

Book 2016 Page 1438
Document 2016 GWH-1438 Type 53 001 Pages 6
Date 6/06/2016 Time 2:57:56PM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Heidi A. Hansel

Address 3340 Mulberry Drive, Marion, Iowa 52302

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

TRANSFEREE:

Name Jon F. Beyer

Address 20484 254th Street, Delhi, Iowa 52223

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

Address of Property Transferred:
20484 254th Street, Delhi, Iowa 52223

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)**
   - ___ 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.

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:

(1) functional well located approx 10 yards North of garage

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) 431-3651~~ 563-927-4164

EXHIBIT "A"

LOTS THIRTEEN (13) OF LAKE VIEW FIRST ADDITION TO DELAWARE COUNTY, IOWA, ACCORDING TO PLAT RECORDED IN BOOK 6 PLATS, PAGE 42, SUPERSEDED BY PLAT RECORDED IN BOOK 6 PLATS, PAGE 55, SUBJECT TO ALL COVENANTS, RESTRICTIONS AND EASEMENTS OF RECORD

AND

AND THIRTEEN-A (13A) OF LAKE VIEW FIRST ADDITION TO DELAWARE COUNTY, IOWA, ACCORDING TO PLAT RECORDED IN BOOK 6 PLATS, PAGE 42, SUPERSEDED BY PLAT RECORDED IN BOOK 6 PLATS, PAGE 55, TOGETHER WITH GRANTORS INTEREST IN A 50-FOOT INGRESS AND EGRESS EASEMENT ACROSS THE NE ¼ OF SECTION 23-T88N-R5W OF THE 5TH P.M., DELAWARE COUNTY, IOWA, WHOSE CENTERLINE IS DESCRIBED AS FOLLOWS: COMMENCING AS A POINT OF REFERENCE AT THE SE CORNER OF SAID NE ¼ (E ¼ CORNER); THENCE N89°37'53"W ALONG THE SOUTH LINE OF SAID NE ¼, 577.63 FEET; THENCE N00°00'00"E, 585.29 FEET TO THE CENTERLINE OF A COUNTY ROAD AND THE POINT-OF-BEGINNING; THENCE S86°12'43"E, 464.73 FEET; THENCE N71°31'07"W, 140.30 FEET; THENCE S56°49'20"E, 225.44 FEET; THENCE N77°19'12"W, 224.51 FEET; THENCE S80°19'36"W, 501.23 FEET TO THE END OF THE CENTERLINE OF THE EASEMENT, SAID END BEING S15°58'45"E, 25.15 FEET OF THE NE CORNER OF LOT 8 LAKE VIEW FIRST ADDITION TO DELAWARE COUNTY, IOWA.

AND

ALSO PARCEL V, PART OF LOT 22, LAKE VIEW FIRST ADDITION, SEC. 23, T88N, R5W OF THE FIFTH P.M., DELAWARE COUNTY, IOWA, ACCORDING TO PLAT RECORDED IN BOOK 2005, PAGE 3160.

AND

A STRIP OF LAND DESCRIBED AS "20 FOOT WELL EASEMENT" LOCATED ON LOT 22 ON THE PLAT OF LAKE VIEW FIRST ADDITION TO DELAWARE COUNTY, IOWA, LOCATED IN SECTION TWENTY THREE (23), TOWNSHIP EIGHTY EIGHT (88) NORTH, RANGE FIVE (5), WEST OF THE FIFTH (5TH) P.M., INCLUDING THE WELL, CASING, PUMP, WIRING, AND APPURTENANCES THERETO, LOCATED THEREON, SUBJECT TO THE RIGHTS OF OWNERS OF PROPERTY IN SAID LAKE VIEW FIRST ADDITION AND OTHERS, IF ANY, IN AND TO SAID EASEMENT AND SAID WELL, CASING, PUMP, WIRING AND APPURTENANCES THERETO, AND THE HEIRS, SUCCESSORS AND ASSIGNS OF SAID OWNERS AND OTHERS. GRANTORS AND THEIR HEIRS, SUCCESSORS AND ASSIGNS SHALL HAVE THE EXCLUSIVE RIGHT TO USE SAID REAL ESTATE FOR LAWN, INGRESS, EGRESS, OR OTHER REASONABLE PURPOSES IN SUCH A MANNER AS NOT TO INTERFERE WITH ITS USE AS A WELL EASEMENT.

542-0191

Time of Transfer Inspection Report

Property Information

Current Owner: Jeff Hansel

Buyer: N/A Realtor: N/A

Mailing Address: 3340 Muberry Dr. Marion Ia. 52302

Site Address/County: 20484 254th St. Delhi, Ia 52223

Legal Description

No. of bedrooms: 2 Last occupied: Weekends Records available: some

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

Septic System Information

Septic tank(s): Size: 500/1250gal Material: concrete Condition: good

Tank pumped? ☒ Y ☐ N Date: 4/27/2016 Licensed pumper: Wellu 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 3 Condition: Good

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

Secondary Treatment:

Length of absorption fields: 25' X 15' Determined by: probe and sewer tape

Condition of fields: Good Determined by: Hyd.

Type of trench material: Rock and pipe

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? ☐ Y ☐ N Permitted? ☐ Y ☐ N 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: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:Overall condition of the private sewage system: At the time of inspection everything looked good. The tanks (2) there was a 2nd tank added to the system (1250 gal.) are in good condition all baffles are in good condition, lids are up to ground level. The secondary treatment appears to be in good working order at the time of inspection.

Report system status: good

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: Jody Antrim Date: 04/30/16

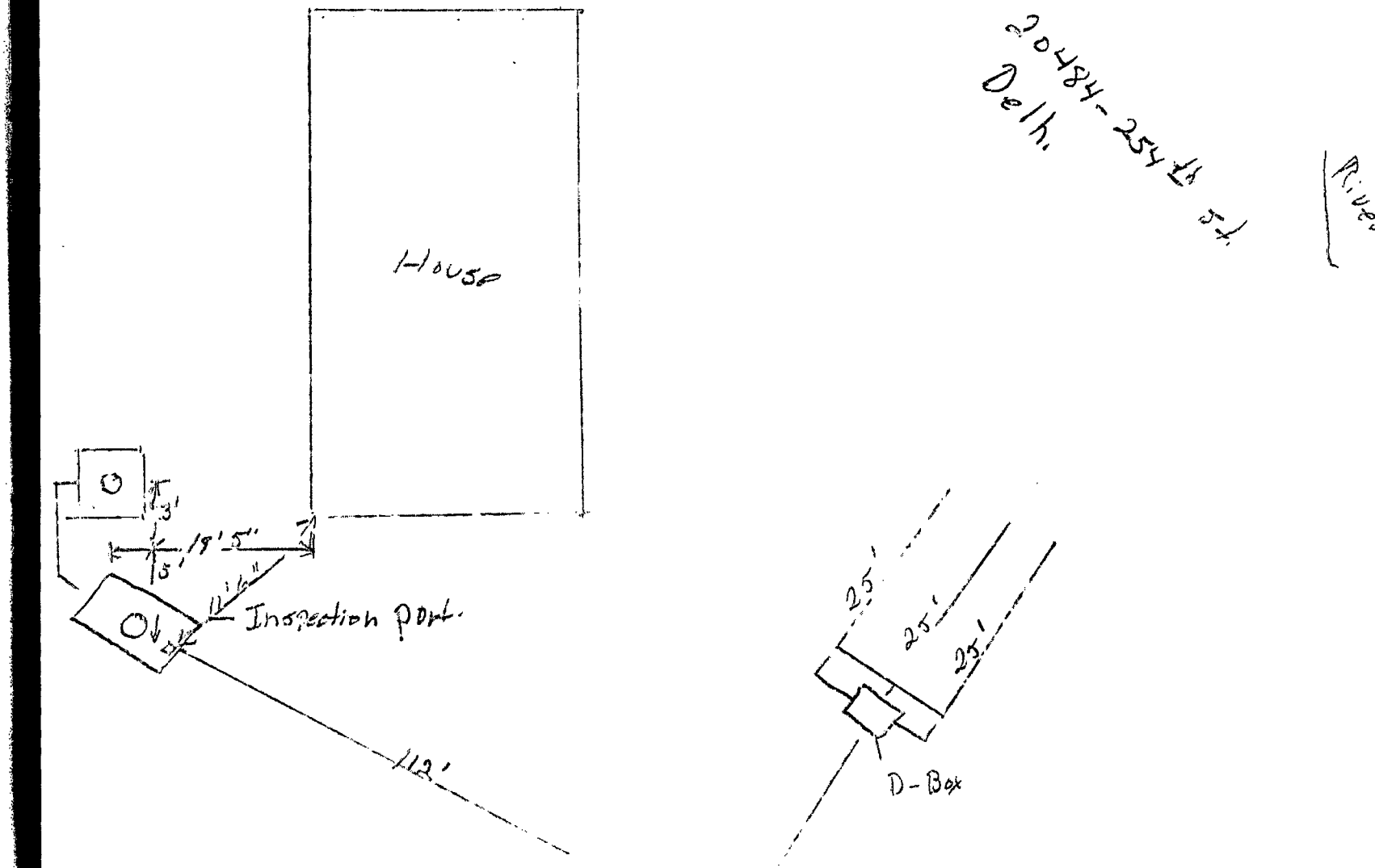
Name (print): Jody Antrim Certificate #: 8874

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


House
3'
5'
19'5"
1'6"
11'
Inspection port.
112'
25'
25'
25'
D-Box
20484-254 15 St
Delh.
River