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Document 2014 GWH-1889 Type 53 001 Pages 5
Date 8/04/2014 Time 3:09:11PM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name John P. Kelchen and Brenda K. Kelchen

Address 18937 161st Avenue, Manchester, Iowa 52057

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

TRANSFEREE:

Name Donald L. Chappell and Muriel J. Chappell

Address 288 Susset Drive NE, Cedar Rapids, Iowa 52402

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

Address of Property Transferred:
18937 161st Avenue, Manchester, Iowa 52057

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

Legal Description of Property: (Attach if necessary) Lot Sixteen (16) of Prairie Hill Estates, a Subdivision of Parcel C and E in the Southwest Quarter of Section 18, and Parcel C in the Northwest Quarter of Section 19, Township 89 North, Range 5, West of the 5th P.M., according to plat recorded in Book 1999, Page 1731.

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. shared well; located 2 houses to the west of ours.
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: Brenda Kelchen (Transferor or Agent) Telephone No.: 563-920-7303

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

Property information

Current owner John Kelchen
Buyer _____ Realtor F & M Iowa Realty
Mailing address 18937 161st. Manchester IA 52057

Site Address/County 18937 161st Manchester IA 52057
Legal Description _____

No. of bedrooms 4 Last occupied? Presnt. Records available Yes

Permit/installation date 933/10/30/2000 Separation distances ok/ no? ok

Septic system information

Septic tank(s): size 1500 material Concrete condition Good
Tank pumped? Yes date _____ licensed pumper St 49
Septic/trash/processing tank: size N/A material N/A condition N/A
Tank pumped? N/A date N/A licensed pumper N/A

Aerobic treatment unit (ATU) mfgr N/A size N/A
Tank pumped? N/A date N/A licensed pumper N/A
Maintenance contract? ____ expiration date N/A service provider N/A
Condition N/A

Pump tanks/vaults: type N/A size N/A condition N/A

Distribution system: distribution box Yes outlets used 5 condition Good
Header pipe(s) - # of lines - Pressure dosed? No

Secondary treatment:
length of absorption fields 300' determined by Permit
condition of fields below average - determined by Hydraulic load test
type of trench material Intrator -

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

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

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

Time of Transfer Inspection Worksheet

Other components:
Alarms N/A Working? N/A disinfection N/A working? N/A

Control box N/A Timers N/A inspection ports N/A

Other components _____

_____

Overall condition of the private sewage disposal system

Report system status Separate sheet

Explain (attach additional pages as needed): _____

_____

Comments: _____

_____

_____

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: _____ Date: 7/17/2014
Name (print): Lula Ogden Certificate #: 6715
Address: 17120 165th St.
Phone # 563-927-6503

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.** 731

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 15937 161st Ave. Section 18 Township Delaware

LOCATION: E/2 SW 1/4 SW 1/4 Sec 18 T89N R5W Lot 10

Owner: John Kuecker Tenant: _____ Plumber: Bud Abbott

Lot Size: 165 x 296 Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Stools 4 Lavatories 4 Bath Tubs 2 Showers 1 Sinks 2 Automatic Laundry 1 Sump Pump _____

Septic Tank made by: Sav-A-Lite Garbage Grinder No Construction Material Concrete Gallons Cap 1050

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

Absorption Field: Total length of laterals 300 No. of lateral lines 3 x 5

This system is new ✓ Existing _____ 300' trenches

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 10-30-01

By Connie Reber
INSPECTOR

APPLICANT'S SIGNATURE

SEAL

