Book 2009 Page 4609

Document 2009 GWH-4609 Type 53 001 Pages 9
Date 12/11/2009 Time 2:20:58PM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:
Name LaVerne/Paula Mosher

Address 24272 205th Avenue, Manchester, Iowa 52057
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name John C. Georgen, Sr.

Address 24272 205th Avenue, Manchester, Iowa 52057
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
24272 205th Avenue, Manchester, Iowa 52057
Number and Street or RR | City, Town, or P.O. | State | Zip

Legal Description of Property: (Attach if necessary) See attached 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)

☒ 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: _____ 12/06/09 Telephone No.: 614-840-5354
(Transferor or Agent) John C. Georgen, Sr.

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

EXHIBIT "A"

Lot Twenty One (21) and that part of Lot Twenty (20) of Logan's First Subdivision of Part of the North one-half (N 1/2) 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, described as commencing at the Southeasterly most corner of said Lot Twenty (20), thence Southwesterly along the Southerly line of said Lot Twenty (20) a distance of twenty six (26) feet, thence North 17° 25' West to a point on the Northerly line of said Lot Twenty (20), thence Northeasterly along the Northerly line of said Lot Twenty (20) to the Northeasterly most corner thereof, thence Southeasterly along the Easterly line of said Lot Twenty (20) a distance of one hundred seventy nine and nine-tenths (179.9) feet to the place of beginning; also Lot Seven (7) of Logan's Fifth Subdivision To Delaware County, Iowa, according to plat recorded in Book 5 Plats, Page 77, and also all lake frontage running to the middle of the Maquoketa River Bed with respect to the above described premises

And the right to use the present access road is included, and this conveyance is subject to use of said access road by all owners and tenants occupying lots in said subdivision and Grantor further grants any and all rights Grantor has in the easement from Viola M. Logan, Executor and Co-Trustee; Viola M. Logan, Individually, to all the owners, future owners, their heirs and assigns of lots in Logan's First, Second, Third, Fourth, Fifth and Sixth Subdivisions to Delaware County, Iowa, dated December 29, 1986, and filed January 5th, 1986 in Book Y, Misc., Page 115.

EXHIBIT "A"

542-0191

Time of Transfer Inspection Report

Property Information

Current Owner: Laverne Mosher

Buyer: unknown Realtor:

Mailing Address: 24272 - 205th Ave. Manchester, Ia. 52057

Site Address/County: 24272 - 205 th Ave. / Delaware

Legal Description

No. of bedrooms: 3 Last occupied: current Records available: Yes

Permit/ installation date: 4/12/2001 Separation distances (ok/no?): ok

Septic System Information

Septic tank(s): Size: 1250 Gal. Material: Concete Condition: Good

Tank pumped? ☒ Y ☐ N Date: Oct. 4, 2008 Licensed pumper: D&S Portables. Inc.

Septic/Trash/Processing tank: Size: Material: Condition:

Tank pumped? ☐ Y ☐ N Date: Licensed pumper:

Aerobic treatment unit (ATU) mfgr Size

Tank pumped? ☐ Y ☐ N Date: Licensed pumper:

Maintenance contract? ☐ Y ☐ N Expiration date: Service provider:

Condition:

Pump tanks/vaults: Type: Size: Condition:

Distribution system: Distribution box Yes Outlets used 3 Condition: Good

Header pipe(s): No. of lines: 3 Pressure dosed?

Secondary Treatment:

Length of absorption fields: 180 FT. Toltal Determined by: Drawing on Permit

Condition of fields: Good Determined by: HYD. Test

Type of trench material: Domes

Size of sand filter: Determined by:

Vent pipes above grade? ☐ Y ☐ N Discharge pipe located? ☐ Y ☐ N

Effluent sample taken Results:

Media Filters: Type:

Maintenance contract? ☐ Y ☐ N Expiration date: Service provider:

Condition:

NPDES General Permit No. 4: Required? ☐ Y ☐ N Permitted? ☐ Y ☐ N NOI provided:

542-0191

Time of Transfer Inspection Report

Other components:

Alarms: ☐ Y ☐ N Working: ☐ Y ☐ N Disinfection: ☐ Y ☐ N Working: ☐ Y ☐ N

Control Box: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:
system appears to be in good condition, the tank is 1250 gal. concrete tank 2 compartments with inlet and outlet T's in good condition. A concrete and plastic D-Box with 3 line coming out of D-Box and going into a secondary treatment system using 34" domes.

Report system status: _____

Explain (attach additional pages as needed): _____

Comments: Home owners do have a water softner . the brine is going into the tank

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: Jody Antrim Date: 7-10-2009

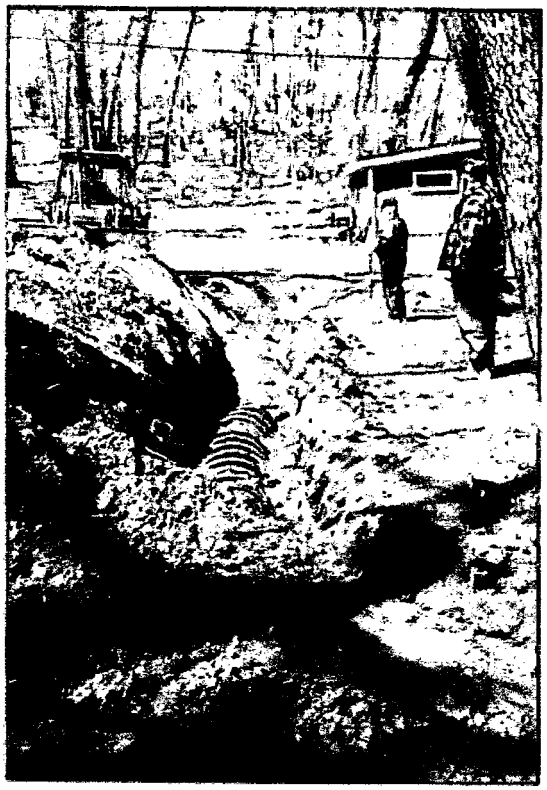
Name (print): Jody Antrim Certificate #: 8874

Address: 20984 265 th St. Manchester, Ia 52057

Phone #: 563-922-2318

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

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







BOARD OF SUPERVISORS (Print or Type) Permit No. _____

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 24272 205th Ave Manchester Section 23 Township _____

LOCATION: SE 1/4 SE 1/4 NE 1/4 T-88 R-5W

Owner: LaVerne Mosher Tenant: _____ Plumber: Don W.

Lot Size: 100 x 100 Type Commercial: _____ Residential: (No. Bedroo 2

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

Septic Tank made by Sutton Garbage Grinder yes Construction Material Concrete Gallons 1250 gal

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

Absorption Field: Total length of laterals 180' No. of lateral lines 3

This system is new ✓ Existing Replace

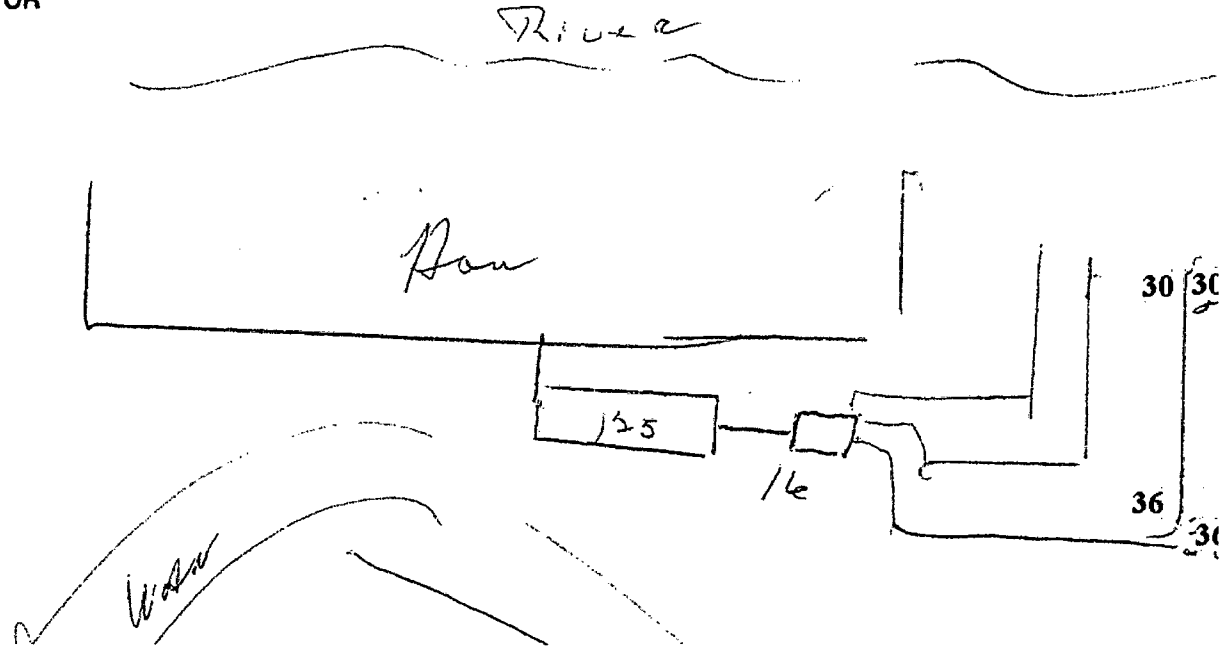
I certify that the above information is correct and that all proposed work will be completed in accordanc Delaware County Regulations.

Date Approved 4-12-01

By _____
INSPECTOR

Robert Sappe
APPLICANT'S SIGNATURE

SEAL



D & S PORTABLES, INC.

BILL DOWNS
1497 110TH AVENUE
DUNDEE, IA 52038
PHONE: 563.924.2225
MOBILE: 563.920.9674
TOLL FREE: 877.875.2225



INVOICE NUMBER: 20081165
DATE: OCTOBER 4, 2008

Service Rendered To:
LAVERNE MOSHER
24272 205TH AVENUE
MANCHESTER, IA 52057

CUSTOMER TELEPHONE	CUSTOMER CONTACT	PAYMENT TERMS
563.927.2653		NET 28 DAYS

QUANITY	SERVICE RENDERED	PER SERVICE	EXTENSION
1.00	SEPTIC SERVICE - OCTOBER 1, 2008	175.00	175.00
1.00	DISPOSAL FEE-MANCHESTER PLANT	107.00	107.00

SUBTOTAL:	282.00
SALES TAX:	
TOTAL INVOICE AMOUNT:	282.00
PAYMENT/CREDIT APPLIED:	
TOTAL:	282.00

THANK YOU
WE APPRECIATE YOUR BUSINESS

pd
10-31-08