Book 2016 Page 2069

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Date 8/10/2016 Time 10:10:24AM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Jack L. Andrews

Address 3605 Forest Valley Ct. NE, Cedar Rapids, Iowa 52411

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

TRANSFEREE:

Name Eric L. Hartgrave

Address 455 Square Creek Circle, Marion, Iowa 52302

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

Address of Property Transferred:
21195 262nd St., Delhi, Iowa 52223

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

Legal Description of Property: (Attach if necessary) Lot Nine (9) of Auditor's Plat No. 2 part of the Northwest Quarter (N.W.1/4) of the Northwest Quarter (N.W.1/4) of Section Twenty Five (25) Township Eighty-Eight (T88N), Range Five West (R5W) of the Fifth P.M. Delaware County, Iowa, according to plat recorded in Book 5 Plats, Page 97, as amended by plat recorded in Book 5 Plats, Page 109, also all lake frontage running to the middle of the Maquoketa River bed with regard to said Lot Nine (9).

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:

Well is 12' South of entrance to basement

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) 360-0941

Time of Transfer Inspection Report

Property Information

Current Owner: Jack Andrews

Buyer: N/A Realtor: Susie Meyer

Mailing Address: 3605 Forest Valley Ct Cedar Rapids Iowa 52411

Site Address/County: 21195 262nd Street Delhi, Iowa (Linden Acres)

Legal Description N/A

No. of bedrooms: 2 Last occupied: Present Records available: Yes

Permit/ installation date: 6/30/2010 Separation distances (ok/no?): 40Ft From well approved by Dennis Lyons

Septic System Information

Septic tank(s): Size: 2200Gal Material: Concrete Condition: Good

Tank pumped? x Y ☐ N Date: 7/28/2016 Licensed pumper: Triple J

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 N/A Outlets used N/A Condition: N/A

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

Secondary Treatment:

Length of absorption fields: Holding Tank Determined by: N/A

Condition of fields: N/A Determined by: N/A

Type of trench material: N/A

Size of sand filter: N/A Determined by: N/A

Vent pipes above grade? N/A Discharge pipe located? N/A

Effluent sample taken No Discharge 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 Report

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: Holding tanks only very good condition

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: Jason Brimeyer Date: 7/28/2016

Name (print): Jason Brimeyer Certificate #: 9446

Address: 23775 Pilot Grove Rd

Phone #: 563-590-2471

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent or the person ordering the inspection, the county sanitarian/environmental health office and to:

Iowa DNR
Private Sewage Disposal Program

IOWA DEPARTMENT OF NATURAL RESOURCES

Variance for Private Water/Wastewater Systems

********** Please Print or Type **********

Name of County (Administrative Authority): Dennis Lyons

Caution: Only those counties that have been delegated private well construction permit authority and have adopted ordinances on design and construction of private wells and individual waste disposal systems can issue a design and/or construction variance for private wells.

Section A -- *Applicant Information*

Applicant Name: Jack Andrews

Mailing Address: 3605 Forest Valley Ct NE. Cedar

City: Cedar Rapids State: Ia Zip: 52411

Site Location: NW ¼ of NW ¼ of NW ¼ of Sec. 25, T 88 (N), R 5 (W/E)

Permit Ref. # 1826

☐ Well

☒ Sewer

Section B -- *Explanation of Proposed Variance*

Rule to be varied from: Septic tank less than 50 Ft From well

Property 21195-262nd Ave

Use the back side of this form if additional space is required.

I certify that the above information is correct to the best of my knowledge.

Signature of Applicant: _____ Date: _____

Phone Number: ( )

Variance Disposition

☒ APPROVED ☐ DISAPPROVED ☐ MODIFIED ☐ NOT REQUIRED

Recommended: Dennis Lyons County Agent Date: 6-30-10

Confirmed: _____ Chair, County Board of Health

Section C -- *Justification for Disposition*

There is no where else to put tank on property to put well or septic. tank. The tank will never alarm on For high water the tank is 40 Ft From well - New tanks with Alarms

Use the back side of this form if additional space is required.

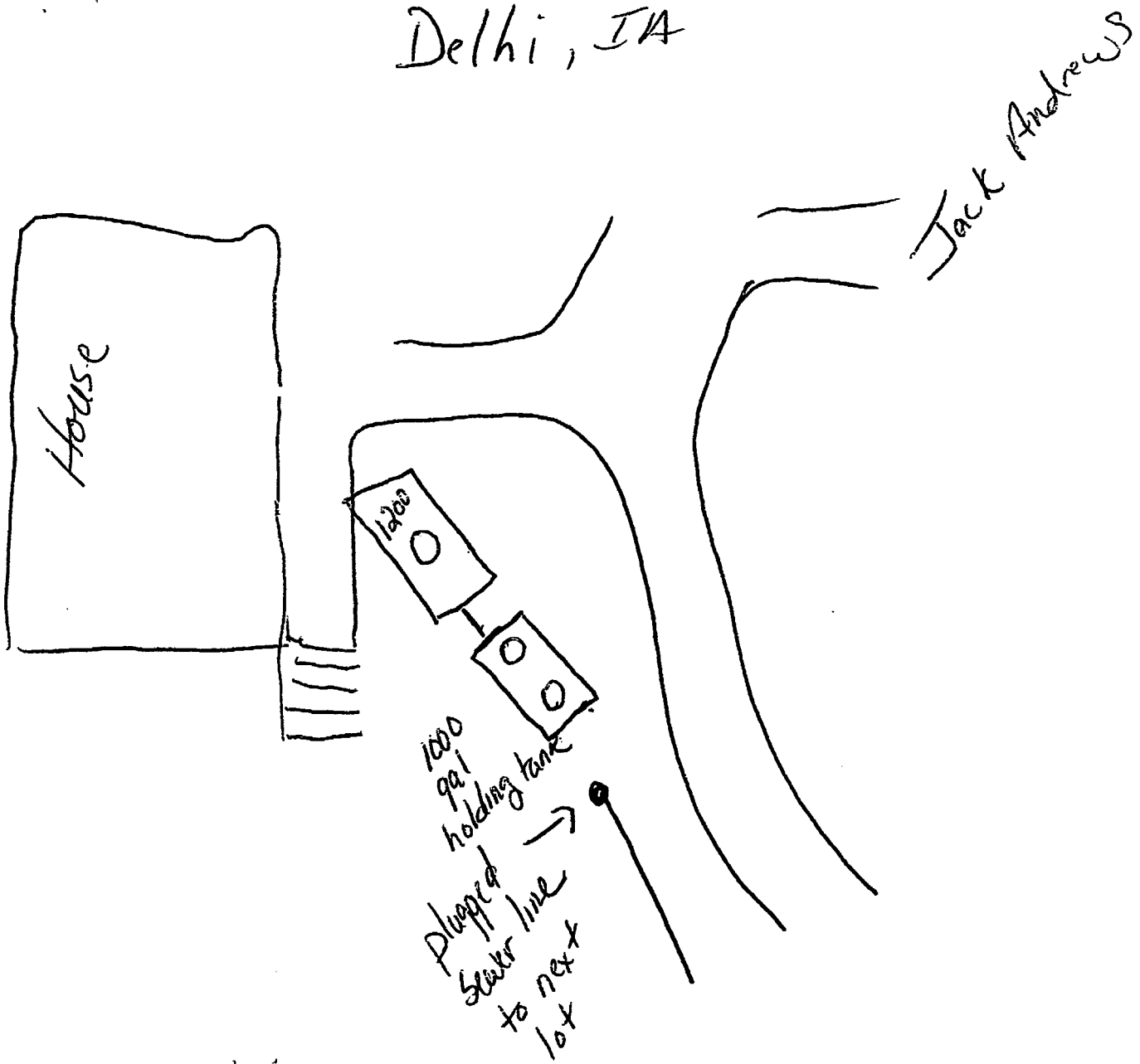
A copy of this form must be submitted, for informational purposes only, to:

Wastewater Operations Section
Department of Natural Resources
502 E. 9th St.
Des Moines, IA 50319-0034

DNR FORM (May 2009)

542-1365

Delhi, IA



7/1/2010

1200 gal concrete tank in good condition added 1000 gal storage tank. 2nd tank set about 6" lower then 1200. Float alarm set in 1000 gal tank, will be wired by Jack Andrews. Approx 250 gal capacity available after alarm lights. Call Harker to pump 563-542-1010

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

Time of Transfer Inspection Report

Other components:
Alarms _____ Working? _____ disinfection _____ working? _____

Control box _____ Timers _____ inspection ports _____

Other components _____

Overall condition of the private sewage disposal system

Report system status old tank excellent condition

Explain (attach additional pages as needed): Secondary area unknown, added 1000 gal tank for a total of 2200 gal holding capacity out let pipe to neighbors plugged

Comments: Approved by Dennis Lyons

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: Jeffrey A Fruehling Date: 7/5/10
Name (print): Jeffrey A Fruehling Certificate #: 8806
Address: 31400 Lower Cedar Rd Cedar Falls 50613
Phone # 563 252-3076

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program

542-0191

Time of Transfer Inspection Report

Property Information

Current Owner: Jack Andrews

Buyer: _____ Realtor: Self

Mailing Address: 3605 Forest Valley Ct. NE. Cedar Rapids IA 52411

Site Address/County: 21195 262nd Street Delhi IA Delaware

Legal Description Milo Twp Sec 25 Range 5

No. of bedrooms: 2 Last occupied: Current Records available: _____

Permit/ installation date: 7/2010 Separation distances (ok/no?): close

Septic System Information

Septic tank(s): Size: 1200+1000 Material: Concrete Condition: new/+ good

Tank pumped? ☒ Y ☐ N Date: _____ Licensed pumper: Harker

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 _____ Outlets used _____ Condition: _____

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

Secondary Treatment: Holding Tanks

Length of absorption fields: _____ Determined by: _____

Condition of fields: _____ Determined by: _____

Type of trench material: _____

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: _____

SEWAGE DISPOSAL SYSTEM

INFORMATION

PERMIT NO: 826

PLUMBER: Jeff Freidlon

FINAL INSPECTION

APPLICANT: Jack Andrews

LOCATION

ADDRESS: 21195- 262nd St

PERCOLATION TESTS: #1 #2 #3 #4

SEPTIC TANK SIZE: 1250 + 1000 COMPARTMENTS: 3

MANUFACTURER: Swalos DEPTH: 24"

DISTANCE FROM HOUSE: 10' WELL: 42'

DISTRIBUTION BOX: DEPTH: 90 LEVEL: 0

DISTANCE FROM HOUSE: 0 WELL: 0

TRENCH #1 LENGTH: WIDTH: DEPTH:

TRENCH#2 LENGTH: WIDTH: DEPTH:

TRENCH#3 LENGTH: WIDTH: DEPTH:

TRENCH#4 LENGTH: WIDTH: DEPTH:

6-30-10

APPROVED (Y) REJECT ( ) INSPECTED BY: Dennis Lyon

