Book 2014 Page 1338
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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 Daniel J. Hoeger and Donna Sue Hoeger

Address 2846 245th Street, Earlville, Iowa 52041

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

TRANSFEREE:

Name Benjamin J. Steffen

Address 218 1/2 NW Street, Earlville, Iowa 52041

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

Address of Property Transferred:
2965 230th Street, Earlville, Iowa 52041

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

Legal Description of Property: (Attach if necessary) Parcel 2014-17 part of the Southwest Quarter (SW¼) of the Southeast Quarter (SE¼), Section Five (5), Township Eighty-Eight North (T88N), Range Three West (R3W) of the Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 2014, Page 865.

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.
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:

Well located NE of house approximately 50 feet.

I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: X Daniel J. Hoegn (Transferor or Agent) Telephone No.: 563-923-2087

FILE WITH RECORDER

IOWA DEPARTMENT of NATURAL RESOURCES
TIME OF TRANSFER INSPECTION WAIVER
BINDING AGREEMENT for FUTURE INSTALLATION
542-0064

This agreement is entered into this 29th day of May ,20 14 by and between the Delaware County Board of Health and Ben Steffen

It is understood that Iowa Code 455B.172(11) requires an inspection of the private sewage disposal system on all properties not specifically exempted in Iowa at the time of transfer.

The property located at 2965-230th St. Earlville, Iowa is subject to the inspection, and the buyer Ben Steffen understands there is not an adequate private sewage disposal system serving this property.

It is hereby agreed that the time of transfer inspection will not be required and the buyer agrees that a code compliant private sewage disposal system or connection to a public sewer shall be installed to serve the property and shall be completed no later than 1st day of September ,20 14

Dated the 29th day of May ,20 14 .

Benjamin J Steffen
BUYER

Dennis Lyons
COUNTY BOARD OF HEALTH or
AUTHORIZED REPRESENTATIVE

This instrument was acknowledged before me on May 29 ,20 14

by Ben Steffen & Dennis Lyons

ANNE RAVE
Commission Number 757587
MY COMMISSION EXPIRES
MARCH 25, 2015

Anne Rave
Notary Public

2:30

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

Property information
Current Owner DAN Hogen
Buyer Ben Sickman Realtor
Mailing Address 2965 230th

Site Address/County 20005000/360

No. of Bedrooms 4 Last Occupied? Nov Disposal? Y (N) Softener? Y (N) H_2O Supply? well

Records Available NO Permit/Installation Date NO Installer NO

Septic System Information
Septic Tank(s): Size 900 gal Material Concrete Condition OK
Tank Pumped? Yes Date 5-18-14 Licensed Pumper 358
Septic/Trash/Processing Tank: Size Material Condition OK
Tank pumped? Yes Date 5-18-14 Licensed Pumper 358

Aerobic treatment unit (ATU) MFGR — Size
Tank Pumped? Date Licensed Pumper
Maintenance Contract? Expiration Date Service Provider
Condition

Pump Ttanks/Vaults: Type — Size Condition

Distribution System: Distribution Box NO Outlets Used Condition
Header Pipe(s) Number of Lines
Pressure Dosed?

Secondary Treatment
Length of Absorption Fields None 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 submitted

Time of Transfer Inspection Worksheet

Other Components

Alarms _____ Working? _____ Disinfection _____ Working? _____

Control Box _____ Timers _____ Inspection Ports _____

Other Components Need to Be up Dated

Overall condition of the private sewage disposal system

Acceptable? _____ Unacceptable? _____

Explain (attach additional pages as needed): Will Not PASS.

Comments: 900 gal TANK NO Fields Dumps to Road Ditch

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.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: 5-18-14

Name (print): Kobb Hanten Certficate #: 558

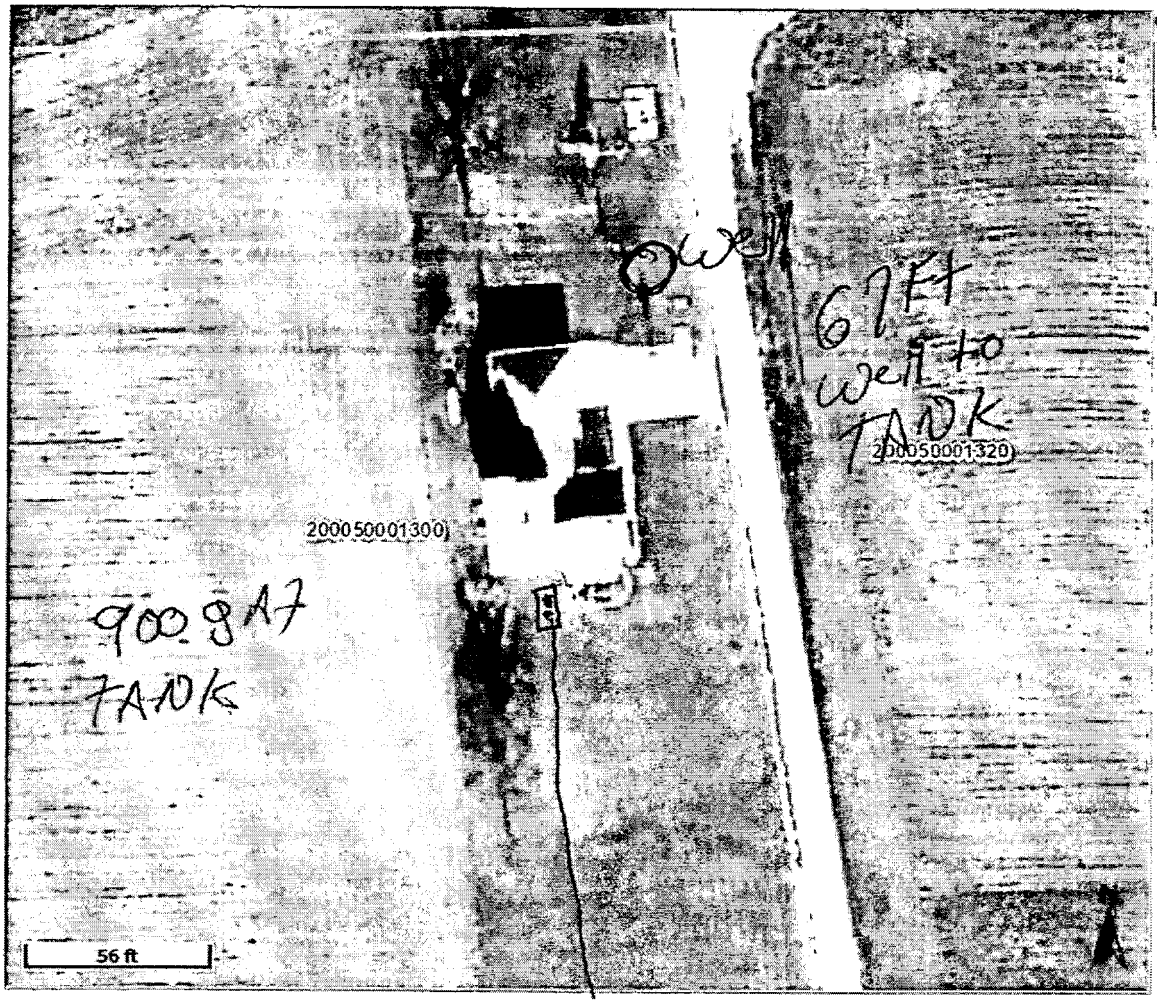
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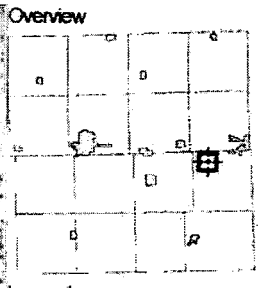
Phone # 563-547-1010

Delaware County, IA

beacon™

Date Created: 5/27/2014





Legend

- Corporate Limits
- Political Townships
- Parcels
- Roads

Parcel ID	200050001320	**Alternate ID**	n/a	**Owner Address**	Hoeger, Daniel J & Donna Sue
Sec/Twp/Rng	5-88-3	**Class**	A		2965 230th St
Property Address	2965 230TH ST EARLVILLE	**Acreage**	69.57		Earlville, IA 52041

District NORTH FORK

Brief Tax Description S 1/2 SE EX 2 AC SW COR & EX PARCEL 2014-17 PT SW SE

(Note: Not to be used on legal documents)

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