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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 Melaine B. Loesche Trust

Address 1914 Hwy 13, Manchester, Iowa 52057 (Barbara A. Recker)

Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:

Name Kenneth E. Ries

Address 3257 150th Avenue, Ryan, Iowa 52330

Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:

~~XXXXXXX~~ STATE HIGHWAY 13 MANCHESTER, IA 52057

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.

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: Joanne L Rinilca trustee Telephone No.: 563-927-4345
(Transferor or Agent)

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

Addendum

1. An undivided one-half interest in:
   The East one-half (E ½) of the Northwest Quarter (NW ¼) and the West one-half (W ½) of the Northwest Quarter (NW ¼) of the Northeast Quarter (NE ¼) and the West one-half (W ½) of the Southwest Quarter (SW ¼) of the Northeast Quarter (NE ¼), and the Northeast Quarter (NE ¼) of the Southwest Quarter (SW ¼) and the West one-half (W ½) of the Northwest Quarter (NW ¼) of the Southeast Quarter (SE ¼) all in Section Seventeen (17), Township Eighty Nine (89) North, Range Five (5), West of the Fifth P.M.