

ENVIRONMENTAL QUESTIONNAIRE

This form is to be completed by the Applicant and returned to the Southeast Alaska Revolving Loan Fund when the Applicant is using loan proceeds to purchase real property or offering business property as collateral for the loan. The Applicant may wish to retain an engineer and/or attorney to assist in the completion of the questionnaire. All information is to be completed to the best of the Applicant's knowledge and belief.

Section 1 - GENERAL INFORMATION

1. Street Address of Property
2. Legal Description of Property
3. Name of Current Property Owner(s)
4. Type of business currently operating on the premises.

SIC Code: _____

☐ Personal Services

☐ Manufacturing

☐ Transportation

☐ Retail Trade

☐ Health Services

☐ Educational Services

☐ Engineering & Management

☐ Other _____

5. Type of business to be operated on the premises.

SIC Code: _____

☐ Personal Services

☐ Manufacturing

☐ Transportation

☐ Retail Trade

☐ Health Services

☐ Educational Services

☐ Engineering & Management

☐ Other _____

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6. Historic use of the property (Check all that apply.)

SIC Code: _____

- | | |
|---|---|
| <input type="checkbox"/> Personal Services | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Retail Trade |
| <input type="checkbox"/> Health Services | <input type="checkbox"/> Educational Services |
| <input type="checkbox"/> Engineering & Management | <input type="checkbox"/> Other _____ |

- 7.. Does this property now have, or will it have, underground storage tanks in use?

Yes No

If Yes, Explain:

8. Did this property ever have underground storage tanks?

Yes No Unknown as to past use

If Yes, Explain:

9. Environmental Permits

- ☐ Current ownership has current permits
Types of permit(s): _____

- ☐ Current owner/tenant had permits
Reason for no longer having permit(s): _____

- ☐ Current owner/tenant has applied for permits
Types of permit(s): _____

10. Is the owner/tenant aware of any notice of violations, or correspondence with governmental agencies, or internal correspondence regarding the release, threat of release, or cleanup of hazardous substances at his property?

SIC Code: _____

- | | |
|--|---|
| <input type="checkbox"/> Personal Services | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Retail Trade |
| <input type="checkbox"/> Health Services | <input type="checkbox"/> Educational Services |

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☐ Engineering & Management

☐ Other _____

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11. Type of business(es) currently operating on property adjacent to applicant business
(Check as many as apply.)

SIC Code: _____

- | | |
|---|---|
| <input type="checkbox"/> Personal Services | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Retail Trade |
| <input type="checkbox"/> Health Services | <input type="checkbox"/> Educational Services |
| <input type="checkbox"/> Engineering & Management | <input type="checkbox"/> Other _____ |

12. Has an environmental audit of this property ever been conducted?

Yes No Unknown

If Yes, Date: _____ By Whom? _____

Section 2 - INFORMATION REGARDING HAZARDOUS SUBSTANCES

Please Provide Snapshots of the Property.

1. Are there currently chemicals, fuels, pesticides or waste products on this property?
(Check as many as apply.)

Yes No Unknown

If Yes, Is the material

- _____
- | |
|---|
| <input type="checkbox"/> Stored in Tanks |
| <input type="checkbox"/> Stored in Drums |
| <input type="checkbox"/> Disposed of directly on the property or adjacent sites. |
| <input type="checkbox"/> Stored or disposed of in surface impoundments, pits, landfills, ponds, lagoons or piles. |

2. Is there now or has there ever been any system of underground sewage disposal (e.g.: septic tanks) at this property?

Yes No Septic Tank

Other: Explain _____

3. If you answered Yes to having hazardous chemicals, etc., currently on the property, have there been any accidental spills?

Yes No Unknown

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If Yes, Date: _____ of spill _____

If yes, what was the name(s) of the substance (s), etc. which spilled? _____

If yes, what has been done to clean up the spill? _____

If you answered Yes to having hazardous chemicals, etc., currently on the property, what is the current practice for disposal of the used solvents, oils, metal shavings, plating solutions, etc.? _____

Signature _____ Date _____