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Document 2013 GWH-3794 Type 53 001 Pages 7
Date 12/09/2013 Time 11:51:00AM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

# REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

**TRANSFEROR:**

Name Theresa M. Oberreuter

Address 200 McCarren Drive, Manchester, Iowa 52057

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

**TRANSFEREE:**

Name Joshua C. Lahr

Address 2608 325th Street, Hopkinton, Iowa 52237

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

Address of Property Transferred:
3086 Hwy 13, Ryan, Iowa 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.
   - _✓_ 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. East of house
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: Theresa M Oberreuter (Transferor or Agent) Telephone No.: 927-8229

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

# Addendum

1. That part of the West fractional one-half (Wfr½) of the Southwest Quarter (SW¼) of Section Eighteen (18), Township Eighty Seven (87) North, Range Five (5), West of the Fifth P.M., described as commencing at the Northwest corner of said West fractional one-half (Wfr½), and running thence South one thousand nine hundred seventy one (1971) feet to the point of beginning, thence East three hundred thirty four (334) feet, thence North one hundred fifty (150) feet, thence West three hundred thirty four (334) feet, thence South one hundred fifty (150) feet to the point of beginning.

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

Property information

Current owner **Theresa Oberreuter**
Buyer **Josh Lahr** Realtor **F & G Realty**
Mailing address _____

Site Address/County **3086 Hwy 13 , Ryan, IA 52330**
Legal Description _____
No. of bedrooms **3** Last occupied? **12 Months ago** Records available **Yes**
Permit/installation date **7/2002** Separation distances ok/ no? **OK**

Septic system information

Septic tank(s): size **1250** material **concrete** condition **Good**
Tank pumped? **Yes** date **11/19/2013** licensed pumper **Groth Services LLC**
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfgr _____ size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Pump tanks/vaults: type **Concrete** size **500 gal.** condition **Good**

Distribution system: distribution box **concrete** outlets used **3** condition **Good**
Header pipe(s) **4** # of lines **4** Pressure dosed? **No**
Secondary treatment:
length of absorption fields **392'** determined by **Map**
condition of fields **Unknown** determined by **Could not perform Hydraulic Load Test**

type of trench material **Infiltrator System**

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? **No** permitted? _____ NOI provided _____

## Time of Transfer Inspection Report

Other components:
Alarms **2** Working? **Yes** disinfection _____ working? _____

Control box **Float control** Timers _____ inspection ports _____

Other components **Sewage pump is working properly** **Effluent filter cleaned and working**

Overall condition of the private sewage disposal system

Report system status **Everything looks good and working properly**

Explain (attach additional pages as needed) **See Attached Narrative Report**

Comments: _____

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: **11/19/2013**
Name (print): **Roger Groth** Certificate #: **8813**
Address: **1690 165th Street Manchester, IA 52057**
Phone # **563-927-5823**

**A copy of this report, the narrative report and sketch has been sent to the following by us:**

YES- seller/agent,
**NO- buyer/agent, please give them a copy**
YES- county sanitarian/environmental health office,
NO - closing attorney for seller
YES – Iowa DNR in Des Moines

# GROTH SERVICES LLC

**11-19-2013** **NARRATIVE INSPECTION REPORT**

Theresa Oberreuter
3086 Hwy 13
Ryan, IA 52330

**HOME DESCRIPTION:**

Ranch style, three bedroom home. All plumbing including basement floor drains connect to septic system. There is no sump pump connected to the septic system. There is a water softener and a kithen garbage disposal. .

**CONDITION:**

Basement plumbing is connected to a concrete 500 gal lift tank with a float operated sewage pump and high water alarm. Lift tank and septic tank have surface access risers. Septic tank is in good condition with very little gas damage. Septic tank was at normal operating level. The inlet and outlet baffles are in place and in good condition. The septic tank outlet has an effluent filter with alarm. Dug up and opened the plastic lined, concrete distribution box and found it in good condition with no septic sludge. I could not perform the hydraulic load test because the house has been vacant for nearly 12 months. The Soil absorption system looked relatively clean.

**This septic system inspection was conducted at 3086 Hwy 13, Ryan, IA on Nov. 19th 2013. The septic was also pumped out at the same date by us.**

**YES - this septic system does meet the Time of Transfer inspection criteria in it having secondary treatment.**

Tank capacity was verified by interior liquid measurements
(L x W x H = in. 3 x 0.00433 = US Gals)

***Company Disclaimer***

**Based on what we were able to observe and our experience with on-site wastewater technology, we submit this sanitary sewage disposal system inspection report based on the present condition of the on-site sewage disposal system. Groth Services LLC has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time in the future. Because of the numerous factors ( usage, soil characteristics, previous failures, etc.) which effect the proper operation of a septic system as well as the inability of our Company to supervise or monitor the use or maintenance of the system, this report shall not be construed as a warranty by our Company that the system will function properly for any particular buyer. Groth Services LLC DISCLAIMS ANY WARRANTY, either expressed or implied, arising from the inspection of the septic system or this report. We are also not ascertaining the impact the system is having on the ground water.**

**I have studied the information contained herein and that my assessment is honest, thorough, and to the best of my ability correct.**

**Certified by Roger Groth # 8813**

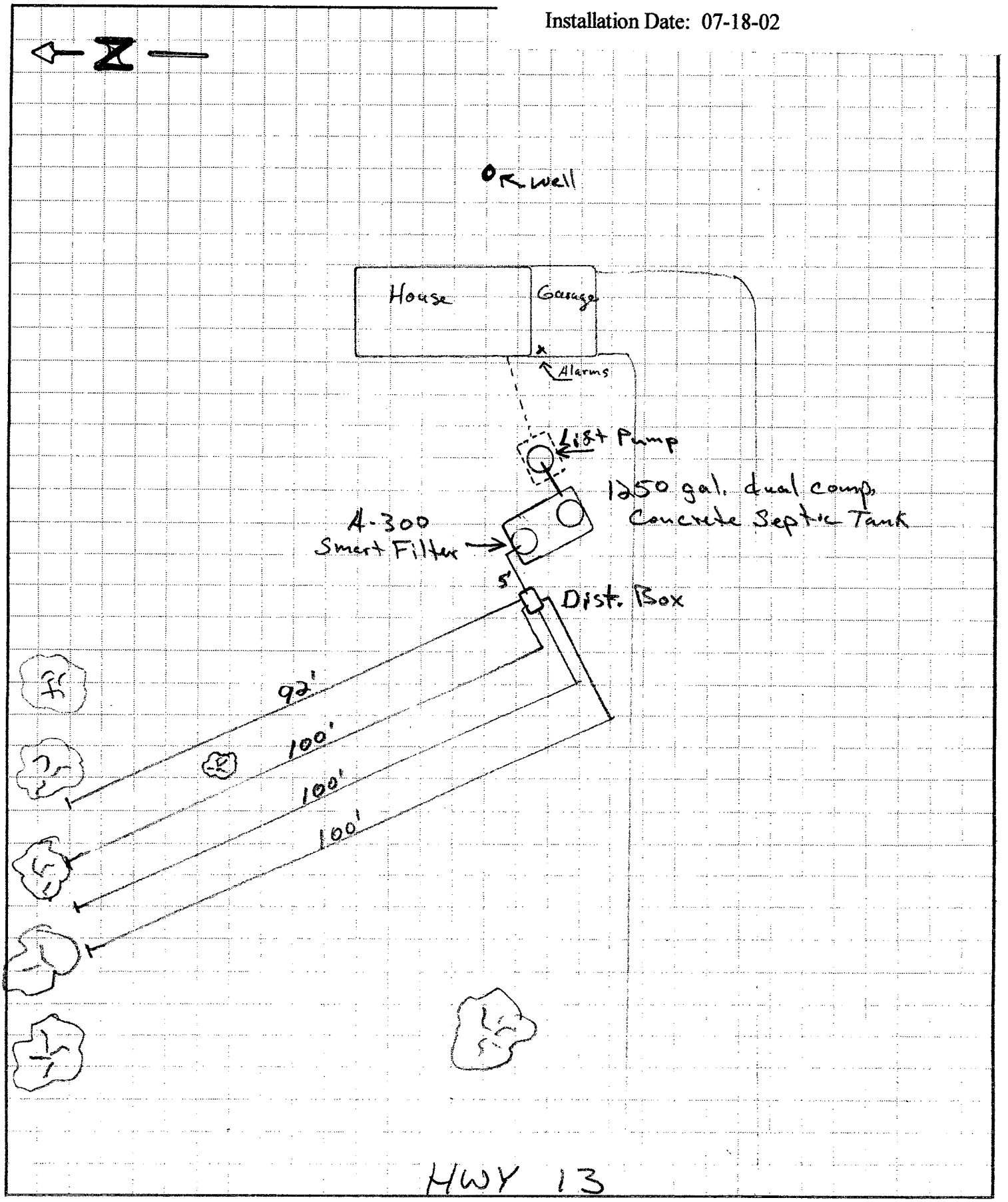
Roger Groth **DATE 11/19/2013**

GROTH SERVICES
1690 165TH ST.
MANCHESTER, IA. 52057

Theresa Oberreuter 563-932-2318
3086 Hwy. 13
Ryan, Ia. 52330

Deleware County- Hazel Green # 18

Installation Date: 07-18-02




PRODUCT 204-1 NEBS Inc., Groton, Mass. 01471.