

7

2013 018350

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2013 MAR 12 PM 2:57

MICHAEL B. BROWN
RECORDER



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

State Form 52653 (R5 / 6-12)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

INDIANA DEPARTMENT OF
ENVIRONMENTAL MANAGEMENT
100 N. Senate Ave.,
MC66-30 IGCN 1101
Indianapolis, IN 46204
Telephone: (317) 234-0338

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.

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.

PART ONE: PROPERTY IDENTIFICATION

A. Address of Property: 3501-23 Broadway St.

City or Town Gary Township Calumet

Parcel Identification Number(s). (18-digit format in compliance with 50 IAC 26-8-1):

45-08-22-351-001.000-004

B. Legal Description: Section Township Range

Enter or attach complete legal description in this area: attached

C. Property Characteristics: Lot Size Acreage 4 acre

Check all types of improvement 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 checked="" type="checkbox"/> Store, Office, Commercial Building | <input type="checkbox"/> Other (specify) |

AMOUNT \$ 2300
CASH _____ CHARGE _____
CHECK # 1144
OVERAGE _____
COPY _____
NON-COM _____
CLERK MB

PART TWO: NATURE OF TRANSFER

- A.** (1) Is this a transfer by deed or other instrument of conveyance of fee title to property? Yes No
- (2) Is this a transfer by assignment of over 25% of beneficial interest of a land trust? Yes No
- (3) A lease exceeding a term of 40 years? Yes No
- (4) A collateral assignment of beneficial interest? Yes No
- (5) An installment contract for the sale of property? Yes No
- (6) A mortgage of trust deed? Yes No
- (7) A lease of any duration that includes an option to purchase? Yes No

B. (1) Identify Transferor:

Name of Transferor *St Johns, LLC*

Current Address of Transferor *7511 Konlan Ave* City *Skokie*

State: *IL* ZIP *60076*

Trust No.

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

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

(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), address and telephone number.

Name *Cyriac T. John* Position *Member - manager*

Address *7128 W. Berwin Ave* City *Chicago* State: *IL* ZIP *60656*

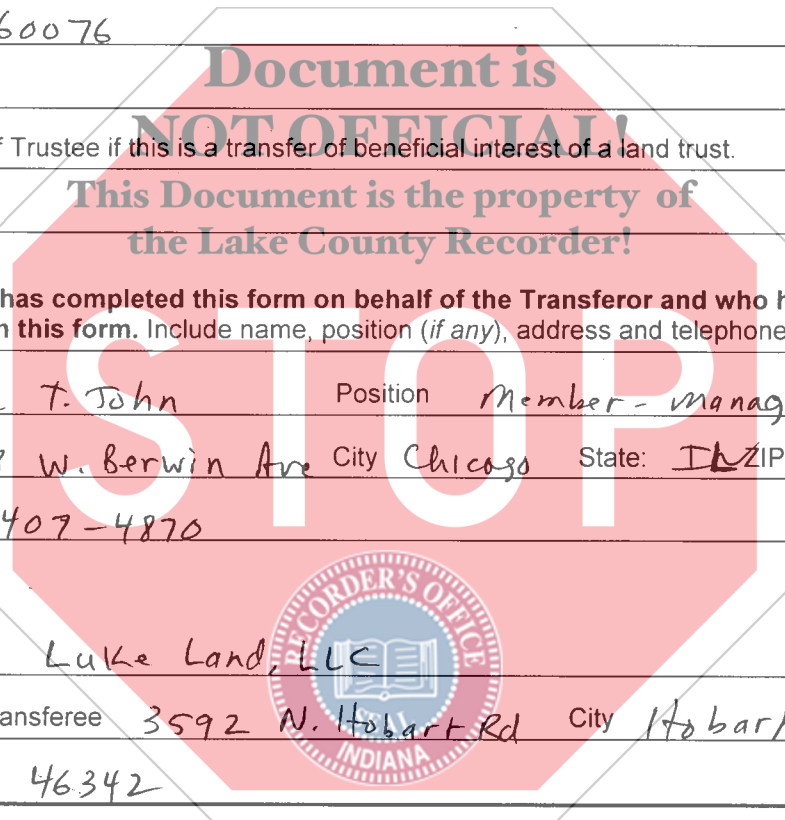
Telephone (773) *407-4870*

C. Identify Transferee:

Name of Transferee *Luke Land, LLC*

Current Address of Transferee *3592 N. Hobart Rd* City *Hobart*

State: *IN* ZIP *46342*



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 IC13-11-2-98)? 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

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 checked="" type="checkbox"/> Yes <input 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 in Part Three A., and the transfer of property that requires this document to be filed is other than 1) a mortgage or trust deed, or 2) a collateral assignment of beneficial interest in a land trust; you must attach a site plan that identifies the location of each unit to the copies of this document that you file with the county recorder and the Department of Environmental Management.

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

PART THREE: ENVIRONMENTAL INFORMATION (continued)

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 from 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?

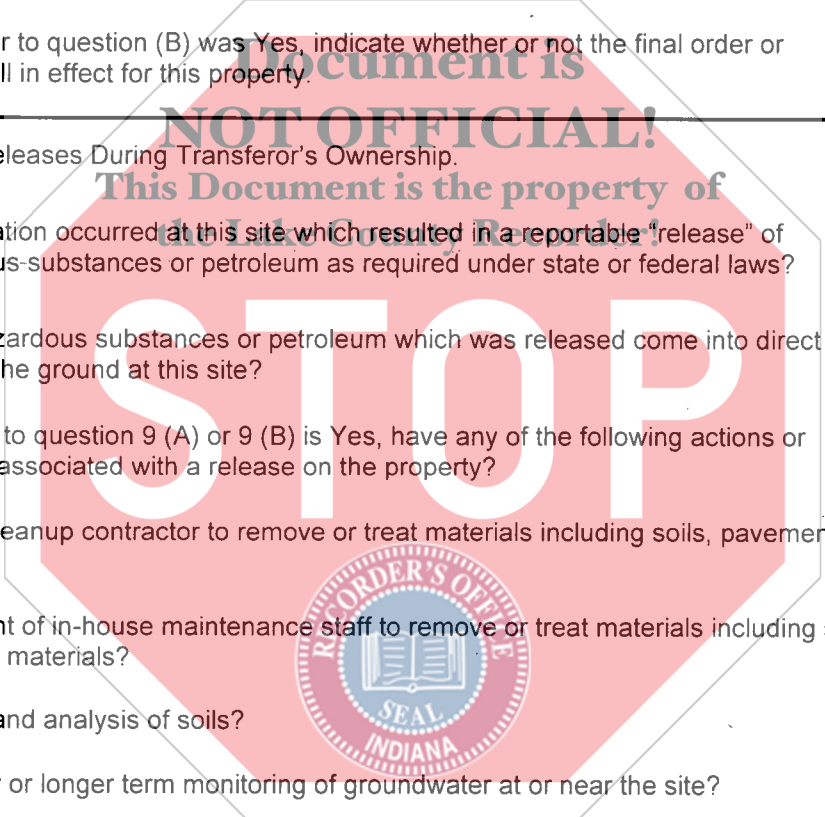
- (A) Written notification regarding known, suspected, or alleged contamination on or emanating from the property. Yes No
- (B) Filing an environmental enforcement case with a court or the solid waste management board for which a final order or consent decree was entered. Yes No
- (C) If the answer to question (B) was Yes, 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 9 (A) or 9 (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 longer 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 or at other low points on or immediately adjacent to the site?



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 to question 9 (C) is Yes, describe the environmental defect:

(D) Is there an environmental "restrictive covenant" (as defined in IC 13-11-2-193.5) that applies to the property?

Yes No

If the answer to question 9 (D) is Yes, check the IDEM Program(s) for which the environmental restrictive covenant was recorded. If known, enter the Identification Number (Site Number, Facility Identification Number, or EPA ID Number) associated with the property.

Department of Defense or Superfund Identification Number

Other Identification Number

Leaking Underground Storage Tank Identification Number

State Cleanup Identification Number

Hazardous Waste Permits Identification Number

Solid Waste Permits Identification Number

Indiana Brownfields Identification Number

Voluntary Remediation Identification Number

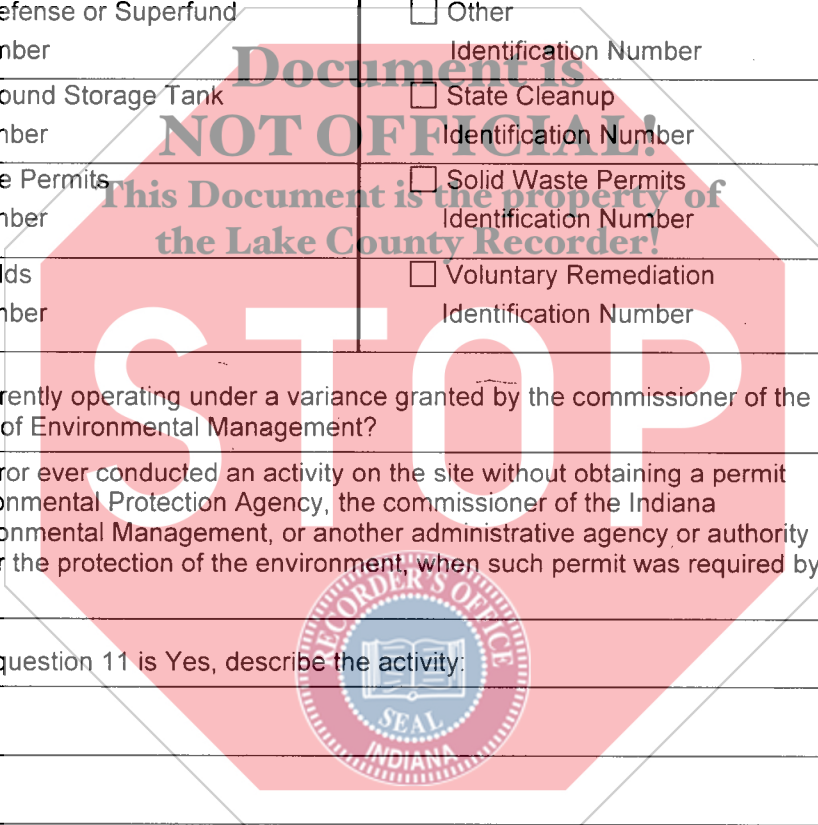
10. Is the facility currently operating under a variance granted by the commissioner of the Indiana Department of Environmental Management?

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 to question 11 is Yes, describe the activity:



PART THREE: ENVIRONMENTAL INFORMATION (continued)

12. Is there any explanation needed to clarify any of the above answers or responses?

B. Site Information Under Other Ownership or Operation

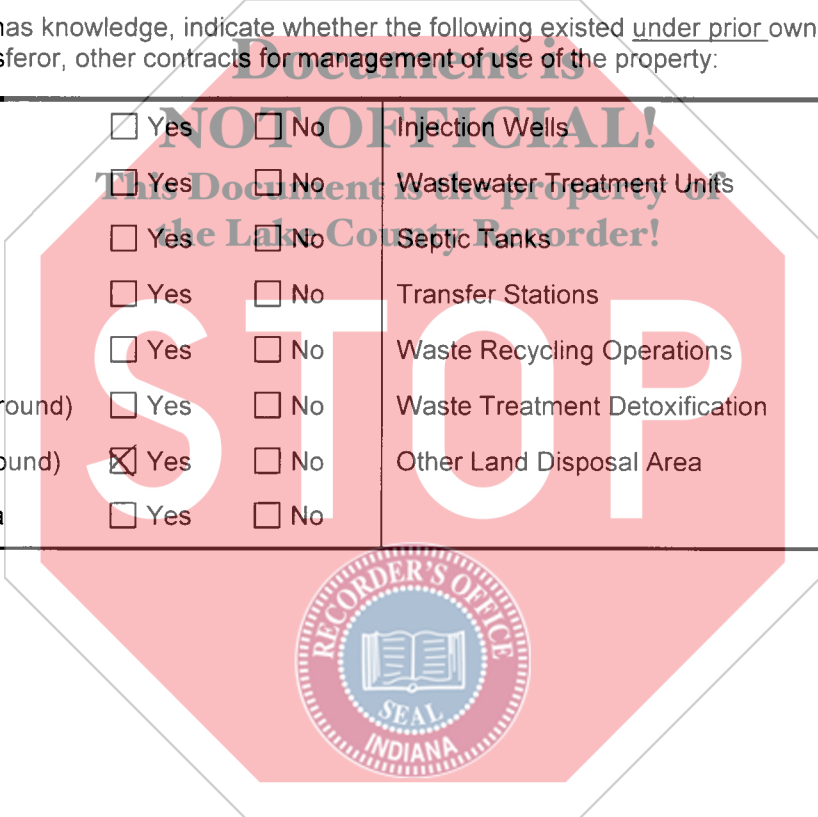
1. Provide the following information about the previous owner, or any entity or person to whom the Transferor leased the property, or with whom the Transferor contracted for the management of the property:

Name: *Isam Samara*

Type of Business or Property Usage: *Gas Station*

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 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 checked="" 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			



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)

Sh. Johns, LLC
By: 

B. This form was delivered to me with all elements completed on 3/12, 2020 13

TRANSFeree (or on behalf of Transferee)



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.

