######################################	ST FINANCIAL		7 GRIFFITH, INC			Do	vironmental cument for al Property	Transfer			
For Use County	By County Recorder's Office	CO		Date	Return	NOS	WEST FINAN	CIAL-188	·		
County					+0.		SARDS PLAZA				
Docume	nt number	Volume		Page		1155	Meterinad by GE	ROAD			
	owing information is provide	d under IC	13-7-22, the Responsib	le Prop	erty Transfer Lat	w, Gittr	rifri, IKDIAM	1-10310			
	erty Identification										
Street	ess of property:			City or	town						
1062 W 59th PL					MERRILLVILLE						
Township .					Permanent real estate index number						
	description:										
Section			Township			Range			•		
Liability Transfero	ettach complete legal description AND BEING DESCRIBED IN ABOVE. AND REFRENCED A Disclosure TO WIT: LOT 51 per and transferees of real proposts whether or not they caused the complete structure.	S-FOLLOWS: in BARCLAY	-018046. THE FOLLOW! VILLAGE UNIT, IN THE	ING-DES	SCRIBED-REAL_E NOF MERRILLVII Control of such pro- Intal problems in a FICE OF THE RE	STATE IN LA LLE, AS PER	KE-COUNTY-IN-T PLAT THEREOF,	HE-STATE OF RECORDED I	STATE INDIA N PLA 25, IN		
Check all	I types of improvement and use	es that pertain	to the property:	and the state of t	100 V-10- 0 -1-10-1-1-10-1-1-1-1-1-1-1-1-1-1-						
Apar Com	rtment building (6 units or less) mercial apartment (over 6 units a, office, commercial building		Docum	Fe Fe	dustrial building arm, with buildings ther (specify)	SINGLE F	MILY				
II. Natur	re of Transfer		OTOFI	T	HALL						
(2) (3) (4) (5)	Is this a transfer by deed or of is this a transfer by assignment A lease exceeding a term of 4 A mortgage or collateral assign A contract for the sale of property.	nt of over 25° 10 years? Inment of ben	% of beneficial interest of				X	Yes XX No Yes XX No Yes No Yes XX No			
	entify Transferor: of current address of Transferor					<b>-</b>	Trust number				
GREG	CORY S. AND JULIA BIRMIN d address of Trustee W this is	GHAM 1062		trust.		and the state of t	a consiste in specific a contact cons	(A)			
(2) Identi	fy person who has completed t	this form on b	ehalf of the Transferor and	d who h	as knowledge of t	he information					
NOR	osition (if any), and address VEST_FINANCIAL_INDIANA Ify Transferee:	INC 1155 E	. RIDGE ROAD GRIFFI	H. In	46319	_//	219-923-9150	<u> </u>			
NORWE	d current address of Transfered ST FINANCIAL INDIANA, I ronmental Information		RIDGE ROAD GRIFFITH	1, IN	46319						
	atory Information During Cur	rent Owners	hip	ini							
1.	Has the transferor ever condu- transportation, treatment, store apply to consumer goods stor- and manner as they are sold to paint mixing or tinting of consu- property.	cted operation age, or handle ed or handled to consumers umer sized co	ns on the property which ing of "hazardous waste" I by a retailer in the same , unless the retailer has e ontainers), finishing, refinis	', as det form ai ngaged shing, se	ined by IC 13-7-17 nd approximate an in any commercia arvicing, or cleanin	? This question mount, concent In mixing (other ing operations (	n does not itration, than on the	95. No (			
	Has the transferor ever condu- petroleum, other than that whi Has the transferor ever condu-	ich was asso cted operation	ciated directly with the tra ns on the property which	nsferor': involved	s vehicle usage?	-	(C)	Yes XX No	25. 20. 20.		
4.	treatment, or disposal of "haz Are there any of the following transferor to manage hazardot Landfill	specific units	(operating or closed) at t	he prop	erty that are used m?	or were used	by the	-	RECORD VENZU		
wa afai waa in a ayay ya	Surface Impoundment							100 IN	6		
Andrew Control	Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area							/es	*. ·		
	Injection Wells Wastewater Treatment Units Septic Tanks						日;	/es XX No /es XX No /es XX No			
	Transfer Stations Waste Recycling Operations Waste Treatment Detoxification	n					日;	/es XX No /es XX No /es XX No /es XX No			
	Other Land Disposal Area If there are "YES" answers to document is other than a mort this document that you file wit that identifies the location of e	tgage or colla h the county	teral assignment of benefi	icial İnte	rest, you must att	ach to the cop	this pies of	168 CJ NO			

(continued on reverse side)

	ere en					
<b>5</b> .	Has the transferor ever held any of the following in regard to this real property?	<u></u>		w		
	(A) Permits for discharges of wastewater to waters of Indiana.  (B) Permits for emission to the atmosphere,	님	Yes Yes	XX XX	.,	
	(C) Permits for any waste storage, waste treatment, or waste disposal operation.	H	708 Y08	XX	No No	
6.	Has the transferor ever discharged any wastewater (other than sewage) to a publicly owned treatment works?	ö	Yes	Ø	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			w		
	and Community Right-to-Know Act of 1986 (42 U.S.C. 11022).  (B) Filed a toxic chemical release form pursuant to the federal Emergency Planning and Community	u	Yes	ΚÑ	No	•
	Right-to-Know Act of 1986 (42 U.S.C. 11023).		Yes	XX	No	
<b>8</b> .	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.	П	Yes	XX	Ma	
	(B) Filing an environmental enforcement case with a court of the solid waste management board for which a final	1	163		140	
	order or consent decree was entered.		Yes	XX	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.	П	Yes	XX	Ma	
9.	Environmental Releases During Transferor's Ownership.	u	168	ليا	NO	
	(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	XX	No	
	(B) Have any hazardous substances or portroleum which were released come into direct contact with the ground at this site?		Yes	XX	No	
	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?  Use of a cleanup contractor to remove or treat materials including soils, pavement, or other surficial materials?	4194	ļ			
	Assignment of in-house management at the attribute of treat materials including soils, pevernent, or other					
	surficial materials?					:
:	Sampling and analysis of soils?				•	
	Temporary or more long term monitoring of groundwater at or near the site?			٠	• ::-	
	Impaired usage of an on-site or nearby water well because of offensive characteristics of the water?					
	Coping with fumes 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?		Yes	<b>M</b>	No	
71.	Is there any explanation needed for clarification of any of the above answers or responses?					
	THE DERECTOR OF THE PROPERTY O					
0 64-	information Under Other Ownership or Operation					
********	The state of the s		·····			
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					
•	Name					
	Type of business or property usage					•
		•		:		
• •			٠	:		
<b>2.</b>	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	П	Yes	XXI	No	
•	Surface Impoundment	П	Yes		No	
-	Land Treatment Waste Pile	Н	Yes Yes	X	No No	
	Incinerator	П	Yes	W	No	
	Storage Tank (Above Ground) Storage Tank (Underground)	Н	Yes Yes	X	No No	
	Container Storage Area		Yes	XXXX	No	
	Injection Wells Wastewater Treatment Units	Н	Yes Yes	XX	No No	
	Septic Tanks	П	Yes	YY	No	
	Transfer Stations Waste Recycling Operations	Н	Yes Yes	씞	No No	
	Waste Treatment Detoxification	Д	Yes	XXXX	No	
	Other Land Disposal Area	لا	Yes	<u>~</u>	No.	<b>≫</b> .
	tification			"		
A. Based	I on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted ledge and belief, true and accurate.	is, to	the b	est (	of my	،،،،،،،،،،،،،،،،،،،،،،،،،،،،،،،،،،،،،
	or/Transferor (type name as signad):	<del></del>		-		-
	RECORY S. BIRMINGHAM Vilau A. Primmoham JULIA BIRMINGHAM Saulie S.	H	<b>!</b> *∧∧	ייראי	**	במאכ
	orm was delivered to me with all elements completed on APRI 10			-	905	Y
Norwest	Financial Indiana, Inc. (type name as signed):			3		THE STATE OF THE S
N	DRWEST FINANCIAL INDIANA, INC BY BRIDGET L. VOORHIES					-
State of	Indiana )			•	A.,	موروووه. اید ایا ا
	) <b>ss</b> .				14:11	小台" munud
County of	of				<u>.</u>	
	e me, the undersigned, a Notary Public in and for said County, this 10th day of APRIL				19	96.
	REGORY S. AND JULIA BIRMINGHAM, H & W	ехес	cution	of t	he for	egoing.
	my hand and official seal.					
	AND E THINGHA				Voter	/ Public
Tuna na	ne as signed: JULY 199			• '	.v.a/)	, , uuliü
• •	mission Expires:					
•	rument was prepared by: BRIDGET L. VOORHIES					
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