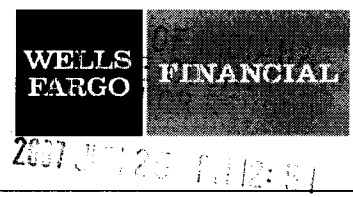


# 4 Environmental Disclosure Document for Transfer of Real Property

2007 051480



**For Use By County Recorder's Office**

County	Date		
Document number	Volume	Page	Received by

The following information is provided under IC 13-7-22, the Responsible Property Transfer Law.

**I. Property Identification**

**A. Address of property:**

Street	City or town
2517 ADAMS STREET	GARY
Township	Permanent real estate index number

**B. Legal description:**

Section	Township	Range
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Enter or attach complete legal description in this area:

**Liability Disclosure**  
 Transferors and transferees of real property are advised that their ownership or other control of such property may render them liable for environmental cleanup costs whether or not they caused or contributed to the presence of the environmental problems in association with the property.

**C. Property Characteristics:**

Lot size	Acreage
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Check all types of improvements and uses that pertain to the property:

<input type="checkbox"/> Apartment building (6 units or less)	<input type="checkbox"/> Industrial building
<input type="checkbox"/> Commercial apartment (over 6 units)	<input type="checkbox"/> Farm, with buildings
<input type="checkbox"/> Store, office, commercial building	<input checked="" type="checkbox"/> Other (specify) RESIDENTIAL

**II. Nature of Transfer**

**A.**

(1) Is this a transfer by deed or other instrument of conveyance?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(2) Is this a transfer by assignment of over 25% of beneficial interest of a land trust?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(3) A lease exceeding a term of 40 years?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(4) A mortgage or collateral assignment of beneficial interest?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(5) A contract for the sale of property?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**B. (1) Identify Transferor:**

Name and current address of Transferor	Trust number
Name and address of Trustee if this is a transfer of beneficial interest of a land trust.	

**(2) Identify person who has completed this form on behalf of the Transferor and who has knowledge of the information contained in this form:**

Name, position (if any), and address	Telephone number
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**C. Identify Transferee:**

Name and current address of Transferee
WELLS FARGO FINANCIAL INDIANA, INC. 41 US HWY 41 SCHERERVILLE, IN 46375

**III. Environmental Information**

**A. Regulatory Information During Current Ownership**

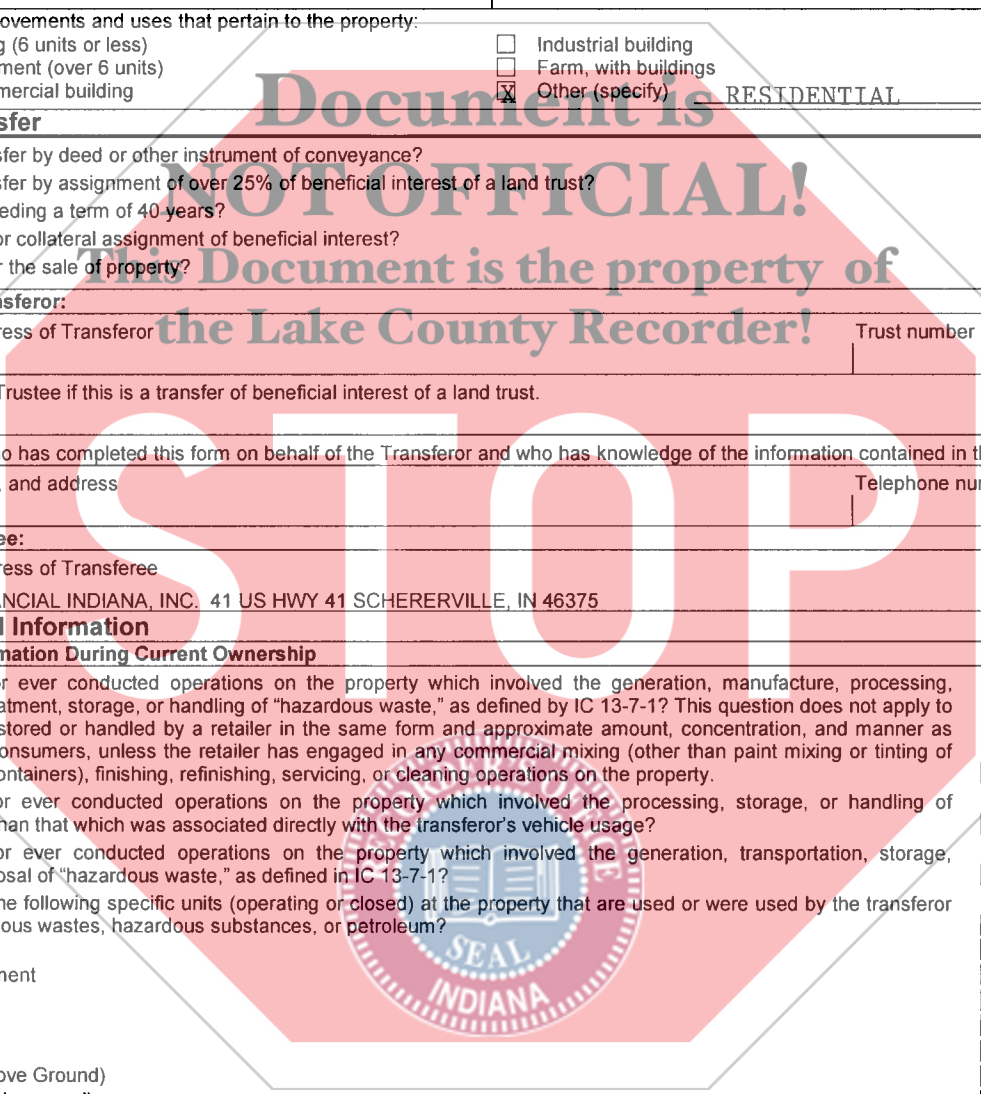
- Has the transferor ever conducted operations on the property which involved the generation, manufacture, processing, transportation, treatment, storage, or handling of "hazardous waste," as defined by IC 13-7-1? This question does not apply to consumer goods stored or handled by a retailer in the same form and approximate amount, concentration, and manner as they are sold to consumers, unless the retailer has engaged in any commercial mixing (other than paint mixing or tinting of consumer sized containers), finishing, refinishing, servicing, or cleaning operations on the property.  Yes  No
- Has the transferor ever conducted operations on the property which involved the processing, storage, or handling of petroleum, other than that which was associated directly with the transferor's vehicle usage?  Yes  No
- Has the transferor ever conducted operations on the property which involved the generation, transportation, storage, treatment, or disposal of "hazardous waste," as defined in IC 13-7-1?  Yes  No
- Are there any of the following specific units (operating or closed) at the property that are used or were used by the transferor to manage hazardous wastes, hazardous substances, or petroleum?
 

Landfill	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Surface Impoundment	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Land Treatment	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Waste Pile	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Incinerator	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Storage Tank (Above Ground)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Storage Tank (Underground)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Container Storage Area	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Injection Wells	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Wastewater Treatment Units	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Septic Tanks	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Transfer Stations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Waste Recycling Operations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Waste Treatment Detoxification	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Other Land Disposal Area	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

If there are "YES" answers to any of the above items and the transfer of property that requires the filing of this document is other than a mortgage or collateral assignment of beneficial interest, you must attach to the copies of this document that you file with the county recorder and the department of environmental management a site plan that identifies the location of each unit.

Hold for Rick

Check FF  
0488-37564



5. Has the transferor ever held any of the following in regard to this real property?
- (A) Permits for discharges of wastewater to waters of Indiana.  Yes  No
  - (B) Permits for emission to the atmosphere.  Yes  No
  - (C) Permits for any waste storage, waste treatment, or waste disposal operation.  Yes  No
6. Has the transferor ever discharged any wastewater (other than sewage) to a publicly owned treatment works?  Yes  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 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  No
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.  Yes  No
  - (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
  - (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  No
  - (B) Have any hazardous substances or petroleum which were released come into direct contact with the ground at this site?  Yes  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 management?  Yes  No
11. Is there any explanation needed for clarification of any of the above answers or responses?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**B. Site 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 property 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

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

- |                          |     |                          |    |
|--------------------------|-----|--------------------------|----|
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

**IV. Certification**

- A. Based on my inquiry of those persons directly responsible for gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true and accurate.

Mortgagor/Transferor (type name as signed):

WAYNE GIRON *Wayne Giron*

- B. This form was delivered to me with all elements completed on MAY 31, 2007

Wells Fargo Financial Indiana, Inc. (type name as signed):

DAN SCHIFF *Dan Schiff*

**NOTARY ACKNOWLEDGMENT FOLLOWS ON NEXT PAGE**



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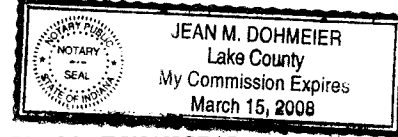
State of Indiana )  
 ) ss.  
County of LAKE )

Before me, the undersigned, a Notary Public in and for said County, this 31ST day of MAY 2007, came WAYNE GIRON, and acknowledged the execution of the foregoing. Witness my hand and official seal.

Jean M Dohmeier  
Notary Public

Type name as signed: JEAN M DOHMEIER

My Commission Expires: MARCH 15, 2008



Instrument was prepared by: JEAN DOHMEIER for WELLS FARGO FINANCIAL

I affirm, under penalties of perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

Signature: Jean Dohmeier



**ADDENDUM A  
TO  
MORTGAGE**

**Description of Property**

2ND OAK PARK ADDITION, LOT 44, LOT 45 AND LOT 46, BLOCK 44 BETTER KNOWN AS  
2517 ADAMS STREET, GARY, INDIANA

