Book 2015 Page 2108
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Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Terry L. Smith Revocable Trust

Address 302 3rd Ave SE Cedar Rapids, IA 52401

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

TRANSFEREE:

Name Nancy Hurt

Address 710 Albert St Lamont, Iowa50650

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

Address of Property Transferred:

26030 226th Ave Delhi, Iowa

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

Legal Description of Property: (Attach if necessary) See Attached Exhibit "A"

1. **Wells (check one)**
   - X 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.
   - X 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)**
   - X 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)**
   - X 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)**
   - 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: _____ Telephone No.: (319) 286-6243
(Transferor or Agent)

GROUNDWATER HAZARD STATEMENT

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

a. Solid Waste Disposal (check one)

X There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.

___ There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

b.. Hazardous Wastes (check one)

___ There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.

___ There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

_____

_____

_____

_____

_____

_____

_____

_____

_____

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) 286-6243

Lot No. 3 on a Plat of H.L.C. First Subdivision of part of the Northwest Quarter (NW 1/4) of the Northeast Quarter (NE 1/4) of Section Thirty (30), Township Eighty Eight (88) North, Range Four (4), West of the 5th P.M., subject to perpetual usage flowage rights of record, according to plat recorded in Book 3, page 46 of the Office of the Delaware County, Iowa, Recorder, together with all easements and servient estates appurtenant thereto, and subject to Protective Covenants and Restrictions recorded in Book P, page 203, in the Office of the Delaware County, Iowa, Recorder, and subject to any later modifications of said covenants and restrictions and said plat.

and

The South fifty five feet of that part of the NW Quarter of the NE Quarter of Section 30, Township Eighty Eight North, Range 4, West of the 5th P.M., described as follows: Commencing at a point marked "point of beginning" on a plat of H.L.C. First Subdivision of part of the Northwest Quarter (NW 1/4) of Section Thirty (30), Township Eighty-Eight (88) North, Range Four (4), West of the Fifth P.M., according to plat recorded in Book 3, page ~~43~~ 46 of the office of the Delaware County, Iowa, Recorder; thence North 88°-08' West 16 feet; thence northerly to a point South 88°-08' East 350.1 feet from the northwest corner of the Northwest Quarter (NW 1/4) of the Northeast Quarter (NE 1/4) of said Section Thirty (30); thence South 90°-38' East 150.0 feet to the point of beginning; subject to all highways and easements of record.

also:

The Southerly 55 feet of that part of the Northwest Quarter (NW 1/4) of the Northeast Quarter (NE 1/4) of Section Thirty (30), Township Eighty Eight (88) North, Range Four (4), West of the Fifth Principal Meridian described as commencing at a point that is South 88° 08' East three hundred fifty and one-tenth (350.1) feet of the Northwest corner of said Northwest Quarter (NW 1/4) of the Northeast Quarter (NE 1/4), and running thence South 88° 08' East approximately two hundred sixty eight and five tenths (268.5) feet to the low water line of the Maquoketa River, thence South 1° 52' West one hundred forty seven and nine-tenths (147.9) feet along said low water line, thence North 88° 08' West approximately two hundred thirty eight and fifty nine one-hundreds (238.59) feet, thence North 9° 38' West one hundred fifty (150.0) feet to the point of beginning, subject to perpetual usage flowage rights of record.

Subject nevertheless to easements, covenants, conditions and restrictions of record.

EXHIBIT "A"

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

Property information

Current owner Terry Smith Revocable Trust
Buyer Nancy Hurt Realtor
Mailing address

Site Address/County 26030 226th Ave Delhi Iowa
Legal Description

No. of bedrooms 2 Last occupied? Present Records available No

Permit/installation date N/A Separation distances ok/ no? ok

Septic system information

Septic tank(s): size material Concrete condition Fair
Tank pumped? Yes date 5/28/15 licensed pumper SL 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? N/A 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 No outlets used — condition —
Header pipe(s) Yes # of lines 2 Pressure dosed? No

Secondary treatment:
length of absorption fields 2 @ 35' determined by Probe
condition of fields Good determined by Hydraulic load test
type of trench material Rock + Pipe

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 N/A

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: 5/28/15
Name (print): Luke Ogden Certificate #: 6715
Address: 17120 185th St. Manchester IA.
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

OASIS PUMP SERVICE
1332 N. Franklin, Manchester, Iowa 52057
563-927-6503 888-666-6503
www.oasiswell.com

Septic Inspection
Terry Smith Revocable Trust
26030 226th Ave.
Delhi, IA 52223

On May 4, 2015 a septic inspection was performed at the above address.

House Description:

The house consists of 3 bathrooms, 2 bedrooms and is approximately 1248 sq. feet on the main floor, on a ½ acre lot. Property does have a water softener.

Septic Description:

Septic Tank is a 750 gallon single compartment concrete tank with 2 – 35' leach lines. Outlet baffle is in good condition and inlet baffle is not accessible due to it being under a deck and concrete patio.

Septic Condition:

Septic System is in fair condition. Inlet Baffle is in unknown condition. Hydraulic load test was performed at 7 GPM for 62 minutes, total of 434 gallons of water. System accepted the water very well. Leach field is at an approximate depth of 2½'.

Company Disclaimer

Based on what we were able to observe and our experience with on-site wastewater technology, we submit this sanitary sewage disposal system inspection report based on the present condition of the on-site sewage disposal system. Oasis Pump Service has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time in the future. Because of numerous factors (usage, soil characteristics, previous failures, etc.) which effect the proper operation of a septic system as well as the inability of our Company to supervise or monitor the use or maintenance of the system, this report shall not be constructed as a warranty by our Company that the system will function properly for any particular buyer. Oasis Pump Service **DISCLAIMS ANY WARRANTY**, either expressed or implied, arising from the inspection of the septic system or this report. We are also not ascertaining the impact the system is having on the ground water.

I have studied the information contained herein and that my assessment is honest, thorough, and, to the best of my ability correct.

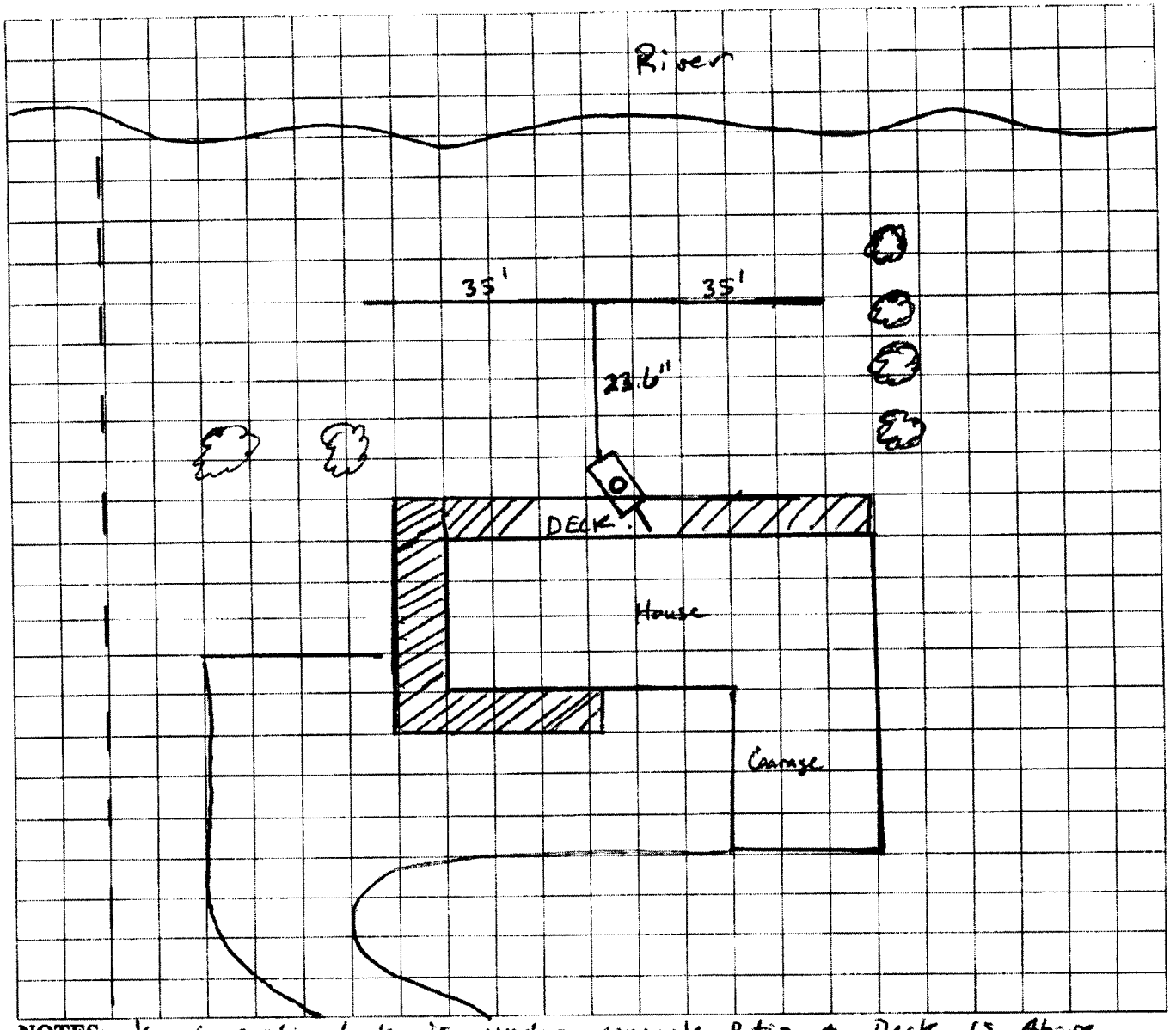
Certified by Luke Ogden #6715

Luke Ogden T.O. **Date** 5/28/15

Owner: **Terry Smith Revocable Trust 26030 226th Ave. Delhi, IA 52223**

OASIS PUMP SERVICE
1332 N. Franklin, Manchester, Iowa 52057
563-927-6503 888-666-6503
www.oasiswell.com

OWNER: Nancy Hurt / Terry Smith Trust **DATE:** 5/4/15
SITE ADDRESS: 26030 226th Ave Delhi IA **TOWN/COUNTY:** Delhi / Delaware Co.
GPS: Long: -91.355437 Lat: 42.41737
TANK SIZE: Plastic **OR** (Concrete) **D-~~BOX: 7 or 9~~** **OUTLETS USED:** No
SECONDARY TREATMENT: 2 - leach line @ appx 35' each



NOTES: ½ of septic tank is under concrete Patio & Deck is Above Concrete Patio.