INVOICE

Please Remit To:

INDIANA DEPT. OF ENVIRONMENTAL MANAGEMENT
PO BOX 3295
INDIANAPOLIS IN 46206-3295

Page:	1
Invoice No:	000390153
Invoice Date:	07/07/2025
Customer Number:	CST100059195
Bill Type:	121
Payment Terms:	15th Next
Due Date:	08/15/2025

Bill To:

SOUTH BEND & MISHAWAKA INVESTMENTS LLC
ACCOUNTS PAYABLE-UST OID 92200
6520 LAKE CREST CIR
SOUTH BEND IN 46628

AMOUNT DUE: 1,800.00 USD

1800.00
Amount Remitted

☐ Note Address Changes Above ☑ Email Address: lucky@expoexpress.com

Write the invoice number on your check and return the upper portion of this invoice.

For billing questions, please email us at UST@IDEM.IN.GOV

Line	Adj	Identifier	Description	Quantity	UOM	Unit Amt	Net Amount
1		2021 UST OID 92200 FACILITY 2830 - PETROLEUM		5.00	EA	90.00	450.00
2		2022 UST OID 92200 FACILITY 2830 - PETROLEUM		5.00	EA	90.00	450.00
3		2024 UST OID 92200 FACILITY 2830 - PETROLEUM		5.00	EA	90.00	450.00
4		2025 UST OID 92200 FACILITY 2830 - PETROLEUM		5.00	EA	90.00	450.00

- Accounts Receivable is accepting payments online by e-Check, MasterCard, Visa, American Express or Discover. Please visit www.in.gov/idem. Under Online Services, click Online Payment options and follow the prompts.
-You may also call us at 317-234-3099 to pay by MasterCard, Visa, American Express or Discover.
-A processing fee of $0.40 plus 2.06% will be charged for credit card payments. A processing fee of $0.15 will be charged for eCheck payments.
-Tank fees must be paid in accordance with IC 13-23-12. Please review the information to verify that you own the facility(s) listed and the number of tanks for each facility is complete and accurate.
-IC 13-23-12-1 has been amended, effective July 1, 2023, to include Aboveground Storage Tanks (AST). Fees will be required for regulated ASTs in use beginning January 1, 2024.
Any discrepancy should be addressed by sending an email to UST@idem.in.gov.
-In accordance with IC 13-23-9-1.3, nonpayment of tank fees may result in an increased deductible when applying to the Excess Liability Trust Fund.

TOTAL AMOUNT DUE : **1,800.00**

Please write the invoice number on your check and return the upper portion of this invoice with remittance.

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