

**ENVIRONMENTAL QUESTIONNAIRE/INTERVIEW
RESIDENTIAL AND VACANT LAND
HISTORICAL AND CURRENT USE(S)**

Name of RM: _____

Name of Customer: _____		
Name of Contact Person: _____		
Address of Collateral: _____ _____		
Phone and Fax Numbers: _____		
Name of Closest Cross Streets: _____		
I am aware of the following information related to historical or current site uses: (use additional sheets as required)		
	Yes	No
Any known spill/release of hazardous materials or petroleum products?	<input type="checkbox"/>	<input type="checkbox"/>
Any likely past or current presence of underground / above storage tanks?	<input type="checkbox"/>	<input type="checkbox"/>
Soil/debris mounds observed and/or known past filling on the property?	<input type="checkbox"/>	<input type="checkbox"/>
Any likely past or current industrial/manufacturing and/or presence/use of petroleum or solvents on the property?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have knowledge that the property has been subject to any environmental sampling or studies?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have knowledge that asbestos is present on the property?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any environmental liens on the property?	<input type="checkbox"/>	<input type="checkbox"/>
If this is a purchase, is the price below normal market value for this type of property?	<input type="checkbox"/>	<input type="checkbox"/>
EXPLAIN ANY "YES" ANSWER ON AN ATTACHED SHEET.		

The undersigned hereby certifies that the above information is true and correct.

Borrower's Signature Date _____ RM's Signature Date _____

**ENVIRONMENTAL QUESTIONNAIRE/INTERVIEW
COMMERCIAL AND INDUSTRIAL PROPERTIES
HISTORICAL AND CURRENT USES**

Borrower's Signature _____ Date _____

Banker's Signature _____ Date _____

SECTION 1: General Information				
Site (Collateral Property) Name _____				
Site Address and Nearest Cross Streets _____ _____				
Principal Contact(s)	Title	Phone/Fax Number		
Customer/Owners of Facility and Mailing Address _____ _____				
SECTION 2: Facility Description and Current Operations				
Total Acreage		Current use of land		
		<input type="checkbox"/> Warehouse	<input type="checkbox"/> Industrial	
		<input type="checkbox"/> Commercial	<input type="checkbox"/> Gas Station	
		<input type="checkbox"/> Retail	<input type="checkbox"/> Other	
Structure (Type and square footage)	List products manufactured and/or services provided at site	Number of Employees	Operating Hours	North American Industrial Classification System (NAICS) Code
Describe past, present, future (if known) use of site: _____ _____ _____				
Please indicate total projected costs of compliance with local, State or Federal environmental laws, regulations or permits, or costs associated with any environmental cleanup or closure activities. _____ _____				

I am aware of the following information related to historical or current site uses: (use additional sheet as required)	YES	NO
Any known spill/release of hazardous materials or petroleum products?	<input type="checkbox"/>	<input type="checkbox"/>
Any likely past or current presence of underground / above ground storage tanks?	<input type="checkbox"/>	<input type="checkbox"/>
Have soil/debris mounds been observed or is there any known past filling on the property?	<input type="checkbox"/>	<input type="checkbox"/>
Any likely past or current industrial/manufacturing use and/or presence/use of petroleum products or solvents on the property?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have knowledge that the property has been subject to any environmental sampling or studies?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have knowledge that asbestos, lead based paint or mold is present on the property?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any environmental liens on the property?	<input type="checkbox"/>	<input type="checkbox"/>
If this is a purchase, is the price below normal market value for this type of property?	<input type="checkbox"/>	<input type="checkbox"/>
EXPLAIN ANY "YES" ANSWERS BELOW OR ON AN ATTACHED SHEET.		

If the property has historically been and currently is low-risk use, and there is no indication that hazardous materials were, or currently are used at the property, then do not complete subsequent section.

SECTION 3: Past use Information				
Dates of current operations / Date of expansion (if any)				
List, if known, date and nature (e.g., deed estate distribution, sheriff the deed, etc.) of the most recent title transfer of the site.				
List, if known, previous site owners:				
Name Address Phone	Land use by past owner	What did past owner manufacture on the site?	What processes or operations were involved?	Did any if the processes involve solvents or liquid chemicals? Y/N
1				
2				
3				
4				
If "YES" was answered above, please describe:				
Has there ever been any spill, cleanups, fines or citations relating to hazardous materials or operations? (Provide history and details):				
Please indicate total projected costs of compliance with local, State or Federal environmental laws, regulations or permits, or costs associated with any environmental cleanup or closure activities.				

SECTION 4: Current Hazardous Materials Use/ Waste Generation	
Are hazardous materials used or stored at the site? (If "YES", please describe)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are hazardous or industrial wastes generated on the site? (If "YES", please describe type of waste and volume generated and storage practices)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Does the facility carry an Environmental Protection Agency (EPA) Identification Number? (If "YES", indicate type and number)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the facility carry a State of Michigan (MID, MIG) Identification Number? (If "YES", indicate type and number)	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 5: Regulatory Compliance	
Has the facility been subject to notice of violation, citation, or other notification from a local, state or federal agency concerned with environmental compliance? (If "YES", please describe this action)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is or has the owner or operator of the site been subject to any private suits relating to compliance with environmental laws, regulations, permits or orders? (If "YES", please describe this action)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the owner or operator of the site anticipate that the federal, state or local government will initiate an administrative or legal enforcement action relating to the site's compliance with environmental requirements during the term of the loan? (If "YES", please describe this action)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the owner or operator of the site ever been identified as a potentially responsible part in any environmental enforcement action or otherwise been the subject of any federal, state or local environmental enforcement or remediation action relating to the site? (If "YES", please describe this action)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the site subject to specific federal, state or local licensing or permit requirements or to rules or regulations relating to specific environmental matters or operations such as underground storage tanks (USTs), the storage or treatment of hazardous or regulated substances, air or water discharge, etc?	<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 6: Aboveground/Underground Storage Tank Information (ASTs/USTs)

Are there any known current or former aboveground or underground storage tanks on the property? Yes No
 (if yes, describe below)

AST No. and Size (Identify if current or former)	AST Contents	AST Construction (i.e. steel, plastic, fiberglass)	AST Location	Describe Containment (if present)

Current UST No. & Size	Date Installed	UST Contents	UST Construction (i.e. steel, single/double walled fiberglass)	Corrosion Protection (if Steel)	Identify Leak Detection and/or Monitoring	Piping Construction, Leak Detection and Corrosion protection
Former UST No. & Size	Date Installed and Removed	UST Contents	UST Construction (i.e. steel, single/double walled fiberglass)	UST Location	Release Detected?	Ongoing Cleanup or Closure Occurring? (if yes please describe below)

AST/USTS continued

1. If a release has been detected, is the site an Open or Closed Leaking UST site?

2. If LUST cleanup/closure activities are ongoing, please describe.

3. Identify the Environmental Consultant completing LUST closure activities.

4. Please identify below, and provide the Loan Officer with all environmental reports regarding current and former UST system removals, releases, remediation and closures.

5. Please provide the Loan Officer with a copy of your UST Pollution Liability Policy that satisfies federal financial assurance requirements

SECTION 7: Adjoining Properties					
Please describe the adjoining properties and associated use. Addresses for each property should be given, if known. Check all that apply					
	North	South	East	West	Comments
Vacant Land					
Residential					
School/Day Care					
Retail					
Commercial					
Light Industrial					
Manufacturing					
Other					

SECTION 6: Licenses or Permits		
Are any licenses or permits required for the customer's operations? (If "YES", please list)		<input type="checkbox"/> Yes <input type="checkbox"/> No
If licenses or permits are required, are all required licenses or permits current? (If "NO", please specify those licenses which are not current)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Has a license or permit ever been suspended, revoked or denied? (If "YES", provide details)		<input type="checkbox"/> Yes <input type="checkbox"/> No
List the Comprehensive General Liability Insurance (CGL) and any excess or umbrella coverage		
Insurance Carrier	Broker	Policy Number
Types	Amount of Coverage	Does the CGL include pollution coverage? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does the customer have Environmental Impairment Liability Insurance (EIL)? (If "YES", please list)		<input type="checkbox"/> Yes <input type="checkbox"/> No
Insurance Carrier	Broker	Policy Number
Individual responsible for operations compliance with environmental law		
Name	Title	Phone/Fax Number
Qualification and how long the person has held these responsibilities:		