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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Donna Jean Wall

Address 900 W Marion Street, Apt #1, Manchester, Iowa 52057

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

TRANSFEREE:

Name John D. Gingerich and Arlene K. Gingerich

Address 2406 Highway 38, Delhi, Iowa 52223

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

Address of Property Transferred:
2406 Highway 38, Delhi, Iowa 52223

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

Legal Description of Property: (Attach if necessary) Parcel R part of the NE¼ NE¼ Section 17, Township 88 North, Range Four, West of the 5th P.M., according to plat recorded in Book 2005, Page 3836 of the records of the Delaware County Recorder.

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: Drilled well approx. 200' SE of House

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

Signature: Donna Jean Wall (Transferor or Agent) Telephone No.: 563-920-2827

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

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

Property information

Current owner Donna Wall
Buyer _____ Realtor None
Mailing address 2406 Hwy 38 Delhi

Site Address/County 2406 Hwy 38 Delhi
Legal Description _____

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

Permit/installation date 3-20-06 Separation distances ok/ no? OK

Septic system information

Septic tank(s): size 1000 material Concrete condition good
Tank pumped? yes date 7-2-16 licensed pumper 5749
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfgr NA size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type _____ size _____ condition _____

Distribution system: distribution box N1 outlets used _____ condition _____
Header pipe(s) yes # of lines 2 Pressure dosed? _____

Secondary treatment:
length of absorption fields 180 Ft determined by per permit
condition of fields Good determined by water test
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 NA Working? _____ disinfection _____ working? _____

Control box _____ Timers_____ inspection ports _____

Other components _____

_____

Overall condition of the private sewage disposal system

Report system status not much use looked like new

Explain (attach additional pages as needed): water test 30 minuty 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: 9-2-16
Name (print): Bill Downs Certificate #: 8890
Address: 1491 110th Ave Danville
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

Permit No. 1-39

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type)

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 2406 Hwy 38 Section 17 Township Delhi

LOCATION: NW¼ NE¼ Sec 17 T. 88-N R. 4 W

Owner: Duston Wall Tenant: Plumber: Self

Lot Size: 1.5 Type Commercial: Residential: (No. Bedrooms) 1

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

Septic Tank made by Swales Garbage Grinder — Construction Material Concrete Gallons Cap. 1000

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

Absorption Field: Total length of laterals 180 Ft No. of lateral lines 2 - lines

This system is new X Existing —

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

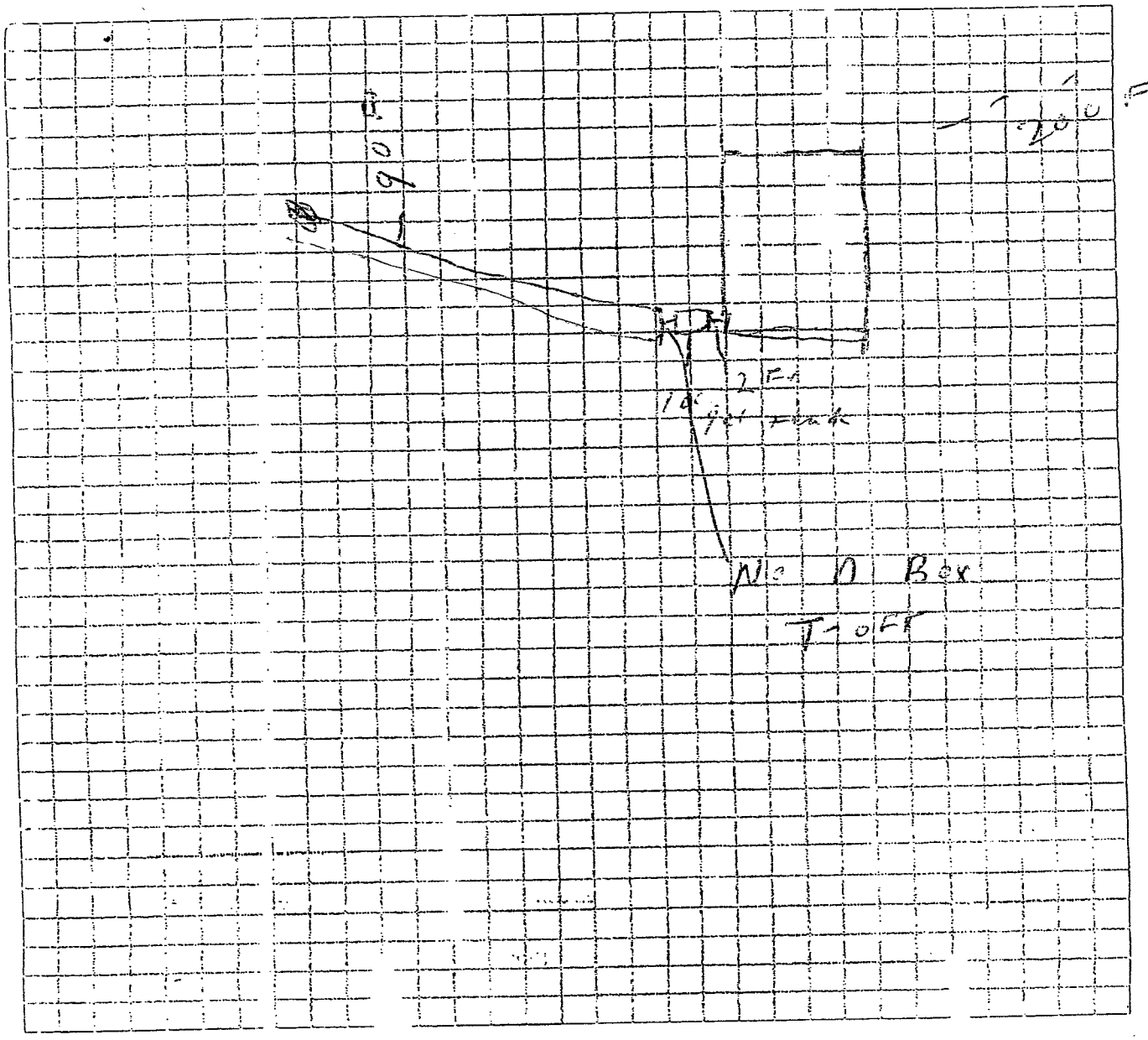
Date Approved 3-20-06

By Dennis Lyons
INSPECTOR

Duston Wall
APPLICANT'S SIGNATURE

SEAL

construction Issues: Onsite Well



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