Book 2012 Page 252

Document 2012 GWH-252 Type 53 001 Pages 8
Date 1/24/2012 Time 11:21:09AM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:
Name Dale R. Hosch and Sheila M. Hosch

Address 2325 Jones Delaware Rd., Hopkinton IA 52237
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name Mitchell A. Siddell and Charlene A. Siddell

Address 1713 Linn Delaware Road, Coggon IA 52218
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
1713 Linn Delaware Road, Coggon IA 52218
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.
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.
   - X 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:

#1 - Residential well located 3 feet east of garage.

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

Signature: Dale R Hosel (Transferor or Agent) Telephone No.: (319) 462-3577

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

Addendum

1. PARCEL B, located in the SW 1/4 SW 1/4 of Section 32, Township 87, North, Range 5, West of the 5th P.M., as shown in the PLAT OF SURVEY recorded in Book 2011, Page 3982 of the Delaware County, Iowa, Recorder's Office, containing 2.92 acres.

   SUBJECT TO the rights of the public in an all highways, and to all easements and restrictive covenants of record.

Time of Transfer Inspection Report (DNR Form 542-0191)

Property information

Current owner **Eugene Sperslage**
Buyer **Dale Hosch** Realtor **None**
Mailing address **2325 Jones/Delaware Road, Hopkinton IA**

Site Address/County **1713 Linn-Delaware Rd, Coggon , IA 52218 / Delaware Co.**
Legal Description _____

No. of bedrooms **3** Last occupied? **current** Records available **yes**

Permit/installation date **5/01/2002** Separation distances ok/ no? **ok**

Septic system information

Septic tank(s): size **1,250** material **concrete** condition **good**
Tank pumped? **yes** date **8/5/2011** licensed pumper **GrothServices LLC**
Septic/trash/processing tank: size **N/A** material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfgr **N/A** size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____

Pump tanks/vaults: type **N/A** size _____ condition _____
Distribution system: distribution box **Plastic-concrete** outlets used **4** condition **good**
Header pipe(s) **4** # of lines **4** Pressure dosed? **no**

Secondary treatment:
length of absorption fields **4 - 75' lines (300')** determined by **map**
condition of fields **Good** determined by **hydraulic load test**

type of trench material **Infiltrator**
Size of sand filter **N/A** determined by _____
Vent pipes above grade? _____ discharge pipe located? _____
Effluent sample taken? _____ Results _____

Media filters: type **N/A**
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

NPDES General Permit No. 4: required? no permitted? _____ NOI provided _____

Time of Transfer Inspection Report

Other components:
Alarms **Filter alarm** Working? **Needs new switch** disinfection _____
working? _____

Control box _____ Timers _____ inspection ports _____

Other components _____

Overall condition of the private sewage disposal system _____

Report system status **Septic system and soil absorption system is functioning proper as designed.**

Explain (attach additional pages as needed) **see attached narrative report**

Comments: __

Site status at conclusion of Time of Transfer inspection:

1 Verify that controls are set on the appropriate mode.
2 Power is on to all components.
3 Revisit all components to verify lids are secure.

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: **8/31/2011**
Name (print): **Corey Groth** Certificate #: **8810**
Address: **1690 165th Street, Manchester, IA 52057**
Phone # **563-927-5823**

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

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

GROTH SERVICES

08-31-2011 **INSPECTION REPORT**

Eugene Sperslage Property
1713 Linn Delaware Road
Coggon, IA 52218

HOME DESCRIPTION:

Two story three bedroom older farm house. Full Basement with in floor drains. No water softener waste discharge. 1250 gallon two compartment swales brand concrete tank. Concrete risers to the surface. Concrete-Plastic lined Distribution Box, and a 300' leech field.

Distance from tank to deep well is 50'

Distance from secondary treatment to well is 100'

CONDITION:

Concrete tank is in good condition and normal operating level. Some sewer gas damage on the outlet risers, more than average for age. Tank has new style plastic baffles and a small single zabel 1801 effluent filter. The alarm for filter does work, but it will not function correctly in alerting homeowner before the system backs up without installing a replacement float switch. Tested water flow from outside water hose at 6.6 gallons a minute and performed a 38 minute hydraulic load test to the d-box.

D-box is in excellent shape and stayed at normal operated level entire time.

This septic system inspection was conducted at 1713 Linn Delaware Road, Coggon, IA 52218 on August 5, 2011.

YES the tank was pumped at the time of inspection on 8-5-2011.

YES this septic system does meet the Time of Transfer inspection criteria in it having secondary treatment.

Tank capacity was verified by interior liquid measurements (L x W x H = $in.^3$ x 0.00433 = US Gals)

Company Disclaimer

Based on what we were able to observe and our experience with on-site wastewater technology, we submit this sanitary sewage disposal system inspection report based on the present condition of the on-site sewage disposal system. Groth Services has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time in the future. Because of the numerous factors (usage, soil characteristics, previous failures, ect.) which effect the proper operation of a septic system as well as the inability of our Company to supervise or monitor the use or maintenance of the system, this report shall not be construed as a warranty by our Company that the system will function properly for any particular buyer. Groth Services DISCLAIMS ANY WARRANTY, either expressed or implied, arising from the inspection of the septic system or this report. We are also not ascertaining the impact the system is having on the ground water.

I have studied the information contained herein and that my assessment is honest, thorough, and, to the best of my ability correct.

Certified by Corey J Groth # 8810

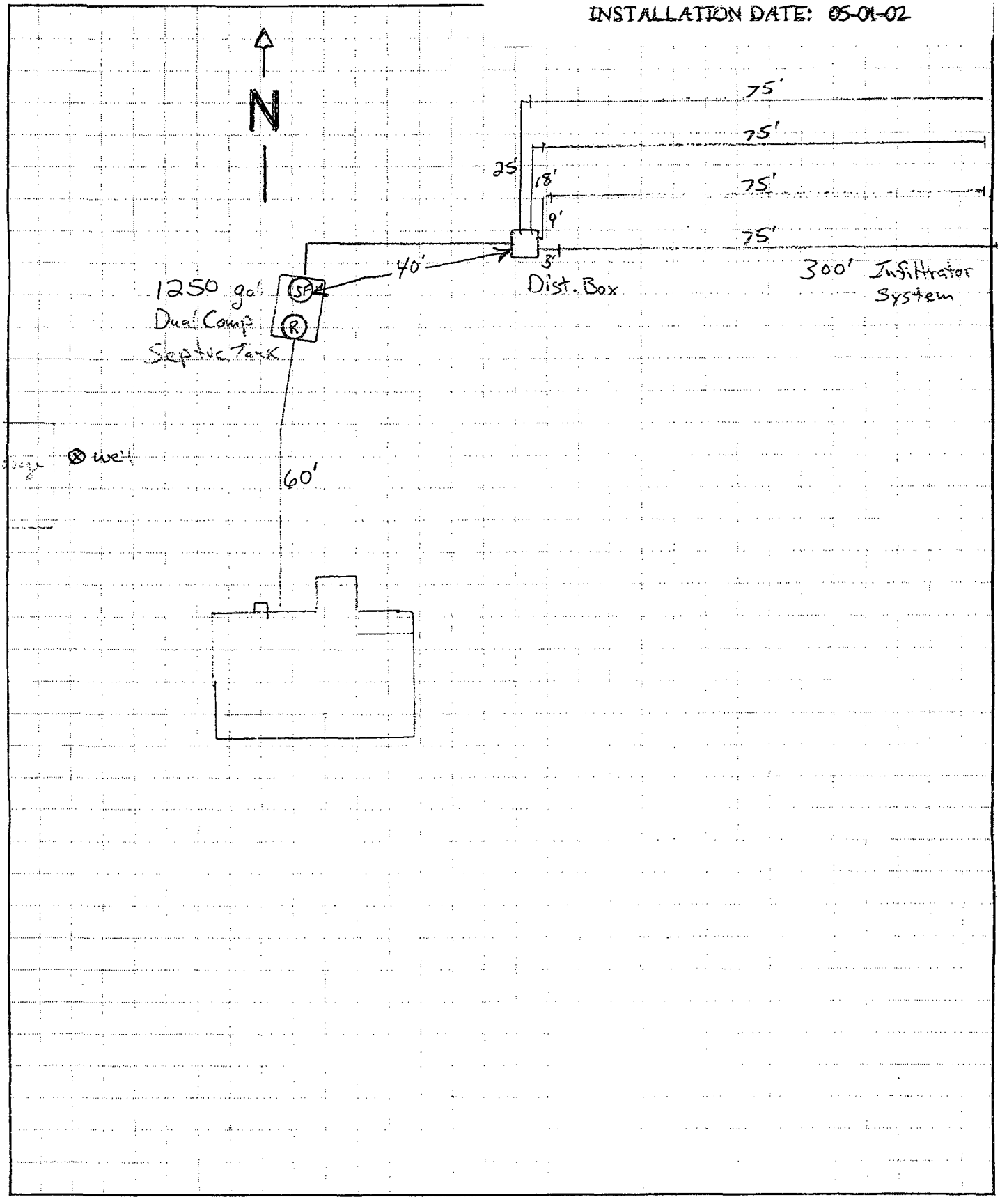
_____ **DATE** 8-31-11

GROTH SERVICES
1690 165TH ST.
MANCESTER, IA. 52057

Eugene Spertsalge 563-932-2391
1713 Linn-Deleware Rd.
Coggon, Ia. 52218

Deleware County-Hazel Green Township # 32

INSTALLATION DATE: 05-01-02



PRODUCT 204-1 NEBS Inc., Groton, Mass. 01471