Book 2012 Page 1570
Document 2012 GWH-1570 Type 53 001 Pages 8
Date 5/11/2012 Time 2:40:19PM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:
Name Doug Vaske

Address 1599 180th Street, Manchester, Iowa 52057
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name Everett J. Kennedy, Jr. and Rhonda K. Kennedy

Address 1871 160th Avenue, Manchester, Iowa 52057
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
1599 180th Street, Manchester, Iowa 52057
Number and Street or RR | City, Town, or P.O. | State | Zip

Legal Description of Property: (Attach if necessary) Parcel "B" Being Part Of The Fractional Northwest One Quarter (Frl NW ¼) Of The Northwest One Quarter (NW¼), Section Eighteen (18), Township Eighty Nine North (T89N), Range Five West (R5W) Of The Fifth Principal Meridian (5th P.M.), Delaware County, Iowa, according to plat recorded in Book 7 Plats, Page 101.

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:

Drilled well in working order located in South west corner of property

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

Signature: X Dawn Hoke (Transferor or Agent) Telephone No.: (563) 920-2963

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

Property information

Current owner Doug Vaske
Buyer _____ Realtor Self
Mailing address 1599 180th St.

Site Address/County 1599 180th St.
Legal Description on seaperate Sheet.

No. of bedrooms 2 Last occupied? Present Records available Yes

Permit/installation date _____ Separation distances ok/ no? Ok

Septic system information

Septic tank(s): size 1000 material Concrete condition good
Tank pumped? Yes date 4-17-12 licensed pumper St. 49 D+S
Septic/trash/processing tank: size N/A material N/A condition N/A
Tank pumped? N/A date N/A licensed pumper N/A

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

Pump tanks/vaults: type N/A size N/A condition N/A

Distribution system: distribution box Yes outlets used 4 condition good
Header pipe(s) N/A # of lines 4 Pressure dosed? N/A

Secondary treatment:
length of absorption fields 240' determined by Permit
condition of fields Good determined by Permit
type of trench material Rock & Pipe

Size of sand filter N/A determined by N/A
Vent pipes above grade? N/A discharge pipe located? N/A
Effluent sample taken? N/A Results N/A

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

NPDES General Permit No. 4: required? N/A permitted? N/A NOI provided N/A

Time of Transfer Inspection Worksheet

Other components:
Alarms N/A Working? N/A disinfection N/A working? N/A

Control box N/A Timers N/A inspection ports N/A

Other components _____

_____

Overall condition of the private sewage disposal system

Report system status System is in good working condition

Explain (attach additional pages as needed): Hydraulic test was done 31 min @ 7.5 gallons per minute system ~~is~~ is in good working condition 20" to top of D-Box & lines are at approx- 28"-36" in depth -

Comments: System is in Sandy- River gravel soil

_____

_____

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: 4-18-12
Name (print): Luke Ogden Certificate #: C715
Address: 17120 185th St.
Phone # 920-5148

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 and to;

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

DELAWARE COUNTY
BOARD OF SUPERVISORS (Print or Type) **Permit No.** 584

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: N 99 180 E St. Section 18 Township Delaware

LOCATION: 1/4 1/4 1/4 T-8 SW R-5 W

Owner: Lonnie Aukes Tenant: _____ Plumber: Kaehler Sons

Lot Size: 13 Acres Type Commercial: _____ Residential: (No. Bedrooms) 3

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

Septic Tank made by Sawles Garbage Grinder _____ Construction Material Concrete Gallons Cap. 1000

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

Absorption Field: Total length of laterals 450' w/rock No. of lateral lines ~~2~~ 3

This system is new ✓ 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 7-9-97

By Lorraine Ackley
INSPECTOR

Lonnie Aukes
APPLICANT'S SIGNATURE

SEAL

SEWAGE DISPOSAL SYSTEM

INFORMATION

FINAL INSPECTION

PERMIT NO: 584

APPLICANT: Lonnie Aylworth

PLUMBER: Kuehl

LOCATION

ADDRESS: Mendocino

PERCOLATION TESTS: #1 #2 #3 #4

SEPTIC TANK SIZE:

COMPARTMENTS: 2

MANUFACTURER: Swales

DEPTH: 12"

DISTANCE FROM HOUSE: 10'

WELL: 100 +

DISTRIBUTION BOX: DEPTH: 32

LEVEL:

DISTANCE FROM HOUSE:

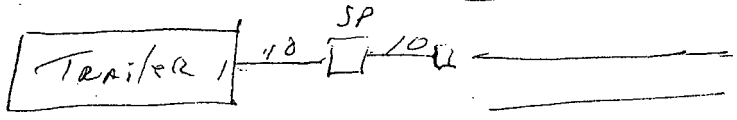
WELL:

TRENCH #1 LENGTH: 80 WIDTH: DEPTH:

TRENCH#2 LENGTH: 80 WIDTH: DEPTH:

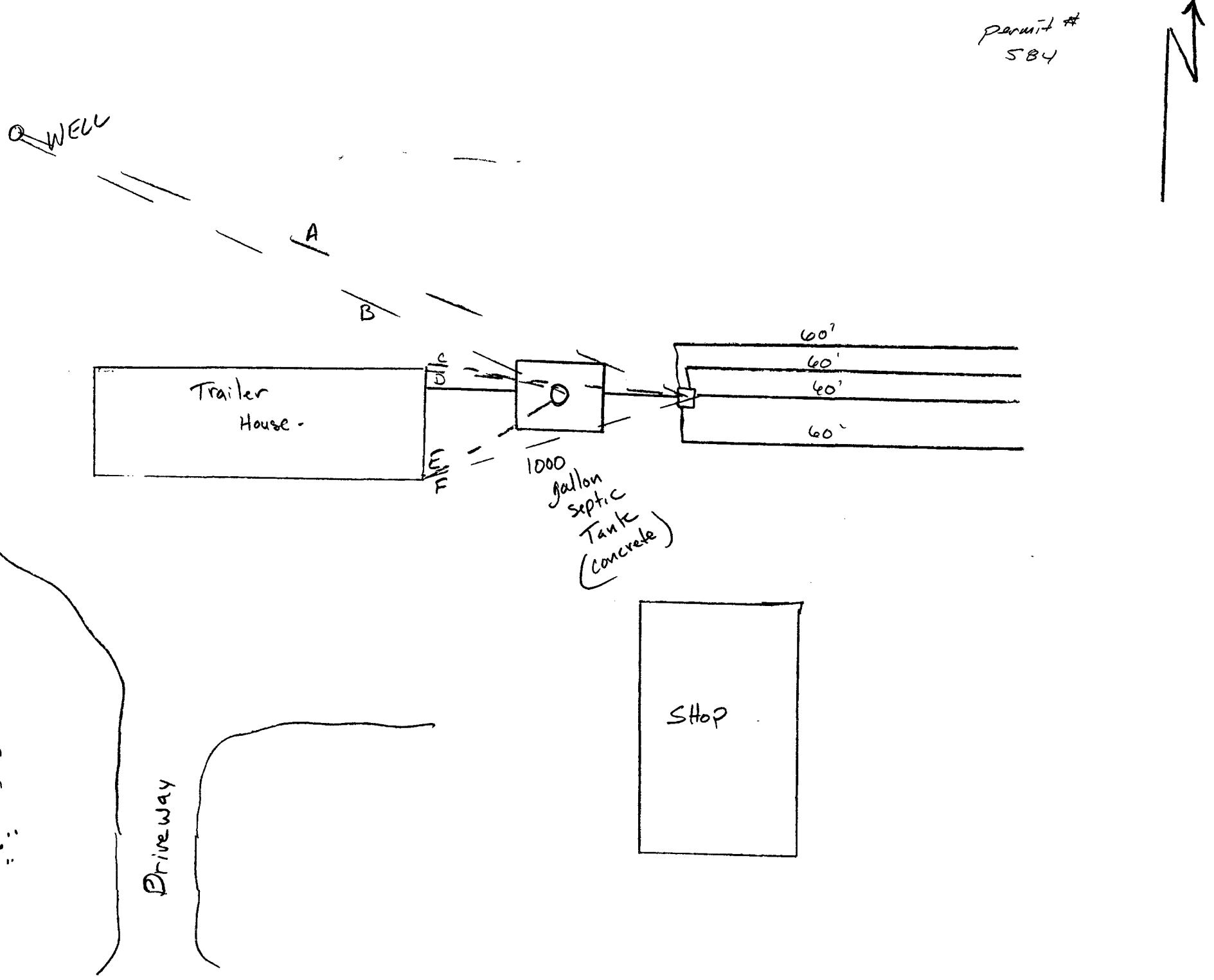
TRENCH#3 LENGTH: 80 WIDTH: DEPTH:

TRENCH#4 LENGTH: WIDTH: DEPTH:



APPROVED ( ) REJECT ( ) INSPECTED BY:

permit # 584



A = 162'
B = 151'
C = 42'
D = 26.6"
E = 25.6"
F = 42'

Address of Property Transferred 1599 180th St., Manchester, IA 52057

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

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Doug Vaske -