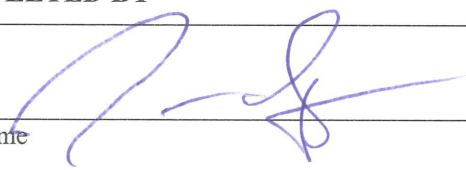


# ASTM E-1527 PHASE I ENVIRONMENTAL SITE ASSESSMENT SURVEY QUESTIONNAIRE AND DISCLOSURE STATEMENT

## 1. PROPERTY INFORMATION:

Property Name: <b>Franklin North</b>		
Property Address: <b>556, 560 &amp; 564 Franklin Street</b>		
City: <b>Buffalo</b>	State: <b>New York</b>	Zip: <b>14202</b>
Appraisal District Parcel Number: <b>SBL: 100.70-4-1; 100.70-4-2; 100.70-4-3</b>		

## 2. COMPLETED BY

Signature 	Date <b>3/10/2017</b>
Printed Name <b>Nick Sinatra</b>	Title <b>Manager</b>

## 3. ASTM-REQUIRED INQUIRIES

Property Owner:	
Name: <b>Nick Sinatra</b>	Phone: <b>716-220-8468</b> Fax: <b>(716) 299-2001</b>
Key Site Manager (Site contact):	
Name: <b>Nick Sinatra</b>	Phone: <b>716-220-8468</b> Fax:
If not residential Property, please provide list of tenants, including contact names and phone numbers.	
<b>Child and Adolescent Services</b> <b>Allentown Pediatrics &amp; Adolescent Services</b> <b>Wood Dental</b> <b>Chameleon Communications West</b>	<b>Contact: REBECCA STEVENS Phone: 886-5437</b> <b>Contact: D. EHLENFIELD Phone: 332-4472</b> <b>Contact: MAGGIE WASILESK Phone: 882-0800</b> <b>Contact: JUSTIN ROSE Phone: 381-9608</b>
Can you provide a Current Title Abstract for the Property, including a chain of Title? If so, please send documents along with completed questionnaire to BBG	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Do you have knowledge of any environmental liens recorded against the Property, or environmentally related Activity and Use Limitations of the Property?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Do you have any specialized knowledge that would be material in identifying recognized environmental conditions in connection with the Property?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are you aware of a reduction in the property value due to environmental issues?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Please attach explanation of all affirmative answers.	

### BBG ASSESSMENT

4615 SOUTHWEST FREEWAY, SUITE 810 HOUSTON, TEXAS 77027  
TELEPHONE 713-942-8980 FACSIMILE: 713-882-8987

BBG ESA Pre\_Survey Questionnaire 12\_31\_2015

8) Please state reason for procuring this Phase 1 ESA:

☐ Qualify for Innocent Landowner defense to CERCLA Liability.

☒ Other: (state below) **Refinance**

#### 4. PLEASE PROVIDE A GENERAL SITE DESCRIPTION BY COMPLETING THE FOLLOWING TABLE:

<p>Legal description/ boundary survey/ plat available (please send if "yes")</p> <p>ALL THAT TRACT OR PARCEL OF LAND, situate in the City of Buffalo, County of Erie and State of New York, being part of Lot No. 52, Township 1, Range 8 of the Holland Land Company's Survey, described as follows:</p> <p>Beginning in the westerly line of Franklin Street at the distance of 160.0 feet southerly from its intersection with the southerly line of North Street; thence southerly along the westerly line of Franklin Street 108.0 feet 9 inches; thence westerly at right angles with Franklin Street 134.0 feet. Thence northerly parallel with Franklin Street 59.67 feet; thence westerly at right angles with Franklin Street 40.0 feet to the southeasterly corner of lands owned by Amelia Stevenson; thence northerly parallel with Franklin Street and along the easterly line of lands of Amelia Stevenson 49.08 feet; thence easterly at right angles with Franklin Street 174.0 feet to the point of beginning.</p> <p>Expecting and reserving therefrom that portion thereof conveyed to John J. Giardino by a Warranty Deed recorded in Erie County Clerk's Office in Liber 9831 of Deeds at page 523.</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Total Property Size</p> <p><b>0.96 acres</b></p>	
<p>Total number of buildings</p> <p><b>Two (2)</b></p>	
<p>Total square footage of buildings</p> <p><b>28,560 SF ±</b></p>	
<p>Date of construction</p> <p><b>Pre 1910</b></p>	
<p>Dates of significant renovation</p> <p><b>Post 2012</b></p>	
<p>Waste water discharge</p> <p><input checked="" type="checkbox"/> Municipal Sanitary Sewer      <input type="checkbox"/> On-site septic system      <input type="checkbox"/> Other</p>	
<p>Potable water source</p> <p><input checked="" type="checkbox"/> Community Water Supplier      <input type="checkbox"/> On-site well      <input type="checkbox"/> Other</p>	
<p>Please describe prior use of property, if known:</p> <p><b>UNKNOWN</b></p>	

#### 5. PREVIOUS INVESTIGATIONS:

## 6. ON SITE OPERATIONS

Are you aware of any of the following conditions, either past or present, on the site?		
Condition	Response	If yes, please describe
1. Stored Chemicals	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2. Underground Storage Tanks	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Aboveground Storage Tanks	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
4. Spills or Releases	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Dump Areas/ Landfills	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
6. Waste Treatment Systems	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7. Clarifies/ Separators	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. Air stacks/ Vents/ Odors	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Floor Drains/Sumps	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Stained Soil/ Impacted Vegetation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11. On-site OWNED Electrical Transformers	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12. Hydraulic lifts/ Elevators	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
13. Dry Cleaning Operations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
14. Wetlands/ Flooding	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
15. Oil/ Gas/ Water/ Monitoring Wells	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
16. Environmental Cleanups	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
17. Environmental Permits	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please describe and ATTACH ALL COPIES of permits. Please attach last three waste manifests.
a) Industrial Discharge	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b) POTW (NPDES)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
c) Hazardous Waste Generator	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
d) Air Quality	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
e) Flammable Materials	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
f) AST/UST	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
g) Waste Manifest(s)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
h) Other	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

## 7. OFF SITE ENVIRONMENTAL CONCERNS

Are you aware of any of the following conditions, either past or present, Adjacent to the site?		
Condition	Response	If yes, please describe
Gasoline Stations	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Dry Cleaners	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Industrial Uses	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Other	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Have any previous environmental investigations been performed at the site?

☐ Yes ☐ No

## INVESTIGATION TYPE

If yes, please describe conclusions, and attach copy of report(s)

<input checked="" type="checkbox"/>	Phase 1 ESA	
<input type="checkbox"/>	Phase 2 ESA	
<input type="checkbox"/>	Tank Tightness Testing	
<input type="checkbox"/>	Asbestos Survey/ O&M	
<input type="checkbox"/>	Radon	
<input type="checkbox"/>	Lead-based Paint	
<input type="checkbox"/>	Lead in Water	
<input type="checkbox"/>	Operations & Maintenance Plan(s)	
<input type="checkbox"/>	Other	