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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 Kevin Stansberry and Heather Stansberry

Address 3105 140th Avenue, Ryan, Iowa 52330
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name Chris A. Robinson

Address 1140 300th Street, Ryan, Iowa 52330
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
413 North Street, Ryan, Iowa 52330
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)

- ☐ All buildings on this property are served by a public or semi-public sewage disposal system.
- ☐ This transaction does not involve the transfer of any building.
- ☒ There is a building served by private sewage disposal system on this property or a building without any lawful sewage disposal system. 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 building served by 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.
- ☐ There is a building served by private sewage disposal system on this property. The buyer has executed a binding acknowledgment with the county board of health to install a new private sewage disposal system on this property within an agreed upon time period. A copy of the binding acknowledgment is provided with this form.
- ☐ There is a building served by 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. [Exemption #9]
- ☐ This property is exempt from the private sewage disposal inspection requirements pursuant to the following exemption [Note: for exemption #9 use prior check box]: _____.
- ☐ 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:

Sand point well located inside the building

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

Signature: _____ Telephone No.: (563) 608-1043
(Transferor or Agent)

FILE WITH RECORDER **DNR form 542-0960 (Sept. 1, 2010)**

Addendum

1. That part of Block Four (4), Ryan, Iowa, according to plat recorded in Book 1 Plats, Page 42, described as commencing at a point on the North line of said Block Four (4) that is one hundred sixty five (165) feet West of the Northeast corner of said Block Four (4), thence South parallel with the East line of said Block Four (4) six hundred twenty nine (629) feet, thence West parallel with the North line of said Block Four (4) two hundred eighty (280) feet and eight (8) inches to the West line of said Block Four (4), thence North on the West line of said Block Four (4) two hundred seventy five and one-third (275 1/3) feet, thence East one hundred thirty three (133) feet, thence North two hundred seven (207) feet, thence East fifteen and five-tenths (15.5) feet, thence North one hundred forty six amd two-thirds (146 2/3) feet, more of less, to the North line of said Block Four (4), thence East on the North line of said Block Four (4) one hundred thirty two (132) feet and two (2) inches, more or less, to the point of beginning.

Time of Transfer Inspection Report

Property Information

Current Owner: Kevin Stansberry

Buyer: _____ Realtor: _____

Mailing Address: 3105 140th Avenue, Ryan, IA 52330

Site Address/County: 413 North St, Ryan, IA Delaware County

Legal Description _____

No. of bedrooms: 0 Last occupied: Current Records available: Yes

Permit/ installation date: 1992 Separation distances (ok/no?): _____

Septic System Information

Septic tank(s): Size: 750 Material: Concrete Condition: Good

Tank pumped? Yes Date: 05/21/11 Licensed pumper: Septic Services of Iowa

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 Concrete Outlets used 1 Condition: Good

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

Secondary Treatment:

Length of absorption fields: 100' Determined by: Probing

Condition of fields: Dry Determined by: Probing

Type of trench material: Pipe & gravel

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? Permitted? NOI provided: _____

Time of Transfer Inspection Report

Other components:

Alarms: Working: Disinfection: Working:

Control Box: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:

Report system status: Good running condition

Explain (attach additional pages as needed): System was fed water for a full half hour and accepted all water with no surfacing present

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: 06/15/11

Name (print): Corey Kadlec Certificate #: 9451

Address: 4401 Preserve LN, Cedar Rapids, IA 52411

Phone #: 319-533-2723

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