Book 2015 Page 1427

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Rec Amt $.00

DEBORAH L PEYTON, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name STEPHEN M. WINTER AND REBA K. WINTER

Address	4200 WHITE BIRCH DRIVE NE	CEDAR RAPIDS	IA	52411
	Number and Street or RR	City, Town or PO	State	Zip

TRANSFEREE:

Name GREGORY M. MERTA AND KELLY L. MERTA

Address	3456 LENNON LANE	MARION	IA	52302
	Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

26249 215TH AVENUE	DELHI	IA	52223
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

SEE ATTACHED EXHIBIT "A"

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.

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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.

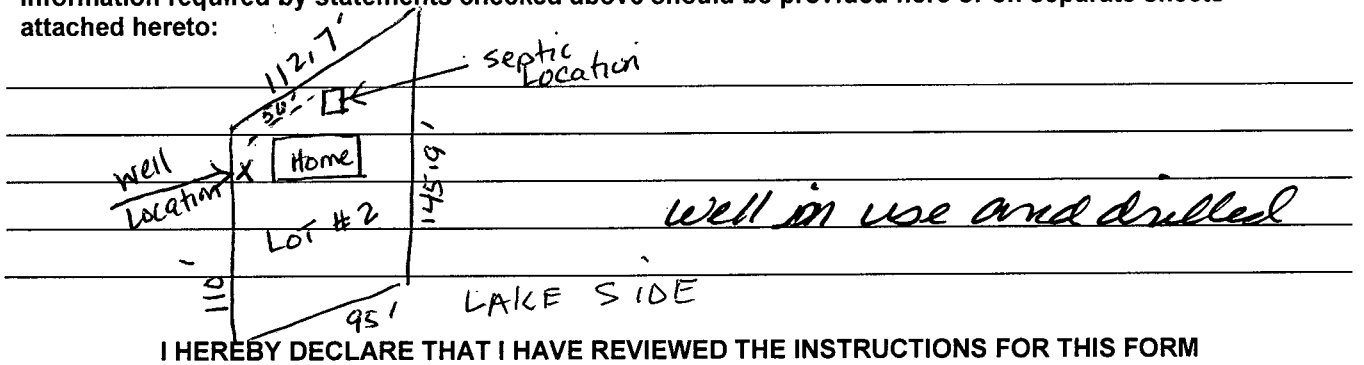
Signature: _____ (Transferor or Agent) Telephone No.: 319-431-8713

STEPHEN M. WINTER

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



well in use and drilled

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

Signature: _____ Telephone No.: 563-542-1010
(Transferor or Agent)

Robb Harter, Harter septic service

FILE WITH RECORDER

DNR Form 542-0960 July 18th 2012 cmz

Exhibit A

LOT TWO (2) OF TURTLE CREEK HEIGHTS ADDITION TO DELAWARE COUNTY, IOWA ACCORDING TO THE PLAT RECORDED IN BOOK 2 PLATS, PAGE 190; SAME BEING A PART OF THE SOUTHEAST QUARTER (SE¼) OF THE NORTHWEST QUARTER (NW¼) AND OF THE SOUTHWEST QUARTER (SW¼) OF THE NORTHEAST QUARTER (NE¼) OF SECTION TWENTY FIVE (25), TOWNSHIP EIGHTY EIGHT (88) NORTH, RANGE FIVE (5) WEST OF THE FIFTH PRINCIPAL MERIDIAN SUBJECT TO COVENANTS, RESTRICTIONS AND EASEMENTS OF RECORD. TOGETHER WITH THE RIGHT TO USE FOR DRIVEWAY PURPOSES A 30 FOOT WIDE PRIVATE DRIVE WHICH IS PLATTED AS PART OF SAID ADDITION AND THE RIGHT TO USE FOR DRIVEWAY PURPOSES A 30 FOOT STRIP OF LAND FROM SAID PRIVATE DRIVE ABOVE DESCRIBED TO THE DELAWARE COUNTY ROAD KNOWN AS TURTLE CREEK ROAD WHICH LAYS EAST OF SAID PRIVATE DRIVE, SAID 30 FOOT STRIP OF LAND FROM SAID PRIVATE DRIVE LAYING WITHIN THE SW¼ NE¼ OF SECTION 25, TOWNSHIP 88, NORTH, RANGE 5, WEST OF THE 5TH P.M. GRANTORS FURTHER QUIT CLAIM TO GRANTEE ALL OF THEIR RIGHT TITLE AND INTEREST IN AND TO ALL LAKE FRONTAGE RUNNING TO THE MIDDLE OF THE MAQUOKETA RIVER ADJACENT TO THE ABOVE DESCRIBED PREMISES. THE WARRANTIES OF TITLE CONTAINED HEREIN DO NOT APPLY TO THIS LAKE FRONTAGE.

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

Property information
Current Owner Steve Winter
Buyer — Realtor Not Sold Yet
Mailing Address
Site Address/County 26249 215th Ave Delhi

No. of Bedrooms 2 Last Occupied? — Disposal? Y (N) Softener? Y (N) H_2O Supply? well

Records Available y/es Permit/Installation Date July 2008 Installer Harter

Septic System Information
Septic Tank(s): Size 1500 Material Concrete Condition good
Tank Pumped? yes Date 5-1-15 Licensed Pumper 358
Septic/Trash/Processing Tank: Size — Material — Condition good
Tank pumped? yes Date 5-1-15 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 Outlets Used Condition
Header Pipe(s) Number 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 submitted

Time of Transfer Inspection Worksheet

Other Components

Alarms Yes Working? Yes Disinfection _____ Working? _____

Control Box _____ Timers _____ Inspection Ports _____

Other Components _____

Overall condition of the private sewage disposal system

Acceptable? Yes Unacceptable? _____

Explain (attach additional pages as needed): _____

THIS IS A HOLD TANK

Comments: WILL NEED TO BE PUMP WHEN THE ALARMS GO OFF

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: Todd Hafer Date: 5-1-15
Name (print): Todd Hafer Certificate #: 758
Address: 5031 160th Dyersville IA
Phone # 563-542-1618

Harter Custom Pumping, Inc & Septic Service

Robb Harter * Owner/ Operator
3031 160th Street Dyersville, IA 52040 * 563-875-8730 or 563-542-1010

****

Homeowners:
Steve & Robb Winter
26249 215th Ave
Delhi 52223 IA

Age of Property
_____
Occupied
Yes or (No)

Inspection Co:
Robb Harter
3031 160 St Dyersville

Date of Inspection: 5-1-15

Does this evaluation/inspection meet the requirements of state and local agencies? Yes ✓ No ___ N/A ___

Section 1:

Location of the system: (East) West North South
Was Water run into the system for 30 minutes? Yes (No)
Does the septic tank have a visible riser? (Yes) No
Estimated size of tank 1500 Gallons *Basis for estimate*
What is the separation between well and septic? 56 FT
Does the separation of the well and septic meet local requirements? Yes No N/A

Section2: Disposal Field

Any evidence of malfunction No Yes (Please check all applicable observed conditions)
___ Wet Areas ___ Unusual green/lush vegetation
___ Liquid Discharges to surface ___ Discharge pipe of unknown origin
___ Localized surface settling ___ Other (Describe below)

Septic Tank:

Septic tank material ✓ Concrete Fiberglass Other
Liquid Level in tank Normal Below Normal Above Normal
Access opening in tank ✓ One Two Three None
Number of risers One Two Three None
Condition of baffles and or sanitary tees:
Inlet baffle or "T" ✓ Present and functional Not functional None present Not Visible
Outlet baffle or "T" ✓ Present and functional Not functional None present Not Visible
Tank was pumped ✓ Yes No (if no please explain below
Is system adequately sized for # of Bedrooms ✓ Yes No # of Bedrooms: ___
Is system adequately sized for # of Bathrooms ✓ Yes No # of Bathrooms: ___
System working Properly ✓ Yes No (if no please explain below)

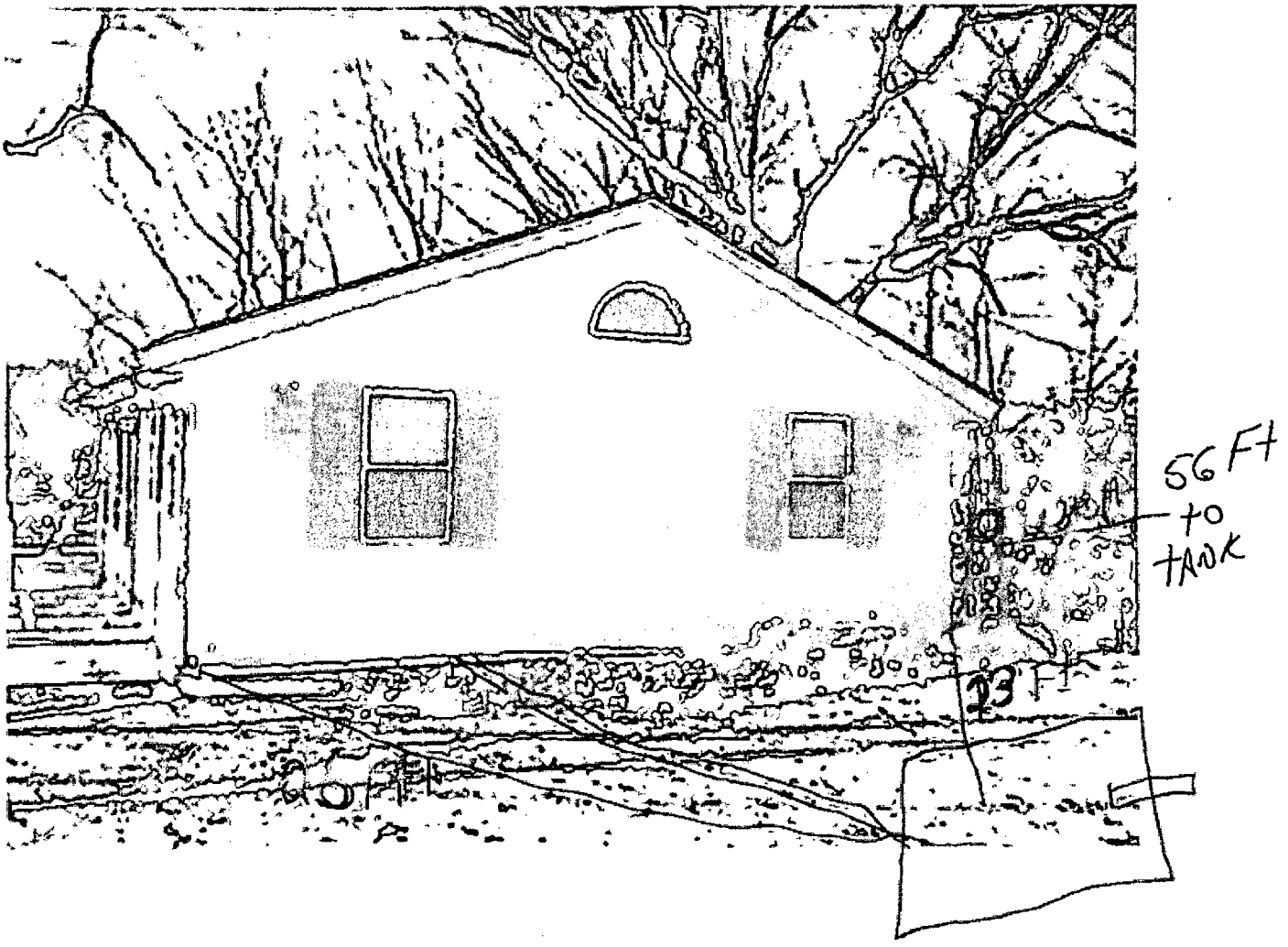
Additional Comments / Repairs needed:

THIS IS A Hold TANK.

Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.
This report comments on the workability of the system on the day of the inspection only, and is in no way intended to be a warranty.
Workability can be altered by factors such as excessive rainfall, heavy water usage, faulty plumbing, neglect or physical damage to the system. All tanks require pumping maintenance.

Inspected by : [signature]

Date: 5-1-15



TANK HAS A ALARM in it.