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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name John D. Gingerich and Arlene K. Gingerich

Address 2406 Hwy 38, ~~Hopkinton, IA 52237~~ Delhi, Iowa 52223

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

TRANSFEREE:

Name Jonas Yoder & Anna Yoder

Address 2290 320th Street, Hopkinton, IA 52237

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

Address of Property Transferred:
3045 230th Street, Hopkinton, IA 52237

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.
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 located 95' from NW corner 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: John H. Lingrich (Transferor or Agent) Telephone No.: (319) 481-0988

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

Addendum

1. Commencing at a point that is one thousand three hundred twenty seven (1,327.0) feet North of the Southeast corner of the Northeast Quarter (NE 1/4) of the Southeast Quarter (SE 1/4) of Section Eighteen (18), Township Eighty Seven (87) North, Range Four (4), West of the Fifth P.M., said point being at the center of the county road, and running thence West four hundred (400.0) feet, thence North four hundred fifty (450.0) feet, thence East four hundred (400.0) feet to the center of said county road, thence South four hundred fifty (450.0) feet to the point of beginning.

Road
House
23'-5" to Boiler
Well
105'
3'
Rear Entrance 3x7 Shop Door

542-0191

Time of Transfer Inspection Report

Property Information

Current Owner: Timothy Griem

Buyer: JOHN AND ARLENE GINGERICH Realtor: Hedges Realty - Coldwell Banker

Mailing Address: 3045 230th Ave. Hopkinton Ia.

Site Address/County: 3045 230th Ave. Hopkinton Ia.

Legal Description: AS PER ABSTRACT - E 400' S 450' SE NE

No. of bedrooms: 3 Last occupied: curent Records available: no

Permit/ installation date: N/A Separation distances (OK/no?): Yes

Septic System Information

Septic tank(s): Size: 750 Gal. Material: Concrete Condition: Good

Tank pumped? ☒ Y ☐ N Date: 11/9/2015 Licensed pumper: Goth Services

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

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

Aerobic treatment unit (ATU) mfgr _____ Size _____

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

Maintenance contract? ☐ Y ☐ N Expiration date: _____ Service provider: _____

Condition: _____

Pump tanks/vaults: Type: _____ Size: _____ Condition: _____

Distribution system: Distribution box no Outlets used _____ Condition: _____

Header pipe(s): 1 No. of lines: 1 Pressure dosed? _____

Secondary Treatment:

Length of absorption fields: 40' of perforated pipe+ A Rock pit at the end Determined by: probe and camera

Condition of fields: good Determined by: Hyd. test And probe

Type of trench material: Rock and pipe

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: _____

At time of inspection the Hyd. test was done . 250gals of water was used . No signs of backing

542-0191

NIit No. 4: Required? ☐Y☐N Permitted? ☐Y☐N NOI provided: _____

Time of Transfer Inspection Report

Other components:

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

Control Box: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:

Report system status The concrete single compartment tank looks to be OK at time of inspection . The HYD. Test on the leach field was done and it handled the 250gals. of water that was put into it.

Explain (attach additional pages as needed): _____

Comments: The 750 gal . septic tank is small for a 3 bedroom home as is the Leach 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 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: 11/10/15

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, the county sanitarian/environmental health office in the county the inspection was conducted, the county recorder and to:

Iowa DNR Onsite Waste water Program
502 E 9th St
Des Moines IA 50319