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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 Ann M. Friauf

Address 22688 262nd Street, Box 76B, Delhi, Iowa 52223
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name Mark S. Odell and Mary B. Odell

Address 1555 Washington Street, Muscatine, Iowa 52761
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
22688 262nd Street, Delhi, Iowa 52223
Number and Street or RR | City, Town, or P.O. | State | Zip

Legal Description of Property: (Attach if necessary) See 1 in Addendum

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. Community well
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)**
   - ☑ 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.
   - ☒ 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: _____ (Transferor or Agent) Telephone No.: 941-716-5787

FILE WITH RECORDER **DNR form 542-0960 (June 26, 2009)**

Addendum

1. The South 75 feet of Lot 2 of Connolly's River View Addition; Parcel AA lying South of Lot 3 of Connolly's River View Addition; and Parcel CC lying South of Lot 2 of Connolly's River View Addition; all in the Southeast Quarter of the Northeast Quarter of Section Thirty (30), Township Eighty Eight (88) North, Range Four (4), West of the 5th P.M., Delaware County, Iowa according to Corrective Plat of Survey recorded in Book 2009, Page 3906 of the records of the Delaware County Recorder; also all lake frontage running to the middle of the Maquoketa River Bed with regard to the above described Parcels AA and CC.

DELAWARE COUNTY
WATER AND SANITATION OFFICE
Dennis Lyons

301 East Main St.
Manchester, Iowa 52057

Phone 563-927-5925
Cell # 563-920-5185
Fax 563-927-5561
e*mail- dlyons@co.delaware.ia.us

10/7/2009

To whom it may concern;

The system at the Gerald Friauf property at 22688 262nd St is completed and was done as planned. The system will need a maintenance contract and should work well for many years. It is a advantex system which is a pod filled with fabric which has had great results. The installer went through great lengths to be sure the system was installed properly and also had a representative there for the installation. The system was installed under county permit # 1712.

Thank You

Dennis Lyons

Dennis Lyons