Book 2013 Page 386

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DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Mitchell R. Orcutt and Cheri A. Boeding-Orcutt

Address 19877 248th Street, Manchester, Iowa 52057

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

TRANSFEREE:

Name Philip J. Rave and Tiffany S. Rave

Address 17346 170th Avenue, Manchester, Iowa 52057

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

Address of Property Transferred:
19877 248th Street, 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)**
   - ___ 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. SE of house
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: _____ Telephone No.: 920-0282
(Transferor or Agent)

Addendum

1. Lot Two (2) of Willie's First Subdivision of part of the Northeast Quarter (NE¼) of the Southeast Quarter (SE¼) of Section Fifteen (15), Township Eighty Eight (88) North, Range Five (5), West of the Fifth Principal Meridian, and part of the Northwest Quarter (NW¼) of the Southwest Quarter (SW¼) of Section Fourteen (14), Township Eighty Eight (88) North, Range Five (5), West of the Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 4 Plats, Page 62-64.

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

Property information

Current owner Mitch Oreutt (563 920 5024)
Buyer Phill Rave Realtor GNB Realty Barb Sailor
Mailing address 17546 170th Street Monticello, Ia

Site Address/County 19877 248th ST Manchester, Ia. Delaware
Legal Description Section 15 Milo Township SE/4 of NE/4 SE/4

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

Permit/installation date 5-26-99 Separation distances ok/ no? ok

Septic system information

Septic tank(s): size 1000 & 500 Hooked in series material concrete condition good
Tank pumped? yes date 12-15-12 licensed pumper yes 5743
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 x

Pump tanks/vaults: type x size x condition x

Distribution system: distribution box yes outlets used 3 condition good
Header pipe(s) no # of lines 0 Pressure dosed? no

Secondary treatment:
length of absorption fields 3 lines total 240' determined by map
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

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 Baffles on 1000 and 500 gal Tanks good.

Explain (attach additional pages as needed): D-Box in good shape Plastic. Hydraulic test 45 min. no rize in effulent in D-Box

Comments: 12-15-12 The day of inspection this system was in good working order. Overall this system was in good shape.

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: 12-15-12
Name (print): Scott Harbach Certificate #: 8815
Address: 9443 216th Ave Delhi, Ia 52223
Phone # 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

DELAWARE COUNTY
BOARD OF SUPERVISORS (Print or Type) **Permit No.** 778

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 19877 248 ST MANCHESTER Section 15 Township MILO

LOCATION: SE ¼ OF NE ¼ OF SE ¼

Owner: MITCH ORCUTT Tenant: _____ Plumber: EIKE

Lot Size: 132' X 164 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 SWALES Garbage Grinder _____ Construction Material CONCRETE Gallons Cap 500

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

Absorption Field: Total length of laterals 240 No. of lateral lines 3

This system is new ___ Existing X. ADD 500 GAL TANK TO EXISTING 1000 1 COMP.
240' 4" W/ROCK

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

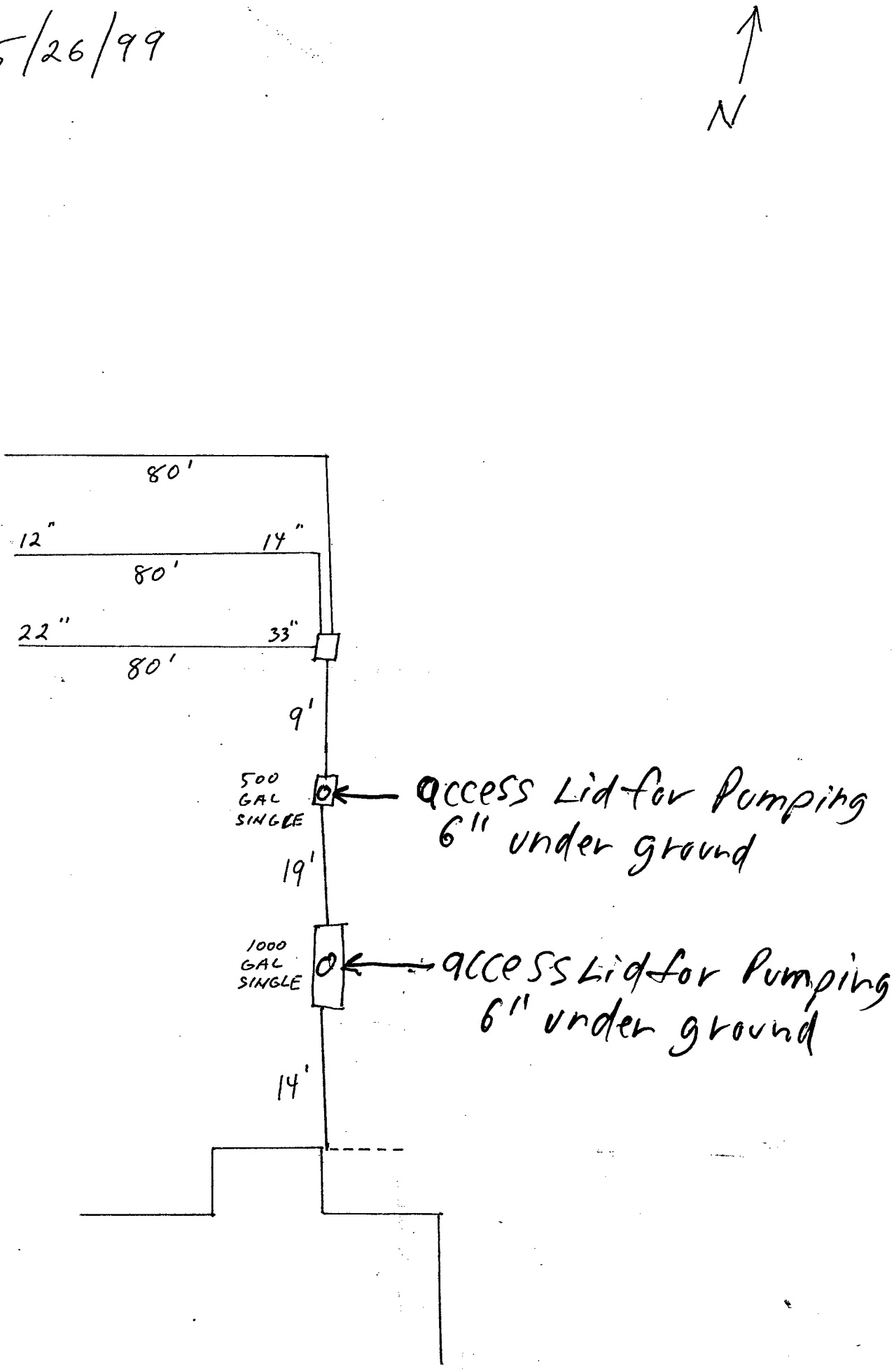
Date Approved 5/26/99

By Norm Wellm
INSPECTOR

Mitchell Orcutt
APPLICANT'S SIGNATURE

SEAL

5/26/99


N
80'
12"
14"
80'
22"
33"
80'
9'
500 GAL SINGLE
access Lid for Pumping 6" under ground
19'
1000 GAL SINGLE
access Lid for Pumping 6" under ground
14'