Book 2013 Page 943
Document 2013 GWH-943 Type 53 001 Pages 6
Date 3/14/2013 Time 10:46:33AM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Lexington Homes, LLC

Address 14984 230th Ave, Anamosa IA 52205

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

TRANSFEREE:

Name Gery Weydert

Address 301 Holt St., Anamosa IA 52205

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

Address of Property Transferred:
2639 231st Ave., Delhi, Iowa 52223

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

Legal Description of Property: (Attach if necessary) Lot Three (3) of First Addition to C. First's Addition, Delaware County, Iowa, according to the plat recorded in Book 6 Plats, Page 59.

1. **Wells (check one)**
   - X 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)**
   - 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.: (319) 462-3852

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

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

Property information

Current owner Janice Brown
Buyer Lexington Homes LLC Realtor
Mailing address Onamosa

Site Address/County 2639 - 231st AVE
Legal Description NW 1/4 Sec 29 T-88-N R-4-W

No. of bedrooms 1 Last occupied? unknown Records available yes

Permit/installation date 5-3-10 Separation distances ok/ no? ok

Septic system information

Septic tank(s): size material condition
Tank pumped? date licensed pumper
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfgr size
Tank pumped? date licensed pumper 347 Scott 563 920 7622
Maintenance contract? expiration date service provider
Condition

Pump tanks/vaults: type Holding Tank size 1500 gal Concrete condition New, Never USED

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

Secondary treatment:
length of absorption fields determined by
condition of fields determined by
type of trench material

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

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

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

Time of Transfer Inspection Worksheet

Other components:
Alarms yes Working? yes New 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 Installed 5-3-10

Explain (attach additional pages as needed):

Comments: Never occupied after Installation

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 Harbaugh Date: 6-6-12
Name (print): Scott Harbaugh Certificate #: 8915
Address: 9443 210 AVE Delhi, Ia. 52223
Phone # 563 920 7627

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

42.70665
DELAWARE COUNTY
BOARD OF SUPERVISORS — 91.34178 (Print or Type)

Pd cash
Permit No. 1786

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 2639 - 231st Ave Section 29 Township Delhi

LOCATION: NW¼ sec 29 T-88-N R-4-W

Owner: Janice Brown Tenant: _____ Plumber: Harbach

Lot Size: 75x75 Type Commercial: _____ Residential: (No. Bedrooms) _____

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

Septic Tank made by Swales Garbage Grinder _____ Construction Material Concrete Gallons Cap. 1500 gal - Holding with alarm

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

Absorption Field: Total length of laterals 0 No. of lateral lines 0

This system is new X Existing _____

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

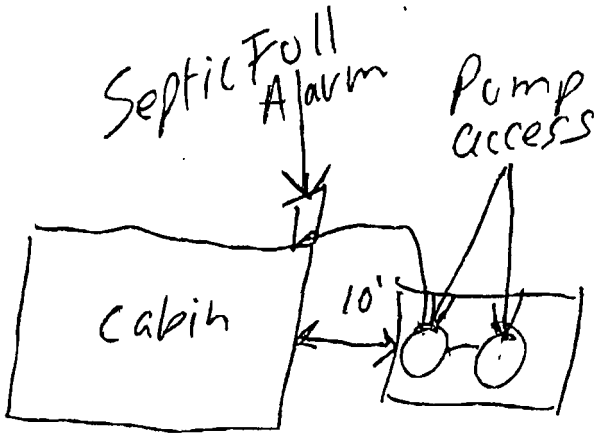
Date Approved 5-3-10

By _____
INSPECTOR

X Janice Brown
APPLICANT'S SIGNATURE

SEAL

220290102900



Call 563 920 7622 Scott Harbach
To Pump Septic Tank

SEWAGE DISPOSAL SYSTEM

INFORMATION

PERMIT NO: 1786

PLUMBER: Harbach

FINAL INSPECTION

APPLICANT: Janice Brown

LOCATION

ADDRESS: 2639 23rd Ave

PERCOLATION TESTS: #1 #2 #3 #4

SEPTIC TANK SIZE: 1500 COMPARTMENTS: 2

MANUFACTURER: Swales DEPTH:

DISTANCE FROM HOUSE: WELL:

DISTRIBUTION BOX: DEPTH: LEVEL:

DISTANCE FROM HOUSE: WELL:

TRENCH #1 LENGTH: WIDTH: DEPTH:

TRENCH #2 LENGTH: WIDTH: DEPTH:

TRENCH #3 LENGTH: WIDTH: DEPTH:

TRENCH #4 LENGTH: WIDTH: DEPTH:

5-4-2010

APPROVED X REJECT ( ) INSPECTED BY: Dennis Lee