

Environmental Disclosure Document for Transfer of Real Property



2005 001399 2005 JAN - 7 FM 1: 0%

For Use By County Recorder	r's Office		· · · · · · · · · · · · · · · · · · ·
County		Date MICHAEL A.	
Document number \	/olume	Page Receiv	
		i aga	eu by
	ed under IC 13-7-22, the Responsible Propert	y Transfer Law.	
I. Property Identification A. Address of property:			
Street		City or town	
1207 BEACON STREET		EAST CHICAGO	
Township I		Permanent real estate index number	
B. Legal description:		24-30-121-4	
Section	Township	Range	
	·		
Enter or attach complete legal des	cription in this area: See the attached legal d	escription.	
Liability Disclosure			
Transferors and transferees of reacted and costs whether or not they	al property are advised that their ownership o	or other control of such property may render the environmental problems in association with the pr	m liable for environmental
C. Property Characteristics:	caused of contributed to the presence of the e	environmental problems in association with the pr	operty.
Lot size	Docum	creage	
Check all types of improvements a	and uses that pertain to the property:	NICIAI	
Apartment huilding (Curite	-1	Industrial building	
☐ Commercial apartment (over € Store, office, commercial build	6 units) This Document is	Farm, with buildings Other (specify)	
II. Nature of Transfer	/ 3 /	v Recorder!	
A. (1) Is this a transfer by deed	or other instrument of conveyance?		☐ Yes ☒ No
	gnment of over 25% of beneficial interest of a la	and trust?	☐ Yes ☒ No
(3) A lease exceeding a term(4) A mortgage or collateral	n of 40 years? assignment of beneficial interest?		∐ Yes ⊠ No
(5) A contract for the sale of			⊠ Yes □ No □ Yes ⊠ No
B. (1) Identify Transferor:			
Name and current address of TransGUADALUPE GUAJARDO, DOLO	RES GUAJARDO	Trust num	ber
1207 BEACON STREET, EAST Ch	HICA GO, IN 463123322 is is a transfer of beneficial interest of a land tr		
		ust.	
(2) Identify person who has	completed this form on behalf of the Transfero	r and who has knowledge of the information conta	ained in this form:
Name, position (if any), and addres	ds	Telephone	
C. Identify Transferee:			
Name and current address of Tran			
	North 4th Ave., Sioux Falls, SD 57104		
III. Environmental Informa A. Regulatory Information Duri		Aut	
1. Has the transferor ever cond	ducted operations on the property which invo	olved the generation, manufacture, processing,	
transportation, treatment, stora	age, or handling of "hazardous waste." as defir	ned by IC 13-7-1? This question does not apply to roximate amount, concentration, and manner as	
they are sold to consumers, u	inless the retailer has engaged in any comme	ercial mixing (other than paint mixing or tinting o	f
2. Has the transferor ever cond	inishing, refinishing, servicing, or cleaning oper	rations on the property. volved the processing, storage, or handling of	∐ Yes Æ∐ No
petroleum, other than that whi	ch was associated directly with the transferor's	s vehicle usage?	∏ Yes 171 No
Has the transferor ever con treatment, or disposal of "haza	iducted operations on the property which in irdous waste," as defined in IC 13-7-1?	nvolved the generation, transportation, storage,	
4. Are there any of the following	specific units (operating or closed) at the prop	perty that are used or were used by the transferor	LIYes YZINo
to manage hazardous wastes, Landfill	hazardous substances, or petroleum?	,	☐ Yes 1☑ No
Surface Impoundment			☐ Yes 121 No ☐ Yes 121 No
Land Treatment Waste Pile			Yes 🙀 No
Incinerator			LiYes 10xi No □ Yes 10xi No
Storage Tank (Above Ground) Storage Tank (Underground)	t .		☐ Yes 🛱 No
Container Storage Area			∐ Yes 12⊈ No
Injection Wells			∐ Yes 10⊈ No □ Yes 12⊡ No
Wastewater Treatment Units Septic Tanks			☐ Yes 💆 No
Transfer Stations			∐ Yes 🔯 No □ Yes 🗭 No
Waste Recycling Operations	_		Yes X No
Waste Treatment Detoxificatio Other Land Disposal Area	n		☐ Yes 💆 No
If there are "YES" answers to	any of the above items and the transfer of	property that requires the filing of this	∐ Yes 104 No
this document that you file with	gage or collateral assignment of beneficial into	oroot vou march alle als to the contract of	
that identifies the location of ea	sch unit.		ontinued on reverse side)

(continued on reverse side)

IN-0145NOWLINE-0803 (also used in OH) (ROC)

	Has the transferor ever neid any of the following in regard to this real property:	☐ Yes	X	
	(A) Permits for discharges of wastewater to waters of Indiana.	Yes	₹	No No
	(B) Permits for emission to the atmosphere.	Yes	Z	No
_	(C) Permits for any waste storage, waste treatment, or waste disposal operation.		1	
	Has the transferor ever discharged any wastewater (other than sewage) to a publicly owned treatment works?	☐ Yes	سعو	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 and	☐ Yes	X	No
	Community Right-to-Know Act of 1986 (42 U.S.C. 11022).		/-×	NO
	(B) Filed a toxic chemical release form pursuant to the federal Emergency Planning and Community Right-to-Know Act of	☐ Yes	M	No
0	1986 (42 U.S.C. 11023). Has the transferor or any facility on the property or the property been the subject of any of the following state or federal		7	
0.	governmental actions?			
	(A) Written notification regarding known, suspected, or alleged contamination on or emanating from the property.	☐ Yes	Ø	No
	(B) Filing an environmental enforcement case with a court of the solid waste management board for which a final order or		/ 3	
	consent decree was entered.	Yes	Ø	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 federal laws?	∐ Yes	Ø	No
	(B) Have any haz ardous substances or petroleum which were released come into direct contact with the ground at this site?	☐ Yes	M	No
	If the answers to question (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?			
	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 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		σZî	NI-
	Management?	∐ Yes	×	No
11	I. Is there any explanation needed for clarification of any of the above answers or responses?			
	NOTOFFICIALS	_		
		_		
	This Document is the property of	_		
	the Lely County Recorded	_		
	the Lake County Recorder:			
В.	Site Information Under Other Ownership or Operation			
1.				
١.	property or with whom the transferor contracted for the management of the property:			
	property of wall and all and a			
		-		
	Name			
		_		
	Type of business or property usage	_		
	Type of business or property usage	_		
	Type of business or property usage	_		
		- - -		
2.	If the transferor has knowledge, indicate whether the following existed under prior ownerships, leaseholds granted by the	- -		
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:	- -		No
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		No No
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
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 Land Treatment	Yes Yes		No No
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 Land Treatment Waste Pile	Yes Yes Yes		No No No
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 Land Treatment Waste Pile Incinerator	Yes Yes		No No
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground)	Yes Yes Yes Yes		No No No No
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground)	Yes Yes Yes Yes Yes Yes		No No No No No
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground)	Yes		No No No No No No No
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area	Yes Yes		No No No No No No No No
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells	Yes Yes		No No No No No No No No No
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units	Yes Yes		No N
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations	Yes Yes		No N
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification	Yes Yes		No No
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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations	Yes Yes		No N
	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area	Yes Yes		No No
īV	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area	Yes Yes		No No No No No No No No No No No No No N
īV	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted in	Yes Yes		No No No No No No No No No No No No No N
ĪV.	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate.	Yes Yes		No No No No No No No No No No No No No N
IV. A.	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate.	Yes Yes		No No No No No No No No No No No No No N
IV. A. M	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 Land Treatment Waste Pile Incinerator Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Intransferor (type name as signed): BUADALUPE GUAJARDO, DOLORES GUAJARDO Management or use of the property: Landfill Surface Impoundment Landfill Surface Impoundment	Yes Yes		No No No No No No No No No No No No No N
IV. A. M G	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Buddalupe Gualardo, DoLores Gualardo This form was delivered to me with all elements completed on December 2.7, 2004	Yes Yes		No No No No No No No No No No No No No N
IV. A. M G	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Buddalupe Gualardo, DoLores Gualardo This form was delivered to me with all elements completed on December 2.7, 2004	Yes Yes		No No No No No No No No No No No No No N
M G B. W	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Moderground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Cortagoor/Transferor (type name as signed): SUADALUPE GUAJARDO, DOLORES GUAJARDO Jundalupe Suagand December 27, 2004 Vells Fargo Financial Indiana, Inc. (type name as signed): TINA KOESTNER	Yes		No No No No No No No No No No No No No N
M G B. W	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Iortgagor/Transferor (type name as signed): IJNDALUPE GUAJARDO, DOLORES GUAJARDO This form was delivered to me with all elements completed on DECEMBER 27, 2004 Vells Fargo Financial Indiana, Inc. (type name as signed): TINA KOESTNER	Yes		No No No No No No No No No No No No No N
IV. A. M. G. B. W.	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Knowledge and belief, true and accurate. SUADALUPE GUAJARDO, DOLORES GUAJARDO This form was delivered to me with all elements completed on DECEMBER 27, 2004 Vells Fargo Financial Indiana, Inc. (type name as signed): TINA KOBSTNER Late of INDIANA) SS.	Yes		No No No No No No No No No No No No No N
IV. A. M. G. B. W.	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Iortgagor/Transferor (type name as signed): IJNDALUPE GUAJARDO, DOLORES GUAJARDO This form was delivered to me with all elements completed on DECEMBER 27, 2004 Vells Fargo Financial Indiana, Inc. (type name as signed): TINA KOESTNER	Yes		No No No No No No No No No No No No No N
IV. A. M. G. B. W.	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Fortigagor/Transferor (type name as signed): BUADALUPE GUAJARDO, DOLORES GUAJARDO This form was delivered to me with all elements completed on DECEMBER 27, 2004 Wells Fargo Financial Indiana, Inc. (type name as signed): TINA KOESTNER Sounty of LAKE Sounty of LAKE	Yes		No No No No No No No No No No No No No N
M G B. W	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 Suface Impoundment Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Iortgagor/Transferor (type name as signed): SUADALUPE GUAJARDO, DOLORES GUAJARDO This form was delivered to me with all elements completed on DECEMBER 27, 2004 Vells Fargo Financial Indiana, Inc. (type name as signed): TINA KOESTNER Joseph Gualand All States (Type Indiana) Joseph Gualand All States (Type I	Yes	sst of m	No No No No No No No No No No No No No N
M G B. W	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Fortigagor/Transferor (type name as signed): BUADALUPE GUAJARDO, DOLORES GUAJARDO This form was delivered to me with all elements completed on DECEMBER 27, 2004 Wells Fargo Financial Indiana, Inc. (type name as signed): TINA KOESTNER Sounty of LAKE Sounty of LAKE	Yes	sst of m	No No No No No No No No No No No No No N
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M G B. W	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Above Ground) Storage Tank (Inderground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Iorigagor/Transferor (type name as signed): Walbanalure Guajarabo, Dolocres Guajarabo This form was delivered to me with all elements completed on DECEMBER 27, 2004 Vells Fargo Financial Indiana, Inc. (type name as signed): TINA KOESTNER TINA KOESTNER Before me, the undersigned, a Notary Public in and for said County, this 27TH day of DECEMBER 2004 UADALUPE GUAJARDO, DOLORES GUAJARDO, and acknowledged the execution of the foregoing. Witness my he undersigned as Notary Public in and for said County, this 27TH day of DECEMBER 2004	Yes	st of m	No No No No No No No No No No No No No N
IV. A. MG B. W GI	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Treatment Detoxification Other Land Disposal Area . Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Iortgagor/Transferor (type name as signed): ### Waste Treatment Option Optio	Yes	st of m	No N
IV. A. MG B. W GI	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Above Ground) Storage Tank (Deferground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Iorigagor/Transferor (type name as signed): Walls Pargo Financial Indiana, Inc. (type name as signed): TINA KORSTNER TINA KORSTNER JEAN M DOHMETER JEAN M DOHMETER	Yes	st of m	No N
M G B. W SI C	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. Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Underground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Recycling Operations Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Containers For (type name as signed): FUADALUPE GUAJARDO, DOLORES GUAJARDO This form was delivered to me with all elements completed on DECEMBER 27, 2004 Wells Fargo Financial Indiana, Inc. (type name as signed): TINA KOESTNER Italia of INDIANA) ss. JSAN M. DOLORES GUAJARDO, and acknowledged the execution of the foregoing. Witness my he WARCH 15, 2008 JEAN M. DOHMETER MARCH 15, 2008	Yes	st of m	No N
M G B. W SI C	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 Land Treatment Waste Pile Incinerator Storage Tank (Above Ground) Storage Tank (Above Ground) Storage Tank (Deferground) Container Storage Area Injection Wells Wastewater Treatment Units Septic Tanks Transfer Stations Waste Recycling Operations Waste Recycling Operations Waste Treatment Detoxification Other Land Disposal Area Certification Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is knowledge and belief, true and accurate. Iorigagor/Transferor (type name as signed): Walls Pargo Financial Indiana, Inc. (type name as signed): TINA KORSTNER TINA KORSTNER JEAN M DOHMETER JEAN M DOHMETER	Yes	st of m	No N

Mortgage/Deed of Trust Addendum

N N

Addendum for legal description of Mortgage/Deed of Trust dated DECEMBER 27, 2004, GUADALUPE GUAJARDO AND DELORES GUAJARDO, mortgagor(s)/trustor(s).

Legal description:

LOT 4, BLOCK 6, RESUBDIVISION OF BLOCKS 13,14,15, LOTS 12 TO 30, IN BLOCK 16, AND BLOCKS 17, 26, 27 AND 28, IN THAT PART OF EAST CHICAGO LYING IN THE SOUTHWEST QUARTER OF SECTION 29, TOWNSHIP 37 NORTH, RANGE 9 WEST OF THE 2ND P.M., IN THE CITY OF EAST CHICAGO, AS SHOWN IN PLAT BOOK 5, PAGE 27, IN LAKE COUNTY, INDIANA

Document is NOT OFFICIAL! This Document is the property the Lake County Recorder!	of	
Suadaluse Anagado GIÁDALUPE GUAJÁRDO Oype name as signed)	Date	12-27-04
Dalara Surayando DOLORES GUAJARDO (Type name as signed) (Type name as signed)	Date Date	12-27-04
(Type name as signed)	Date	