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Document 2016 GWH-3555 Type 53 001 Pages 7
Date 12/27/2016 Time 11:29:57AM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Richard Jurgens, Jr. and Michelle Jurgens

Address 31722 E. Worthington Road, Worthington, IA 52078

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

TRANSFEREE:

Name Eric Jurgens and Laura Jurgens

Address 17334 Hwy 38, Monticello, IA 52310

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

Address of Property Transferred:
3097 295th Street, Hopkinton, IA 52237

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

Legal Description of Property: (Attach if necessary) The East 380 feet of the South 243 feet of the NE 1/4 of the NE 1/4 of Section 9, Township 87 North, Range 3, West of the 5th P.M., Delaware County, Iowa, subject to highways and easements of record. AND Parcel 2016-71 part of the northeast quarter (NE 1/4) of the northeast (NE 1/4) of Section nine (9), Township Eighty-seven north (T87N), Range Three West (R3W) of the Fifth principal meridian, Delaware County, Iowa

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:

Well is located 25 feet from N.W. Corner of the House.

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) 480-5588

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

Property information

Current owner Rick Jurgens
Buyer Eric Jurgens Realtor
Mailing address

Site Address/County 3097 295th St. Hopkinton Ia.
Legal Description Delaware County South fork township Section 9

No. of bedrooms 3 Last occupied? Current/y Records available yes

Permit/installation date 4-25-97 Separation distances ok no?

Septic system information

Septic tank(s): size 1250 material cement condition good
Tank pumped? yes date 9-15-16 licensed pumper ST 374
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 yes outlets used 3 condition good
Header pipe(s) # of lines Pressure dosed?

Secondary treatment:
length of absorption fields 260' determined by probe
condition of fields dry determined by probe
type of trench material 10" gravelless

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

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

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 _____

Explain (attach additional pages as needed): See Attached

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: Scott Hagen Date: 9-15-16
Name (print): Scott Hagen Certificate #: 10544
Address: 17789 Dales Ford Rd. Scotch Grove Ia. 52310
Phone # (319) 480-2577

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
502 E. 9th St.
Des Moines, IA 50319

SEWAGE DISPOSAL SYSTEM

INFORMATION

PERMIT NO: 554

PLUMBER: White Work

FINAL INSPECTION

APPLICANT: K.A Jamisons

LOCATION

ADDRESS: 2097 355 Ext. Hoptown

PERCOLATION TESTS: #1 #2 #3 #4

SEPTIC TANK SIZE: 1250 COMPARTMENTS: 2

MANUFACTURER: Pac Cast Cascade DEPTH: 12"

DISTANCE FROM HOUSE: 58' WELL: 100 +

DISTRIBUTION BOX: DEPTH: 36' LEVEL: L

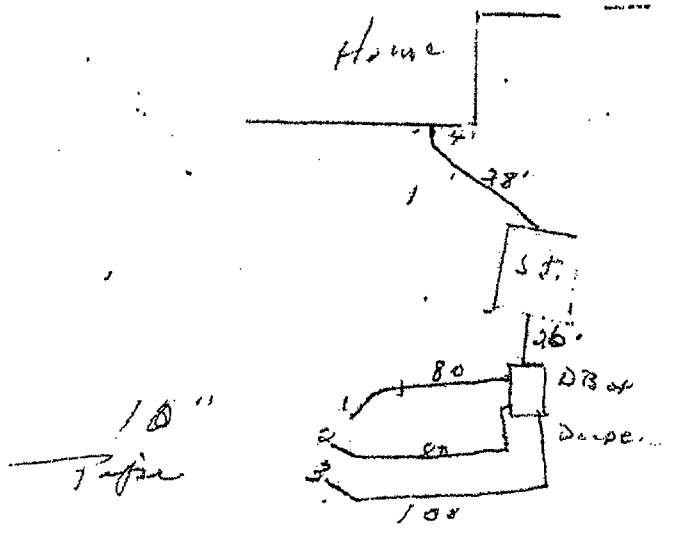
DISTANCE FROM HOUSE: 130' WELL: 100 +

TRENCH #1 LENGTH: 50 WIDTH: 18" DEPTH: 10 - 30

TRENCH#2 LENGTH: 50 WIDTH: 18" DEPTH: 10 - 38

TRENCH#3 LENGTH: 80 WIDTH: 18" DEPTH: 10"-30"

TRENCH#4 LENGTH: WIDTH: DEPTH:



APPROVED ( ) REJECT ( ) INSPECTED BY:

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type) **Permit No.** 554

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 3091 295th Hopkinton Section 9 Township Sand Creek

LOCATION: SE 1/4 NE 1/4 NW 1/4 T-87 N R3-1 W

Owner: Richard Jessen Tenant: _____ Plumber: _____

Lot Size: 1½ Acres Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Stools___ Lavatories___ Bath Tubs___ Showers___ Sinks___ Automatic Laundry___ Sump Pump___

Septic Tank made by Reuss Garbage ~~Grinder~~ Disposal yes ? Construction Material Concrete Gallons Cap 1000

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

Absorption Field: Total length of laterals 240-a-360 No. of lateral lines 240 a/ 360
3 4-5

This system is new ✓ 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 4-25-97

By _____ INSPECTOR

_____ APPLICANT'S SIGNATURE

SEAL

TIME OF TRANSFER

On 09-15-2016 at 3097 295th Street Hopkinton Iowa 52237 In Delaware County South Fork Township Section 9; I inspected a septic system for a 3-bedroom home. It has a 1250 gallon cement 2 compartment septic tank in good condition.
The distribution box is in good condition also with 3 outlets used.
The absorption field consists of 3 lines of 10 inch gravel less pipe totaling 260ft. All lines were dry when probed.
The overall system looked to be in good condition at this time.

SCOTT HAGEN
#10544

THIS INSPECTION IN NO WAY MAKES ME RESPONSIBLE FOR THE CONTINUED OPERATION OF THIS SANITATION SYSTEM.