7. Commercial
 2. Open Land 5. Operating Farm 8. Industrial
 3. Secondary Residence 6. Government Use 9. Other TIMESHARE

L. AGRICULTURAL/MANAGED FOREST LAND USE VALUE PROGRAM, 32 V.S.A. Chapter 124 If transfer is exempt from Property Transfer Tax, cite exemption number from instructions and complete Sections M, N, and O below.
 1. Check if new owner elects to continue enrollment of eligible property _____

M. TOTAL Price Paid Price paid for Personal Property _____ Price paid for Real Property _____
 State type of Personal Property _____
 If price paid for Real Property is less than fair market value, please explain: Gift

N. Value of purchaser's principal residence (See instructions) _____
O. Fair market value of property enrolled in current use program _____
P. Fair market value of qualified working farm _____

Q. PROPERTY TRANSFER TAX DUE from rate schedule on page 3 of this form. 0.00
COMPLETE RATE SCHEDULE FOR ALL TRANSFERS. Make checks payable to VERMONT DEPARTMENT OF TAXES

R. DATE SELLER ACQUIRED 02 12 2009
 M M D D Y Y Y Y

S. IF A VERMONT LAND GAINS TAX RETURN IS NOT BEING FILED, cite exemption(A) from instructions on page 4 of this booklet _____

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RATE SCHEDULE

1. Value of purchaser's principal residence (See instructions)	1.	0
2. Value of property enrolled in current use program	2.	0
3. Value of qualified working farm	3.	0
4. Add Lines 1, 2, and 3	4.	0
5. Tax rate	5.	0.005
6. Tax due on Special Rate Property (Multiply Line 4 by Line 5)	6.	0
Tax on General Rate Property		
7. Enter amount from Line O on page 2 of this form	7.	0
8. Enter amount from Line 4 above	8.	0
9. Subtract Line 8 from Line 7	9.	0
10. Tax rate	10.	0.0125
11. Tax due on General Rate Property (Multiply Line 9 by Line 10)	11.	0
TOTAL TAX DUE		
12. Add Line 6 and Line 11. Enter here and on Line 5 on page 2 of this form.	12.	0

LOCAL AND STATE PERMITS AND ACT 250 CERTIFICATES

Buyer(s) and Seller(s) certify as follows:

A. That they have investigated and disclosed to every party to this transaction all of their knowledge relating to flood regulations, if any, affecting the property.

B. That the seller(s) advised the buyer(s) that local and state building regulations, zoning regulations and subdivision regulations and wastewater system and potable water supply rules under 10 V.S.A. Chapter 64 pertaining to the property may limit significantly the use of the property.

C. That this transfer is in compliance with or is exempt from the wastewater system and potable water supply rules of the Agency of Natural Resources for the following reasons:
 1. This property is the subject of Permit Number _____ and is in compliance with said permit, or
 2. This property and any retained parcel is exempt from the wastewater system and potable water supply rules because (see instructions for exemptions):
 a. Parcel to be sold: Exemption Number _____
 b. Parcel retained: Exemption Number _____

Seller(s) further certifies as follows:

D. That this transfer of real property and any development thereon is in compliance with or exempt from 10 V.S.A. Chapter 151, Vermont's Land Use and Development law (Act 250), for the following reason:
 1. This property is the subject of Act 250 Permit Number _____ and is in compliance with said permit, or
 2. This property is exempt from Act 250 because (list exemption number from Line D in instructions): _____

E. That this transfer does/does not (strike one) result in a partition or subdivision of land. Note: If it does, an Act 250 Disclosure Statement must be attached to this return before filing with the town clerk (see Line E instructions).

WITHHOLDING CERTIFICATION

Buyer(s) certifies that Vermont income tax has been withheld from the purchase price and will be remitted to the Commissioner of Taxes with Form RW-171 within 30 days from the transfer.

The transfer is exempt from income tax withholding for the following reason (check one):
 1. Under penalties of perjury, seller(s) certifies that at the time of transfer, each seller was a resident of Vermont or an estate.
 2. Buyer(s) certifies that the parties obtained withholding certificate number _____ from the Commissioner of Taxes in advance of this sale.
 3. Buyer(s) certifies that this is a transfer without consideration. (See Instructions for Form RW-171.)
 4. Seller(s) is a mortgagee conveying the mortgaged property to a mortgagee in a foreclosure or transfer in lieu of foreclosure, with no additional consideration.

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SIGNATURES

We hereby swear and affirm that this return, including all certificates, is true, correct and complete to the best of our knowledge.

SELLER(S)
 Signature Carole Lacasse Date 2-24-2009
 Signature Andre Lacasse Date 2/24/2009
 Signature _____ Date _____
 Signature _____ Date _____

BUYER(S)
 Signature Uri Freid Date 3-3-2009
 Signature URI FREID - PRESIDENT OF JC Date _____
 Signature _____ Date _____
 Signature _____ Date _____

Prepared by (print or type) _____ Preparer's Signature _____
 Preparer's Address _____ Buyer's Representative _____
 Buyer's Representative Telephone _____

Town or City: Please forward original to the VT Department of Taxes within 30 days of receipt.

THIS SECTION TO BE COMPLETED BY TOWN OR CITY CLERK

Book Number 199 Page Number 401-402 Grand List year of 2008
 City or Town Warren Date of Record _____
 Listed Value Time share Parcel ID Number 334100
 Grand List Category 0 SPAN 690 219 13413
 M M D D Y Y Y Y

ACKNOWLEDGMENT
 Return received (including certificates and Act 250 disclosure statement) and tax paid.
 SIGNED [Signature] Clerk DATE 3/16/09

* Please use the following two-digit grand list category codes

Residential <6 Acres	01	Seasonal >6 Acres	06	Utilities Other	11
Residential >6 Acres	02	Commercial	07	Farm	12
Mobile Home/Ln	03	Commercial Apt	08	Other	13
Mobile Home/Ln	04	Industrial	09	Woodland	14
Seasonal <6 Acres	05	Utilities Elec	10	Miscellaneous	15

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