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 Gary A + Barbara J Carlson

Address 107 Prairie St (Number and Street or RR) Raymond (City, Town or P.O.) Ia (State) 50667 (Zip)

TRANSFEREE Name Roger + Dorothy Goldsberry

Address [redacted] 503 Cataract Ave (Number and Street or RR) Waterloo (City, Town or P.O.) Ia (State) 50702 (Zip)

Address of Property Transferred 25863 217th ave (Number and Street or RR) Delhi (City, Town, or P.O.) Ia (State) (Zip)

Legal Description of Property Lot 27 + 28 in subdivision at Camp O Delhi, Section 24, Township 88, Range 5, Delaware County

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

2. **Solid Waste Disposal (check one)**
   - ☑ 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)**
   - ☑ 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)**
   - ☑ 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 on this property. The type(s), size(s) and any known substance(s) contained are described below.

5. **Private Burial Site (check one)**
   - ☑ 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:

(None.)

Attachment for Additional Information? X / N If so, number of pages **(None.)**

I HEREBY DECLARE THAT THE INFORMATION CONTAINED IN PART 1 OF THIS STATEMENT IS TRUE AND CORRECT.

Signature: Gary Allen Carlson (Transferor or Agent) Telephone Number: 319 232 3420

PART II - TO

Date of Instrument _____ Bo

Date of Recording _____ Ci

Deed ☐ Contract ☐ County _____

DNR form (November 02) **FI**

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DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA