

07-20-576750

**Notice:** Use this form when submitting an environmental assessment conducted for the purpose of obtaining the lender liability exemption under s. 292.21, Wis. Stats. Completion of an environmental assessment is required to obtain the exemption. The information collected will be used to assist the DNR and lenders in tracking and administering the lender liability exemption. Personal information will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31 - 19.39, Wis. Stats.].

RECEIVED  
W/DNR GREEN BAY

Property Information						
Property Name	¼ / ¼	¼	Section	Township	Range	<input checked="" type="checkbox"/> E <input type="checkbox"/> W
Campbellsport Self Serve	SW	NE	13	13 N	18	
Address			Parcel #			
104 <sup>N</sup> South Railroad Street			V02-13-18-99-OP-225-00 & V02-13-18-99-OP-230-00			
City	State	ZIP Code	x/y Coordinates		Method	
Campbellsport	WI	53010	658331 / 348581		BRRTS Map	
Property Size (in acres)			BRRTS # (if applicable)		FID# (if applicable)	
0.69			03-20-170268		None	
Alternate Property Name(s)						
MSM Mart						
Lender Information						
Organization			Title			
Collins State Bank			President			
Name			Telephone Number (include area code)			
Terry Van Engen			920-994-9434			
Address			Fax Number (include area code)			
302 East Towne Drive			920-994-8404			
City	State	ZIP Code	Email Address			
Random Lake	WI	53075	tvanengen@collinsstatebank.com			
Previous Landowner Information (Prior to Lender's Acquisition)						
Organization			Title			
MSM Chahal LLC						
Name			Telephone Number (include area code)			
Arushupinder Singh Chahal						
Address			Fax Number (include area code)			
N511 HWY 57						
City	State	ZIP Code	Email Address (Optional)			
Random Lake	WI	53075				
Environmental Consultant Representing Lender						
Organization			Title			
Endpoint Solutions Corp.			Principal			
Name			Telephone Number (include area code)			
Robert A. Cigale			414-858-1202			
Address			Fax Number (include area code)			
6871 South Lovers Lane			414-427-1259			
City	State	ZIP Code	Email Address (Optional)			
Franklin	WI	53132	bob@endpointcorporation.com			

Attorney Representing Lender				
Organization Krawczyk, Duginski & Rohr			Title	
Name Brian A. Romans			Telephone Number (include area code) 262-827-5800	
Address 16620 West Bluemound Road, Suite 500			Fax Number (include area code) 262-827-5809	
City Brookfield	State WI	ZIP Code 53005	Email Address (Optional) brian@kdrlawyers.com	

Regulatory Criteria			
1. Has a discharge of a hazardous substance been detected at the property?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
2. If contamination was detected, has it been reported to the state? If yes, Agency Notified		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3. Does it include petroleum from a leaking underground storage tank (LUST)?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
4. Does it include non-LUST petroleum or non-petroleum contamination?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
5. When did you acquire the property? (Note: Property acquired before 11/15/93 is ineligible for the lender liability exemption.) Borrower turned over keys to the property to Collins State.			Date December 18, 2015
6. Have you acquired title to the property?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Date  
~~9/19/94~~  
9/5/2007 TRB

Describe the method you used to enforce your security interest and acquire title to the property and the statute provisions worked under.  
Relief from Stay and Abandonment in Bankruptcy pursuant to 11 U.S.C. Section 362(d), Section 544(b), Federal Rules of Bankruptcy Procedure 4001(a) and 6007(b); then Foreclosure Action under Wis. Stats. Chapter 846, in particular 846.10 if owner-occupied, 846.102 if abandoned, or 846.103(1) if non-owner-occupied; coupled with a replevin action under Wis. Stats. Chapter 810.

List all technical reports (including Phase I and Phase II Environmental Assessments) documenting past and planned environmental work at the site, including the title of the report, the date completed, and the date the report was submitted to DNR.

Title of Report	Date Completed	Date Report Submitted to DNR
Phase I Environmental Site Assessment	January 25, 2016	

Certification		
I certify that I am legally authorized to act on behalf of the lender for submittal of this information regarding the property listed above. To the best of my knowledge the information provided herein is accurate.		
Name (Type or Print) Robert A. Cigale	Title Environmental Consultant	Date 2/2/16
Signature 		