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STATE OF INDIANA
LAKE COUNTY
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MICHAEL A. BROWN
RECORDER

Environmental Disclosure Document for Transfer of Real Property (IC 13-25-3-7.5)

State Form 52653 (R/1-07)

Indiana Department of Environmental Management

For Use By County Recorder's Office	
County	
Date	
Document Number	
Volume	
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Received by	
The following information is provided under IC 13-25-3-7.5, the Responsible Property Transfer Law.	

A WARNING TO THE PARTIES TO A TRANSFER OF PROPERTY:

The single act of reading this document does not constitute "all appropriate inquiries" into the previous ownership and uses of the facility to satisfy that requirement under the federal Comprehensive Environmental Response, Compensation and Liability Act (42 U.S.C. 9601(35)(B)). You are strongly encouraged to read this document carefully and to take all other actions necessary to make a due diligence inquiry into the previous ownership and uses of the facility if you intend to satisfy the criteria to avoid liability under the federal Comprehensive Environmental Response, Compensation and Liability Act or IC 13-25-4.

I. Property Identification

A. Address of Property:

Street: 428 BRIARWOOD LANE City or town: HOBART

Township: Tax Parcel Identification No. (Key Number): 27-17-248-63

B. Legal Description:

Section: Township: Range:

Enter or attach complete legal description in this area:

SEE ATTACHED ADDENDUM B

Liability Disclosure

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 environmental problems in association with the property.

C. Property Characteristics:

Lot size: Acreage:

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

- Apartment building (6 units or less)
- Commercial apartment (over 6 units)
- Store, office, commercial building
- Industrial building
- Farm, with buildings
- Other (specify)

II. Nature of Transfer

- | | | |
|-----------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| A. (1) Is this a transfer by deed or other instrument of conveyance of fee title to property? | <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 collateral assignment of beneficial interest? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (5) An installment contract for the sale of property? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| (6) A mortgage of trust deed? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| (7) A lease of any duration that includes an option to purchase? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

B. (1) Identify Transferor:

Name of Transferor: ARTHUR G. ERICKSON AND HELEN ERICKSON

Address: 428 BRIARWOOD LANE City/State: HOBART IN

Zip: 46342 Trust number:

Name and address of Trustee if this is a transfer of beneficial interest of a land trust.

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10. Is the facility currently operating under a variance granted by the commissioner of the Indiana Department of Environmental Management? Yes No

11. Has the transferor ever conducted an activity on the site without obtaining a permit from the U.S. Environmental Protection Agency, the commissioner of the Indiana Department of Environmental Management, or another administrative agency or authority with responsibility for the protection of the environment, when such permit was required by law? Yes No

If the answer is Yes, describe the activity:

12. Is there any explanation needed for clarification of any of the above answers or responses?

N/A

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, other contracts for management or use of the property:

Landfill

Yes No

Surface Impoundment

Yes No

Land Application

Yes No

Waste Pile

Yes No

Incinerator

Yes No

Storage Tank (Above Ground)

Yes No

Storage Tank (Underground)

Yes No

Container Storage Area

Yes No

Injection Wells

Yes No

Wastewater Treatment Units

Yes No

Septic Tanks

Yes No

Transfer Stations

Yes No

Waste Recycling Operations

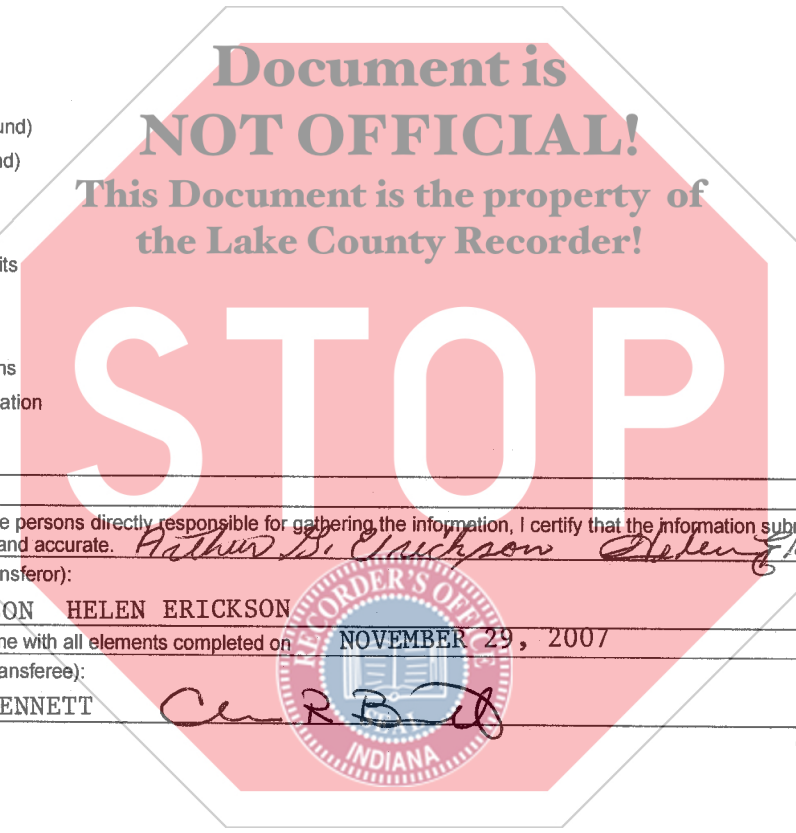
Yes No

Waste Treatment Detoxification

Yes No

Other Land Disposal Area

Yes 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. Arthur G. Erickson Helen Erickson

Transferor (or on behalf of Transferor):

ARTHUR G. ERICKSON HELEN ERICKSON

B. This form was delivered to me with all elements completed on NOVEMBER 29, 2007

Transferee (or on behalf of Transferee):

CHRISTOPHER R. BENNETT

CHR R B

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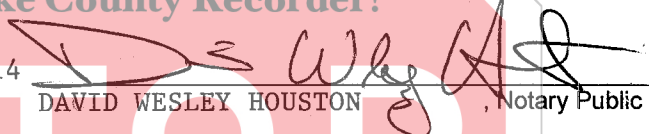
V. Further Action Upon Completion of the Form
A. The transferor must comply with the delivery requirements of IC 13-25-3-2 and the filing and recording requirements of IC 13-25-3-8.

B. The transferee must comply with the recording requirements of IC 13-25-3-8.

NOTARY ACKNOWLEDGMENT

State of INDIANA)
County of LAKE) ss.

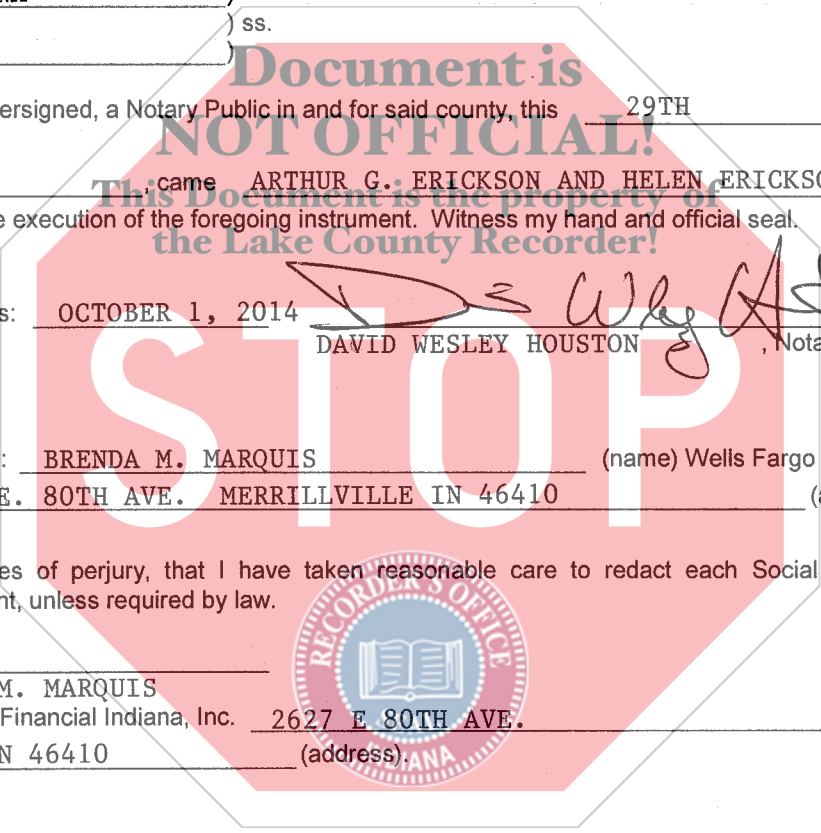
Before me, the undersigned, a Notary Public in and for said county, this 29TH day of NOVEMBER 2007, came ARTHUR G. ERICKSON AND HELEN ERICKSON and acknowledged the execution of the foregoing instrument. Witness my hand and official seal.

My Commission Expires: OCTOBER 1, 2014

DAVID WESLEY HOUSTON, Notary Public

Instrument prepared by: BRENDA M. MARQUIS (name) Wells Fargo Financial
Indiana, Inc. 2627 E. 80TH AVE. MERRILLVILLE IN 46410 (address).

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: _____
BRENDA M. MARQUIS
Return to: Wells Fargo Financial Indiana, Inc. 2627 E. 80TH AVE.
MERRILLVILLE IN 46410 (address).



**ADDENDUM B
TO
ENVIRONMENTAL DISCLOSURE**

Description of Property

LOT 63, CRESTWOOD TRACE, IN THE CITY OF HOBART, AS SHOWN IN PLAT BOOK 47, PAGE 29, AND AS AMENDED BY CERTIFICATE OF CORRECTION DATED SEPTEMBER 25, 1973 AS DOCUMENT NO. 222192, IN LAKE COUNTY, INDIANA.

