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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT
TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name James Francis Funke and Elaine M. Funke

Address	Number and Street or RR	City, Town or PO	State	Zip
	1052 Laser Rd	Edgewood	IA	52042

TRANSFEREE:

Name Farm Credit Leasing Services Corporation

Address	Number and Street or RR	City, Town or PO	State	Zip
	600 Highway 169 South, Suite 300	Minneapolis	MN	55426

Address of Property Transferred:

Number and Street or RR	City, Town or PO	State	Zip
1052 Laser Rd	Edgewood	IA	52042

Legal Description of Property: (Attach if necessary)

See Exhibit B

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)**
   - [x] 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: James Francis Funke (Transferor or Agent) Telephone No.: (563) 920-0600

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FARM CREDIT LEASING

600 Highway 169 South, Suite 300
Minneapolis, MN 55426

Exhibit A

Contract No: 001-0067511-000

Dated As Of: December 04, 2014

This Exhibit A is made a part of that Landlord and Mortgagee Waiver, Facility Lease Agreement, and Interim Funding Agreement referencing the Contract number indicated above.

Asset #	Cond	Qty	Year	Manufacturer	Model	Description	Serial No
79648	New	1	2014	CUSTOM	60' x 100'	Pole Building	NA

Description of the Facility:

79648	One (1) 2014 Custom 60' x 100' Pole Building together with all attachments, components, and accessories including but not limited to: Four (4) Windows; Two (2) Walk Doors

FARM CREDIT LEASING
600 Highway 169 South, Suite 300
Minneapolis, MN 55426

Exhibit B

Contract No: 001-0067511-000

Dated As Of: December 04, 2014

This Exhibit B is made a part of that Landlord and Mortgagee Waiver, Facility Lease Agreement, and Interim Funding Agreement referencing the Contract number indicated above.

Legal Description of the Property

The following property in the County of DELAWARE, State of IA:

Parcel ID:

Parcel K in Lot 5 in the NW 1/4 of SE 1/4 of Section 2, Township 90 North, Range 5 West of the 5th P.M. Delaware County