Book 2014 Page 2585
Document 2014 GWH-2585 Type 53 001 Pages 9
Date 10/14/2014 Time 11:56:01AM
Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Vernon N. Schaff Lynnette M. Schaff

Address 5815 STOP 58 A, ZAPATA, TX 52057
Number and Street or RR City, Town or P.O. State Zip

TRANSFEREE:

Name Sasha M. Veenstra Kyle E. Veenstra

Address 16837 Prairie Drive, Clive, IA 50325
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
24988 208th Avenue, Manchester, IA 52057
Number and Street or RR City, Town, or P.O. State Zip

Legal Description of Property: (Attach if necessary)
See attached legal description

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.

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

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 _____.

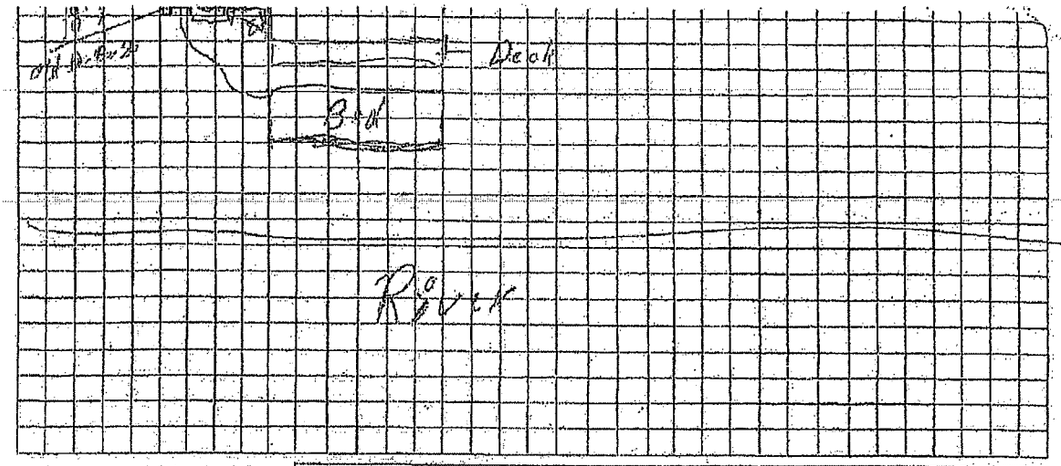
Information required by statements checked above should be provided here or on separate sheets attached hereto:

Well is located - 25 feet Northwest of the shop
Well # Z102928
Well type is 135 foot deep well

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.: (563) 927-2842

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



List any construction issues:

Mapping Checklist

Map scale: _____ ___ indicate north ___ show slope _____ % direction ___

Locate
- ☐ Lot Dimensions/Property Lines
- ☐ Dwellings and Other Improvements
- ☐ Existing or Proposed System(s)
- ☐ Replacement Area
- ☐ Unsuitable Area(s)
- ☐ Public Water Supply Wells
- ☐ Pumping Access
- ☐ Inner Wellhead Zone

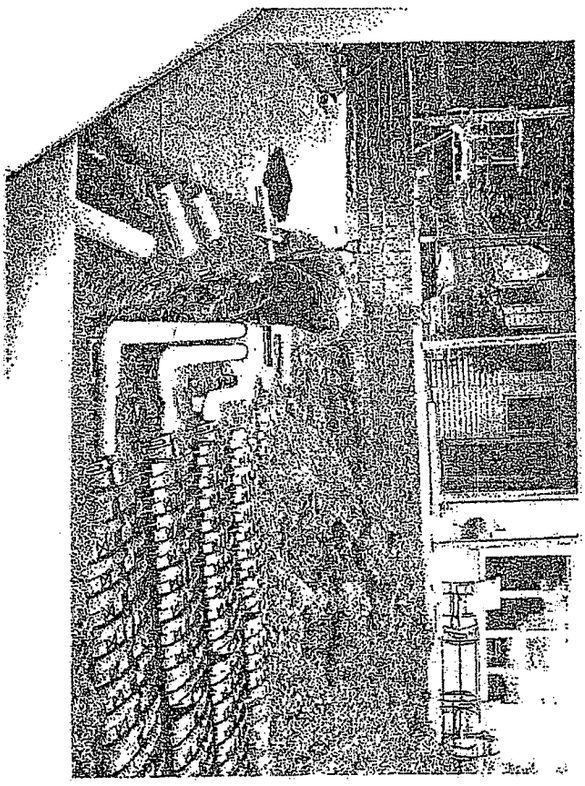
Easements
- ☐ Phone
- ☐ Electric
- ☐ Gas

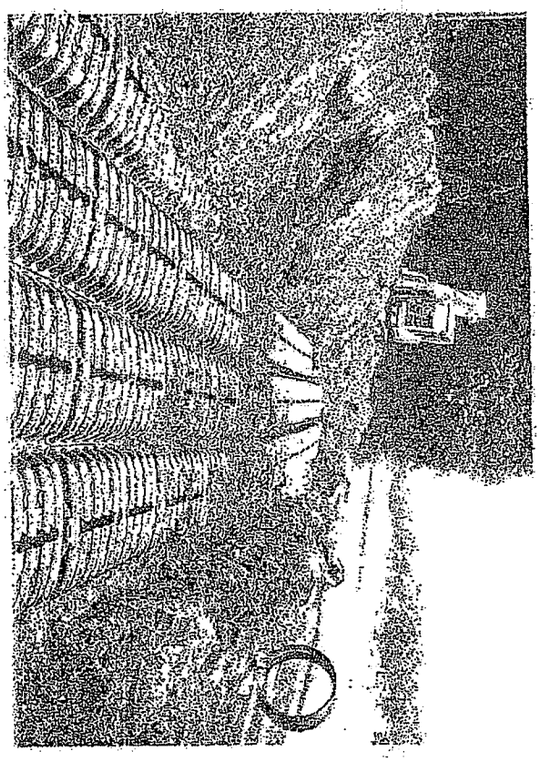
Elevations
- ☐ Benchmark
- ☐ Borings
- ☐ Perc Tests
- ☐ Horizontal and Vertical Reference Points

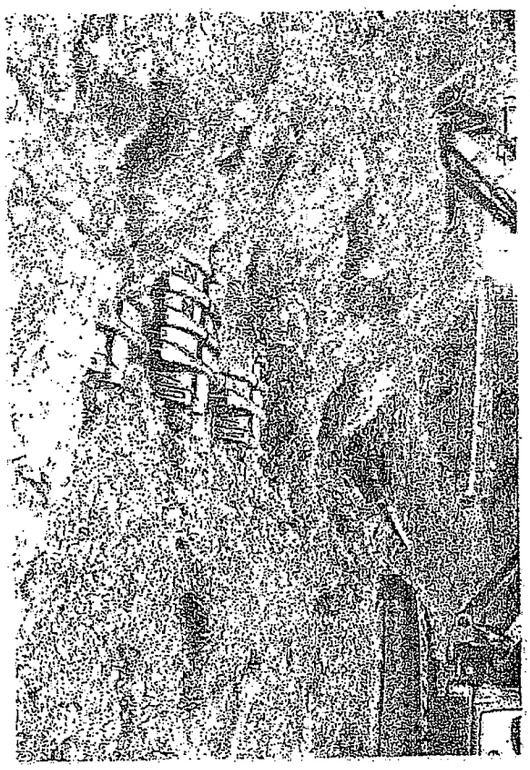
Setbacks
- ☐ Building
- ☐ All water wells within 100 feet
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines

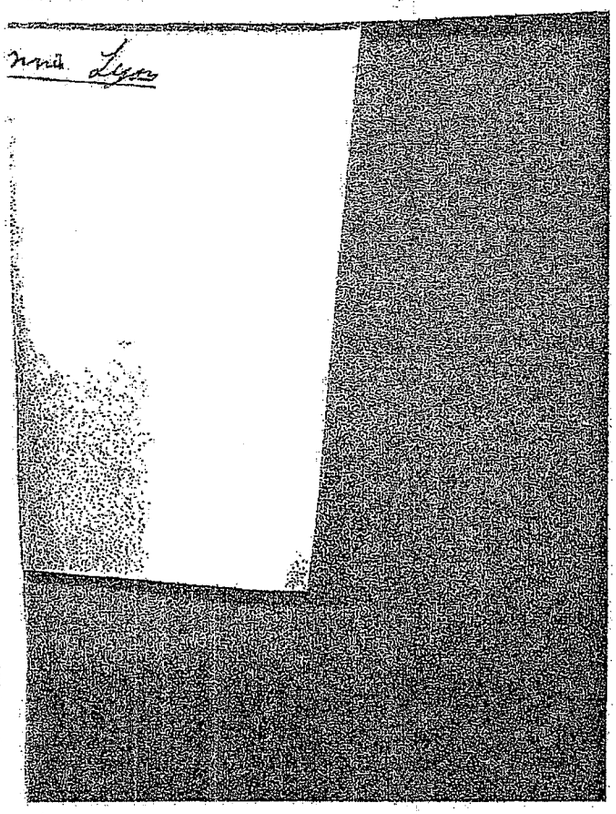
I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

(Designer)	(Signature)	(License #)	(Date)








Innd. Lyse

542-0191

Time of Transfer Inspection Report

Property Information

Current Owner: Vern and Lynnette Schaff

Buyer Kyle and Saha Veenstra Realtor: Coldwell Banker (Hedges Realty)

Mailing Address:

Site Address/County: 24988 208th Ave.

Legal Description

No. of bedrooms: 4 Last occupied: current Records available: yes

Permit/ installation date: Separation distances (ok/no?): ok

Septic System Information

Septic tank(s): Size: 1500 Gal. Material: concrete Condition: good

Tank pumped? ☒ Y ☐ N Date: 08/11/14 Licensed pumper: Welu Pumping

Septic/Trash/Processing tank: Size: Material: Condition:

Tank pumped? ☐ Y ☐ N Date: Licensed pumper:

Aerobic treatment unit (ATU) mfgr Size

Tank pumped? ☐ Y ☐ N Date: Licensed pumper:

Maintenance contract? ☐ Y ☐ N Expiration date: Service provider

Condition:

Pump tanks/vaults: Type: Size: Condition:

Distribution system: Distribution box yes Outlets used 6 Condition: good (NEW)

Header pipe(s): No. of lines: 6 Pressure dosed?

Secondary Treatment:

Length of absorption fields: 60 feet Determined by: replaced field

Condition of fields: good (NEW) Determined by:

Type of trench material: Domes

Size of sand filter: Determined by:

Vent pipes above grade? ☐ Y ☐ N Discharge pipe located? ☐ Y ☐ N

Effluent sample taken Results:

Media Filters: Type:

Maintenance contract? ☐ Y ☐ N Expiration date: Service provider:

Condition:

NPDES General Permit No. 4: Required? [redacted] Permitted? [redacted] NOI provided:

542-0191

Time of Transfer Inspection Report

Other components:

Alarms: ☐Y☐N Working: ☐Y☐N Disinfection: ☐Y☐N Working: ☐Y☐N

Control Box: ~~working~~ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system: Good

Report system status: _____

Explain (attach additional pages as needed): At the time of inspection the old letch field had failed the HYD. Test . A new Field was installed.

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: Jody Antrim Date: 08/11/14

Name (print): Jody Antrim Certificate #: 8874

Address: 20984 265th St. Manchester Ia. 52057

Phone #: 563-920-9388

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, the county recorder and to:

Iowa DNR Onsite Wastewater Program
502 E 9th St
Des Moines IA 50319

New Line

SEWAGE DISPOSAL FINAL INSPECTION

PERMIT NO: 2282 APPLICANT: Schaff

PLUMBER Antrim SITE ADDRESS 24988

SEPTIC TANK SIZE NA EFFLUENT FILTER INPLACE Yes

MANUFACTURER NA DEPTH 6" Yes

DISTANCE TO STRUCTURE OR HOME NA DISTANCE FROM WELL 7100

DISTRIBUTION BOX: DEPTH 6" top IS IT LEVEL AND SECURE Yes

DISTANCE FROM HOUSE OR STUCTURE 27' - house - 18'

DISTANCE FROM WELL 7100

TRENCH # 1 LENGTH _____ WIDTH _____ DEPTH _____

TRENCH # 2 LENGTH _____ WIDTH _____ DEPTH _____

TRENCH # 3 LENGTH _____ WIDTH _____ DEPTH _____

TRENCH # 4 LENGTH _____ WIDTH _____ DEPTH _____

18x60 - Infiltrator ITEMS IF APPLICABLE

IS ANY ELECTRICAL ITEMS DONE TO CODE NA

ARE ALL BAFFLES IN CORRECT Yes

DOES HOMEOWNER HAVE DRAWING AND UNDERSTAND THE USE OF EFFLUENT FILTER - Yes

IF TRENCHES USED DID THEY STOMP DOWN THE SIDES WITH DIRT

IF A SAND FILTER IS INSTALLED IS IT VENTED

ANY CONCERNS BY INSPECTOR _____

APPROVED (Y) REJECTED ( ) WHY ( ) INSPECTED BY Donna Ligon

DATE 8-11-14

DELAWARE COUNTY

BOARD OF SUPERVISORS

New Lines only

PERMIT NO. 2282

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 24988 - 208th Ave Manchester SECTION 14 TOWNSHIP Milo

LOCATION QT ___ QT ___ SEC 14 T 88 N R 5 W Parcel# ___

Owner Vern Schaff Plumber Austin

Lot size ___ Type Commercial ___ Residential (No. Bedrooms) 4

Fixtures: Stools 3 Bath tubs ___ Showers 3 Sinks 5 Automatic Laundry 1 Lift Pump ___

Septic tank made by NA Construction Material ___ Gallon Cap. ___ Garbage disposal ___

Absorption Field: Total length of Laterals ___ No. of lateral lines ___ Size of leach bed 1000 Sq ft

Trench Material chambers Secondary Treatment Type ___

This system is new construction ___ Existing X

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

Date Approved 8-7-14

By Dennis Lyon

INSPECTOR

[signature]

APPLICANT'S SIGNATURE

No change
rado - Bed

Attachment

Lot Six (6) of Logan's Second Subdivision of Part of the South one-half (S½) of Section Fourteen (14) and Part of the Northeast Quarter (NE¼) of Section Twenty Three (23), Township Eighty Eight (88) North, Range Five (5), West of the Fifth Principal Meridian, according to plat recorded in Book 4 Plats, Page 55; also all the lake frontage running to the middle of theMaquoketa River bed, with respect to said Lot Six (6) also per replat in Bk 1999 Page 2835.