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MICHAEL A. BROWN  
RECORDER



**ENVIRONMENTAL DISCLOSURE FOR  
TRANSFER OF REAL PROPERTY (IC 13-25-3-7.5)**

State Form 52653 (R / 1-07)  
Indiana Department of Environmental Management

**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.

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

County

Date

Doc. No.

Vol.

Page

Rec'd by:

The following information is provided under IC 13-25-3-7.5, the Responsible Property Transfer Law.

**PART ONE: PROPERTY IDENTIFICATION**

**A. Address of Property:** 2136 WASHINGTON CIRCLE

City or Town MUNSTER

Township

Tax Parcel Identification No. (Key Number): 18-28-0120-0009

**B. Legal Description:** Section

Township

Range

Enter or attach complete legal description in this area: See the attached legal description.

**This Document is the property of  
the Lake County Recorder!**

**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 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)

Industrial Building

Commercial Apartment (over 6 units)

Farm, with Buildings

Store, Office, Commercial Building

Other (specify)

**PART TWO: 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 checked="" type="checkbox"/> Yes | <input 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 |

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IN-0145NOWLINE-0707 (also used in OH) (ROC)

# 0488-37849

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Hold for Rick

**PART TWO: NATURE OF TRANSFER (continued)**

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

Name and Current Address of Transferor CHRISTOPHER MAYO,			
Address 2136 WASHINGTON CIRCLE		City MUNSTER	
State: IN	ZIP 46321		
Trust No.			
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. Include name, position (if any), and address and telephone number.**

Name		Position	
Address		City	State: ZIP
Telephone ( ) -			

**C. Identify Transferee:**

Name and Current Address of Transferee Wells Fargo Financial Bank			
Address 3201 North 4th Ave.		City Sioux Falls	
State: SD	ZIP 57104		

**PART THREE: ENVIRONMENTAL INFORMATION**

**A. Regulatory Information During Current Ownership**

1. Has the transferor ever conducted operations on the property which involved the generation, manufacture, processing, transportation, treatment, storage, or handling of a "hazardous substance" (as defined by IC 13-11-2-98)? 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
2. 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
3. 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 13-11-2-99(a))?  
 Yes     No

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**PART THREE: ENVIRONMENTAL INFORMATION (continued)**

4. Are there any of the following 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 | Injection Wells                | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Surface Impoundment         | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Wastewater Treatment Units     | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Land Application            | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Septic Tanks                   | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Waste Pile                  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Transfer Stations              | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Incinerator                 | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Waste Recycling Operations     | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Storage Tank (above ground) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Waste Treatment Detoxification | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Storage Tank (underground)  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Other Land Disposal Area       | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Container Storage Area      | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |                                |                              |                                        |

If there are "YES" answers to any of the items on the preceding page and the transfer of property that requires the filing of this document is other than a mortgage or trust deed or a collateral assignment of beneficial interest in a land trust, 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.

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 emissions 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?  Yes  No

- (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 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 or 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 resulted 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 was released come into direct contact with the ground at this site?  Yes  No

If the answer to question (A) or (B) is 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 onsite 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 of or at other low points on or immediately adjacent to the site?

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**PART THREE: ENVIRONMENTAL INFORMATION (continued)**

(C) Is there an environmental defect (as defined in IC 13-11-2-70) on the property that is not reported under question (A) or (B)?  Yes  No

If the answer is Yes, describe the environmental defect:

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?

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**STOP**

**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 of use of the property:

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

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**PART FOUR: 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.

TRANSFEROR (or on behalf of Transferor)

CHRISTOPHER MAYO

*Christopher Mayo*

B. This form was delivered to me with all elements completed on FEBRUARY 13

2008

TRANSFeree (or on behalf of Transferee)

JEAN DOHMEIER

*Jean Dohmeier*

**PART FIVE: 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.

State of INDIANA

County of LAKE

Document is

ss.

Before me, the undersigned, a Notary Public in and for said County, this 8TH day of FEBRUARY, 2008, came

CHRISTOPHER MAYO

**This Document is the property of the Lake County Recorder!**

and

\_\_\_\_\_ , and acknowledged the execution of the foregoing

TRANSFeree (or on behalf of Transferee)

instrument. Witness my hand and official seal.

My Commission Expires: JULY 23, 2015

*Kevin Sean Smosna*  
KEVIN SEAN SMOSNA, Notary Public



Instrument prepared by: JEAN DOHMEIER (name)

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

Signature: *Jean Dohmeier*

Return to: Wells Fargo Financial Bank, 3201 North 4<sup>th</sup> Ave., Sioux Falls, SD 57104

**ADDENDUM A  
TO  
MORTGAGE**

**Description of Property**

THE EAST 1/2 OF LOT 9 AND ALL OF LOT 10 IN BLOCK 4 IN INDEPENDENCE PARK, IN  
THE TOWN OF MUNSTER, AS PER PLAT THEREOF, RECORDED MAY 1, 1939 IN PLAT BOOK 24  
PAGE 23, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

