MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY - REMEDIATION AND REDEVELOPMENT DIVISION

PO BOX 30426, LANSING, MI 48909-7926, Phone 517-284-5087, Fax 517-241-9581

PUBLIC HIGHWAY INSTITUTIONAL CONTROL

When environmental contamination is proposed to remain in place within a public highway owned or controlled by a county road commission or local unit of government, the "Public Highway Institutional Control" may be used to satisfy all of the requirements under Section 21310a(3)(c) of Part 213, Leaking Underground Storage Tanks, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended (NREPA). In addition, the "Public Highway Institutional Control" may serve as an alternative instrument, with department approval, pursuant to Section 20121(9) of Part 201, Environmental Remediation, of the NREPA. The party proposing this Institutional Control (IC) shall submit the completed form and all attachments with a Closure Report pursuant to Part 213 or a No Further Action Report pursuant to Part 201 to the appropriate District Office. Multiple signature pages may be necessary if there is more than one authority that owns or controls the public highway. The MDEQ Reference Number can be obtained by contacting the Remediation and Redevelopment Division at deg-rrd@michigan gov, or by calling 517-284-5153

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SECTION 1. FACILITY INFORMATION:	MDEQ RE	F. NUMBER.: L	ROW-R	RD-213-17-	091
SITE OR FACILITY NAME: M.M. & S. Investments, II	SITE OR FACILITY ID NUMBER: 00016396				
STREET ADDRESS: 16850 James Couzens	,				
CITY: Detroit	ZIP: MI 48	3235	COUNTY: Wayne		
NAME OF PARTY PROPOSING PUBLIC HIGHWAY IC: M.M. & S. Investments II	EMAIL AD	DRESS: oil@yahoo.com			
STREET ADDRESS: 16850 James Couzens	CITY: Det	roit		STATE: MI	ZIP: 48235
CONTACT PERSON: Mr. Sam Chahrour	PHONE: 3	313-258-6060		FAX:	
MDEQ District Office: ☐Cadillac ☐Gaylord ☐Grand Rapids	s □Jacksc	n □Kalamazoo	□Lan	sing	
☐Saginaw Bay ☐SE Michigan ☐Upper Peninsula					
SECTION 2. AFFECTED PUBLIC HIGHWAY INFORMATION	l:				
1. Name of affected public highway(s) and nearest intersection	n: Meyers R	load			
2. Known or suspected contaminant(s) type (Check all that ap	ply):				
☑Petroleum ☑Volatile organic compounds	□Metal	s	☐ Other	r	
3. Is residual/mobile nonaqueous-phase liquid present in the a	affected pub	lic highway: ⊠Y	ES □N	10	
4. Media contaminated:					
a. ⊠Soil Depth to contaminated soil: 5 feet to 8 feet					
b. ⊠Groundwater Depth to contaminated groundwater: ~direction: none	6.6 feet bel	ow ground Pred	ominant	t groundwat	er flow
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- 5. Provide a scaled drawing of the portion of the public highway subject to the institutional control that depicts the area impacted by regulated substances and the location of utilities in the impacted area, including storm water systems and municipal separate storm water systems. At a minimum, the scaled drawing should include:
 - a A north arrow.
 - b. A graphical scale bar and scale statement (e.g. 1"=50').
 - The limits of the source property plotted, to scale, showing the relationship to the county road commission or local unit of government and other affected parcels.
 - d. The public highway(s) name identified.
 - e. A statement identifying the Township, Range, Section, and Quarter Section where the parcel is located.
 - The limits of the affected public highway plotted to scale. This area should be hatched and labeled appropriately.
 - The location of significant site features such as buildings, drives, parking lots, and road surface.
 - Cross section illustrating affected public highway, media, utilities, and location and depth of contaminated media.
 - Most recent analytical data illustrating contaminant compounds and concentrations within the contaminated media.

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 Provide a complete list that identifies all parties with public highway (including owners of real property, e public utilities): 	owner easeme	ship and possessory or use prop nt holders, utility franchise holder	erty interests related to the rs, and owners or operators of	
see attachment				
a. Are any of the parties listed above affected by the b. Have all of the parties above affected by the concorrective action plan or pursuant to the due care recorrective.	taminat	ion received notification of the ex	sisting conditions as part of a	
7. Exposure risks: a. Due to groundwater contamination (Check all that	or air in ation/rel or a para up crite. to add se this in mption, es; any	r halation ⊠Leaching from soil to ocation agraph below which describes the ria exceeded, the routes of poten ress the contamination, and any institutional control to not be proteirrigation, or any other use, manage excavation or intrusive activity the	e affected media, the nature tial exposure, any response activities that could result in active of public health, safety, agement and disposal of that would result in	
SECTION 3. STORM SEWER SYSTEM CERTIFICAT	101	· · · · · · · · · · · · · · · · · · ·		
Is contamination present in or does the contamination separate storm sewer systems and combined sewers) MYES NO If yes, please provide information below and attach and the contamination that enters or has the potential to entered the contamination of the contamination of the contamination that enters or has the potential to entered the contamination of the cont	as a re	sult of the release from the unde	rground storage tank system:	
see attachment				
SECTION 4. SUBMITTER INFORMATION:				
I, as the submitter identified in Section 1, or the qualified submitter's behalf, hereby attest to the accuracy of the this document to the county road commission or local up	statem	ents in this document and all atta	document on the achments, and have provided	
Signature		Print	Date	
An Chal	Mr. S	amuel Chahrour	4-12-2019	
Name of Company (if applicable)		Address, City, S	tate, Zip	
M.M. & S. Investments II	16850	James Couzens, Detroit, MI 482	ouzens, Detroit, MI 48235	
Phone Number		Fax Number	Email Address	
313-258-6060			smm_mobil@yahoo.com	
SECTION 5. COUNTY ROAD COMMISSION OR LOC	AL UN	IT OF GOVERNMENT CONFIRM	MATION:	
Name of county road commission or local unit of gover	nment:	City of Detroit		
The aforementioned [choose: county road commission current plans to relocate, vacate, or abandon the public authorized to sign on behalf of the [choose: county road commission.	ion or I	ocal unit of government] herebay. With my signature below, I c	ertify that I am legally	
Signature of Authorized Official		Print Authoria	zed Official	
Title of Authorized Official		Dat	e	

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ame of county road commission or local unit of government	Address, City, State, Zip	
Phone Number	Fax Number	Email Address