State of Wisconsin Department of Natural Resources PO Box 7921, Madison, WI 53707-7921 dnr.wi.gov

# Off-Site Liability Exemption and Liability Clarification Application

Form 4400-201 (R 05/19)

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**Notice:** Pursuant to ss. 292.13 and 292.55, Wis. Stats., this application must be completed to request a written determination from the Department of Natural Resources (DNR) for the off-site liability exemption or for the liability clarification regarding property affected by an offsite discharge. The Department will not consider, or act upon your application unless all sections are completed on this form and the required fee of \$700, required under ch. NR 749, Wis. Adm. Code is included. Personal information collected will be used for administrative purposes and may be provided to requester's to the extent required by Wisconsin's Open Records law [ss. 19.31] - 19.39, Wis. Stats.]

#### **Definitions:**

"Off-Site Exemption" refers to a statutory limit on liability available to a person with respect to the existence of a hazardous substance in the groundwater or soil, including sediments, on Property possessed or controlled by the person, as provided in s. 292.13, Wis. Stats. The off-site exemption is available only to persons who possess or control the affected property, who meet the requirements and criteria in the statutes. DNR provides a written determination regarding liability upon submittal of this application and the required fee.

"General Liability Clarification" refers to a written determination by the Department, as provided in s. 292.55, Wis. Stats., that clarifies the environmental liability of a person, business or another party for a specific situation. General liability clarifications can be provided in situations when the party requesting the clarification does not meet one of the requirements for the off-site exemption at the time of the application submittal, for example, does not yet own the off-site property. This application form should be used to request a written liability clarification for property affected by an off-site discharge.

"Property" refers to the subject property that has been impacted by hazardous substances that migrated there from a different property containing the original contamination source. The subject property is often referred to as an "off-site" or "off-source" property.

"Possession or control" refers to holding title to the property or exercising possession or control over the property by some other means, such as a lease.

[NOTE: a person with an easement doesn't have possession or control over the property; the property owner just allows the person to use part of the property for a limited purpose].

#### Instructions:

- Use this application to request a written determination from the Department for the off-site liability exemption or for the liability clarification
  regarding property affected by an off-site discharge. See DNR's Fact Sheet: "When Contamination Crosses a Property Line Rights and
  Responsibilities of Property Owners Off-Site Limited Liability Exemption" (RR-589) for general information on eligibility requirements, liability
  clarification letters related to the off-site liability exemption, and property owner responsibilities. Information and these publications are
  available by contacting a DNR office or on the Internet at: http://dnr.wi.gov/topic/Brownfields.
- . Complete the application and include the information that adequately shows that the required criteria are met. See Section 7 on page 4.
- · Include a \$700 fee payment with this application, in accordance with ch. NR 749, Wis. Adm. Code.
- Send the completed application, fee, and supporting materials to the DNR regional office where the Property is located, as listed on page 6.
   Contact the person listed with any questions.
- Department staff will make every attempt to provide timely written determinations. However, the time required for the determination varies depending on the complexity of the site, and the clarity and completeness of the application and supporting documentation.
   Do not use this application form to request liability clarifications for properties without off-site contamination. Contact one of the DNR regional offices or see the DNR website on the Internet for more information.

1. Applicant information for perso	n requesting the determinatior	٦.			
Applicant Last Name		First			
Mullee		Michael			
Address		City	State	ZIP Code	e
5402 Flad Avenue		Madison	WI	Л 53711	
Phone Number (include area code)	Fax Number (include area code)	E-Mail Address			
(608) 239-8137		wahc@tds.net			
Contact for questions (if different than applicant) Last Name		First			MI
Address		City	State	ZIP Code	e
			WI		
Phone Number (include area code)	Fax Number (include area code)	E-Mail Address			

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#### 2. Applicant eligibility for off-site exemption or off-site liability clarification.

Request one determination based on whether the requirements for the off-site exemption are currently met. See page 5 and sign the appropriate certification.

✓ Off-Site Discharge Exemption – I "possess or control" the Property and I believe I meet the criteria for an off-site exemption. I request an off-site exemption letter.

 $\boxtimes$  I have completed Section 8a on page 5.

As the applicant, I am:

O Current owner

Other\* Explain your relationship to the Property or the nature of your possession or control of the Property: The property is titled to Castille Affordable Housing Limited Partnership. Wisconsin Affordable Housing Corporation is the General Partner owning 1%. Michael Mullee is the President of the company and owns 100% of the stock. The sole limited partner is Michael Mullee who owns a 99% interest.

\*Additional documentation may be requested by the DNR to verify the applicant's possession or control of the Property. For example, if a lessee requests a determination, DNR would need a copy of the lease by which to assess whether the lessee possesses or controls the Property.

Off-site Liability Clarification – I lack one or more of the requirements for the off-site exemption as shown below. I request a liability clarification letter that explains which conditions must be met in order to qualify for the off-site liability exemption.

I have completed Section 8b on page 5.

Requirements for the off-site exemption that are missing:

- Currently I do not possess or control the Property and
  - I plan to buy the Property on
  - I plan to lease the Property on

2. Currently no contamination has been detected on the Property but there is credible evidence that contamination has migrated onto the Property.

(Date) or

(Date).

- 3. Multiple contiguous properties are believed to be affected by contamination from a known source.
- 4. Other: Explain the circumstances here or in an attachment.

#### 3. Information on additional parties.

Check the appropriate box to have a copy of the determination letter sent to one or more of these parties:

Environmental Consultant	First		MI
Address	City	State ZIP Code	e
Phone Number (include area code) Fax Number (include ar	ea code) E-Mail Address		
Attorney / Other Last Name	First		MI
Address	City	State ZIP Code	e
Phone Number (include area code) Fax Number (include ar	ea code) E-Mail Address	I	

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	Property affected I	by off-site	discharge.							
Property / Facility						1	County			
Maple Glen Apa	rtment Homes			10.1			Dane	<u></u>	710 0	
Address				City					ZIP Code	
212 Deer Vall	ley Road		<b>b</b>	Mac	lison			WI	5370	)3
Public L	and Survey Coordina		Latitude			Long	itude			
	Section Range O E		Datum (check or		: 083 () 1990 A	diustme	Metho	bd	Accuracy	
(Attach a list of l	ocations if this reques	1	<u> </u>	0	0				<b>I</b>	
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Phone Numbe	r (include area code)	Fax Num	ber (include area	(aho)	E-Mail Addres	e e			1	
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5 Information at	out contamination	on the imp	actod Property	and the second second		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1. J			
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	t, explain why contam					in an at	tachment	or here:		
Yes. Chec	k all that apply: 🔲 G	Groundwate	r 🗌 Soil 🗌 Se	ediment	Other, des	cribe:	Vapor			****
B. Has the presen	ce of contamination be	een reporte	d to any State or	local q	overnmental ad	encv?				
O No.						,,.				
	k all that apply: ⊠DN	IR						Date I	Reported	
0.1			nergency Govern	ment						
		ommerce						<b>Hereitersternen</b> hereiter		
		epartment o	of Agriculture, Tra	de and	Consumer Pro	tection (	DATCP)			
	X 01	ther, descrit	be: DNR repo	orted da	te is unknown	n to ap	plicant.			
C. Is the source of	the contamination kn	own? Chec	k only one.							
O No.										
O Yes. If yes	, what is the source of	of the contai	mination?							
Provide the	name and address of	f the owner	of the contamina	ition sou	arce or source p	property	, if knowr	ı.		
Owner Nar	ne	and a spin of an				a fan an de skriver an de s			anderselation of equivalent to be and	
Address	;	na line ta na ang kan lata 5 ang ang			City	*****		State	ZIP Cod	Ð
( ) Suspected.	If suspected to be m	igrating from	m a nearby sourc	e what	is the source a	and its a	ddress?			
	wer line on Town of									
	e name of the owner o	of the suspe	ected contaminati	on sour	ce or source pr	roperty,	if known.			
Owner Na	me									
Address	:			10	City			State	ZIP Cod	A
Address				ſ						
		energia esta de la constante d	an a							

6. Specific liability clarification questions relating to off-site contamination.

- I have no additional liability clarification questions.
- I request a DNR response to the questions provided to clarify my liability for the cleanup of off-site contamination to be included in the written determination (questions should be provided here or in an attachment) :

Vapor testing was done in the basement of one of my buildings at 200 Deer Valley Road and the basement air was tested. It was determined that the basement air quality was acceptable but the eastern side of the basement tested high under the basement slab. As a precaution, the DNR has recommended mitigation that will prevent any vapors from entering into the basement.

It is my understanding that the cost of this mitigation system will not be the owner's responsibility. Please clarify this along with detailing any potential future costs that may be incurred to maintain the system.

It is my understanding that some soils on the eastern side of the building and on the Town of Madsion land adjoining my property may be contaminated. Please clarify if the DNR believes it necessary to mitigate the soils on the eastern side of my building.

#### 7. Property information needed for the determination of off-site exemption or off-site liability clarification.

DNR requires adequate information in order to make the determination requested in this application. Incomplete or inadequate information will delay the completion of the determination. DNR has the authority to request additional information, if needed. Include the following information with the application, if appropriate:

- 1. Map(s) showing Property location(s) and any suspected or known off-site contaminant source properties.
- 2. For any environmental data submitted, include:
  - a) Property map(s) showing sampling locations for all data submitted;
  - b) Interpretation of data signed by a qualified environmental professional, including data tables and figures that include data;
  - c) Soil boring logs;
  - d) Groundwater monitoring well construction, development and sampling logs;
  - e) Laboratory-provided data reports;
  - f) Survey information for groundwater elevations;
  - g) Chain of custody forms for all samples; and
  - h) Description of sample collection methods.

The submitted materials should document that the statutory criteria are satisfied regarding the contamination and its source as listed in A through C below.

- A. Document that there is hazardous substance contamination present in soil, groundwater and/or sediment on the Property or Properties. Examples of information include: Analytical results and interpretations for samples collected from soil, groundwater, and/or sediment on the Property, or at or near the Property line, that conclusively document the presence of a hazardous substance in one or more of these media on the Property. This information could be documented in a Phase II Environmental Assessment report, or could refer to existing reports in DNR files related to the source property.
- B. Document that the hazardous substance contamination, which is present in soil, groundwater, and/or sediment on the Property or Properties, is migrating onto the Property or Properties from an off-site source.

Examples of information include:

- 1. Information identifying known or suspected discharges of the hazardous substance on neighboring property(ies), e.g., a Phase I Environmental Assessment report, information in existing reports in DNR files related to the source property.
- 2. Soil, groundwater and/or sediment sample data and interpretations adequate to conclude that the hazardous substance is migrating onto the Property or Properties, such as:
  - Samples from monitoring wells located on the upgradient side of the Property or Properties (include information to establish upgradient direction), which show increasing contaminant concentrations toward the upgradient Property or Properties;
  - Off-site investigation results that provide information about groundwater flow direction and contaminant movement that convincingly
    document hazardous substances from a known or suspected off-site source have impacted the Property or Properties; or
  - A description of the event(s) that caused the deposit or accumulation of contaminated sediment on the affected Property or Properties and a map showing the location of the water body and elevations of the affected Property or Properties and water surface at normal flow and flood stage conditions.
- C. Document that the discharge of a hazardous substance is not from a source on the Property or Properties.

Examples of information include:

- 1. Information related to historical activities, such as descriptions of chemicals used and handled, areas where chemicals were used and handled, and areas of potential discharges on the Property or Properties, e.g., a Phase I Environmental Assessment report.
- 2. Where the types of hazardous substances used, handled, or discharged on the Property or Properties are the same as the hazardous substances migrating onto the Property or Properties, provide environmental information, e.g., expanded Phase II environmental assessment data, including type and volume of hazardous substances handled, generated or stored on the applicant's Property during the period of ownership and/or length of lease, and analytical results and interpretation for soil and groundwater samples collected from potential discharge areas to demonstrate that the contamination migrating onto the Property is separate and distinct from the contamination that may be on the Property.

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8. Sign one of the certifications below based on whether the requirements of the off-site exemption are currently met.

8a. Certification if the applicant currently meets all the requirements for the off-site liability exemption. Applicant Certification for a Determination for the Off-Site Discharge Exemption, as provided in s. 292.13, Wis. Stats.

I certify that I possess or control the Property and have read and am familiar with the information on this application. The information on and included with this application is true, accurate and complete to the best of my knowledge.

I understand that I retain the responsibility for any hazardous substance discharges that I caused or cause, and for any discharges whose source I possess or control on the Property or on other properties.

I believe that I meet the criteria in s. 292.13, Wis. Stats., with respect to the fact that I never controlled or possessed either the source property itself, or the hazardous substances that have migrated onto the Property from the source property, nor did I cause the hazardous substance discharge for which I am seeking this written exemption.

I understand that if I fail to satisfy the statutory requirements in s. 292.13, Wis. Stats., such as failing to provide access to the Property, the DNR has the authority to revoke the off-site exemption for the Property.

Applicant Last Name	First	MI
Mullee	Michael	
Signature	Date Signed	11
Michael Muller	07/27/2020 2	Allas
8b. Certification if applicant has not currently r	met all the conditions for the off-site exemption.	

Applicant Certification for a Determination for Liability Clarification, as provided in s. 292.55, Wis. Stats.

I certify that I have read and am familiar with the information on this application and that the information on and included with this application is true, accurate and complete to the best of my knowledge.

I understand that I retain the responsibility for any hazardous substance discharges that I caused or cause, and for any discharges whose source I possess or control on the Property or Properties or on other properties.

It is my understanding that I have not met all the conditions for the off-site exemption at the time of this application, but I request a liability clarification determination that includes the conditions under which I or others would become eligible for the off-site discharge exemption for the Property or Properties, if I were to meet all the criteria under s. 292.13, Wis. Stats. I believe that I meet the criteria regarding the source of the contamination and the source property in s. 292.13, Wis. Stats., with respect to the fact that I never controlled or possessed either the source property itself, or the hazardous substances that have migrated onto the Property or Properties from the source property, nor did I cause the hazardous substance discharge for which I am seeking this written exemption.

I understand that if I meet the criteria in s. 292.13, Wis. Stats., and obtain the off-site liability exemption, but subsequently fail to satisfy the statutory requirements in s. 292.13, Wis. Stats., such as failing to provide access to the Property, the DNR has the authority to revoke the off-site exemption for the Property.

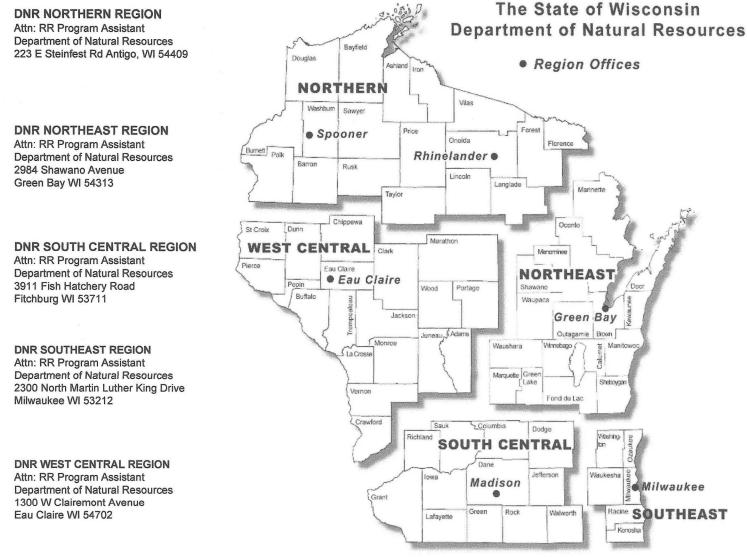
Applicant Last Name	First	MI
Signature	[ [	Date Signed

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## 9. DNR contacts and addresses for application submittals.

Send or deliver the completed request, supporting materials, and fee to the region where the property is located. Contact a DNR Regional Brownfield Specialist with any questions about this form or a specific situation involving a contaminated property



Note: These are the Remediation and Redevelopment Program's designated regions. Other DNR program regional boundaries may be different.

	For DNR Office Use Only	
Date Received	BRRTS Activity Name	BRRTS Activity Code
Date Assigned	DNR Reviewer	BRRTS FID No. (if used)
Comments		Fee Enclosed
		⊖ Yes
		O No
Date Approved	Date Additional Information Requested Date Withdrawn	Date Denied