Recorded: 9/14/2016 at 12:38:32.0 PM
Fee Amount: $0.00
Revenue Tax:
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2016 PG: 2465

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Tyler J. Murphy

Address 17190 189th Street, Manchester, IA 52057

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

TRANSFEREE:

Name Dale E. Soppe & Gwendolyn F. Soppe

Address 105 Gay Street, Manchester, IA 52057

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

Address of Property Transferred:

17190 189th Street, Manchester, IA 52057

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

Legal Description of Property: (Attach if necessary) See 1 in Addendum

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. Located in the house, Sand point
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: _____ (Transferor or Agent) Telephone No.: (563) 929-1189

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

Addendum

1. That part of Lot Two (2), Block Three (3) and of vacated Sunset View Road described as commencing at the Northeast corner of said Lot Two (2) and running thence East twenty (20.0) feet, thence South sixty (60.0) feet, thence West one hundred twenty (120.0) feet, thence North to the South line of Shady Lane, thence Easterly on the South line of Shady Lane to the place of beginning, in Sunset Beach, a Subdivision of part of Section Seventeen (17), Eighteen (18) and Twenty (20), Township Eight Nine (89) North, Range Five (5), West of the Fifth P.M., according to plat recorded in Book 2 Plats, Page 20, excepting rights of flowage.

542-0191

Time of Transfer Inspection Report

Property Information

Current Owner: Tyler Murphy

Buyer: Dale And Gwendolyn Soppe Realtor: F & M Realty

Mailing Address: 17190 189 St. Manchester Ia.52057

Site Address/County: 17190 189th St. Manchester Ia. 52057

Legal Description

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

Permit/ installation date: 1/10/2006 Separation distances (ok/no?): OK

Septic System Information

Septic tank(s): Size: Material: Condition:

Tank pumped? ☐ Y ☐ N Date: Licensed pumper:

Septic/Trash/Processing tank: Size: Material: Condition:

Tank pumped? ☐ Y ☐ N Date: Licensed pumper:

Aerobic treatment unit (ATU) mfgr Norweco Size 1500 gal

Tank pumped? ☐ Yes Date: 9/7/2016 Licensed pumper: Groth septic service

Maintenance contract? ☐ Yes Expiration date: 9/1/2016 Service provider: Jody Antrim (JDC WORKS)

Condition: Good

Pump tanks/vaults: Type: Size: Condition:

Distribution system: Distribution box Outlets used Condition:

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

Secondary Treatment:

Length of absorption fields: 30'X 12' Determined by: Print

Condition of fields: Good Determined by: Hyd. Test and Probe

Type of trench material: Domes

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:

542-0191

NPDES General Permit No. 4: Required? ☐ NO Permitted? ☐ Y ☐ N NOI provided: _____

Time of Transfer Inspection Report

Other components:

Alarms: ☐ YES Working: ☐ YES Disinfection: ☐ Y ☐ N Working: ☐ Y ☐ N

Control Box: Yes Timers: _____ Inspection Ports: _____

Other components: Lift pump for Effluent With alarm in house.

Overall condition of the private sewage disposal system:

Report system status: This system is in good condition at time of inspection. The lift pump and the aerator is work good. The filter and pump are do for service in Oct. of 2016

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: Jody Antrim Date: 9/7/2016

Name (print): Jody Antrim Certificate #: 8874

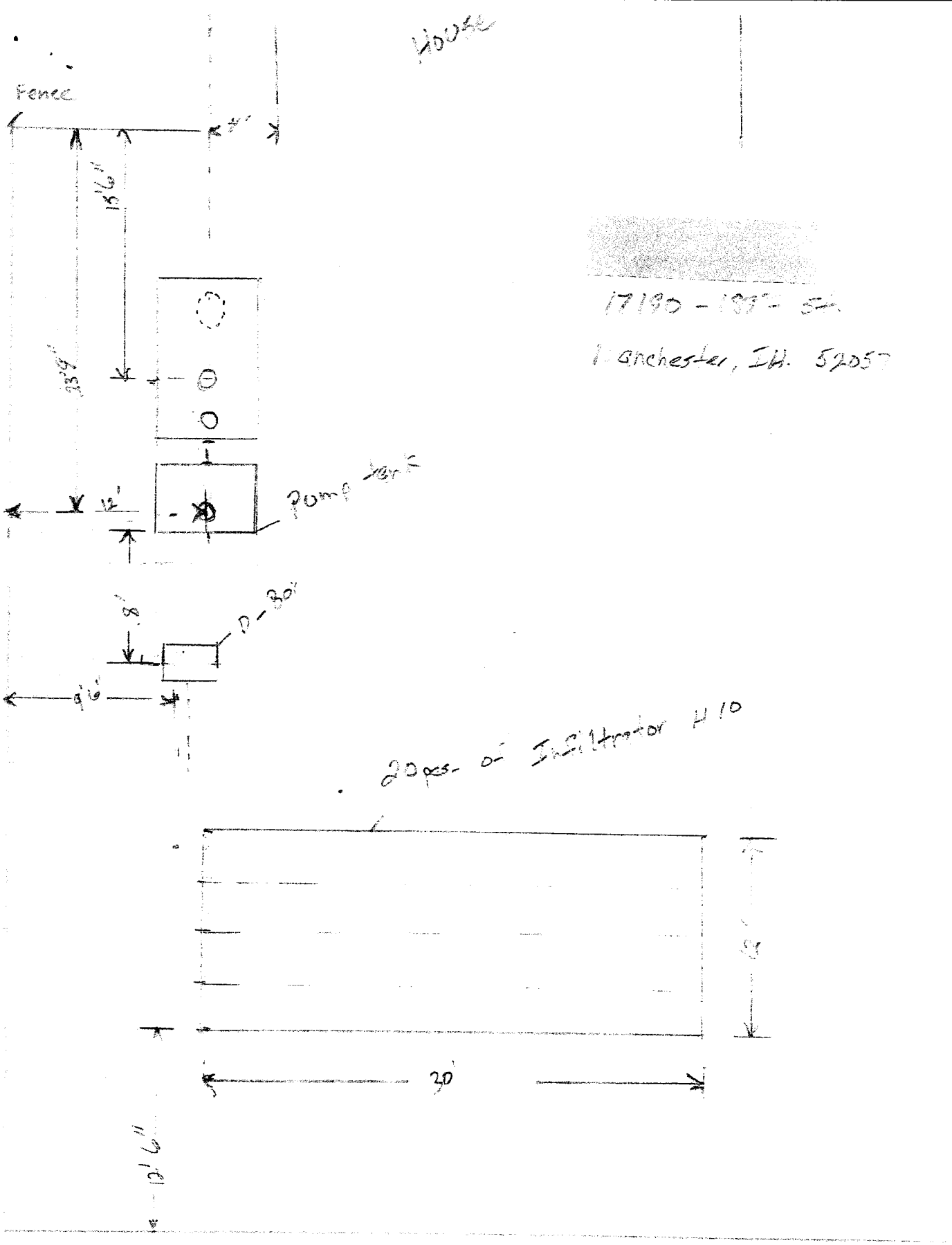
Address: 20984 265th St. Manchester Ia. 52057

Phone #: 563.920.9388

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:

542-0191

Private Sewage Disposal Program
502 E 9th St
Des Moines IA 50319



[redacted]

17190 - 197 - St.

Manchester, IA. 52057