REAL ESTATE TRANSFER – GROUNDWATER HAZARD STATEMENT

Please read the filing instructions on the reverse side **BEFORE** completing this form.

PART I – TO BE COMPLETED BY TRANSFEROR

TRANSFEROR Name MICHAEL S. ROGERS

Address 506 S 5TH ST FARMINGTON IA 52626
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE Name **LOUIE J. BOTTELMAN**

Address 417 Union St. Ryan Iowa 52330
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred 417 UNION ST RYAN IA 52330
Number and Street or RR | City, Town or P.O. | State | Zip

Legal Description of Property Lots One (1) and Two (2) of Park First Addition to the City of Ryan, Delaware County, Iowa, according to plat recorded in Book 7 Plats, Page 177

1. **Wells (check one)**
   - [X] There are no known wells situated on this property.
   - [ ] There is a well or wells situated on this property. The type(2), location(2) and legal status are stated below.

2. **Solid Waste Disposal (check one)**
   - [X] There is no known solid waste disposal site on this property.
   - [ ] There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.
   - [ ] There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below.

3. **Hazardous Wastes (check one)**
   - [X] There is no known hazardous waste on this property.
   - [ ] There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.

4. **Underground Storage Tanks (check one)**
   - [X] There are no known underground storage tanks on this property. (Note exclusions such as small farm and residential motor fuel tanks, most heating oil tanks, cisterns and septic tanks, in instructions.)
   - [ ] There is an underground storage tank or tanks on this property. The type(s), size(s) and any known substance(s) contained are described below.

5. **Private Burial Site (check one)**
   - [X] There are no known private burial sites on this property.
   - [ ] There is a private burial site on this property. The location(s) of the site(s) is stated below. The known identifying information of the decedent is stated below.

Information, if any, required by statements checked above:

Attachment for Additional Information? Y[ ] N[X] If so, number of pages _____

I HEREBY DECLARE THAT THE INFORMATION CONTAINED IN PART I OF THIS STATEMENT IS TRUE AND CORRECT

Signature: Michael S. Rogers Telephone Number: 319-610-3082
(Transferor or Agent)

PART II – TO BE COMPLET

Date of Instrument _____ Book/I.

Date of Recording _____ City or

Deed [ ] Contact [ ] County _____

DNR form (July 99) **FILE WITH RE**
(See Instructio

Book 2007 Page 4043

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Date 12/19/2007 Time 3:06:11PM
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DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA