



Vermont Food Bank
Buyer #1 or Entity _____
SSN or FID _____
Property Location _____
Date of Closing _____



1. SELLER'S (TRANSFEROR'S) INFORMATION

BLACK OUT ON TOWN COPY ONLY
Entity SELLER #1 Federal ID Number _____ Individual SELLER #1 Social Security Number _____ Individual SELLER #2 Social Security Number _____

Entity SELLER #1 Name
Janice M. Kingsbury

Individual SELLER #1 Last Name _____ First Name _____ Initial _____

Entity SELLER #1 or Individual SELLER #1 Mailing Address Following Transfer (Number and Street or Road Name)
SQUIRE HOUSE, UNION STREET

City or Town _____ State _____ Zip Code _____

Individual SELLER #2 Last Name _____ First Name _____ Initial _____

Individual SELLER #2 Mailing Address Following Transfer (Number and Street or Road Name)
WATERBURY

City or Town _____ State _____ Zip Code _____

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

2. PROPERTY LOCATION
Number and Street or Road Name
284 VT. ROUTE 100
City or Town
WARREN VT 05674 VT

3. DATE OF CLOSING
03 30 2009
M M D D Y Y Y Y

4. INTEREST IN PROPERTY - Write the number from the list If "1", enter % Interest here %
1. Fee Simple 2. Life Estate 3. Undivided 1/2 Interest 4. Undivided 1/4 Interest 5. Lease 6. Time-Share 7. Easement/Row 8. Other

5. LAND SIZE (Acres or fraction thereof)
 ±

6. 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
FINANCING: Conventional/Bank Owner Financing Other NA

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

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

9. BUYER'S USE OF PROPERTY AFTER TRANSFER (Enter number from list) Check if property was purchased by tenant Check if buyer holds title to any adjoining property
1. Primary Residence 2. Open Land 3. Secondary Residence 4. Timberland 5. Operating Farm 6. Government Use 7. Commercial 8. Industrial 9. Other NA - EASEMENT

10. AGRICULTURAL/MANAGED FOREST LAND USE VALUE PROGRAM, 32 V.S.A. Chapter 124
 1. Check if property being conveyed is subject to a land use change tax lien
 2. Check if new owner elects to continue enrollment of eligible property

11. IF TRANSFER IS EXEMPT FROM PROPERTY TRANSFER TAX, cite exemption number from Instructions and complete Sections M, N, and O below. 4

12. TOTAL Price Paid Price paid for Personal Property Price paid for Real Property
0.00 0.00 0.00

State type of Personal Property _____
If price paid for Real Property is less than fair market value, please explain _____

13. Value of purchaser's principal residence (See Instructions) 0.00 **14. Fair market value of property enrolled in current use program** 0.00 **15. Fair market value of qualified working farm** 0.00

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

17. DATE SELLER ACQUIRED 09 26 1952
M M D D Y Y Y Y

18. IF A VERMONT LAND GAINS TAX RETURN IS NOT BEING FILED, cite exemption(s) from Instructions on page 4 of this booklet. 2

3. BUYER'S (TRANSFEEE'S) INFORMATION INTERNATIONAL address check box

BLACK OUT ON TOWN COPY ONLY
Entity BUYER #1 Federal ID Number _____ Individual BUYER #1 Social Security Number _____ Individual BUYER #2 Social Security Number _____

Entity BUYER #1 Name
Vermont Food Bank

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)
PO Box 254

City or Town _____ State _____ Zip Code _____

Individual BUYER #2 Last Name _____ First Name _____ Initial _____

Individual BUYER #2 Mailing Address Following Transfer (Number and Street or Road Name)
South Barre

City or Town _____ State _____ Zip Code _____

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

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Rev. 11/05 (REPLACES Form PT-1)

Form PT-172, Page 2 of 4
Rev. 11/05 (REPLACES Form PT-1)

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RATE SCHEDULE

1. Value of purchaser's principal residence (See Instructions)	1.	
2. Value of property enrolled in current use program	2.	
3. Value of qualified working farm	3.	
4. Add Lines 1, 2, and 3	4.	
5. Tax rate	5.	0.005
6. Tax due on Special Rate Property (Multiply Line 4 by Line 5)	6.	
7. Enter amount from Line D on page 2 of this form	7.	
8. Enter amount from Line 4 above	8.	
9. Subtract Line 8 from Line 7	9.	
10. Tax rate	10.	0.0125
11. Tax due on General Rate Property (Multiply Line 9 by Line 10)	11.	
TOTAL TAX DUE		
12. Add Line 6 and Line 11. Enter here and on Line S on page 2 of this form	12.	0.00

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 1-304
b. Parcel retained: Exemption Number NA

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): B

E. That this transfer 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.

OR that 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.

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 Janice Kingsbury Date 3/30/09
Signature _____ Date _____
Signature _____ Date _____

BUYER(S)
Signature Wendy Dyer City of VT Food Bank Date 3-30-09
Signature _____ Date _____
Signature _____ Date _____

Prepared by (print or type) OLENICK & OLENICK, P.C. Preparer's Signature _____
Preparer's Address P.O. BOX 25 Preparer's Representative _____
HATZFELD, VT 05673 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 601 Grand List year of 2008
City or Town
Warren Date of Record
03 30 2009
M M D D Y Y Y Y

Listed Value 0.00 Parcel ID Number 1.00000-4
Grand List Category 02 SPAN 690-219-1157

ACKNOWLEDGMENT
Return received (including certificates and Act 250 disclosure statement) and tax paid.
SIGNED [Signature] Clerk DATE 3/31/09

* Please use the following two-digit grand list category codes
Residential <6 Acres 01 Seasonal >6 Acres 05 Utilities Other 11
Residential >6 Acres 02 Commercial 07 Farm 12
Mobile Home/In 03 Commercial Apts 08 Commercial 13
Mobile Home/LA 04 Industrial 09 Woodland 14
Seasonal <6 Acres 05 Utilities Elec. 10 Miscellaneous 15

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