Book 2012 Page 741
Document 2012 GWH-741 Type 53 001 Pages 7
Date 3/05/2012 Time 2:55:26PM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:
Name Anthony S. McCullough and Melissa L. McCullough

Address 521 Jordan Dr, Anamosa, IA 52205
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name Phillip M. Klein

Address 117 Howard St, Manchester, IA 52057
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
27260 217th St, Earlville, IA 52041
Number and Street or RR | City, Town, or P.O. | State | Zip

Legal Description of Property: (Attach if necessary) Lot Two (2), Block Five (5) of the Subdivision of Lot Two (2) of Timbergate Subdivision in Section Thirty Six (36), Township Eighty Nine (89) North, Range Four (4), West of the Fifth Principal Meridian in Delaware County, Iowa, according to plat recorded in Book 4 Plats, Pages 65-67.

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:

A private well is located 10' west of the garage.

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

Signature: _____ (Transferor or Agent) Telephone No.: (563) 923 7107

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

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

Property information

Current owner Anthony & Melissa McCullough
Buyer Gerald & Diane Edwards Realtor Weigmann Real Estate
Mailing address 27260 217th St Earlville IA 52041

Site Address/County Delaware
Legal Description SW1/4 NE 1/4 Sec 36 T89N

No. of bedrooms 3 Last occupied? — Records available Yes Permit #1440

Permit/installation date 7-16-2060 Separation distances ok/ no? OK

Septic system information

Septic tank(s): size 1500 material Concrete condition Good
Tank pumped? Yes date 6-22-2011 licensed pumper 99 200206
Septic/trash/processing tank: size 600 material Concrete condition Good
Tank pumped? Yes date 6-22-2011 licensed pumper 99 200206

Aerobic treatment unit (ATU) mfgr — size ____
Tank pumped? ____ date ____ licensed pumper ____
Maintenance contract? ____ expiration date ____ service provider ____
Condition ____

Pump tanks/vaults: type ____ size ____ condition ____

Distribution system: distribution box ____ outlets used ____ condition ____
Header pipe(s) ____ # of lines ____ Pressure dosed? ____

Secondary treatment:
length of absorption fields 22" Chambers determined by Probe
condition of fields Good determined by Probe
type of trench material 22" Chambers

Size of sand filter — determined by ____
Vent pipes above grade? ____ discharge pipe located? ____
Effluent sample taken? ____ Results ____

Media filters: type —
Maintenance contract? ____ 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 All in good working condition.

Explain (attach additional pages as needed): _____

Comments: Keep tank Pump ever 3-5 years.

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

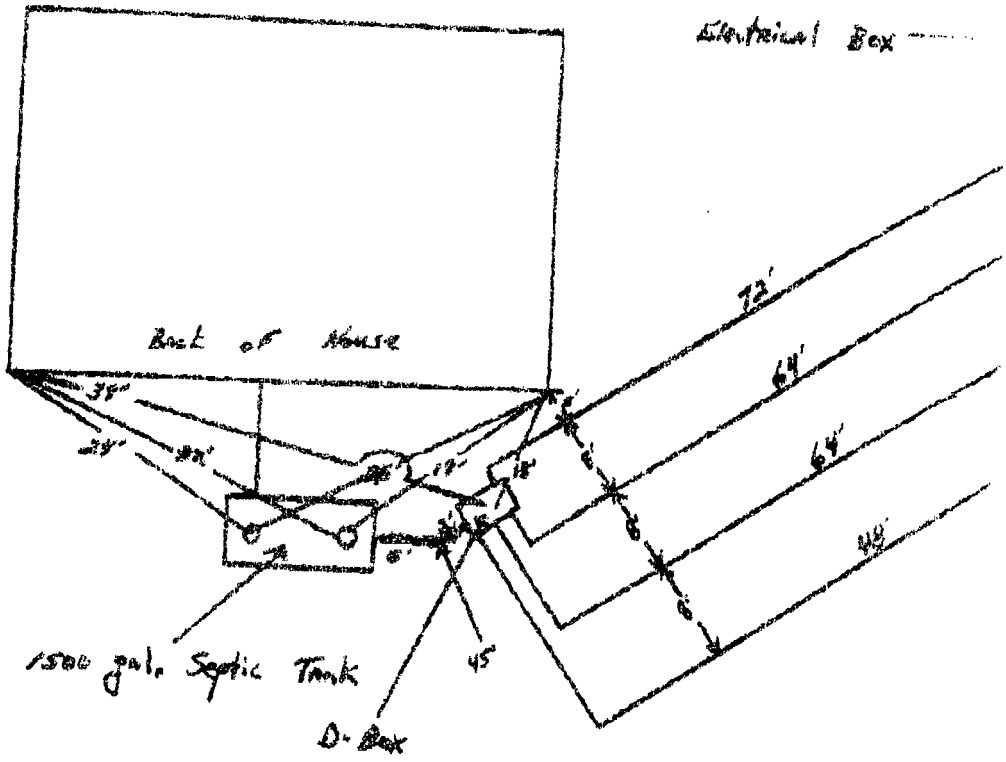
This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified inspector: _____ Date 6-23-2011
Name (print): Robb Harter Certificate #: _____
Address: 3031 160th St Dyersville, Ia 52040
Phone # 563 542-1010

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

Road



Mike Millenkamp
Timbergate Subdivision
Earlville

22" wide Infiltrator
248'

JUN-21-2011 11:35 AM COUNTY SERVICES 563 927 5561 P.02

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type) **Permit No.** 1140

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 217th St Section 36 Township Onrida

LOCATION: SWly NEly sec 36 T89N R.4.W

Owner: Mike M. Wenkamp Tenant: _____ Plumber: Leech

Lot Size: 2 acres Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Stools 2 Lavatories ___ Bath Tubs ___ Showers 2 Sinks 4 Automatic Laundry 1 Sump Pump ___

Septic Tank made by Sudro Garbage Grinder ___ Construction Material Concrete Gallons Cap. 1250

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

Absorption Field: Total length of laterals 270 No. of lateral lines 3

This system is new X Existing ___

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

Date Approved 7-10-06

By Dennis Lyons
INSPECTOR

Dan Vincent
APPLICANT'S SIGNATURE

SEAL

Harter Custom Pumping, Inc & Septic Service

Robb Harter * Owner/ Operator
3031 160th Street Dyersville, IA 52040 * 563-875-8730 or 563-542-1010

****

Homeowners:
Anthony & Melissa McCullough
521 Jordan Road
Anamosa, IA 52205

Age of Property
2006
Occupied
Yes or (No)

Inspection Co:
Robb Harter 3031 160th St
Dyersville IA 52040
Date of Inspection:

Does this evaluation/inspection meet the requirements of state and local agencies? Yes X No ___ N/A ___

Section 1:

Location of the system (East) West North South
Was Water run into the system for 30 minutes? (Yes) No
Does the septic tank have a visible riser? (Yes) No
Estimated size of tank 1500 Gallons *Basis for estimate*
What is the separation between well and septic? over 100ft
Does the separation of the well and septic meet local requirements? (Yes) No N/A

Section2: Disposal Field

Any evidence of malfunction (No) Yes (Please check all applicable observed conditions)
___ Wet Areas ___ Unusual green/lush vegetation
___ Liquid Discharges to surface ___ Discharge pipe of unknown origin
___ Localized surface settling ___ Other (Describe below)

Septic Tank

Septic tank material X Concrete ___ Fiberglass ___ Other
Liquid Level in tank X Normal ___ Below Normal ___ Above Normal
Access opening in tank ___ One X Two ___ Three ___ None
Number of risers ___ One X Two ___ Three ___ None
Condition of baffles and or sanitary tees:
Inlet baffle or "T" X Present and functional ___ Not functional ___ None present ___ Not Visible
Outlet baffle or "T" X Present and functional ___ Not functional ___ None present ___ Not Visible
Tank was pumped X Yes ___ No (if no please explain below
Is system adequately sized for # of Bedrooms X Yes ___ No # of Bedrooms ___
Is system adequately sized for # of Bathrooms X Yes ___ No # of Bathrooms ___
System working Properly X Yes ___ No (if no please explain below)

Additional Comments / Repairs needed:

Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.
This report comments on the workability of the system on the day of the inspection only, and is in no way intended to be a warranty.
Workability can be altered by factors such as excessive rainfall, heavy water usage, faulty plumbing, neglect or physical damage to the system. All tanks require pumping maintenance.

Inspected by Robb Harter Date: 6-23-2011