

94004608

Environmental Disclosure Document for Transfer of Real Property

	County Recorder's Of	<u>fice</u>		·			
County Lake			Däte November 1:05,1993				
Document nu	mber.	Volume		Page		Received by	***************************************
The following	g Information is provid	ded under IC 13-7-2	2, the Responsibl	e Property	Transfor Law.		
CANADA AND AND AND AND AND AND AND AND AN	Identification						
A. Address of				City or town			
	Martin Luth	er King Dr		(Gary		•··
Township'			•	Permanent r	eal estate index number		
B. Legal des	cřiption:						
Section lot 5	, except the north	1 171/2 feet therof	<i>ship</i> , and the north	1:22" 1/2 feet	t of lot 6 block 14,	resubdivison	of gary land!
Enter or attack	h.complete legal descrip	ption in this area; con	panys thirteent he office of th	:h(:13th)-si ie recordei	ubdivision in the circoff Lake County; IN	t y of gary as diana:	per plat
Liability Disci	losure)		*****			· · · · · · · · · · · · · · · · · · ·	
Transferors an	nd transferees of real pro i whether or not they cau	perty are advised the used or contributed to	it their ownership or the presence of en	othër contro	l'of such property may ren problems in association wit	der them:liable for	envjronmental.
	Characteristics:				Forefichiologists above cross training and the	ii tila piopoliy.	
Lotisize.				Acreage		· (7)	STA
Checkiell type	es; of Improvement and u	uses that portain to the	o 'nronerhr				<u> </u>
	nt building (6 units or les cial apartment (over 6 un		Doors.	i Industri	al bulldkiğ	m C	(E) (E)
Commerce Store, off	cial apartment (over 6 un lice, commercial building	its)\	Joeum	Other (s	Athibuildings:	<u> </u>	5
	f Transfer	· · · · · · · · · · · · · · · · · · ·	TOFF	HCI	AL!		N O.
	ils a transler by deed or	other mitte mention	onveyance21 is 1	the pro	nerty of	∞ □•	Vest LI No.
(2) Is th	nis a transfer by assignm	nent of over 25% of b	enelicial interest of:	a land trust?	rder!	五	
(3). Alle	ese exceeding;a term of portgage or collateral ass	1 40 years?		y reced	Tuci.	XXX \	Yes ☐ No F
	ontract for the sale of pr						
B: (1) Identify	y.Transferor:					<u></u>	APPARATE AND A STATE OF THE STA
	rrent address of Transfer	or				Trust number.	
Name and add	dress of Trustee if this is	s a transfer of benefic	ial interest of alland	trust.		·	<u></u>
							· · · · · · · · · · · · · · · · · · ·
	rson who has completed n (If any); and address	tithis form on behalf o	of the Transferor and	d who has kn	owledge of the information	contained in this Telephone number	
······	ii (ii diiy), diid dadi aga		STORDER S	O		Talophono numbe	
Chidentify Tr	ransferee: rrent address of Transfer						
·ivaiije and cui	ITEM EQUIESS OF TRANSFER	AA				***	
	nental information:		WOLAN	in string			*** **** **** ********* *** * * *** **
	y Information During Cu the transferor ever cond		the property which	involved the	generation, manufacture, p	rocessina	• • • • • • • • • • • • • • • • • • • •
trans	sportation, treatment, sto	orage, or handling of	"hazardous.waste".	as defined l	by 10.13-7.17.This question proximate amount, concen	n∙does not	
and	manner as they are sold	d to consumers, unles	is the retaller has er	ngaged in an	y commercial mixing (other	r than	
.prop	perty.				g, or cleaning operations	اعا	Yes DaNo
2. Hasi	the transferor ever cond oleum, other than that w	lucted operations on which was associated	the propërty which i directiv with the trai	involved the p nsferor's vehi	processing, storage, or hai icle usage?		Yes 🗔 No
3. Has	the transferor ever cond	ducted operations on	the property which i	involved the g	generation, transportation,	storage;	Yes 🖾 No
	tment; or disposal of "hi there any of the followin	· · · · · · · · · · · · · · · · · · ·			hat are used or were used		162 (5) NO.
trans	sferor to manage hazard	lous wastes, hazardo	us substances, or p	ertroleum?			Yes .[]/ No
	ace Impoundment						Yes No
	d Treatment ste Pile					<u> </u>	Yes No
	nerator rage Tank (Above Ground	d)					Yes No
Store	age Tank (Underground) tainer Storage Area	j*				\mathbb{H}	Yes No
Injec	ction Wells		•			R	Yes LaNo
Sept	tewater Treatment Units tic Tanks					Ħ	Yes I No
Was	isfer Stations ite Recycling Operations	;				H	Yes No
Was	ite Treatment Detoxificati er Land Disposal Area	ion					Yes No Yes No Yes No
If the	ere are "YES" answers	to any of the above i	tems and the transf	er. of property	that requires the filing of	this	
this.	ument is other than a mo document that you file v identifies the location of	with the county record	assignment of benef der and the departm	iciai interest, ient of enviro	you must attach to the co nmental management a si	ppies of le [†] plan	

(continued on reverse side)

5.	Has the transferor ever held any of the following in regard to this real property?		6 *	•
	(A) Permits for discharges of wastewater to waters of Indiana.	Yes	□ No	
	(B) Permits for emission to the atmosphere.	***	₩ No	
	(C) Permits for any waste storage, waste treatment, or waste disposal operation.		-No	
6.	Has the transferor eyer discharged any wastewater (other than sewage) to a publicly owned treatment works?	☐ Yes	No No	
7.	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 federal Emergency Planning		PPM	
	and Community Right-to-Know Act of 1986 (42 U.S.C11022):	LJ Yes	E 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	E-No	
8.	Has the transferor or any facility on the property or the property been the subject of any of the following state or	1 100		
	federal governmental actions?			
	(A) Written notification regarding known, suspected, or alleged contamination on or emanating from the property.	Yes	Mo.	
	(B) Filling an environmental enforcement case with a court of the solid waste management board for which a final	г	سيسك	
	order or consent decree was entered. (C) If the answer to question (B) was Yes, then indicate whether or not the final order or decree is still in effect for	□: Yes	No.	
	to in the answer to deeple to the tree the introduction and the tree that the the the tree to sell in electror	h Yes	19 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 federal laws?\	Yes!	14 No	
	(B) Have any hazardous substances or pertroleum which were released come into direct contact with the ground at this site?	Yes	□ No	
	If the answers to questions (A) and (B) are Yes, have any of the following actions or events been associated with a	1-1 765	LJ*N0	
	release on the property?			
	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?			
	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 offensive characteristics of the water?			
	Coping with furnest from subsurface storm drains or inside basements?			
	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?			
10.	is the facility currently operating under a variance granted by the commissioner of the indiana department of environmental management?		/m -	
		∐ Yes	٥٨٠٠٤ ا	
1.71	Is there any explanation needed for elacification of any of the above enswers or responses?	1		
	the Lake County Recorder!			
			and a subsequent to see 1986.	
B. Site I	nförmation 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:			
	Production .			
	Type of business or property usage			
	THOE RICE.			
				420
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	Yes.		
	Surface Impoundment Land Treatment	Yes Yes		
	Waste Pile	Yes	ET No	
	Incinerator Council (Above Council)	Yes	,	
	Storage Tank (Above Ground). Storage Tank (Underground)	Yes Yes	No No	
	Container Storage Area	☐ Yes	☑ No	
			liel Ala.	
	Injection: Wells Westerwister Treatment Units:	Yes Yes	. —	
	Wastewater Treatment Units	Yes Yes	D No:	
	Wastewater Treatment Units: Septic Tanks Transfer Stations	Yes Yes	No.	
	Wastewater Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations	Yes Yes Yes	No. No. No.	
	Wastewater Treatment Units: Septic Tanks Transfer Stations	Yes Yes	No No No No No	
:IV: Cer	Wastewater Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area	Yes Yes Yes Yes	No No No No No	· · · · · · · · · · · · · · · · · · ·
A. Basec	Wastewater Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted	Yes Yes Yes Yes Yes Yes	No No No No No No No No	
A. Basec	Wastewater Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area	Yes Yes Yes Yes Yes Yes	No No No No No No No No	
A. Based knowl	Wastewater Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted and belief, true and accurate.	Yes Yes Yes Yes Yes Yes	No No No No No No No No	
A. Based knowl Mortgage	Wastewater Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted and belief, true and accurate. Transferor (type name as signed:) Transferor (type name as signed:)	Yes Yes Yes Yes Yes Yes	No No No No No No No No	
A. Based knowl Mortgage B. This fo	Wastewater Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted aggs and belief, true and accurate. Transferor (type name as signed):	Yes Yes Yes Yes Yes Yes	No No No No No No No No	
A. Based knowl Mortgago B. This for Norwest	Wastewater Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted aggs and belief, true and accurate. In Transferor (type name as signed): The information of the informati	Yes Yes Yes Yes Yes Yes	No. No. No. No. No. No. No. No. No.	
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A. Based knowl Mortgago B. This for Norwest	Waste Treatment Units: Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted and belief, true and accurate. or/Transferor (type name as signed) orm was delived to me with all elements completed on the information of	Yes Yes Yes Yes Yes Yes	No. No. No. No. No. No. No. No. No.	
A. Based knowle Mortgage B. This for Norwest	Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area illication on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted side and belief, true and accurate. in Transferor (type name as signed) frendar Gatifricy orm was delived to me with all elements completed on the completed of the co	Yes Yes Yes Yes Yes Yes	No. No. No. No. No. No. No. No. No.	
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A. Based knowl Mortgage B. This to Norwest:	Waste Nations Waste Recycling Operations Waste Recycling Operations Waste Recycling Operations Waste Recycling Operations Wiffication Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted soge and belief, true and accurate. In Transferor (type name as signed) International Companies of the complete of the	Yes Yes Yes Yes Yes Yes	No.	93
A. Based knowl Mortgage B: This for Norwesti County & Belon	Wastewater Treatment Units' Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxilication Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted and belief, true and accurate. Transferor (type name as signed): Transferor (type name as sign	Yes Yes Yes Yes Yes Yes	No:	93 eggina
A. Based knowledge Mortgage B. This for Norwest: State of Belon came	Waste Nations Waste Recycling Operations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxilication Other Land Disposal Area tification In my Inquiry of those persons directly responsible for gathering the Information; I certify that the Information submitted sogs and belief, thue and accurate. Transferor (type name as signed) Financial religion (type name as signed) Fina	Yes Yes Yes Yes Yes Yes	No:	
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A. Based knowl Mortgage B. This for Norwesti State of Before County of Before Witness	Waste water Treatment Units' Septic Tanks Transfer Stations Waste, Recycling, Operations Waste, Recycling, Operations Waste, Treatment Detoxilication Other Land Disposal Area Willcation On my Inquiry of those persons directly responsible for gathering the information; I certify that the information submitted soigned and belief, true and accurate. The Transferor (type name as signed) The Transferor (type name as s	Yes Yes Yes Yes Yes Yes	No: No: No: No: No: No: No: No: No: 19	egoing.
A. Based knowledge Mortgage B. This for Norwesti County of Belon came Witness Type nar My Comit	Waste Water Treatment Units: Septite Tanks Transfer Stations Waste Recycling, Operations Waste Treatment Detoxification Other Land Disposal Area tification on my inquiry of those persons directly responsible for gathering the information; I certify that the information submitted sogs and belief, true and accurate. In Transferor (type name as signed) Transferor (type name as signed) Financial Gathery The work of the second of th	Yes Yes Yes Yes Yes Yes	No: No: No: No: No: No: No: No: No: 19	egoing.