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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Joshua C. Lahr

Address 3086 Hwy 13, Ryan, IA 52330

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

TRANSFEREE:

Name Earl Eugene Quigley Jr.

Address 2906 Breyer St. SW, Unit A, Cedar Rapids, IA 52404

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

Address of Property Transferred:
3086 Hwy 13, Ryan, IA 52330

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.
   - ✓ 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. east of house
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]: _____.

___ 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, Active

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

Signature: _____ Telephone No.: (563) 920-6210
(Transferor or Agent)

Addendum

1. That part of the West fractional one-half (Wfr1/2) of the Southwest Quarter (SW1/4) of Section Eighteen (18), Township Eighty Seven (87) North, Range Five (5), West of the Fifth P.M. described as commencing at the Northwest corner of said West fractional one-half (Wfr1/2), and running thence South one thousand nine hundred seventy one (1971) feet to the point of beginning, thence East three hundred thirty four (334) feet, thence North one hundred fifty (150) feet, thence West three hundred thirty four (334) feet, thence South one hundred fifty (150) feet to the point of beginning.

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

Property information

Current owner Josh lahr
Buyer _____ Realtor _____
Mailing address 3086 Hwy 13 Ryan Iowa

Site Address/County 3086 Hwy 13 Ryan Iowa
Legal Description _____

No. of bedrooms 2 Last occupied? _____ Records available Yes

Permit/installation date 7/18/2002 Separation distances ok/ no? ok

Septic system information

Septic tank(s): size 1250 material Concrete condition Good
Tank pumped? Yes date 5/9/17 licensed pumper St. 49
Septic/trash/processing tank: size N/A material N/A condition N/A
Tank pumped? N/A date N/A licensed pumper N/A

Aerobic treatment unit (ATU) mfgr N/A size N/A
Tank pumped? N/A date N/A licensed pumper N/A
Maintenance contract? N/A expiration date N/A service provider N/A.
Condition N/A

Pump tanks/vaults: type Concrete size 500 gal condition good

Distribution system: distribution box Yes outlets used 4 condition Good
Header pipe(s) No # of lines 4 Pressure dosed? Yes

Secondary treatment:
length of absorption fields 3-100' 1-92' determined by Map.
condition of fields Good determined by Hydraulic load test
type of trench material Rock pipe

Size of sand filter No determined by N/A
Vent pipes above grade? N/A discharge pipe located? N/A
Effluent sample taken? N/A Results N/A

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

NPDES General Permit No. 4: required? N/A permitted? N/A NOI provided _____

Time of Transfer Inspection Worksheet

Other components:
Alarms Yes Working? Yes disinfection No working? N/A

Control box No Timers No inspection ports No

Other components _____

Overall condition of the private sewage disposal system

Report system status _____

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: _____ Date: 5/9/17
Name (print): Luke Ogden Certificate #: 6715
Address: 17120 195th st. Manchester
Phone # 563-927-6503

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

OASIS PUMP SERVICE
1332 N. Franklin, Manchester, Iowa 52057
563-927-6503 888-666-6503
www.oasiswell.com

Septic Inspection
Josh Lahr
3086 Hwy 13
Ryan, IA 52330

On May 9, 2017 a septic inspection was performed at the above address.

House Description:

Approximately 1600 sq. ft. home consists of 2 bathrooms and 2 bedrooms. Lot size is approximately 1.01 acres. Property does have a sewage pump and water softner.

Septic Description:

Septic system consists of 1 – 1250 gallon 2 compartment concrete tank with a 500 gallon pump tank, septic filter with alarm, 1 – 7 hole distribution box with 4 septic lines totaling 392'. Depth of leach line is 24-30"

Septic Condition:

A hydraulic load test was completed on septic system and accepted water very well. Septic system is in good working condition.

Company Disclaimer

Based on what we were able to observe and our experience with on-site wastewater technology, we submit this sanitary sewage disposal system inspection report based on the present condition of the on-site sewage disposal system. Oasis Pump Service has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time in the future. Because of numerous factors (usage, soil characteristics, previous failures, etc.) which effect the proper operation of a septic system as well as the inability of our Company to supervise or monitor the use or maintenance of the system, this report shall not be constructed as a warranty by our Company that the system will function properly for any particular buyer. Oasis Pump Service **DISCLAIMS ANY WARRANTY**, either expressed or implied, arising from the inspection of the septic system or this report. We are also not ascertaining the impact the system is having on the ground water.

I have studied the information contained herein and that my assessment is honest, thorough, and, to the best of my ability correct.

Certified by Luke Ogden #6715

Luke Ogden T.O. **Date** 5/9/17

Owner: **Josh Lahr 3086 Hwy 13 Ryan, IA 52330**

OASIS PUMP SERVICE
1532 N. Franklin, Manchester, Iowa 52057
563-927-6503 888-666-6503
www.oasiswell.com

OWNER: Josh Lahr **DATE:** 5/8/17
SITE ADDRESS: 3086 Hwy 13 Ryan IA **TOWN/COUNTY:** Delaware
GPS: Long: -91.479751 Lat: 42.341859
TANK SIZE: 1050 Plastic **OR** (Concrete) **D-BOX:** (7) or 9 **OUTLETS USED:** 4
SECONDARY TREATMENT: Rock & Pipe

