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DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name: Henry Christian Gofforth and Linda Gail Gofforth

Address	Number and Street or RR	City, Town or P.O.	State	Zip
	3195 31st Street	Maron	IA	52302

TRANSFEREE:

Name: Marvin A. Tauke and Leona G. Tauke

Address	Number and Street or RR	City, Town or P.O.	State	Zip
	408 2nd Ave SE	Dyersville	IA	52040

Address of Property Transferred:

	Number and Street or RR	City, Town or P.O.	State	Zip
	24498 204th Ave	Manchester	IA	52057

Legal Description of Property: (Attach if necessary): Lot Four (4) of Logan's First Subdivision of Part of the North one-half (N1/2) of Section Twenty Three (23), township Eighty Eight (88) North, Range Five (5), West of the Fifth Principal Meridian, according to plat recorded in Book 4 Plats, Page 46

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: C Zaffarti Telephone No.: (319) 373-5506

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

Property information

Current owner CHRIS GOFFORTH -
Buyer Mike Jauke Realtor Dennis Wood
Mailing address 3195 315t 52302

Site Address/County 24498 204 AVE. LAKE DELHI IA 52057
Legal Description _____

No. of bedrooms 1 Last occupied? _____ Records available _____

Permit/installation date ~ Separation distances ok/ no? _____

Septic system information

Septic tank(s): size 750 GPD material _____ condition _____
Tank pumped? Yes date 10-15-09 licensed pumper _____
Septic/trash/processing tank: size Fiberglass material _____ condition good
Tank pumped? Yes date 10-15-09 licensed pumper _____

Aerobic treatment unit (ATU) mfgr Multi-Flow size 750
Tank pumped? Yes date 10-15-09 licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider Hanken Now
Condition good

Pump tanks/vaults: type Multi-Flow size 750 condition good

Distribution system: distribution box _____ outlets used Yes condition good
Header pipe(s) P # of lines _____ Pressure dosed? _____

Secondary treatment:
length of absorption fields 15-20 Ft determined by _____
condition of fields Good determined by _____
type of trench material _____

Size of sand filter ~ determined by _____
Vent pipes above grade? _____ discharge pipe located? _____
Effluent sample taken? _____ Results _____

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 X Working? Yes disinfection _____ working? _____

Control box Yes Timers Yes inspection ports OK

Other components Multe-Flow

Overall condition of the private sewage disposal system

Report system status good working - like to see A TRASH.

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: Robb Harter Date: 10-15-09
Name (print): Robb HARTER Certificate #: _____
Address: 3031 160 St Donnellson IA 52040
Phone # 563-542-1010

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

Harter Custom Pumping, Inc & Septic Service

Robb Harter * Owner/ Operator
3031 160th Street Dyersville, IA 52040 * 563-875-8730 or 563-542-1010

****

Homeowners: CHRIS GOFFORTH

Age of Property Yes — Occupied Yes or No

Inspection Co: HARTER Custom Pumping Inc.

Date of Inspection: 10-15-09

Does this evaluation/inspection meet the requirements of state and local agencies? Yes ✓ No ___ N/A ___

Section 1:

Location of the system: East West North (South)
Was Water run into the system for 30 minutes? (Yes) No
Does the septic tank have a visible riser? (Yes) No
Estimated size of tank 750 Gallons *Basis for estimate*
What is the separation between well and septic? 100 Ft
Does the separation of the well and septic meet local requirements? (Yes) No N/A

Section2: Disposal Field

Any evidence of malfunction (No) Yes (Please check all applicable observed conditions)
___ Wet Areas ___ Unusual green/lush vegetation
___ Liquid Discharges to surface ___ Discharge pipe of unknown origin
___ Localized surface settling ___ Other (Describe below)

Septic Tank:

Septic tank material Concrete ✓ Fiberglass Other
Liquid Level in tank ✓ Normal Below Normal Above Normal
Access opening in tank ✓ One Two Three None
Number of risers One Two Three None
Condition of baffles and/or sanitary tees:
Inlet baffle or "T" ✓ Present and functional Not functional None present Not Visible
Outlet baffle or "T" ✓ Present and functional Not functional None present Not Visible
Tank was pumped (Yes) No (if no please explain below
Is system adequately sized for # of Bedrooms ✓ Yes No # of Bedrooms:
Is system adequately sized for # of Bathrooms ✓ Yes No # of Bathrooms:
System working Properly ✓ Yes No (if no please explain below)

Additional Comments / Repairs needed;

Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.
This report comments on the workability of the system on the day of the inspection only, and is in no way intended to be a warranty.
Workability can be altered by factors such as excessive rainfall, heavy water usage, faulty plumbing, neglect or physical damage to the system. All tanks require pumping maintenance.

Inspected by: Robb Harter Date: 10-15-09