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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Carol C. Hammann and Greggory C. Hammann

Address 19720 Xavier Ct., Dyersville, IA 52040

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

TRANSFEREE:

Name Travis J. Thier and Kristie Thier

Address 1706 2nd Ave. SE, Dyersville, IA 52040

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

Address of Property Transferred:
19720 Xavier Ct., Dyersville, IA 52040

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

Legal Description of Property: (Attach if necessary) Lot Five (5) of Scenic Hill Terrace 2nd Addition Replat, Replat of Lots 1 Through 12 of Scenic Hill Terrace 2nd Addition in the SE 1/4 of the SW 1/4, Section 24, T89N, R3W of the 5th P.M. Delaware County, Iowa, according to plat recorded in Book 2002, Page 3836.

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 approximately 30 feet SW 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: Cindi C Hammann (Transferor or Agent) Telephone No.: (563) 581-9075

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

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

Property information
Current Owner CAROL C HAMMANN
Buyer _____ Realtor _____
Mailing Address 19720 XAVIER CT DYERSVILLE 52040
Site Address/County 19720

No. of Bedrooms 4 Last Occupied? NOW Disposal? (Y) / N Softener? (Y) / N H_2O Supply? well

Records Available _____ Permit/Installation Date 2004 Installer _____

Septic System Information
Septic Tank(s): Size 1500 Material Cement Condition good
Tank Pumped? yes Date 2-28-17 Licensed Pumper 358
Septic/Trash/Processing Tank: Size _____ Material _____ Condition good
Tank pumped? yes Date 2-28-17 Licensed Pumper 358

Aerobic treatment unit (ATU) MFGR — Size _____
Tank Pumped? — Date _____ Licensed Pumper _____
Maintenance Contract? — Expiration Date _____ Service Provider _____
Condition _____

Pump Ttanks/Vaults: Type _____ Size _____ Condition _____

Distribution System: Distribution Box yes Outlets Used 4 Condition good
Header Pipe(s) no Number of Lines 4
Pressure Dosed? no

Secondary Treatment
Length of Absorption Fields 4x100 Determined by Prob
Condition of Fields good Determined by Dug up
Type of Trench Material Rock & Pipe

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 submitted _____

Time of Transfer Inspection Worksheet

Other Components

Alarms _____ Working? _____ Disinfection _____ Working? _____

Control Box _____ Timers _____ Inspection Ports _____

Other Components All in good working condition.

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): Keep Pump over 3-5 years

Comments: D Box is 24" Deep Do not Drive on Absorption-Field.

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.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: _____ Date: 2-28-17

Name (print): Robb Harter Certficate #: 358

Address: 3031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1010

Harter Custom Pumping, Inc & Septic Service

Robb Harter * Owner/ Operator
3031 160th Street Dyersville, IA 52040 * 563-875-8730 or 563-542-1010

Homeowners: HAMMANN

Age of Property 2004

Occupied (Yes) or No

Inspection Co: Robb Harter 3031 160th Dyersville

Date of Inspection: 2-28-17

Does this evaluation/inspection meet the requirements of state and local agencies? Yes ✓ No ___ N/A ___

Section 1:

Location of the system: (East) West North South

Was Water run into the system for 30 minutes? (Yes) No

Does the septic tank have a visible riser? (Yes) No

Estimated size of tank 1500 Gallons *Basis for estimate*

What is the separation between well and septic? 168 ft 129 to well

Does the separation of the well and septic meet local requirements? (Yes) No N/A

Section2: Disposal Field

Any evidence of malfunction (No) Yes (Please check all applicable observed conditions)

___ Wet Areas ___ Unusual green/lush vegetation

___ Liquid Discharges to surface ___ Discharge pipe of unknown origin

___ Localized surface settling ___ Other (Describe below)

Septic Tank:

Septic tank material ✓ Concrete Fiberglass Other

Liquid Level in tank ✓ Normal Below Normal Above Normal

Access opening in tank One ✓ Two Three None

Number of risers One ✓ Two Three None

Condition of baffles and or sanitary tees:

Inlet baffle or "T" ✓ Present and functional Not functional None present Not Visible

Outlet baffle or "T" ✓ Present and functional Not functional None present Not Visible

Tank was pumped Yes ✓ No (if no please explain below

Is system adequately sized for # of Bedrooms ✓ Yes No # of Bedrooms:

Is system adequately sized for # of Bathrooms ✓ Yes No # of Bathrooms:

System working Properly ✓ Yes No (if no please explain below)

Additional Comments / Repairs needed:

Keep Pump over 3-5 years

Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.

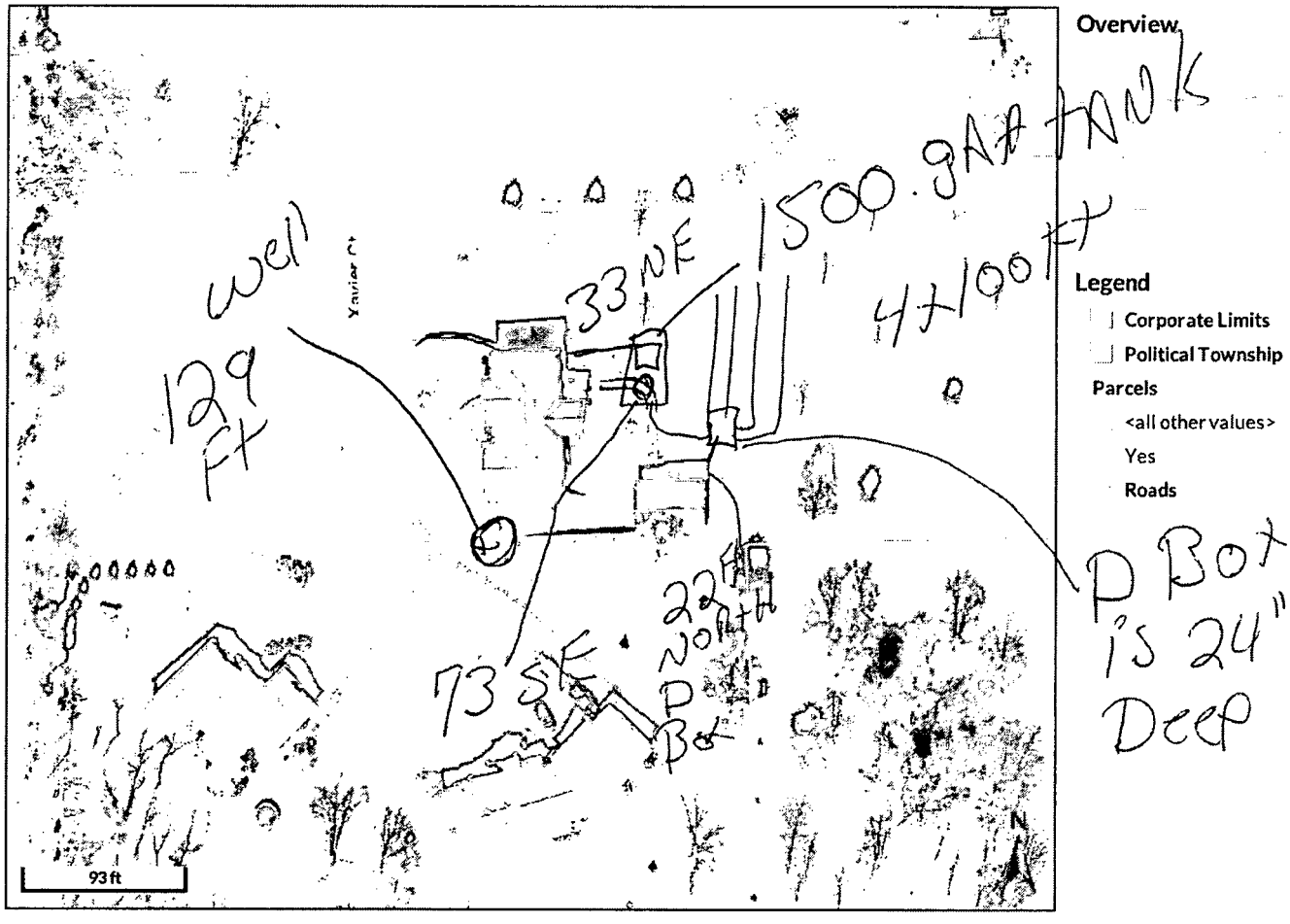
This report comments on the workability of the system on the day of the inspection only, and is in no way intended to be a warranty.

Workability can be altered by factors such as excessive rainfall, heavy water usage, faulty plumbing, neglect or physical damage to the system. All tanks require pumping maintenance.

Inspected by: [signature]

Date: 2-28-17

Beacon Delaware County, IA



Parcel ID	180240001040	**Alternate ID**	n/a	**Owner Address**	Hammann, Carol C
Sec/Twp/Rng	24-89-3	**Class**	R		19720 Xavier Ct
Property Address	19720 XAVIER CT DYERSVILLE	**Acreage**	1		Dyersville, IA 52040
District	BREMEN				
Brief Tax Description	LOT 5 SCENIC HILL TERRACE 2ND SUBDIV REPLAT PT SE SW				

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