Program Application
Purchaser Liability Exemption

#P-24
SED
7/27/95

WISCONSIN DEPT. OF NATURAL RESOURCES

CONTAMINATED LANDS RECYCLING PROGRAM • WDNR •

Please complete an application form for each property that you are requesting DNR review and approval of cleanup actions. This application form should be submitted to the DNR in order to apply for the protection of limited liability under s.144.765, Stats. Protection of limited liability is effective at the completion of a cleanup action, if the purchaser complies with all of the statutory requirements of ss. 144.76 and 144.765, Stats. Personally identifiable information found in this form will be used for no purpose other than the Contaminated Lands Recycling Program. If you have questions about completing this form, please call (608) 261-6424.

Return to: Wisconsin Department of Natural Resources
Emergency and Remedial Response Section
Contaminated Lands Recycling Program
101 S. Webster (SW/3), Box 7921
Madison, WI 53707

General Information:

Property Name (if any): Former Allis Chalmers Tractor Plant Site

Address: Northeast corner of 70th and W. Washington Streets

City, Village, or Town: West Allis State WI Zip Code 53214

Property size: 26.8 (acres)

Public Land Survey Coordinates[1]:

☐ Quarter SW¼ and SE¼ ☐ Section 34 ☐ Township 7N

☐ Range 21E ☐ County Milwaukee

Department-issued identification number for site or facility: 241379160

To the best of your knowledge what type of business or businesses have operated at this property in the past?

☐ Landfill ☐ Pipeline ☐ Bulk Plant ☐ Coal Gas Manufacturer

☐ Gas Station ☒ Manufacturing ☐ Dry Cleaners ☐ Salvage Yard

☐ Ag. Coop. ☒ Other (explain) foundry sand

[1] Please attach to this application the most recent Wisconsin County Plat map highlighting location of the property.

Did you own the business or entity[5] at the time of the hazardous substance release? ☐ Yes ☒ No

Did you participate in the management of a business or entity[5] that caused the release of a hazardous substance on the property? ☐ Yes ☒ No

Did you own the property at the time of the hazardous substance release? ☐ Yes ☒ No

Did you otherwise cause the release of a hazardous substance on the property? ☐ Yes ☒ No

Part II: Potential Purchaser Status:

If you are the potential purchaser, who currently owns the property? N / A

Name: _____

Address: _____

City, Village or Town _____ State _____ Zip Code _____

Please answer the following questions to help DNR determine if you will acquire the property in an "*arms-length*,[3] *good-faith*[4]" transaction:

How will you acquire the property? ☐ Inheritance ☐ Purchase ☐ Land Trade

☐ Other (explain) _____

Did you own the business or entity[5] at the time of the hazardous substance release? ☐ Yes ☐ No

Did you participate in the management of the business or entity[5] that caused the release of a hazardous substance on the property? ☐ Yes ☐ No

Did you own the property at the time of the hazardous substance release? ☐ Yes ☐ No

Did you otherwise cause the release of a hazardous substance on the property? ☐ Yes ☐ No

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[5] "Owner of a business or entity", as defined in s. 144.765, Stats., means "any person who owns or who receives direct or indirect consideration from the operation of a business or entity regardless of whether the business or entity remains in operation and regardless of whether the person owns or receives consideration at the time any discharge of a hazardous substance occurs." "Owner of a business or entity" is further defined in s. 144.765(1)(e), Stats., to include a "subsidiary or parent corporation as any business entity, including a subsidiary, parent corporation or other business arrangement that has elements of common ownership or control or uses a long-term contractual arrangement with any person that has the effect of avoiding direct responsibility for conditions on a parcel of property."

[illegible]

Please check all that apply:

- ☒ Petroleum Products
- ☐ RCRA Hazardous Waste
- ☐ VOCs
- ☐ Metals
- ☒ Chlorinated Solvents
- ☐ PCBs
- ☐ Pesticides
- ☐ Other (explain) _____

Involvement with Other Regulatory Programs:

Please check the appropriate boxes below if any of the following programs or agencies have been involved with the property in question.

- ☒ WDNR Tank Program (LUST)
- ☐ WDNR Voluntary Sediment Program
- ☐ WDNR Hazardous Waste Program
- ☒ WDNR Solid Waste Program
- ☐ WDNR Site Assessment (CERCLIS)
- ☐ U.S. EPA National Priorities List Site
- ☐ WDNR Air Program
- ☐ WDNR Waste Water Program
- ☒ PECFA Eligible
- ☐ Wisconsin DATCP
- ☐ WDNR Water Supply Program
- X WDNR ENVIRONMENTAL RESPONSE AND REPAIR

Is there an enforcement order issued by WDNR, DILHR or DATCP in effect at this property?

☐ Yes ☒ No

Date issued: _____ (DY,MM,YR)

Agency: _____

If not, has an enforcement order been issued and complied with in the past?

☐ Yes ☒ No

Date issued: _____ (DY,MM,YR)

Date Compliance Attained: _____ (DY,MM,YR)

Agency: _____

Has a hazardous substance discharge been reported in accordance with s. 144.76(2), Stats, and ch. NR 158 or 705?

☒ Yes ☐ No

Date reported: several (DY,MM,YR)

Environmental Consultant

Please list the name(s) of your current environmental consultant, if one has been selected:

Name Donna Volk

Company STS Consultants, Ltd.

Address 11425 W. Lake Park Drive, Milwaukee, WI 53224

Phone 414-771-4076

Please note: Effective May 1, 1995, specific types of environmental response actions are to be conducted by persons who meet the qualifications established in ch. NR 712, Wis. Adm. Code.

Legal Counsel

Please list the name(s) of the legal counsel representing the applicant in this matter, if any:

Name Mike Sachen

Firm City of West Allis

Address 7525 W. Greenfield Ave., West Allis, WI 53214

Phone 414-256-8258

Certification

The applicant should read and sign the following certification:

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

I believe that I meet the definition of "purchaser" in s. 144.765, Stats., and I agree that I will provide to the WDNR further information to document my status as a "purchaser," if requested to do so.

I hereby request assistance from WDNR in reviewing the environmental response actions that have been or will be taken to obtain protection of limited liability, as provided in s. 144.765, Stats.

I recognize that to obtain this limited liability exemption from s.144.76(3), (4), 7(b) and (c), Stats., that the environmental response actions taken will need to comply with the applicable provisions of the NR 700 rule series, and will require a Phase I and II environmental assessment to be conducted for the property.

Applicant's Name John Stibal

Title Director, Dept. of Developmen

Signature John F. Stibal

Date July 26, 1995

Form F4400-178: 12-94

PURCHASER LIABILITY EXEMPTION PROGRAM APPLICATION

Form 4400-178 12-96

Use this application to apply for the purchaser liability exemption under s. 292.15, Wis. Stats. Please refer to the attached instructions when completing this form. Note: This form is authorized by ss. 227.11(2)(b) and 292.15, Wis. Stats. Participation in the Land Recycling program is voluntary. However, this form is required by ch. NR 750, Wis. Adm. Code, for persons requesting approval to participate in the program. Personally identifiable information that is submitted to the DNR on this form will become a public record and may be used by the DNR in the administration and enforcement of the hazardous substance spill program in addition to being used in the purchaser liability exemption program. Incomplete applications will be returned.

PROPERTY INFORMATION (1)

Property Name: Center Point Properties Trust AKA - City of West Allis

Address: NE corner of 70th & Washington St.

City and Zip Code: West Allis, WI 53214

County: Milwaukee

Property Size (in acres): 6.047

Public Land Survey Coordinates

QQ (circle): NE SE (NW) SW — QT (circle): NE (SE) NW SW — Section: 3 4 — Township: 7 — Range: 2 1 (E) W

	Latitude	Longitude	Datum (check one)
Degrees			☐ NAD27
Minutes			☐ NAD83
Seconds			☐ 1990 Adjustment
Method		Accuracy	

APPLICANT INFORMATION (2)

Organization: City of West Allis

Title: Director of Development

Name: John Stibal

Telephone Number (including Area Code): 414-302-8462

Address: 7525 W. Greenfield Avenue

Fax Number (including Area Code): 414-302-8401

City, State, Zip Code: West Allis, WI 53214-4688

E-mail Address:

APPLICANT ELIGIBILITY (3)

Relationship to the property (please check one)

☐ Current Owner ☒ Potential Purchaser

When did/will you acquire the property (dd/mm/yy)? June 1998

How did/will you acquire the property?

☒ Purchase ☐ Bankruptcy/Foreclosure
☐ Land Trade ☐ Other (please explain)
☐ Inheritance
☐ Tax Delinquency

Are you related to the person or entity from whom you did/will acquire the property? ☐ Yes ☒ No

If Yes, please describe relationship:

Did you own a business or entity that operated on the property at any time during the hazardous substance release? ☐ Yes ☒ No

Did you manage a business or entity that operated on the property that caused the release of a hazardous substance on the property? ☐ Yes ☒ No

Did you own the property at the time of a hazardous substance release? ☐ Yes ☒ No

Did you otherwise cause the release of a hazardous substance on the property? ☐ Yes ☒ No

REGULATORY IDENTIFICATION (IF KNOWN) (4)

Program	ID Number (if applicable)
☒ DNR FID	241379160
☐ Environmental Repair (ERP)	
☐ Leaking Underground Storage Tank (LUST)	
☐ Solid Waste	
☐ Hazardous Waste	
☐ Wastewater-surface water (WPDES)	
☐ Wastewater-groundwater (WPDES)	
☐ DCOM PECFA Claim Number	
☐ DATCP Agricultural Contamination	
☐ USEPA ID	

☐ Hazardous Substance Spill ☐ Abandoned Containers
☐ Brownfield Env'l. Asmt. Pilot ☐ Superfund Site Evaluation (CERCLA)
☐ Municipal Negotiation and Cost Recovery ☐ Municipal Grants Program
☐ Superfund Remedial (NPL) ☐ Contaminated Sediments
☐ Other:

FOR OFFICE USE

Date Received: Application Fee Enclosed ☐ Yes ☐ No

BRRTs PLL Activity Number: BRRTs Activity Name:

FID: Region: NO WC NE SC SE

☐ Approved to Proceed (602) PMN
☐ Denied (explain) (603)
☐ Withdrawn (explain) (610)

Comments:

Reviewed By: Date:

Project Manager:

SELLER

Organization/Firm: Not Applicable	Title:
Name:	Telephone Number (including Area Code):
Address:	Fax Number (including Area Code):
City, State, Zip Code:	E-mail Address:

ENVIRONMENTAL CONSULTANT REPRESENTING APPLICANT (6)

Organization/Firm: STS Consultants, LTD	Title: Principal Scientist
Name: Thomas Kroeger	Telephone Number (including Area Code): 414-359-3030
Address: 11425 W. Lake Park Drive	Fax Number (including Area Code): 414-359-0822
City, State, Zip Code: Milwaukee, WI 53209	E-mail Address: Kroeger@STSL.Com

ATTORNEY REPRESENTING APPLICANT (IF APPLICABLE) (7)

Organization/Firm: City of West Allis	Title: City Attorney
Name: Michael Sachen	Telephone Number (including Area Code): 414-3028450
Address: 7525 W. Greenfield Avenue	Fax Number (including Area Code): 414-302-8401
City, State, Zip Code: West Allis, WI 53214	E-mail Address:

PAST LAND USES (8)

- [ ] Service station
- [ ] Agricultural co-op.
- [ ] Salvage yard
- [ ] Pipeline
- [ ] Coal gas manufacturer
- [ ] Electroplater
- [ ] Other:
- [X] Manufacturing
- [ ] Dry cleaner
- [ ] Bulk plant
- [ ] Tannery
- [ ] Unknown
- [ ] Landfill

KNOWN OR SUSPECTED SOURCES/WASTES (9)

- [X] Foundry sand
- [ ] Surface spills
- [X] Routine industrial operations
- [ ] Transformer
- [ ] Dumping or buried drums
- [ ] Burning of materials
- [ ] Other:
- [X] Underground pipeline or tank
- [X] Above ground pipeline or tank
- [ ] Contaminated building
- [ ] Industrial accident
- [ ] Lagoons
- [ ] FlyAsh

REGULATORY CRITERIA (10)

Has contamination been detected at the property?	[X] Yes [ ] No		
If contamination was detected, has it been reported to the state?	[X] Yes [ ] No	Agency notified: WDNR	Date:
Does it include petroleum from a leaking underground storage tank (LUST)?	[X] Yes [ ] No		
Does it include non-LUST petroleum or non-petroleum contamination?	[X] Yes [ ] No		
Is there an enforcement order currently in effect at this property?	[ ] Yes [X] No	Issuing agency:	Date:

ATTACHMENTS AND CERTIFICATION (11)

I have attached: 1) [ ] a list of past environmental work; 2) [ ] a check or money order for $250 application fee made payable to the DNR; and 3) [ ] a public survey map showing location of property.

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

I believe that I meet the definition of "purchaser" in s. 292.15, Wis. Stats., and ch. NR 750, Wis. Adm. Code, and I agree that I will provide the DNR with further information to document my status as a "purchaser," upon request.

I hereby request assistance from DNR in reviewing the environmental response actions that have been or will be taken to obtain protection of limited liability, as provided in s. 292.15, Wis. Stats.

I recognize that to obtain this limited liability exemption from s. 292.11(3), (4), (7(b) and (c)), Wis. Stats., that the environmental response actions taken will need to comply with the applicable provisions of the NR 700 rule series, and will require a Phase I and II environmental assessment to be conducted for the property.

I recognize that I will be responsible for paying fees to DNR for assistance provided to me as provided under ch. NR 750, Wis. Adm. Code.

Applicant's Name (Type or Print): JOHN F. Stibal	Title: Director of Development
Signature: John F. Stibal	Date Signed: May 20, 1998

State of Wisconsin
Department of Natural Resources

PURCHASER LIABILITY EXEMPTION PROGRAM APPLICATION

Form 4400-178 12-96

Use this application to apply for the purchaser liability exemption under s. 292.15, Wis. Stats. Please refer to the attached instructions when completing this form. Note: This form is authorized by ss. 227.11(2)(b) and 292.15, Wis. Stats. Participation in the Land Recycling program is voluntary. However, this form is required by ch. NR 750, Wis. Adm. Code, for persons requesting approval to participate in the program. Personally identifiable information that is submitted to the DNR on this form will become a public record and may be used by the DNR in the administration and enforcement of the hazardous substance spill program in addition to being used in the purchaser liability exemption program. Incomplete applications will be returned.

PROPERTY INFORMATION (1)

Property Name: C & H Distributors, Inc.

Address: 770 South 70 Street

City and Zip Code: West Allis, 53214

County: Milwaukee

Property Size (in acres): 10.353

Public Land Survey Coordinates

QQ (circle)	QT (circle)	Section	Township	Range
NE SE NW SW	NE SE NW SW	3 4	7	21 E/W

	Latitude	Longitude	Datum (check one)
Degrees			☐ NAD27
Minutes			☐ NAD83
Seconds			☐ 1990 Adjustment
Method		Accuracy	

APPLICANT INFORMATION (2)

Organization: City of West Allis

Title: Director, Department of Development

Name: John F. Stibal

Telephone Number (including Area Code): 414-302-8462

Address: 7525 West Greenfield Avenue

Fax Number (including Area Code): 414-302-8401

City, State, Zip Code: West Allis, WI 53214-4688

E-mail Address:

APPLICANT ELIGIBILITY (3)

Relationship to the property (please check one)

☒ Current Owner ☐ Potential Purchaser

When did/will you acquire the property (dd/mm/yy)? October 4, 1995

How did/will you acquire the property?

☒ Purchase ☐ Bankruptcy/Foreclosure
☐ Land Trade ☐ Other (please explain)
☐ Inheritance
☐ Tax Delinquency

Are you related to the person or entity from whom you did/will acquire the property? ☐ Yes ☒ No

If Yes, please describe relationship:

Did you own a business or entity that operated on the property at any time during the hazardous substance release? ☐ Yes ☒ No

Did you manage a business or entity that operated on the property that caused the release of a hazardous substance on the property? ☐ Yes ☒ No

Did you own the property at the time of a hazardous substance release? ☐ Yes ☒ No

Did you otherwise cause the release of a hazardous substance on the property? ☐ Yes ☒ No

REGULATORY IDENTIFICATION (IF KNOWN) (4)

Program	ID Number (if applicable)
☒ DNR FID	241379160
☐ Environmental Repair (ERP)	
☐ Leaking Underground Storage Tank (LUST)	
☐ Solid Waste	
☐ Hazardous Waste	
☐ Wastewater-surface water (WPDES)	
☐ Wastewater-groundwater (WPDES)	
☐ DCOM PECFA Claim Number	
☐ DATCP Agricultural Contamination	
☐ USEPA ID	

☐ Hazardous Substance Spill ☐ Abandoned Containers
☐ Brownfield Env'l. Asmt. Pilot ☐ Superfund Site Evaluation (CERCLA)
☐ Municipal Negotiation and Cost Recovery ☐ Municipal Grants Program
☐ Superfund Remedial (NPL) ☐ Contaminated Sediments
☐ Other:

FOR OFFICE USE

Date Received:

Application Fee Enclosed: ☐ Yes ☐ No

BRRTs PLL Activity Number:

BRRTs Activity Name:

FID:

Region: NO WC NE SC SE

☐ Approved to Proceed (602) PMN
☐ Denied (explain) (603)
☒ Withdrawn (explain) (610)

Comments:

Reviewed By:

Date:

Project Manager:

Organization/Firm: Not applicable	Title:
Name:	Telephone Number (including Area Code):
Address:	Fax Number (including Area Code):
City, State, Zip Code:	E-mail Address:

ENVIRONMENTAL CONSULTANT REPRESENTING APPLICANT (7)

Organization/Firm: STS Consultants, Ltd.	Title: Principal Scientist
Name: Thomas Kroeger	Telephone Number (including Area Code): 414-359-3030
Address: 11425 West Lake Park Drive	Fax Number (including Area Code): 414-359-0822
City, State, Zip Code: Milwaukee, WI 53209	E-mail Address: KROEGER@STSL.COM

ATTORNEY REPRESENTING APPLICANT (IF APPLICABLE) (8)

Organization/Firm: City of West Allis	Title: City Attorney
Name: Michael J. Sachen	Telephone Number (including Area Code): 414-302-8450
Address: 7525 West Greenfield Avenue	Fax Number (including Area Code): 414-302-8444
City, State, Zip Code: West Allis, WI 53214-4688	E-mail Address:

PAST LAND USE (8)

- [ ] Service station
- [ ] Agricultural co-op.
- [ ] Salvage yard
- [ ] Pipeline
- [ ] Coal gas manufacturer
- [ ] Electroplater
- [ ] Other:
- [x] Manufacturing
- [ ] Dry cleaner
- [ ] Bulk plant
- [ ] Tannery
- [ ] Unknown
- [ ] Landfill

KNOWN OR SUSPECTED SOURCES/WASTES (9)

- [x] Foundry sand
- [ ] Surface spills
- [x] Routine industrial operations
- [ ] Transformer
- [ ] Dumping or buried drums
- [ ] Burning of materials
- [ ] Other:
- [x] Underground pipeline or tank
- [x] Above ground pipeline or tank
- [ ] Contaminated building
- [ ] Industrial accident
- [ ] Lagoons
- [ ] FlyAsh

REGULATORY CRITERIA (10)

Has contamination been detected at the property?	[x] Yes [ ] No		
If contamination was detected, has it been reported to the state?	[x] Yes [ ] No	Agency notified: WDNR	Date:
Does it include petroleum from a leaking underground storage tank (LUST)?	[x] Yes [ ] No		
Does it include non-LUST petroleum or non-petroleum contamination?	[x] Yes [ ] No		
Is there an enforcement order currently in effect at this property?	[ ] Yes [x] No	Issuing agency:	Date:

ATTACHMENTS AND CERTIFICATION (11)

I have attached: 1) [ ] a list of past environmental work; 2) [ ] a check or money order for $250 application fee made payable to the DNR; and 3) [ ] a public survey map showing location of property.

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

I believe that I meet the definition of "purchaser" in s. 292.15, Wis. Stats., and ch. NR 750, Wis. Adm. Code, and I agree that I will provide the DNR with further information to document my status as a "purchaser," upon request.

I hereby request assistance from DNR in reviewing the environmental response actions that have been or will be taken to obtain protection of limited liability, as provided in s. 292.15, Wis. Stats.

I recognize that to obtain this limited liability exemption from s. 292.11(3), (4), (7(b) and (c)), Wis. Stats., that the environmental response actions taken will need to comply with the applicable provisions of the NR 700 rule series, and will require a Phase I and II environmental assessment to be conducted for the property.

I recognize that I will be responsible for paying fees to DNR for assistance provided to me as provided under ch. NR 750, Wis. Adm. Code.

Applicant's Name (Type or Print): John F. Stibal	Title: Director, Department of Development
Signature: John F. Stibal	Date Signed: May 20, 1998

State of Wisconsin
Department of Natural Resources

PURCHASER LIABILITY EXEMPTION PROGRAM APPLICATION

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PROPERTY INFORMATION (1)

Property Name: W. Washington Street Right-of-Way

Address: E of S 70 Street

City and Zip Code: West Allis 53214

County: Milwaukee

Property Size (in acres):

Public Land Survey Coordinates

QtQt (circle)	QT (circle)	Section	Township	Range
NE SE NW SW	NE (SE) NW (SW)	3 4	7 N	2 1 (E) W

	Latitude	Longitude	Datum (check one)
Degrees			☐ NAD27
Minutes			☐ NAD83
Seconds			☐ 1990 Adjustment
Method		Accuracy	

APPLICANT INFORMATION (2)

Organization: City of West Allis

Title: Director of Development

Name: John Stibal

Telephone Number (including Area Code): 414-302-8462

Address: 7525 W. Greenfield Avenue

Fax Number (including Area Code): 414-302-8401

City, State, Zip Code: West Allis, Wi 53214-4688

E-mail Address:

APPLICANT ELIGIBILITY (3)

Relationship to the property (please check one)

☒ Current Owner ☐ Potential Purchaser

When did/will you acquire the property (dd/mm/yy)?
26th of May, 1993

How did/will you acquire the property?

☒ Purchase ☐ Bankruptcy/Foreclosure
☐ Land Trade ☐ Other (please explain)
☐ Inheritance
☐ Tax Delinquency

Are you related to the person or entity from whom you did/will acquire the property? ☐ Yes ☒ No

If Yes, please describe relationship:

Did you own a business or entity that operated on the property at any time during the hazardous substance release? ☐ Yes ☒ No

Did you manage a business or entity that operated on the property that caused the release of a hazardous substance on the property? ☐ Yes ☒ No

Did you own the property at the time of a hazardous substance release? ☐ Yes ☒ No

Did you otherwise cause the release of a hazardous substance on the property? ☐ Yes ☒ No

REGULATORY IDENTIFICATION (IF KNOWN) (4)

Program	ID Number (if applicable)
☒ DNR FID	241379160
☐ Environmental Repair (ERP)	
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☐ Hazardous Substance Spill ☐ Abandoned Containers
☐ Brownfield Env'l. Asmt. Pilot ☐ Superfund Site Evaluation (CERCLA)
☐ Municipal Negotiation and Cost Recovery ☐ Municipal Grants Program
☐ Superfund Remedial (NPL) ☐ Contaminated Sediments
☐ Other:

FOR OFFICE USE

Date Received:

Application Fee Enclosed ☐ Yes ☐ No

BRRTs PLL Activity Number:

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FID:

Region: NO WC NE SC SE

Comments:

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Reviewed By:

Date:

Project Manager:

Organization/Firm	Title
Name	Telephone Number (including Area Code)
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Address 11425 W. Lake Park Drive	Fax Number (including Area Code) 414-359-0822
City, State, Zip Code Milwaukee, WI 53209	E-mail Address Kroeger@STSL.Com

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Organization/Firm City of West Allis	Title City Attorney
Name Michael Sachen	Telephone Number (including Area Code) 414-302-8450
Address 7525 W. Greenfield Avenue	Fax Number (including Area Code)
City, State, Zip Code West Allis, Wi 53214	E-mail Address

PAST LAND USES (8)

- [ ] Service station
- [ ] Agricultural co-op.
- [ ] Salvage yard
- [ ] Pipeline
- [ ] Coal gas manufacturer
- [ ] Electroplater
- [ ] Other:
- [X] Manufacturing
- [ ] Dry cleaner
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- [ ] Tannery
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KNOWN OR SUSPECTED SOURCES/WASTES (9)

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- [ ] Transformer
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- [ ] Burning of materials
- [ ] Other:
- [X] Underground pipeline or tank
- [X] Above ground pipeline or tank
- [ ] Contaminated building
- [ ] Industrial accident
- [ ] Lagoons
- [ ] FlyAsh

REGULATORY CRITERIA (10)

Has contamination been detected at the property?	[X] Yes	[ ] No		
If contamination was detected, has it been reported to the state?	[X] Yes	[ ] No	Agency notified: WDNR	Date:
Does it include petroleum from a leaking underground storage tank (LUST)?	[X] Yes	[ ] No		
Does it include non-LUST petroleum or non-petroleum contamination?	[X] Yes	[ ] No		
Is there an enforcement order currently in effect at this property?	[ ] Yes	[X] No	Issuing agency:	Date:

ATTACHMENTS AND CERTIFICATION (11)

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Applicant's Name (Type or Print) John F. Stibal	Title Director of Development
Signature John F. Stibal	Date Signed May 20, 1998

State of Wisconsin
Department of Natural Resources

PURCHASER LIABILITY EXEMPTION PROGRAM APPLICATION

Form 4400-178 12-96

Use this application to apply for the purchaser liability exemption under s. 292.15, Wis. Stats. Please refer to the attached instructions when completing this form. Note: This form is authorized by ss. 227.11(2)(b) and 292.15, Wis. Stats. Participation in the Land Recycling program is voluntary. However, this form is required by ch. NR 750, Wis. Adm. Code, for persons requesting approval to participate in the program. Personally identifiable information that is submitted to the DNR on this form will become a public record and may be used by the DNR in the administration and enforcement of the hazardous substance spill program in addition to being used in the purchaser liability exemption program. Incomplete applications will be returned.

PROPERTY INFORMATION (1)

Property Name: Poplocki & Sons, Inc.

Address: 922 South 70 Street

City and Zip Code: West Allis 53214

County: Milwaukee

Property Size (in acres): 6.8910

Public Land Survey Coordinates

QtQt (circle)	QT (circle)	Section	Township	Range
(NE) SE NW SW	NE SE NW (SW)	3 4	7	2 1 (E) W

	Latitude	Longitude	Datum (check one)
Degrees			☐ NAD27
Minutes			☐ NAD83
Seconds			☐ 1990 Adjustment
Method		Accuracy	

APPLICANT INFORMATION (2)

Organization: City of West Allis

Title: Director, Department of Development

Name: John F. Stibal

Telephone Number (including Area Code): 414-302-8462

Address: 7525 West Greenfield Avenue

Fax Number (including Area Code): 414-302-8401

City, State, Zip Code: West Allis, WI 53214-4688

E-mail Address:

APPLICANT ELIGIBILITY (3)

Relationship to the property (please check one)

☒ Current Owner ☐ Potential Purchaser

When did/will you acquire the property (dd/mm/yy)? September 8, 1993

How did/will you acquire the property?

☒ Purchase ☐ Bankruptcy/Foreclosure
☐ Land Trade ☐ Other (please explain)
☐ Inheritance
☐ Tax Delinquency

Are you related to the person or entity from whom you did/will acquire the property? ☐ Yes ☒ No

If Yes, please describe relationship:

Did you own a business or entity that operated on the property at any time during the hazardous substance release? ☐ Yes ☒ No

Did you manage a business or entity that operated on the property that caused the release of a hazardous substance on the property? ☐ Yes ☒ No

Did you own the property at the time of a hazardous substance release? ☐ Yes ☒ No

Did you otherwise cause the release of a hazardous substance on the property? ☐ Yes ☒ No

REGULATORY IDENTIFICATION (IF KNOWN) (4)

Program	ID Number (if applicable)
☒ DNR FID	241379160
☐ Environmental Repair (ERP)	
☐ Leaking Underground Storage Tank (LUST)	
☐ Solid Waste	
☐ Hazardous Waste	
☐ Wastewater-surface water (WPDES)	
☐ Wastewater-groundwater (WPDES)	
☐ DCOM PECFA Claim Number	
☐ DATCP Agricultural Contamination	
☐ USEPA ID	

☐ Hazardous Substance Spill ☐ Abandoned Containers
☐ Brownfield Env'l. Asmt. Pilot ☐ Superfund Site Evaluation (CERCLA)
☐ Municipal Negotiation and Cost Recovery ☐ Municipal Grants Program
☐ Superfund Remedial (NPL) ☐ Contaminated Sediments
☐ Other:

FOR OFFICE USE

Date Received

Application Fee Enclosed ☐ Yes ☐ No

BRRTs PLL Activity Number

BRRTs Activity Name

FID

Region NO WC NE SC SE

Comments

☐ Approved to Proceed (602) PMN
☐ Denied (explain) (603)
☒ Withdrawn (explain) (610)

Reviewed By

Date

Project Manager

Organization/Firm: Not applicable	Title:
Name:	Telephone Number (including Area Code):
Address:	Fax Number (including Area Code):
City, State, Zip Code:	E-mail Address:

ENVIRONMENTAL CONSULTANT REPRESENTING APPLICANT (6)

Organization/Firm: STS Consultants, Ltd.	Title: Principal Scientist
Name: Thomas Kroeger	Telephone Number (including Area Code): 414-359-3030
Address: 11425 West Lake Park Drive	Fax Number (including Area Code): 414-359-0822
City, State, Zip Code: Milwaukee, WI 53209	E-mail Address: KROEGER@STSL.COM

ATTORNEY REPRESENTING APPLICANT (IF APPLICABLE) (7)

Organization/Firm: City of West Allis	Title: City Attorney
Name: Michael J. Sachen	Telephone Number (including Area Code): 414-302-8450
Address: 7525 West Greenfield Avenue	Fax Number (including Area Code): 414-302-8444
City, State, Zip Code: West Allis, WI 53214-4688	E-mail Address:

PAST LAND USES (8)

- [ ] Service station
- [ ] Agricultural co-op.
- [ ] Salvage yard
- [ ] Pipeline
- [ ] Coal gas manufacturer
- [ ] Electroplater
- [ ] Other:
- [X] Manufacturing
- [ ] Dry cleaner
- [ ] Bulk plant
- [ ] Tannery
- [ ] Unknown
- [ ] Landfill

KNOWN OR SUSPECTED SOURCES/WASTES (9)

- [X] Foundry sand
- [ ] Surface spills
- [X] Routine industrial operations
- [ ] Transformer
- [ ] Dumping or buried drums
- [ ] Burning of materials
- [ ] Other:
- [X] Underground pipeline or tank
- [X] Above ground pipeline or tank
- [ ] Contaminated building
- [ ] Industrial accident
- [ ] Lagoons
- [ ] FlyAsh

REGULATORY CRITERIA (10)

Has contamination been detected at the property?	[X] Yes [ ] No		
If contamination was detected, has it been reported to the state?	[X] Yes [ ] No	Agency notified: WDNR	Date:
Does it include petroleum from a leaking underground storage tank (LUST)?	[X] Yes [ ] No		
Does it include non-LUST petroleum or non-petroleum contamination?	[X] Yes [ ] No		
Is there an enforcement order currently in effect at this property?	[ ] Yes [X] No	Issuing agency:	Date:

ATTACHMENTS AND CERTIFICATION (11)

I have attached: 1) [ ] a list of past environmental work; 2) [ ] a check or money order for $250 application fee made payable to the DNR; and 3) [ ] a public survey map showing location of property.

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

I believe that I meet the definition of "purchaser" in s. 292.15, Wis. Stats., and ch. NR 750, Wis. Adm. Code, and I agree that I will provide the DNR with further information to document my status as a "purchaser," upon request.

I hereby request assistance from DNR in reviewing the environmental response actions that have been or will be taken to obtain protection of limited liability, as provided in s. 292.15, Wis. Stats.

I recognize that to obtain this limited liability exemption from s. 292.11(3), (4), (7(b) and (c)), Wis. Stats., that the environmental response actions taken will need to comply with the applicable provisions of the NR 700 rule series, and will require a Phase I and II environmental assessment to be conducted for the property.

I recognize that I will be responsible for paying fees to DNR for assistance provided to me as provided under ch. NR 750, Wis. Adm. Code.

Applicant's Name (Type or Print): John F. Stibal	Title: Director, Department of Development
Signature: John F. Stibal	Date Signed: May 20, 1998