

93013833

Environmental Disclosure Document for Transfer of Real-Property

For Use By County Recorder's Of	fice			
County LAKE		Date 1/22/02		and the state of the state of the second state of the second state of the state of
	Value	1/22/93		and the state of t
Document number	Volume	Page	[A	eceived by
The following information is provid	led under IC 13-7-22.	the Responsible Property Transfe	er Law.	
Property Identification				SA
A. Address of property:				
3430_W_22nd: Ave		City or town		EC SEC
SHSU_W_ZZNU: AVE		GAry Permanent real est	ate index number	
•	•		•	5
3. Legal description:		en e	4	WE E
Section	Township		Range	
nter or attach complete legal descrip	tion in this area:	· · · · · · · · · · · · · · · · · · ·		- 29 - 3
inter or attach complete legal descrip 21 AND THE WEST 18 FEET OF 1	LOT#22, BLOCK/4>:WO	RTHLEY'S ADDITION TO GARY	•	•
lability*Disclosüre •	•	•	,	
Transferors and transferees of real pro Eleanup costs whether or not they cau	perty are advised that the	eir ownership or other control of suc	h property may render	them liable for environmental:
C. Property Characteristics:		presence of environmental problem	s in association with the	тө ргорегту.
Lot size		Acreage		
		7.10.0080		
Check all types of Improvement and u		operty:		
Apartment building (6 units or less	5) (is)	Industrial build	ng diam	•
Store, office, commercial building	107	Ocum Estant with Sull Other (specify)	ungs	
I. Nature of Transfer	/ NO	TOFFICIA		
	other instrument of conv	evance?	The second secon	Yes No
(2) Is this a transfer by assignm	and of over 25% of bene	evance? Timent is the prope licial interest of a land livel?	erty of	Yes I No
(3) A lease exceeding a term of	40 years? the La	ake County Record	er!	Yes No
(4) A mortgage or collateral ass				19 Yos [] No
(5) A contract for the sale of pro-	pperty?			☐ yes ☐ No
. (1) Identify Transferor:				
ame and current address of Transfer	or			rust number
		• . •	1	manner in place to be une a
ame and address of Trustee if this is	a transfer of beneficial in	nterestrof a land trust.		
2) Identify person who has completed	this form on behalf of th	e Transferor and who has knowledg		
lame, position:(if any), and address		THOER'S OF		elephone [.] number
. Identify Transferee:				· · · · · · · · · · · · · · · · · · ·
lame and current address of Transfer	98			iiii
I. Environmental Information"		CALL SEAL STATE	· · · · · · · · · · · · · · · · · · ·	
. Regulatory Information During Cu		DIANALITY	/	
1. Has the transferor ever cond	ucted operations on the	property which involved the generation	on, manufacture, proc	essing,
ennly to:consumer goods sto	ored or hendled:bv.e rete	zardous waste", as defined by IC/13 iller in:the same form:and approxima	ite amount.:concentra	tion.
and manner as they are sold	to consumers, unless th	e retailer has engaged in any comm	ercial mixing (other th	an
paint mixing or tinting of con property.	sumer sized:containers),	finishing, refinishing, servicing, or co	eaning operations on	the:
2. Has the transferor ever cond	ucted operations on the	property which; involved, the process	ing, storage, or handli	ng of
petroleum, other than that ye	hich was associated dire	ctly with the transferor's vehicle usa	ge?	∐ Yes l⊌d No
3. Has the transferor ever cond	ucted operations on the	property:which:involved-the generati ned:in:IC 13-7-1?	on, transportation, sto	rage, No.
		ned in:10-13-7-17 g or closed) at the property that are		
transferor to manage hazard	ous wastes, hazardous s	ubstances, or pertroleum?		1.32 - 22
Landlill •	• •			Yos Hana
Surface Impoundment		•	.	Yes, Jan No.
Land Treatment Waste Pile			ر » د ا	Yes No
Incinerator			J.	Yes You
Storage Tank (Above Ground)	():		/	Yes No.
Storage Tank (Underground) Container Storage Area				Yes No
Injection Wells				Vas W No
Wastewater Treatment Units				Yes No
Septic Tanks				Yes W No
Transler Stations Waste Recycling Operations				Yes W No
Waste Treatment Detoxilication	on			Yes No
Other Land Disposal Area				L Yes L No
		and the transfer of property that re		
		inment of beneficial interest, you mu and the department of environmental		
that identifies the location of			management a site p	· Mr 7

(continued on reverse side).

u.	(A) Permits for discharges of wastewater to waters of Indiana. (B) Permits for emission to the atmosphere. (C) Permits for any waste storage, waste treatment, or waste disposal operation.	Yes No				
6. 7.	Has the transferor ever discharged any wastewater (other than sewage) to a publicly owned treatment works? Has the transferor been required to take any of the following actions relative to this property? (A) Filed an emergency and hazardous chemical inventory form pursuant to the lederal Emergency Planning and Community Right-to-Know Act of 1986 (42 U.S.C. 11022).	☐ Yes ☐ No				
	(B) Filed a toxic chemical release form pursuant to the federal Emergency Planning and Community Right-to-Know Act of 1986 (42 U.S.C. 11023).	☐ Yes ☐ Ño				
-8.	Has the transferor or any facility on the property or the property been the subject of any of the following state or federal governmental actions?	·				
	(A) Written notification regarding known, suspected, or alleged contamination on or emanating from the property,(B) Filing an environmental enforcement case with a court of the solid waste management board for which a final order or consent decree was entered.	☐ Yes ☐ No ☐ Yes ☐ No				
	(C) If the answer to question (B) was Yes, then indicate whether or not the final order or decree is still in effect for this property,	☐ Yes ☑ No				
₹9,	Environmental Releases During Transferor's Ownership. (A) Has any situation occurred at this site which results in a reportable "release" of any hazardous substances or					
	petroleum as required under state or fédéral laws? (B) Have any hazardous substances or partroleum which were released come into direct contact with the ground at	L. Yes LD No.				
	this site? If: the answers to questions (A) and (B) are Yes, have any of the following actions or events been associated with a release on the property?	Yos In No				
	Use of a cleanup contractor to remove or treat materials including soils, pavement, or other surficial materials? Assignment of in-house maintenance staff to remove or treat materials including soils, pavement, or other surficial materials?					
	Sampling and analysis of soils? Temporary or more long-term monitoring of groundwater at or near the site?					
	☐ -Impaired usage of an on-site or nearby water well because of difensive characteristics of the water? ☐ Coping with fumes from subsurface storm drains or inside basements?					
10	Signs: of substances leaching out of the ground along the base of slopes or at other low points on or immediately adjacent to the site?					
	Is the facility currently operating under a variance granted by the commissioner of the Indiana department of environmental management? Is there any explanation needed for clarification of any of the above enswers or responses?	Yes No.				
11.	is there any explanation headed for claim and or any entire survey engine and engine of the survey o					
ts r						
	Information! Under Other Ownership or Operation					
1.	Provide the following information about the previous owner or about any entity or person to whom the transferor leased the property or with whom the transferor contracted for the management of the property: Name Type of business or preperty usage					
2.	If the transferor has knowledge, indicate whether the following existed under prior ownerships, leaseholds granted by the transferor, or other contracts for management or use of the property:	/				
	Landfill Surface Impoundment	Yes No				
	Land Trealment Waste Pile	Yes No Yes No				
	Incinerator Storage Tank (Above Ground) Storage Tank (Underground)	Yes No				
	Container Storage Area Injection Wells	Yes No				
	Wastewater Treatment Units Septic Tanks Transfer Stations	Yes No				
	Waste Fiecycling Operations -Waste-Treatment Detoxification	Yes No				
	Other Land Disposar Area	Yes W. No.				
A. Baseo	ion mylinguity of those persons directly responsible for gathering the information, I certify that the information submitted and belief, true and accurate.	is, to the best of my				
	or/Transferor (type name as signed): M CARNEYGEE A sthe M. Cawygu					
B: This fo	orm was delivered to me with all elements completed on 1/22/ Financial Indianadinc. (type name as signedy)	19 93				
Tim S						
State of) ss.					
County o	Lake e_me, the undersigned, a Notary Public in and for said County, this	, 1993				
came	Reatha M Carney gee , and acknowledged the mand and acknowledged the mand and official seal.	execution of the foregoing.				
	James A Apss	, Notary Public				
My Com	mission Expires:	e (20)				
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