Book 2016 Page 1444

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Date 6/07/2016 Time 1:00:47PM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Thomas M. Kintzle and Verna M. Kintzle

Address 2303 State Hwy 3, Greeley, Iowa 52050

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

TRANSFEREE:

Name Jennifer A. Ellison

Address 2315 State Hwy 3, Greeley, Iowa 52050

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

Address of Property Transferred:
2315 State Hwy 3, Greeley, Iowa 52040

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

Legal Description of Property: (Attach if necessary) Parcel 2016-20; in the Southwest Quarter of the Southwest Quarter Section 5, Township 90 North, Range 4 West of the 5th P.M., Delaware County, Iowa, according to plat recorded in Book 2016, Page 1013.

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)**
   - X 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)**
   - 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: Thomas M. Kintzle (Transferor or Agent) Telephone No.: (563) 920-7873

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

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

Property information

Current Owner Tom Kintzle

Buyer UNKnown Realtor Philipp Realty

Mailing Address 604 W. Union St Box 99

Site Address/County 2305 Hwy 3 Greeley, Ia (Delaware)

No. of Bedrooms 4 Last Occupied? _____ Disposal? Y / (N) Softener? Y / N H_2O Supply? ____

Records Available Yes Permit/Installation Date 4/10/00 Installer Budden

Septic System Information

Septic Tank(s): Size 1500 gal. Material Concrete Condition Good

Tank Pumped? Yes Date 5/26/16 Licensed Pumper Donnie Knoll

Septic/Trash/Processing Tank: Size _____ Material _____ Condition _____

Tank pumped? _____ Date _____ Licensed Pumper _____

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 Yes Outlets Used 5 Condition Good

Header Pipe(s) 5 Number of Lines 5

Pressure Dosed? No

Secondary Treatment

Length of Absorption Fields 5 - 60' Lines Determined by Diagram

Condition of Fields Good Determined by Probing Field

Type of Trench Material Infiltrator

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 _____ Working? _____ 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): Tank was pumped and inspected. Risers where put on to get it to Level of ground.

Comments: Lateral lines seem to be working fine, grass look green and no sign of sewage.

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: Donnie Kuehl Date: 5/26/16
Name (print): Donnie Kuehl Certificate #: 8889
Address: 38342 Hilton Rd. Edgewood, Ia 52042
Phone # 563-928-6418

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type) **Permit No.** 876

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 2305 Hay 3 Coreley Section 5 Township Elk

LOCATION: SE 1/4 SW 1/4 SW 1/4 T-90N R-4W

Owner: Tom Kintzle Tenant: _____ Plumber: Buddy Plumbing

Lot Size: 1.78 Acres Type Commercial: _____ Residential: (No. Bedrooms) 4

Fixtures: Stools 2 Lavatories 2 Bath Tubs 1 Showers 1 Sinks 1 Automatic Laundry 1 Sump Pump _____

Septic Tank made by Sawlec Garbage Grinder No Construction Material Concrete Gallons Cap 1500

Percolation Test: 1. _____ 2. _____ 3. _____ 4. _____ Made by: _____

Absorption Field: Total length of laterals 300 No. of lateral lines 4-5

This system is new ✓ Existing Replace Installation

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

Date Approved 4-10-00

By Duane Clark
INSPECTOR

A R Buddy
APPLICANT'S SIGNATURE

SEAL

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