Book 2012 Page 3691

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Date 10/29/2012 Time 2:33:47PM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Anderson Gearhart and Martha Gearhart

Address 3236 255th Avenue, Hopkinton, Iowa 52237

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

TRANSFEREE:

Name Aaron L. Butikofer and Andrea C. Butikofer

Address 104 Ungs Court, Manchester, Iowa 52057

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

Address of Property Transferred:
24619 198th Avenue, Manchester, Iowa 52057

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)**
   - X There are no known wells situated on this property. Shared well on north neighbor's lot
   - ___ 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 which has or is required by law to have a sewage disposal system.
   - 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:

_____

_____

_____

_____

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.: 563 926 2267

FILE WITH RECORDER

Addendum

1. Parcel 'J' being part of Lot Three (3) and part of Lot Four (4) of Cozy Cove Subdivision of Lot One (1) through Lot Seven (7) of Willie's Second Subdivision being part of the Southeast Quarter of the Northeast Quarter (SE¼-NE¼) and part of the Northeast Quarter of the Southeast Quarter (NE¼-SE¼) of Section Fifteen (15) and part of the Northwest Quarter of the Northwest Quarter (NW¼-NW¼) of Section 14, all in Township Eighty-eight (88) North, Range Five (5) West of the Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 2006, Page 3300.

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

Property information

Current owner Andy Gearheart (563) 920-5336
Buyer Aron Butikofer Realtor Barb Sailer GNB Real Estate
Mailing address 24619 198th AVE Manchester, Ia. 563 920 5024

Site Address/County 24619 198th AVE Manchester, Ia.
Legal Description T-88-N R-5-W section 15, Twp Milo, County Delaware

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

Permit/installation date 11-14-00 Separation distances ok/ no? ok

Septic system information

Septic tank(s): size 1500 material concrete condition good
Tank pumped? yes date 10-10-12 licensed pumper yes ST3417 Tel- 5639207
Septic/trash/processing tank: size X material X condition X
Tank pumped? X date X licensed pumper X

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

Pump tanks/vaults: type X size X condition X

Distribution system: distribution box yes outlets used 3 condition good
Header pipe(s) X # of lines X Pressure dosed? X

Secondary treatment:
length of absorption fields 4 lines 65' determined by map from county
condition of fields Good determined by hydraulic test
type of trench material Rock & Pipe

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

Media filters: type X
Maintenance contract? X expiration date X service provider X
Condition X

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

[redacted]

Time of Transfer Inspection Worksheet

Other components:
Alarms X Working? X disinfection X working? X

Control box X Timers X inspection ports X

Other components X

Overall condition of the private sewage disposal system

Report system status The day of inspection 10-10-12 system was in good working order

Explain (attach additional pages as needed): _____

Comments: System is in very good working. Should pump septic 3 to 5 years for maintence.

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: Scott Harbach Date: 10-10-12
Name (print): Scott Harbach Certificate #: 8815
Address: 2443 210th AVE Delhi, Ia. 52223
Phone # 563 920 7622
563 920 7622

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

Andy Gearhart

not Paid

DELAWARE COUNTY
BOARD OF SUPERVISORS (Print or Type) **Permit No.** 1481

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 24619 - 198th Ave Section 15 Township M. to

LOCATION: NE¼ SE¼ SE¼ sec 15 T-82-N R-5-W

Owner: Mike Gearhart Tenant: _____ Plumber: Harbach ~~Thompson~~

Lot Size: 100 x 300 Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Stools 3 Lavatories ___ Bath Tubs 2 Showers 1 Sinks 4 Automatic Laundry 1 Sump Pump ___

Septic Tank made by Sundes Garbage Grinder _____ Construction Material Concrete Gallons Cap. 1500

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

Absorption Field: Total length of laterals 300 Ft No. of lateral lines 4

This system is new X Existing ___. L: F+ Station Basement

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 11-14-06

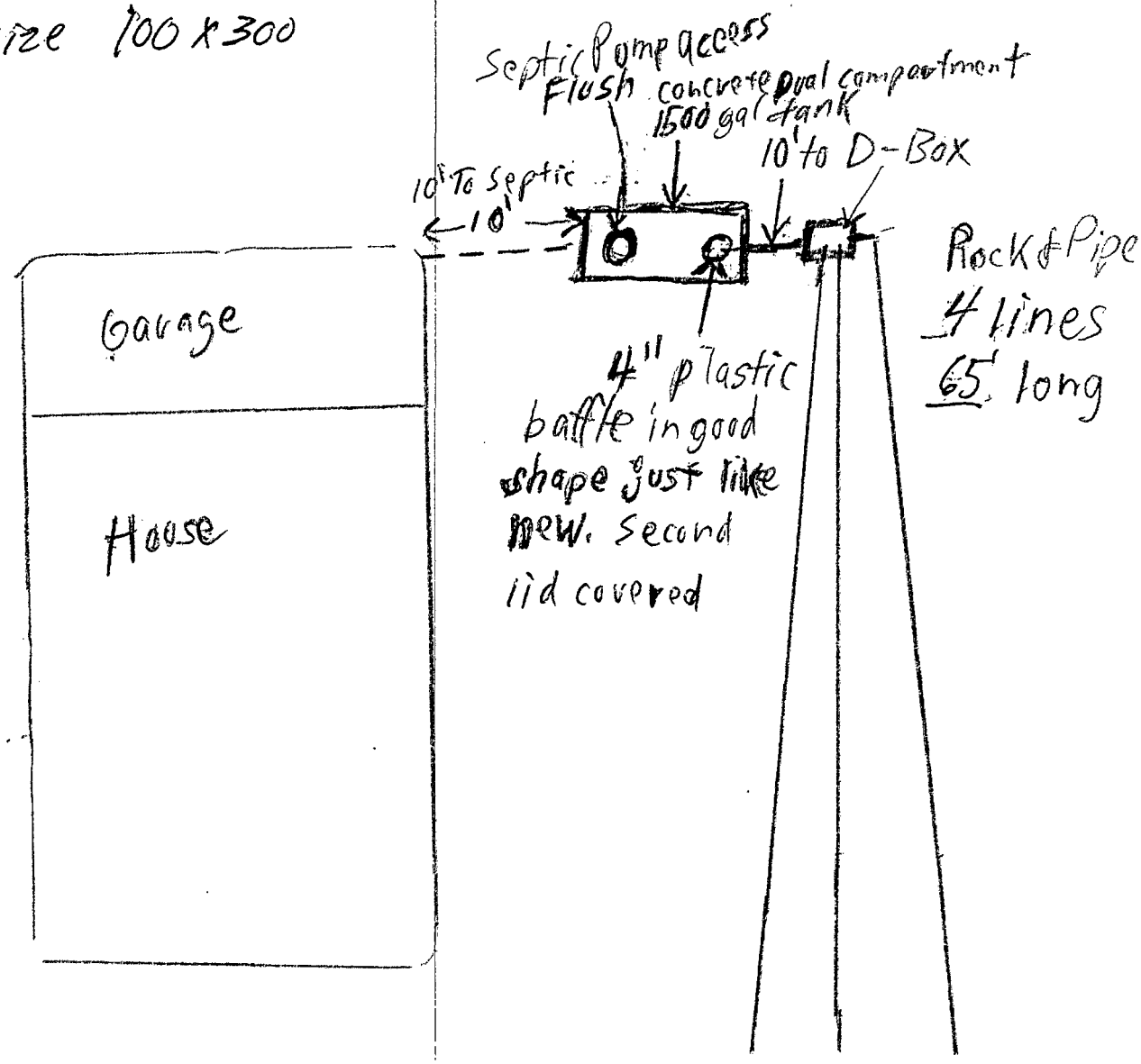
By Dennis Lyons
INSPECTOR

X Mike Gearhart
APPLICANT'S SIGNATURE

SEAL

Shared well 300' away

Lot size 100 x 300



Performed 45 min. Hydraulic Test Efulent went from tank to D-Box no fluxuation in efulent, did not rise, in D-Box. This system was in good working order day of inspection.

Barb Sailor

Andy Gearheard

Scott Harbach
541 970 7622