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Date 12/14/2012 Time 9:27:49AM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Amos C. Christner and Fannie D. Christner

Address 2547 - 220th Ave, Delhi, IA 52223

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

TRANSFEREE:

Name All American Decorative Concrete, LLC

Address 23615 Highwater Rd., Manchester, IA 52057

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

Address of Property Transferred:
3177 180th Ave., Ryan, IA 52330

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 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]: _____.
   - X The private sewage disposal system has been installed within the past two years pursuant to permit number 1962.

Information required by statements checked above should be provided here or on separate sheets attached hereto:

Well is located west of the house.

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) 920-9194

Addendum

1. That part of the East one-half (E ½) of the Southeast Quarter (SE ¼) of Section Twenty (20), Township Eighty Seven (87) North, Range Five (5), West of the Fifth Principal Meridian described as commencing at the Southeast corner of said Southeast Quarter (SE ¼), and running thence West six hundred and nine-tenths (600.9) feet along the South line of said Southeast Quarter (SE ¼), thence North 0° 44' West one thousand four hundred forty nine and nine-tenths (1,449.9) feet, thence East six hundred and nine-tenths (600.9) feet, thence South 0° 44' East one thousand four hundred forty nine and nine-tenths (1,449.9) feet along the East line of said Section Twenty (20) to the point of beginning.

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type) **Permit No.** 1962

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 3177 180+1 Ave Section 20 Township H. G

LOCATION: sec 20 T-87-N R-5-W

Owner: Corey Smith Tenant: _____ Plumber: Gudenkauf

Lot Size: 16 Acres Type Commercial: _____ Residential: (No. Bedrooms) 3

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

Septic Tank made by Swales 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 3 or 4

This system is new X Existing ____. or 900 sq. Feet Drummond Chambers

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 6-8-11

By Dennis Lyons
INSPECTOR

Corey Smith
APPLICANT'S SIGNATURE

SEAL

SEWAGE DISPOSAL SYSTEM

INFORMATION

PERMIT NO: 1962

PLUMBER: Gaden Kaufe

FINAL INSPECTION

APPLICANT: Corey Smith

LOCATION

ADDRESS: 3177 180th Ave

PERCOLATION TESTS: #1 #2 #3 #4

SEPTIC TANK SIZE: 1500 COMPARTMENTS: 2

MANUFACTURER: Swales DEPTH: 18"

DISTANCE FROM HOUSE: 62' WELL: 52'

DISTRIBUTION BOX: DEPTH: 18" LEVEL: Yes

DISTANCE FROM HOUSE: 100' WELL: 170'

TRENCH #1 LENGTH: 75' WIDTH: 2' DEPTH: 24"

TRENCH#2 LENGTH: 75' WIDTH: 2' DEPTH: 24"

TRENCH#3 LENGTH: 75' WIDTH: 2' DEPTH: 24

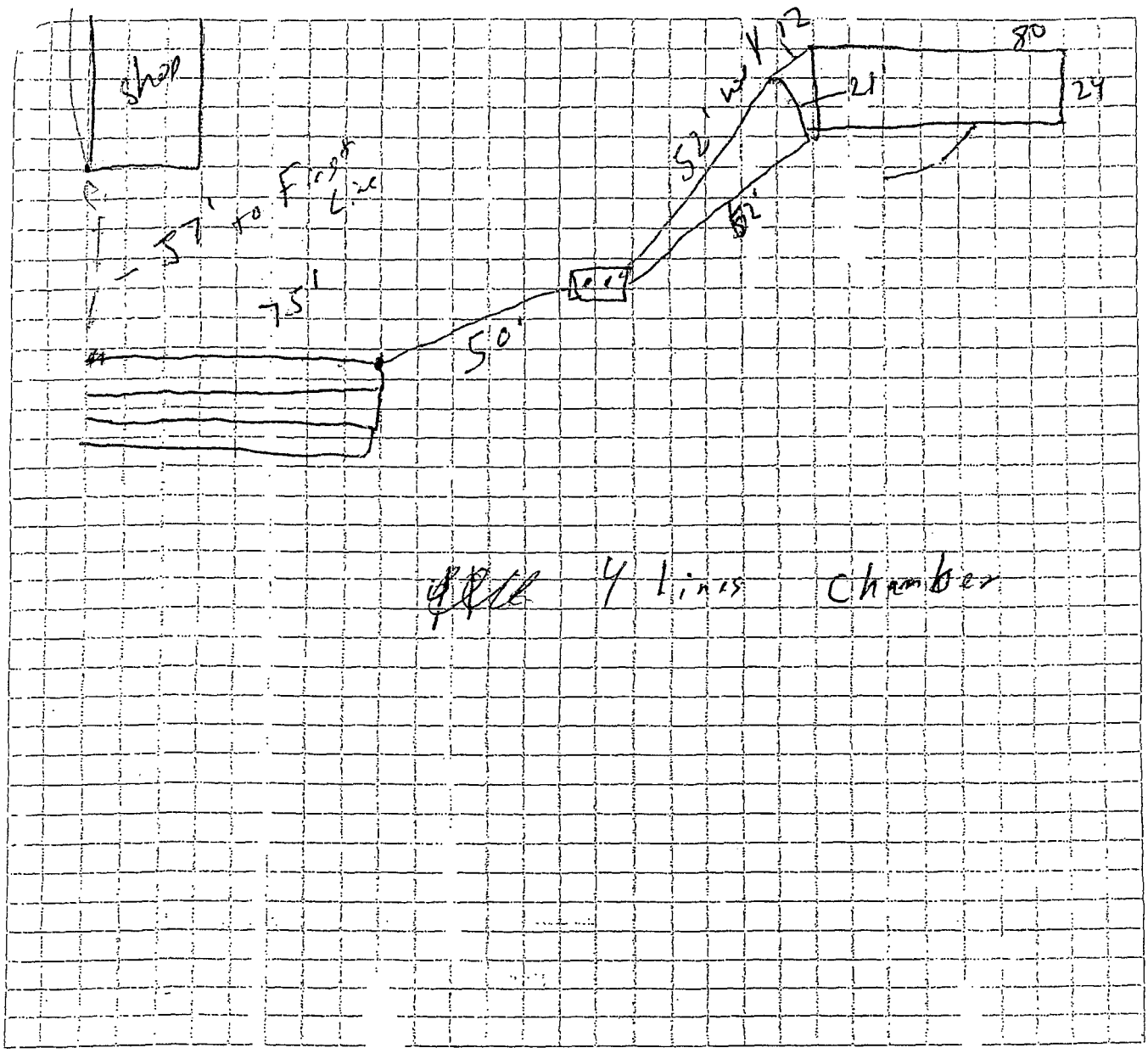
TRENCH#4 LENGTH: 75' WIDTH: 2' DEPTH: 24"

6-16-11

APPROVED (X) REJECT ( ) INSPECTED BY: Dennis Lyon

 Designer _____

Construction Issues: _____



Mapping Checklist

Map scale: _____ ___ indicate north ___ show slope _____ % direction ___

Locate

___ lot dimensions/property lines
___ dwellings and other improvements
___ existing and/or proposed system(s)
___ replacement area
___ unsuitable area(s)
___ public water supply wells
___ pumping access
___ inner wellhead zone

___ easements
___ phone
___ electric
___ gas
___ elevations
___ borings
___ benchmark
___ perc tests
___ horiz&vert reference pts

___ setbacks
___ building
___ all water wells within 100ft
___ pressure pipe
___ water suction pipe
___ streams, lakes, rivers
___ floodway and fringe