Book 2017 Page 1638
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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT
TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Lynnette A Sturtz* and David E. W. Sturtz

Address , , Iowa 21558 259th St Delhi, IA 52223
Number and Street or RR | City, Town or PO | State | Zip

TRANSFEREE:

Name Janelle M Phillips* and Martin L. Phillips

Address 21558 259th St Delhi, IA 52223
Number and Street or RR | City, Town or PO | State | Zip

Address of Property Transferred:

21558 259th Street, Delhi, Iowa 52223
Number and Street or RR | City, Town or PO | State | Zip

Legal Description of Property: (Attach if necessary)

Parcel T and Parcel U, all in being parts of Parcel N in the SW 1/4 - SE 1/4 Sec. 24, T88N, R5W of the Fifth P.M., Delaware County, Iowa, according to plat recorded in Book 2007, Page 665; also all that land Lying South of and adjoining said Parcel T extending to the center of the lake.

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.
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.

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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:

_____

_____

_____

_____

_____

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.: 1-563-608-6067

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

Property information

Current Owner David Sturtz

Buyer _____ Realtor Kristine Baldwin

Mailing Address _____

Site Address/County 21558 259th St. Delhi, Iowa Delaware County

No. of Bedrooms 3 Last Occupied? weekend Home Disposal (Y) N Softener? (Y) N H_2O Supply? well

Records Available _____ Permit/Installation Date _____ Installer _____

Septic System Information

Septic Tank(s): Size 1200 Material Concrete Condition O/K

Tank Pumped? Yes Date 6-4-17 Licensed Pumper 359

Septic/Trash/Processing Tank: Size 1000 Material _____ Condition O/K

Tank pumped? Yes Date 6-4-17 Licensed Pumper 359

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 3 Condition OK

Header Pipe(s) PVC Number of Lines —

Pressure Dosed? —

Secondary Treatment

Length of Absorption Fields 3x22 Bed Determined by Prob

Condition of Fields OK Determined by _____

Type of Trench Material Rock & CHAMPER

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 _____

_____

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

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

_____

_____

_____

Comments: D Box is 27" Deep

_____

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.

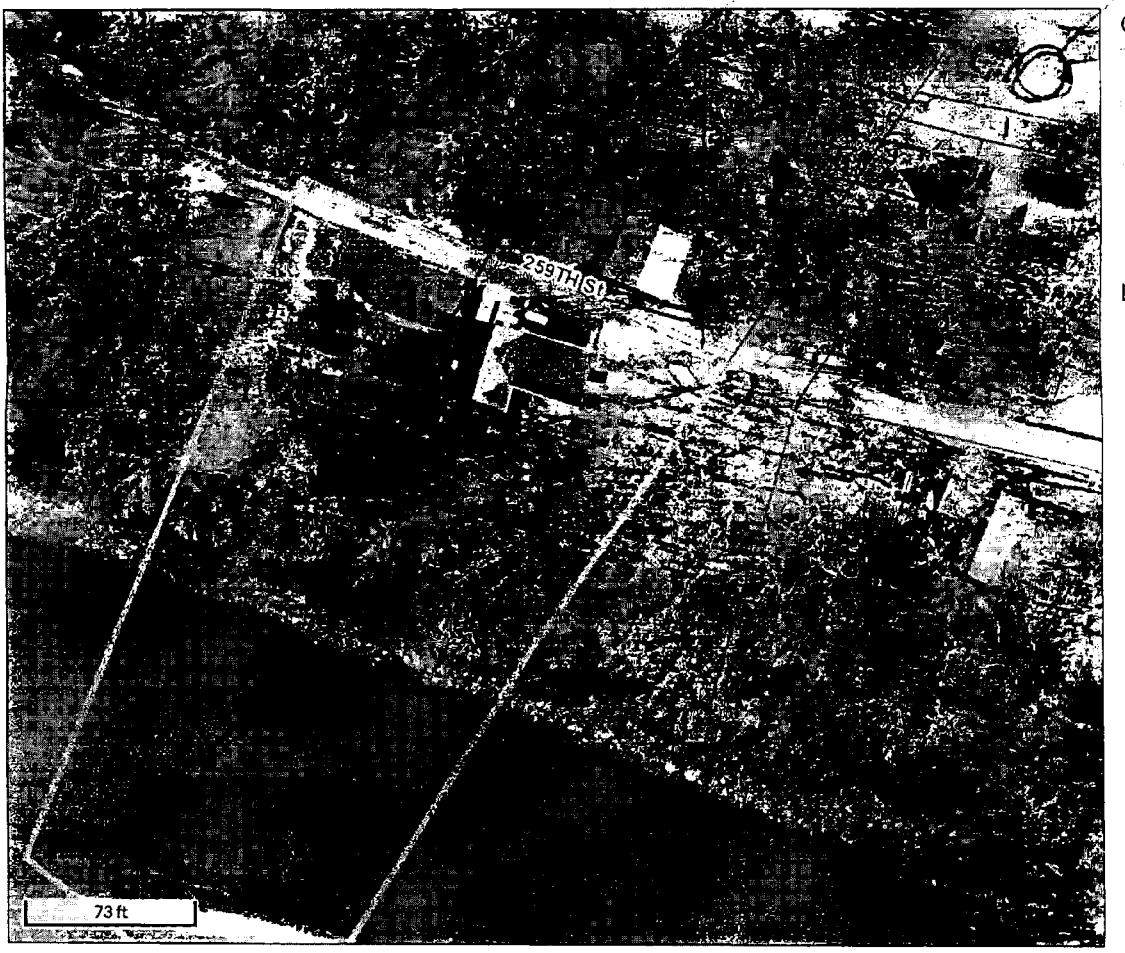
Signature of Certified Inspector: Robb Harter Date 6-5-17

Name (print): Robb Harter Certficate #: 358

Address: 3031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1010

Beacon Delaware County, IA



Overview

Legend
- Corporate Limits
- Political Township

Parcels
- <all other values>
- Yes

Roads

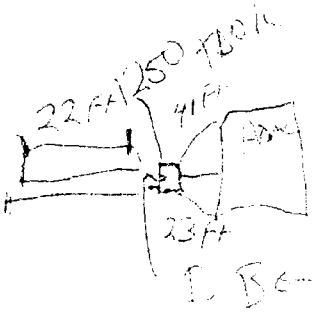
Parcel ID	250240206810	Alternate ID	n/a	Owner Address	Sturtz, David E W
Sec/Twp/Rng	24-88-5	Class	R		21558 259th St
Property Address	21558 259TH ST DELHI	Acreage	n/a		P O Box 246
					Manchester, IA 52057
District	MILO MAQ. V. LAKE FD 12				
Brief Tax Description	PARCEL T PT PARCEL N PT SW SE & LAKE FRTG				

(Note: Not to be used on legal documents)

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Developed by
The Schneider Corporation



Harter Custom Pumping, Inc & Septic Service

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

********** Cell

Homeowners: Dave Stuntz
21588 259th St
Manchester IA

Age of Property 1989
Occupied
Yes or No

Inspection Co: 563-542-1010 Robb Harter
3031 160th St Dyersville
Date of Inspection: 6-5-17

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 1250 Gallons *Basis for estimate*
What is the separation between well and septic? Over 500 FT
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 Every 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: 6-5-17