Book 2009 Page 3021
Document 2009 GWH-3021 Type 53 001 Pages 2
Date 7/31/2009 Time 3:36:41PM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:
Name CINDY S. DOUGALL

Address 1116 23RD STREET SE, CEDAR RAPIDS, IA 52403
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name TODD D. GORDON

Address 1102 SUNSHINE AVENUE, OSAGE, IA 50461
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
19843 247TH STREET, MANCHESTER, IA 52057
Number and Street or RR | City, Town, or P.O. | State | Zip

Legal Description of Property: (Attach if necessary)
SEE EXHIBIT A

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 or set forth on an attached separate sheet, as necessary.
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 and information related thereto is provided in Attachment #1, attached to this document.
3. **Hazardous Wastes (check one)**
   - ☒ There is no known hazardous waste on this property.
   - ☐ There is hazardous waste on this property and information related thereto is provided in Attachment #1, attached to this document.
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 listed below or on an attached separate sheet, as necessary.

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) and known identifying information of the decedent(s) is stated below or on an attached separate sheet, as necessary.

6. Private Sewage Disposal System (check one)

- [ ] There are no known private sewage disposal systems on this property.
- [X] There is a private sewage disposal system on this property. A certified inspector's report is attached which documents the condition of the private sewage disposal system and whether any modifications are required to conform to standards adopted by the Department of Natural Resources. A certified inspection report must be accompanied by this form when recording.
- [ ] There is a private sewage disposal system on this property. Weather or other temporary physical conditions prevent the certified inspection of the private sewage disposal system from being conducted. The buyer has executed a binding acknowledgment with the county board of health to conduct a certified inspection of the private sewage disposal system at the earliest practicable time and to be responsible for any required modifications to the private sewage disposal system as identified by the certified inspection. A copy of the binding acknowledgment is attached to this form. When the inspection is completed, an amended Groundwater Hazard Statement shall be recorded with the certified inspection and shall include the document numbers of both the real estate transfer document and the original Groundwater Hazard Statement.
- [ ] There is a private sewage disposal system on this property. The building to which the sewage disposal system is connected will be demolished without being occupied. The buyer has executed a binding acknowledgment with the county board of health to demolish the building within an agreed upon time period. A copy of the binding acknowledgment is provided with this form.
- [ ] This property is exempt from the private sewage disposal inspection requirements pursuant to the following exemption: _____.
- [ ] The private sewage disposal system has been installed within the past two years pursuant to permit number _____.

Information required by statements checked above should be provided here or on separate sheets attached hereto:

_____

_____

_____

_____

_____

_____

I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: Cindy S. Dorgan (Transferor or Agent) Telephone No.: (319) 310-6917

EXHIBIT A

Lots Forty One (41) and Seventy Six (76) of Willie's Second Subdivision of Part of the Southeast Quarter (SE¼) of the Northeast Quarter (NE¼) of Section Fifteen (15), and Part of the Northeast Quarter (NE¼) of the Southeast Quarter (SE¼) of Section Fifteen (15), AND part of the Northwest Quarter (NW¼) of the Southwest Quarter (SW¼) of Section Fourteen (14), and Part of the Southwest Quarter (SW¼) of the Northwest Quarter (NW¼) of Section Fourteen (14), all in Township Eighty Eight (88) North, Range Five (5), West of the 5th Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 4 Plats, Page 106, and Retracement Survey recorded in Book 2008, Page 180.

Miene
SEPTIC SERVICE
Office (319) 393-4142
Fax (319) 832-1695
MieneSeptic@mchsi.com

July 27, 2009

Enclosed you will find a copy of the DNR Inspection Form and our Inspection Report (in paragraph form). Please send these copies to the County Recorder at the time that the property closes (attached to the groundwater hazard statement). We are sending copies to the Iowa DNR and the County Health Department. Thank you for choosing us to perform the septic inspection. Please feel free to let us know if you have any questions.

Sincerely,

Christy Lehtola
Miene Septic Service

Office (319) 393-4142
Fax (319) 832-1695
MieneSeptic@mchsi.com

July 27, 2009

To whom it may concern:

Re: Septic system at 19843 – 247th Street
Manchester, IA
Seller: Cindy Dougall
Buyer: Todd/Kathleen Gordon

On July 27, 2009, we pumped and inspected the septic system at the above two bedroom residence. The house has been vacant since 2006. According to the DNR, "if we are testing a system with a soil absorption field, we may not get an accurate result from a system that has not been used for a while." The 1,000 gallon, two compartment plastic tank was in good condition and the baffles are intact. There is one riser on the tank for maintenance purposes. When the toilet was flushed and washing machine was discharged, waste adequately ran into the tank. There is a garbage disposal hooked up to the septic system. The water softener discharges to the sump pump pit which discharges out the side of the tank and into a ditch. The system was installed in June 2000 by Dave's Construction.

We dug up the concrete distribution box, which is approximately five feet from the tank. The measurements on the completion report were not accurate but have been corrected. (See attached map/diagram) The distribution box is in good condition. According to the completion report from the health department, four lines lead out of to a 20' by 40' sand filter pit. There were no vent pipes visible and we could not find a discharge pipe due to rip rap lining the lake (around the sand filter pipe). The sand filter appears to be working properly. The system is more 100 feet from the shared well, as required by Iowa Code, chapter 69.

Health Departments recommend septic tanks be pumped every three or four years, depending on the number of people living in the house and the amount of water usage. Wet wipes, tampons, disposable diapers, paint, cigarette butts, cat litter, facial tissues and paper towels should not be flushed into the system, even if the box says it is "septic safe." In addition, it is preferable to use liquid laundry detergent rather than a powder. Fabric softener sheets should be used in the dryer rather than a liquid in the washing machine. Please keep all vehicles off of the system. This inspection is an assessment of the current functioning of the system, not a guarantee of its future performance. If you have any questions, please call.

Sincerely,

Christy Lehtola

Inspected by Kyle Nekvinda
Certified Inspector #8866

DELAWARE COUNTY
BOARD OF SUPERVISORS (Print or Type) **Permit No.** 892

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 19843 347th Manchester Section 35 Township Ma. Lo

LOCATION: NW 1/4 SW 1/4 NW 1/4 T-88 N R4-W

Owner: Tim Dwyer II Tenant: _____ Plumber: Dave Conyt

Lot Size: 2.5 x 210 Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Stools 2 Lavatories 2 Bath Tubs 1 Showers 1 Sinks 1 Automatic Laundry 1 Sump Pump _____

Septic Tank made by _____ Garbage Grinder _____ Construction Material Plastic Gallons Cap. 1000

Percolation Test: 1. _____ 2. _____ 3. _____ 4. _____ Made by: _____

Absorption Field: Total length of laterals _____ No. of lateral lines _____

This system is new ✓ Existing ____ 30 x 40 gravel bed.

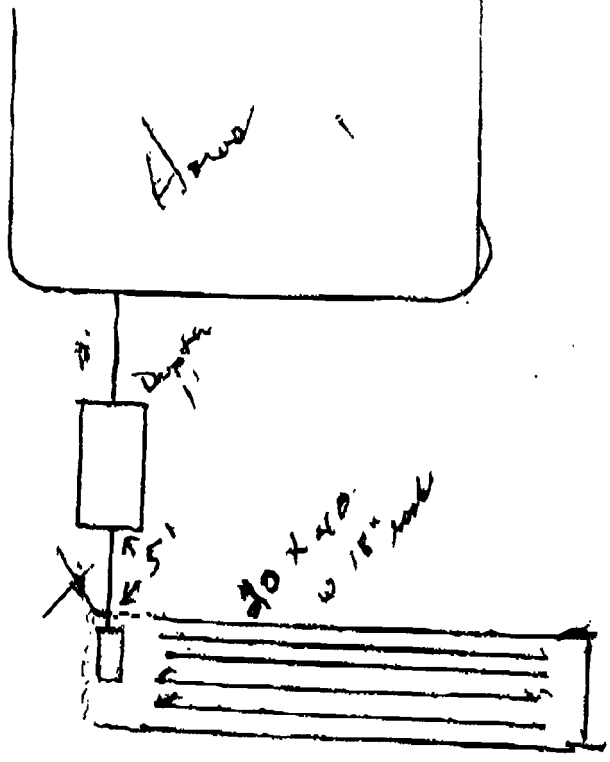
I certify that the above information is correct and that all proposed work will be completed in accordance with the Delaware County Regulations.

Date Approved 6-14-00

By _____ INSPECTOR

SEAL

APPLICANT'S SIGNATURE



Time of Transfer Inspection Report (DNR Form 542-0191)

Property information

Current owner Cindy Dougall Realtor Kelly Bemus / Steve Emig - Skogman
Buyer Todd & Kathleen Gordon 389-1999
Mailing address 19843-247th St, Manchester, IA
Site Address/County 19843-247th St Manchester, IA
Legal Description Lt 4 & 7 & 6 Willies 2nd Sub PT Sec's 14 & 15

No. of bedrooms 2 Last occupied? _____ Records available yes

Permit/installation date 6-14-00 Separation distances ok/ no? _____

Septic system information

Septic tank(s): size 1000 GAL material PLASTIC condition GOOD
Tank pumped? YES date 7-27-09 licensed pumper MAINE SEPTIC
Septic/trash/processing tank: size N/A material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfgr N/A size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type N/A size _____ condition _____

Distribution system: distribution box CONCRETE outlets used 4 condition OK
Header pipe(s) _____ # of lines _____ Pressure dosed? _____

Secondary treatment:
length of absorption fields _____ determined by _____
condition of fields _____ determined by _____
type of trench material _____

Size of sand filter 20' X 40' determined by MAP
Vent pipes above grade? NO discharge pipe located? NOTHING VISABLE
Effluent sample taken? NO Results _____
COULD NOT FIND DISCHARGE PIPE DUE TO RIP RAP LINING LA

Media filters: type _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

NPDES General Permit No. 4: required? _____ permitted? _____ NOI provided _____

Time of Transfer Inspection Report

Other components:
Alarms N/A Working? _____ disinfection _____ working? _____

Control box _____ Timers _____ inspection ports _____

Other components HOUSE IS VACANT

Overall condition of the private sewage disposal system

Report system status EVERYTHING APPEARS TO BE WORKING @ THIS TIME

Explain (attach additional pages as needed): _____

Comments: _____

Site status at conclusion of Time of Transfer inspection:

- Verify that controls are set on the appropriate mode.
- Power is on to all components.
- Revisit all components to verify lids are secure.
- Gather all tools for removal from the site.
- Verify that no sewage is on the ground surface.

Using this worksheet, write a narrative report of the inspection results and attach a site sketch.

This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified inspector: _____ **Date:** 7-27-09
Name (print): Kyle Nekvinda **Certificate #:** 8866
Address: 7912 Morris Hills Rd Toddville IA 52341
Phone # (319) 393-4142

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319