

**208 Hazardous Waste Survey -- To be completed by Lenders for all FO-G Applications**

<b>A. Background Information</b>			
<b>Property Name:</b>			
<b>Property Size (acres):</b>			
<b>Directions to Property (from nearest town)</b>			
<b>Present Use of Property</b> <i>(check all that apply)</i>			
<input type="checkbox"/> Agricultural	<input type="checkbox"/> Residential	<input type="checkbox"/> Industrial	
<input type="checkbox"/> Commercial	<input type="checkbox"/> Mixed	<input type="checkbox"/> Other	
Comments: <i>(Explain if Mixed, Other or more than one block is checked)</i>			
<b>Facilities and Buildings</b> <i>(check all that apply even if no longer in use)</i>			
<input type="checkbox"/> Dwelling	<input type="checkbox"/> Garage	<input type="checkbox"/> Barn	<input type="checkbox"/> Shop
<input type="checkbox"/> Grain Storage	<input type="checkbox"/> Machine Sheds	<input type="checkbox"/> Livestock Sheds	<input type="checkbox"/> Feedlot
<input type="checkbox"/> Dairy Facility	<input type="checkbox"/> Hog Facility	<input type="checkbox"/> Other	
Comments regarding existing structures and facilities:			
<b>Adjacent Property Usage</b>			
North	South	East	West
<input type="checkbox"/> Agricultural <input type="checkbox"/> Mixed	<input type="checkbox"/> Agricultural <input type="checkbox"/> Mixed	<input type="checkbox"/> Agricultural <input type="checkbox"/> Mixed	<input type="checkbox"/> Agricultural <input type="checkbox"/> Mixed
<input type="checkbox"/> Commercial <input type="checkbox"/> Resident.	<input type="checkbox"/> Commercial <input type="checkbox"/> Resident.	<input type="checkbox"/> Commercial <input type="checkbox"/> Resident.	<input type="checkbox"/> Commercial <input type="checkbox"/> Resident.
<input type="checkbox"/> Industrial <input type="checkbox"/> Other	<input type="checkbox"/> Industrial <input type="checkbox"/> Other	<input type="checkbox"/> Industrial <input type="checkbox"/> Other	<input type="checkbox"/> Industrial <input type="checkbox"/> Other
Comments:			
<b>Property Ownership History</b>			
Current Owner:		Number of Years:	
Current Operator <i>(if different than current owner)</i>		Number of Years:	
Previous Owner:		Number of Years:	

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<b>B. Site Inspection</b>			
<b>Answer all questions after completing a site visit and if possible after consulting with the current operator and current owner</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>
1. Was a trash dump observed on the property?			
a. If yes, was there any evidence that chemical or other hazardous substances were deposited in the trash dump?			
2. Does the property contain any underground storage tanks?			
a. If yes, did the tank ever contain any hazardous substances.			
b. If yes, is the tank currently being used?			
c. If yes is the tank current registered with the State of Montana?			
d. Is there any evidence or knowledge of tank leakage either currently or in the past?			
3. Does the property contain any above ground storage tanks?			
a. If yes, did the tank contain any hazardous substances?			
b. If yes, is there any evidence or knowledge of tank leakage or spillage.			
3. Are you aware that any federal state or local agencies ever investigated or cited the property for violations of any hazardous substance laws?			
4. Was any evidence of hazardous substance spills or releases observed or otherwise noted on the subject property? (e.g. stressed vegetation, stained soles, open or leaking containers, foul fumes, oily ponds, etc.)			
5. Was any evidence of hazardous substance spills or releases observed or otherwise noted on the neighboring property?			
6. Is there any evidence of dumping of any hazardous materials, debris or construction materials including buried wastes on the property.			
7. Are there any drums or containers (greater than one gallon) currently stored on the property?			
a. If yes, is there any evidence of leakage or spillage?			
8. Was any evidence of fence post treatment pits or containers observed or noted on the property?			
9. Does the unit contain hog, dairy, poultry or livestock feedlot facilities?			
a. If yes, are the facilities currently in use			
b. If yes, is there any evidence of run off from waste into neighboring creeks or streams?			
10. Was any positive or circumstantial evidence of contaminated surface or ground water noted?			
<b>Comments and Explanation:</b> (describe any potential problems or problems noted. Be specific including the size of any affected area, size of tanks, etc.)			

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**C. Conclusion**

**Based on my review and site inspection the results of this Hazardous waste survey are:**

- No evidence of contamination was noted or found.
- Evidence of contamination was noted found.
- The results of this survey were found to be inconclusive and additional information or reviews will be necessary.

**NAME:**

**TITLE:**

**DATE:**