Book 2016 Page 2013
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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Thomas Joseph Holub and Marci Joan Holub and Teresa Lynn Jones and Kenneth Patrick Jones and Traci Ann Warren and Steve Warren

Address 26340 232ND Avenue, Delhi, IA 52223

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

TRANSFEREE:

Name Randall John Cook and Dixie Lea VanHeiden

Address 727 10th Avenue SW, Cedar Rapids, IA 52404

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

Address of Property Transferred:
26340 232ND Avenue, Delhi, IA 52223

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

Legal Description of Property: (Attach if necessary)
Lot Three (3) of the Plat of Hawker's H-H Subdivision of Part of W ½ of the NW ¼ of Section 29, T88N, R4W of the 5th P.M. Delaware County, Iowa, according to plat recorded in Book 5 Plats, Page 42

1. Wells (check one)

__ There are no known wells situated on this property.

X 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 _____.

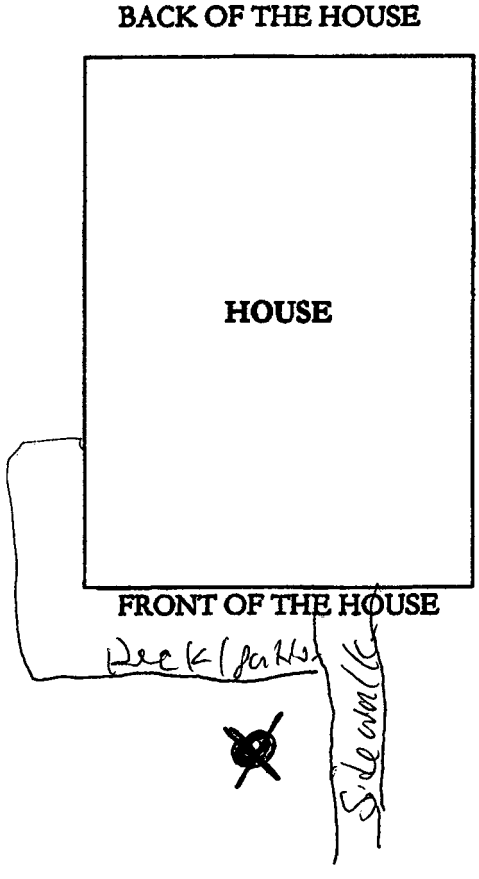
Information required by statements checked above should be provided here or on separate sheets attached hereto:

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

Signature: _____ Telephone No.: (319) 330-6684
(Transferor or Agent)

PLEASE COMPELTE THE FOLLOWING ITEMS BELOW:

1) **What type of well do you have?** Deep Water Well - active
2) **Is the well active or inactive?** active
3) **Please draw an X on the diagram below where the well is located.**



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

Property information

Current owner Tom Holub 319-330-6684
Buyer _____ Realtor None
Mailing address _____

Site Address/County 26340 232nd Ave Delhi
Legal Description per permit

No. of bedrooms 1 Last occupied? part time Records available yes

Permit/installation date 10-8-08 Separation distances ok/ no? ok

Septic system information

Septic tank(s): size 2/500gallon material plastic condition Good
Tank pumped? yes date 7-19-16 licensed pumper S+G
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 tanks/vaults: type _____ size _____ condition _____

Distribution system: distribution box NA outlets used _____ condition _____
Header pipe(s) yes # of lines 2 Pressure dosed? NA

Secondary treatment:
length of absorption fields Bed 17' by 21' determined by per permit
condition of fields _____ determined by _____
type of trench material _____

Size of sand filter NA determined by _____
Vent pipes above grade? _____ discharge pipe located? _____
Effluent sample taken? _____ Results _____

Media filters: type NA
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

NPDES General Permit No. 4: required? _____ permitted? _____ NOI provided _____

Time of Transfer Inspection Worksheet

Other components:
Alarms N/A Working? _____ disinfection _____ working? _____

Control box _____ Timers_____ inspection ports _____

Other components N/A

Overall condition of the private sewage disposal system

Report system status Small cabin system in good working order

Explain (attach additional pages as needed): Did water test OK

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: Bill Downs Date: 6-19-16
Name (print): Bill Downs Certificate #: 8880
Address: 1497 100th Ave Dunlap IA
Phone #563 924-2225

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

319-330-6684

DELAWARE COUNTY
BOARD OF SUPERVISORS sold to children Tom Holub (Print or Type) **Permit No.** 1647

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 26340- 232nd Ave Section 29 Township Delhi

LOCATION: SW¼ NW¼ sec 29 T-88-N R-4-W

Owner: Bill Schipper Tenant: _____ Plumber: Dempster

Lot Size: _____ Type Commercial: _____ Residential: (No. Bedrooms) 1

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

Septic Tank made by Norby's Garbage Grinder _____ Construction Material Plastic Gallons Cap. 500

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

Absorption Field: Total length of laterals 10 x 25' No. of lateral lines _____

This system is new _____ Existing X 42.407800 -91.340450 add on tank

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 10-8-08

By Dennis Lyons
INSPECTOR

Allen Schipper
APPLICANT'S SIGNATURE

SEAL

DISTANCE FROM HOUSE: 50 WELL: <200

TRENCH #1 LENGTH: _____ WIDTH: _____ DEPTH: _____

TRENCH#2 LENGTH: 17' WIDTH: 21' DEPTH: 2'

TRENCH#3 LENGTH: _____ WIDTH: _____ DEPTH: _____

TRENCH#4 LENGTH: _____ WIDTH: _____ DEPTH: _____

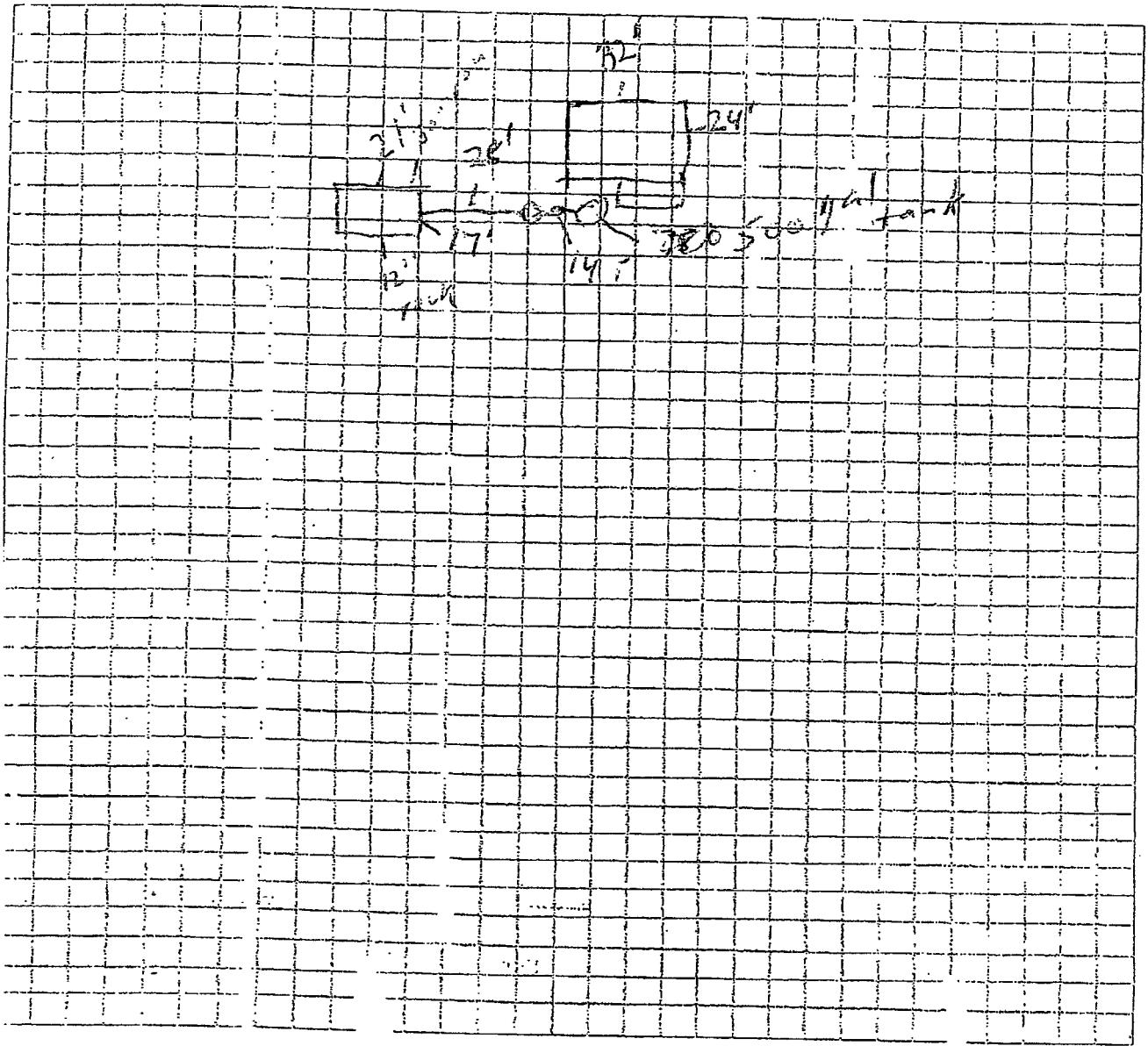
17'x21'

APPROVED ( ) REJECT ( ) INSPECTED BY:

Site Evaluation Map

Designer Dempster

List any construction issues: Schappe



Mapping Checklist

Map scale: _____ _____ ___ indicate north ___ show slope _____ % direction ____

Locate

- ___ lot dimensions/property lines
- ___ dwellings and other improvements
- ___ existing and/or proposed system(s)
- ___ replacement area
- ___ unsuitable area(s)
- ___ public water supply wells
- ___ pumping access
- ___ inner wellhead zone

- ___ easements
  - ___ phone
  - ___ electric
  - ___ gas
- ___ elevations
  - ___ borings
  - ___ benchmark
  - ___ perc tests
  - ___ horiz&vert reference pts

- ___ setbacks
  - ___ building
  - ___ all water wells within 100ft
  - ___ pressure pipe
  - ___ water suction pipe
  - ___ streams, lakes, rivers
  - ___ floodway and fringe



I certify that the above information i
Delaware County Regulations.

Date Approved 10-8-08

By Dennis Lyons
INSPECTOR

DISTANCE FROM HOUSE: 50'

TRENCH #1 LENGTH: _____ WI

TRENCH#2 LENGTH: 17' WI

TRENCH#3 LENGTH: _____ WI

TRENCH#4LENGTH: _____ WI



17'

