Book 2017 Page 2432
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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Penny D. Sebeny and Michael J. Sebeny - Trustees

Address 16375 189th Street, Manchester, Iowa 52057

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

TRANSFEREE:

Name Kerby L. Seeley and Sarah M. Tweedy

Address 505 Peace Avenue NW, Cedar Rapids, Iowa 52405

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

Address of Property Transferred:
16375 189th Street, Manchester, Iowa 520575

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

Legal Description of Property: (Attach if necessary) Lots Eleven (11) and Twenty Two (22) of North Ridge Subdivision in the Southeast Quarter of the Southwest Quarter of Section 18, Township 89 North, Range 5 West of the 5th Principal Meridian, according to plat recorded in Book 7 Plats, Page 65.

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. located in front of the house on the West side of the driveway
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:

_____

_____

_____

_____

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.: 3197219855
(Transferor or Agent)

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

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

Property information

Current Owner: Michael & Penny Sebeny

Buyer: _____ Realtor: F & M Realty - Teresa Turnis

Mailing Address: 16375 189th St. Manchester, IA 52057

Site Address/County: 16375 189th St. Manchester, IA 52057

No. of Bedrooms 4 Last Occupied? Present Disposal? Y / N Softener? Y / N H_2O Supply? Well

Records Available Yes Permit/Installation Date 7/9/02 1095 Installer Dan schulte

Septic System Information

Septic Tank(s): Size 1250 Material Concrete Condition Good

Tank Pumped? Yes Date 7/7/17 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 Ttanks/Vaults: Type N/A Size N/A Condition N/A

Distribution System: Distribution Box Yes Outlets Used 3 Condition Fair

Header Pipe(s) 3 Number of Lines 3

Pressure Dosed? No

Secondary Treatment

Length of Absorption Fields Approx 300' Determined by Probe + Visual

Condition of Fields Good Determined by Hydrlic load test

Type of Trench Material Rock + Pipe + Infiltrator

Size of Sand Filter N/A 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 submitted N/A

Time of Transfer Inspection Worksheet

Other Components

Alarms No Working? N/A Disinfection No Working? N/A

Control Box No Timers No Inspection Ports No

Other Components None

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): Seperate Report.

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.

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: Luke Ogden T.O. Date: 7/7/17

Name (print): Luke Ogden Certficate #: 6715

Address: 17120 185th St. Manchester, IA 52057

Phone # 563-927-2348

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

Septic Inspection
Mike & Penny Sebeny
16375 189th St.
Manchester, IA 52057

On July 7, 2017 a septic inspection was performed at the above address.

Description:

Home is 3500 square feet with 4 bedrooms and 4 bathrooms. Property contains a sewage pump in the basement and water softener.

Septic Description:

Septic system consists of a 1250 gallon 2 compartment concrete septic tank, 1 – 7 hole distribution box with 3 outlets used. System was installed by Dan Schulte on July 9, 2002. Trench depth ranges from 42"-24" – determined by probe.

Septic Condition:

A hydraulic load test was performed at 5 GPM at 85 minutes for total of 425 gallons of water. Septic system accepted water fine.

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.

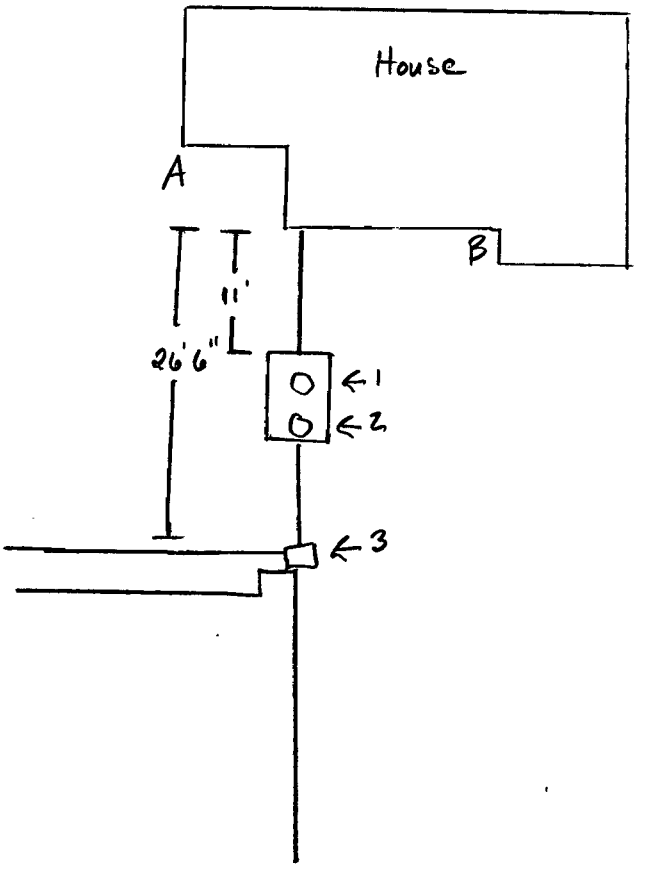
Certified by Luke Ogden #6715

Luke Ogden **Date** 7/7/17

Owner: Mike & Penny Sebeny 16375 189th St. Manchester, IA 52057

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

OWNER: Mike + Penny Sebeny **DATE:** 7/5/17
SITE ADDRESS: 16375 189th St **TOWN/COUNTY:** Manchester / Delaware
GPS: Long:_____ Lat:_____
TANK SIZE: 1250 Swales Plastic **OR** (Concrete) **D-BOX:** (6) or 9 **OUTLETS USED:** 3
SECONDARY TREATMENT: Rock + Pipe + Infiltrator -



A-1 = 25' 8"
A-2 = 28' 4"
A-3 = 37' 6"
B-1 = 38'
B-2 = 39' 4"
B-3 = 45' 4"