

1. List the following for each claimant(s):

Name: _____

Address: _____

Phone: _____

E-Mail: _____

**FIRST PALMER TRUST
C/O HUGH A. PALMER
TRUSTEE FOR THE FIRST PALMER TRUST
AND NOT INDIVIDUALLY
P.O. BOX 23489
COLUMBIA, SC 29224-3489
PHONE: (803) 788-8300 EXT. 2**

(If property is owned by more than one individual or company, please list all owners on separate sheet of paper)

2. List the physical address of each property for which claimant(s) is/are making a claim:
**TMS #R117005-03-12 WITH ANY AND ALL IMPROVEMENTS THEREON
"CREEKSIDE PLAZA" 7350-7352 TWO NOTCH RD, COLUMBIA, SC 29223**

3. Identify the ownership interest claimant(s) has/have in the property listed in 2 above:
CLAIMANT OWNS THE PROPERTY

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.

The property identified above is adjacent to or near to a site that contained, at one time, an Exxon service station. The undersigned has been informed by records at the office of the South Carolina Department of Health and Environmental Control that such site of Exxon's service station operations was contaminated.

(SEE SIGNATURE BELOW)

Signature of Claimant(s) or Claimant(s) Authorized Representative

(SEE DATE BELOW)

Date

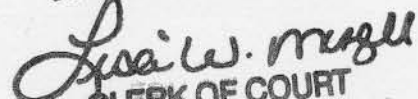
Signature of Claimant(s) or Claimant(s) Authorized Representative



**HUGH A. PALMER, TRUSTEE FOR THE
FIRST PALMER TRUST AND NOT INDIVIDUALLY**

DATE: MAY 26, 2004

ATTEST: TRUE COPY


**Lisa W. Mizell
CLERK OF COURT
ORANGEBURG COUNTY, SOUTH CAROLINA**

FILED IN REC. RECORD
LISA W. MIZELL
CLERK OF COURT
ORANGEBURG COUNTY, S.C.
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