

## South Carolina Exxon Mobil UST Class Action Claims Form

1. List the following for each claimant(s):  
Name: **BMC Distributors of S.C.**  
Address: **1911 Maybank Highway**  
**Charleston, SC 29412**  
Phone: **843-795-7865**  
Email:
2. List the physical address of each property for which claimant(s) is/are making a claim:  
**2941 W. Montague Avenue**  
**N. Charleston, SC 29418**
3. Identify the ownership interest claimant(s) has/have in the property listed in 2 above:  
**100%**
4. Provide a brief statement of your basis to believe that the property listed in 2 above was/is contaminated from Exxon's service station operations.

**Exxon Store #4-4839**

Name of Claimant(s) or Claimant(s) Authorized Representative:

**C. Alan Runyan**

Today's Date:

**02/27/04**