Book 2012 Page 2614

Document 2012 GWH-2614 Type 53 001 Pages 7
Date 8/10/2012 Time 2:34:12PM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Daniel J. Staebell

Address 817 Olympic Drive, Onalaska, WI 54650

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

TRANSFEREE:

Name James A. Rave

Address 1303 227th Avenue, Greeley, Iowa 52050

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

Address of Property Transferred:
25689 206th Avenue, Manchester, Iowa 52057

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

Legal Description of Property: (Attach if necessary) Cabin on leased land of Schneiders South ½ of Section 23, Township 88 North, Range 5, West of the Fifth Principal Meridian

Locally known as 25689 206th Avenue, Manchester, Iowa 52057

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 which has or is required by law to have a sewage disposal system.
   - ✓ 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:

_____

_____

_____

_____

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.: 608-783-2240

FILE WITH RECORDER **DNR form 542-0960 (July 18, 2012)**

542-0191

Time of Transfer Inspection Report

Property Information

Current Owner: Dan Staebell

Buyer: ? Realtor: None

Mailing Address: 817 Olympic Drive Onalaska, Wisconson 54650

Site Address/County: 25689 206th St. Manchester, Iowa 52057

Legal Description

No. of bedrooms: 2 Last occupied: 2 years Records available: NO

Permit/ installation date: None Separation distances (ok/no?): Ok

Septic System Information

Septic tank(s): Size: 750 Gal. Material: Concrete Condition: O.K.

Tank pumped? ☒ Y ☐ N Date: 7/10/2012 Licensed pumper: A-1 Septic

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: Concrete tank Ok Baffeles are Ok

Pump tanks/vaults: Type: Size: Condition:

Distribution system: Distribution box No Outlets used Condition:

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

Secondary Treatment:

Length of absorption fields: Dry Well Determined by: Digging

Condition of fields: Dry Well -O.K Determined by: Hyd.

Type of trench material:

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? ☐ Y ☐ N Permitted? ☐ Y ☐ N NOI provided:

542-0191

Time of Transfer Inspection Report

Other components:

Alarms: ☐ Y ☐ N Working: ☐ Y ☐ N Disinfection: ☐ Y ☐ N Working: ☐ Y ☐ N

Control Box: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:

Septic system is a 750 gal tank which two cabins share. The secondary system is a dry well that seems to be in good condition at the time of inspection. The tank was about three foot in the ground with no riser on the tank. This system is under sized for todays standards, and a dry well is no longer allowed to be put in but the system passed the HYD. test that was required for us to do by the State of Iowa.

Report system status:

Explain (attach additional pages as needed): _____

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: _____

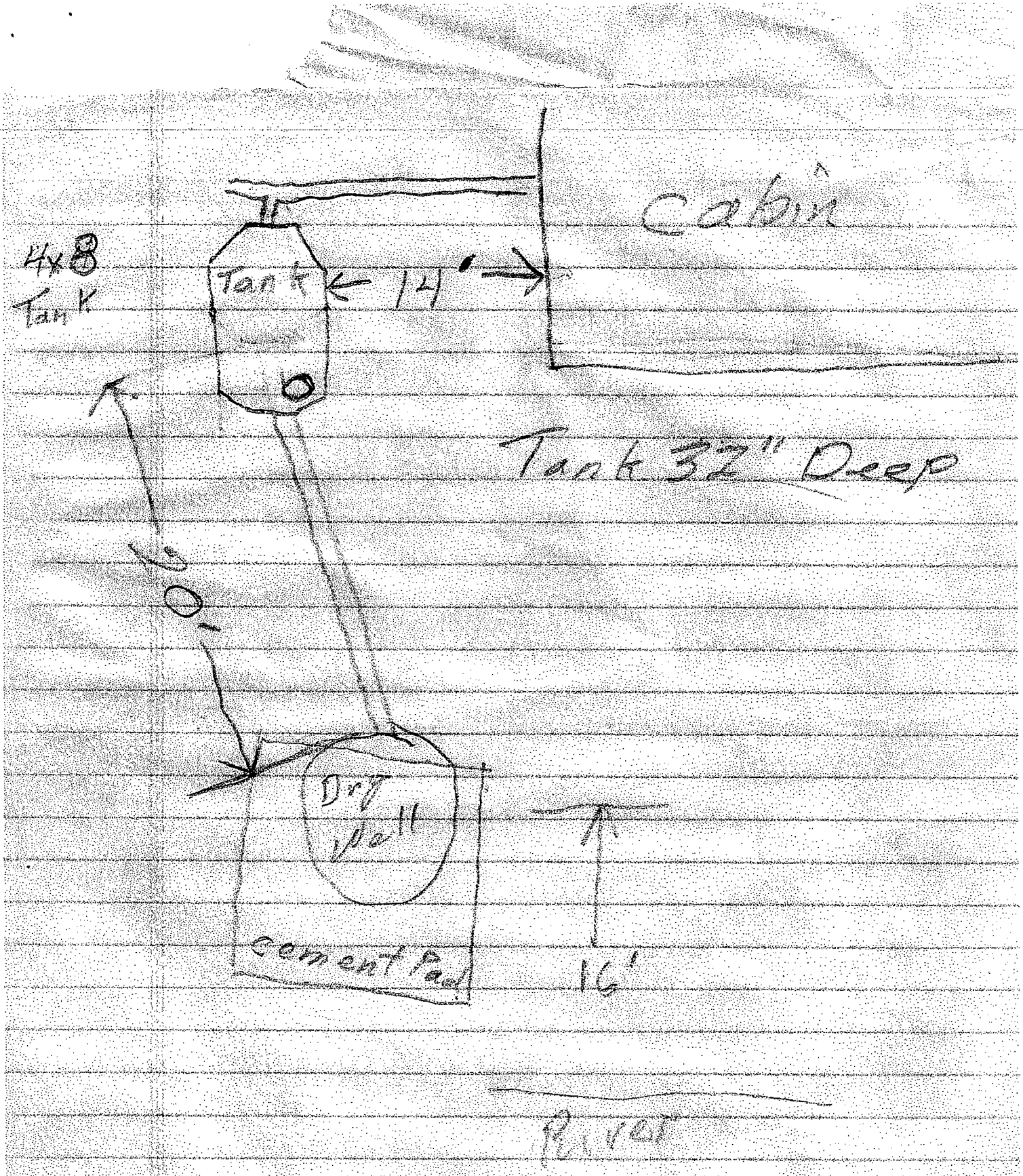
Name (print): Jody Antrim Certificate #: 8874

Address: 20984 265th Street Manchester, Iowa 52057

Phone #: 563-920-9388

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


Cabin
4x8
Tank
Tank
14'
Tank 32" Deep
Dry
Well
Cement Pad
16'
River

Invoice No. 1572

7-10-12

A1 Septic Tank Pumping llc.

319-232-1719
P.O. Box 1226
Cedar Falls, IA 50613

BILLING:

Name Johnson & Haebell

Street 25679 & 25689 206th

City Manchester State IA

Phone Zip 52057

Job SAME

- ☐ Every _____ weeks
- ☐ Every _____ month
- ☒ Every 3 year
- ☒ Gallons 570
- ☐ Inlet Plugged
- ☐ Outlet Plugged
- ☐ Repairs Required
- ☐ _____

Enzymes _____

Pumping $200.00

Fuel Surcharge $14.00

Tax _____

Total $214.00

☐ Check ☐ Cash
☐ Credit Card
☐ Chg.

FINANCE CHARGE of 1 1/2% (18% Annually will be charged on all accounts 30 days **PAST DUE** from the original billing date. From 15-30 days, payment is NET. After 40 days all orders in process or received will be held for total clearance of all invoices rendered.

JDC WORKS

Invoice

Jody Antrim
20984 265th St.
Manchester, Ia
52057-8565

Date	Invoice #
7/10/2012	2206

PAID
07/23/2012

Bill To
Steve Johnson 628 Hunter Drive Cedar Falls Ia. 50613

P.O. No.	Terms	Project

Description	Qty	Rate	Amount
Excavator work	1.75	75.00	131.25
Transport	1	25.00	25.00
Labor	1.75	28.00	49.00
Time of transfer Inspection	1	200.00	200.00
Hour Charge skidloader	0.8	75.00	60.00
Road Rock ----------Tons>	2.5	7.05	17.63T
Minimum Hauling	1	20.00	20.00
Fuel Surcharge hourly on skid loader & excavator.	2.55	6.22745	15.88

Thank you, Please make check payable to Jody Antrim

Subtotal	$518.76
Sales Tax (7.0%)	$1.24
Total	$520.00
Payments/Credits	$-520.00
Balance Due	$0.00