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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 Robert Lahr and Rosemary Lahr

Address 1767 130th Street, Manchester, IA 52057
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name Daniel & Jacqueline Lahr

Address 912 Evergreen Dr., Manchester, IA 52057
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
1767 130th Street, Manchester, Iowa
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.
   - X 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. 501 w phase
2. **Solid Waste Disposal (check one)**
   - X 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)**
   - X 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)**
   - X 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)**
   - __ 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]
   - X This property is exempt from the private sewage disposal inspection requirements pursuant to the following exemption [Note: for exemption #9 use prior check box]: Lineal descendant trust
   - __ 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: _____ Telephone No.: ( ) 518-1850
(Transferor or Agent)

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

Addendum

1. The North West quarter of the North East quarter of Section Sixteen (16), and that parcel of land described as commencing at the North East corner of the North East quarter of the North West quarter of Section Sixteen (16), thence West about Forty (40) rods, more or less, to the West bank of the creek, thence Southwesterly along the West bank of the creek to a point Two (2) rods distant from the North line of said Section, thence East parallel with the Two (2) rods from said North line of said Section to East line of said quarter Section, thence North to point of beginning, and the South East quarter of South West quarter and South one half of South East quarter of Section Seventeen (17), except commencing at North East corner of South East quarter of South East quarter of said Section Seventeen (17), running thence West along quarter quarter line 3 chains, 92 links, thence South bearing slightly to East 7 chains 28 links, thence Southeasterly 3 chains, 65 links, thence North along East Section line of said Section 8 chains, 35 links to beginning; Also South 5/8 of the South one half of South West quarter of Section Sixteen (16), all being in Township Ninety (90), North, Range Five (5), West of the 5th P.M.