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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

# REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

**TRANSFEROR:**

Name L. James Achenbach and Sandra Achenbach

Address 134 Monterey Trail, Monticello, IA 52310

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

**TRANSFEREE:**

Name Michael J. Steger and Taleigha M. Steger

Address 8421 Monterey Drive NE, Cedar Rapids, IA 52402

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

Address of Property Transferred:
26112 223rd Avenue, Delhi, IA 52223

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

Legal Description of Property: (Attach if necessary) Cabin located at Lake Delhi, Hartwick Point, Cabin #32.

NW 1/4, Section 30, Township 88 North, Range 4, West of the 5th P.M., Delaware County, Iowa.

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]: _____.
   - X The private sewage disposal system has been installed within the past two years pursuant to permit number 2427 DELAWARE COUNTY.

**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: _____ (Transferee or Agent) Telephone No.: 319-480-5561

**DELAWARE COUNTY**

**BOARD OF SUPERVISORS**

**PERMIT NO.** 2427

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 26112 223rd Ave Delhi SECTION 30 TOWNSHIP Delhi

LOCATION QT____ QT____ SEC 30 T 88 N R 4 W Parcel# Z 203001032 09

Owner Jim & Ackerback Plumber Tony White

Lot size_____ Type Commercial_____ Residential (No. Bedrooms) 2

Fixtures: Stools 2 Bath tubs 1 Showers 1 Sinks 3 Automatic Laundry NA Lift Pump____

Septic tank made by roth Construction Material plast. Gallon Cap. 1500 Garbage disposal N

Absorption Field: Total length of Laterals NA No. of lateral lines_____ Size of leach bed_____

Trench Material NA Secondary Treatment Type_____

This system is new construction____ Existing ____ Lat._____ Long. _____

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

Holding Tank

Date Approved 9-3-15

By Dennis Lyons

INSPECTOR

APPLICANT'S SIGNATURE

CABIN

**DELAWARE COUNTY SANITATION**

EnvTrack # _____
Permit # 2427

LOC ication # _____

## Completion Report for Private Sewage Disposal System

Owner: Jim Achenbach

Site Address: 2612 223rd Ave Township: Delhi

Parcel #: _____ Lot # _____ Legal S-T-R 30-88-4

Mailing Address: _____

Contractor: White Hawk Bedroom #: 2

**Water Supply:** Public

**Primary Treatment:** **Latitude:** 42.410220 **Longitude:** -91.359481

**Septic Tank** Volume (g): 1500 Manuf: Rotk Material: Plastic # Pieces: 1 # Cmp: 2

Riser Ht Lid 1 (in): 12" Riser Ht Lid 2 (in): 18" Filter Brand: → Diameter (in): ___ Distance to well (ft): ___

**Note: Effluent filter requires frequent cleaning.**

**Dose Tank** Volume(g): ___ Pump or Siphon Dose: ___ Gallons/dose: ___ Riser Ht (in): ___ Alarm: ___

**D-Box:** **Latitude:** NA **Longitude:** _____ **Depth:** _____

**Subsurface Absorption Type:** _____ Chamber Manuf: _____ Lineal Ft: _____ # Trenches: _____

Inches rock under pipe: ___ Trench Depth (in): _____ Trench width (in): _____ Distance to well (ft): _____

**Surface Absorption Type:** _____ Overall length (ft): _____ Overall width (ft): _____

Rock bed length (ft): _____ Rock bed width (ft): _____ Length of laterals (ft): _____ # Laterals: _____

Header pipe diameter (in): ___ Rock type: _____ Distance to well (ft): _____ Depth to bottom of trench (in): _____

**Packed Bed Media Filter:** _____ Sand filter length(ft): _____ Sand filter width (ft): _____ Sand filter sq ft: _____

Liner: _____ Distance to well (ft): _____ # Distributor lines: _____ # Collector lines: _____

Distributor line type: _____ Separating layer: _____ Discharge GPS (lat x long): _____

***Peat Filter:** Serial #: _____ Closed or Open bottom: _____ Lineal Ft absorption: _____ # Laterals: _____

crushed rock, river rock or chamber _____ Trench width (ft): _____ Rock under pipe (in): _____

Distance to well (ft): _____ Inches soil cover over trench: _____ Discharge GPS (lat x long): _____

***Recirculating Textile Filter:** Brand Name: _____ Distance to well (ft): _____

Discharge GPS (lat x long): _____ Absorption field installed after (no discharge) _____

***Note: A maintenance agreement with a manufacturer-approved contractor must be maintained for the life of the septic system.**

**Comments:** **Effluent filter requires frequent cleaning.**

Holding tank

Was any portion of the field covered before the inspection: No System installation approved: Y/S

**Date of Final Inspection:** 9-7 **Environmental Health Specialist:** Dennis Kay

Scanned ☐

***This APPROVAL in no way makes the County responsible for the continued operation of this sanitation system***