Book 2017 Page 2860

Document 2017 GWH-2860 Type 53 001 Pages 8
Date 10/16/2017 Time 12:42:27PM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Evan R. Hughes

Address 20875 262 St Delhi IA 52223
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:

Name Robert F. Wright Sherri C. Salow

Address 905 Maplewood Drive Center Point IA 52213
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
2560 220th Avenue Delhi IA 52223
Number and Street or RR | City, Town, or P.O. | State | Zip

Legal Description of Property: (Attach if necessary) SEE ATTACHED

See attached legal description

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.

   Drilled in use See drawing attached for location
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.

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

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.: (319) 350-5551
(Transferor or Agent)

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

EXHIBIT "A"

Lot Twelve (12) of The Village – Third Addition A Re-Subdivision of Lots 1, 2, & 3 Of The Village – First Addition Part Of the SW ¼ - Sec. 19, T88N, R4W of the Fifth P.M., Delaware County, Iowa, according to plat recorded in Book 2015, Page 2287

542-0191

Time of Transfer Inspection Report

Property Information

Current Owner: Even Hughes

Buyer: Robert F. Wright & Sherri C. Shaw Realtor: Chip Hughes -Caldwell Banker/Hedges Realty

Mailing Address: 2560 220th .Ave Delhi, Ia

Site Address/County: 2560 220th Ave. Delhi, Ia.52223

Legal Description

No. of bedrooms: 2 Last occupied: Current Records available: Yes

Permit/ installation date: Permit # 1463 Separation distances (ok/no?): ok

Septic System Information

Septic tank(s): Size: 1000 Material: concrete Condition: good

Tank pumped? ☐ Date: 4/22/2015 Licensed pumper: Welu PumpingTank

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: Tank in good condition and baffles are Ok lids are exposed.

Pump tanks/vaults: Type: Size: Condition:

Distribution system: Distribution box: Manifold Outlets used Condition: good

Header pipe(s): No. of lines: 4 Pressure dosed?

Secondary Treatment:

Length of absorption fields: 12x20 Bed Determined by: Probe and map

Condition of fields: Good Determined by: Probe and Hyd. test

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:

Condition:

542-0191

NPDES General Permit 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:
System was put in when the building was only a shop since then part of the shop was turned into a living area with bath, kitchen, office and 2 bed rooms.
This the second time this has been inspected nothing has changed (1st. inspection has expired) At time of this inspection the tank baffles are in good condition. The letch field handled the load test ok.

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: Jody Antrim Date: 10/4/2017

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 or the person ordering the inspection, the county sanitarian/environmental health office and to:

Iowa DNR
Private Sewage Disposal Program
502 E 9th St
Des Moines IA 50319

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type) **Permit No.** 1423

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 2560 120th Ave **Section** 19 **Township** Delhi

LOCATION: SW¼ sec 19 T-88-N R-4-W.

Owner: Chip Hughes **Tenant:** _____ **Plumber:** Mark Fink

Lot Size: _____ **Type Commercial:** Shop **Residential: (No. Bedrooms)** _____

Fixtures: Stools 1 **Lavatories** _____ **Bath Tubs** _____ **Showers** _____ **Sinks** 1 **Automatic Laundry** _____ **Sump Pump** _____

Septic Tank made by Smalley **Garbage Grinder** _____ **Construction Material** Concrete **Gallons Cap** 1000

Percolation Test: 1. _____ 2. _____ 3. _____ 4. _____ **Made by:** _____

Absorption Field: Total length of laterals 12x20 Bed **No. of lateral lines** _____

This system is new X **Existing** _____ 18" rock under pipe

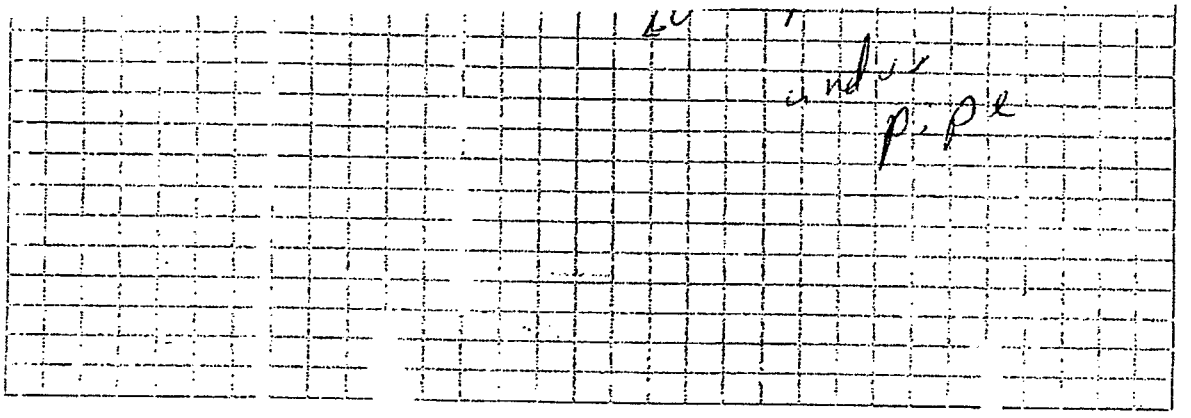
I certify that the above information is correct and that all proposed work will be completed in accordance with the Delaware County Regulations.

Date Approved 9-15-06

By Dennis Lyons
INSPECTOR

APPLICANT'S SIGNATURE

SEAL



Mapping Check ist

Map scale: _____ _____ ___ indicate north ___ show slope _____ % direction ___

Locate

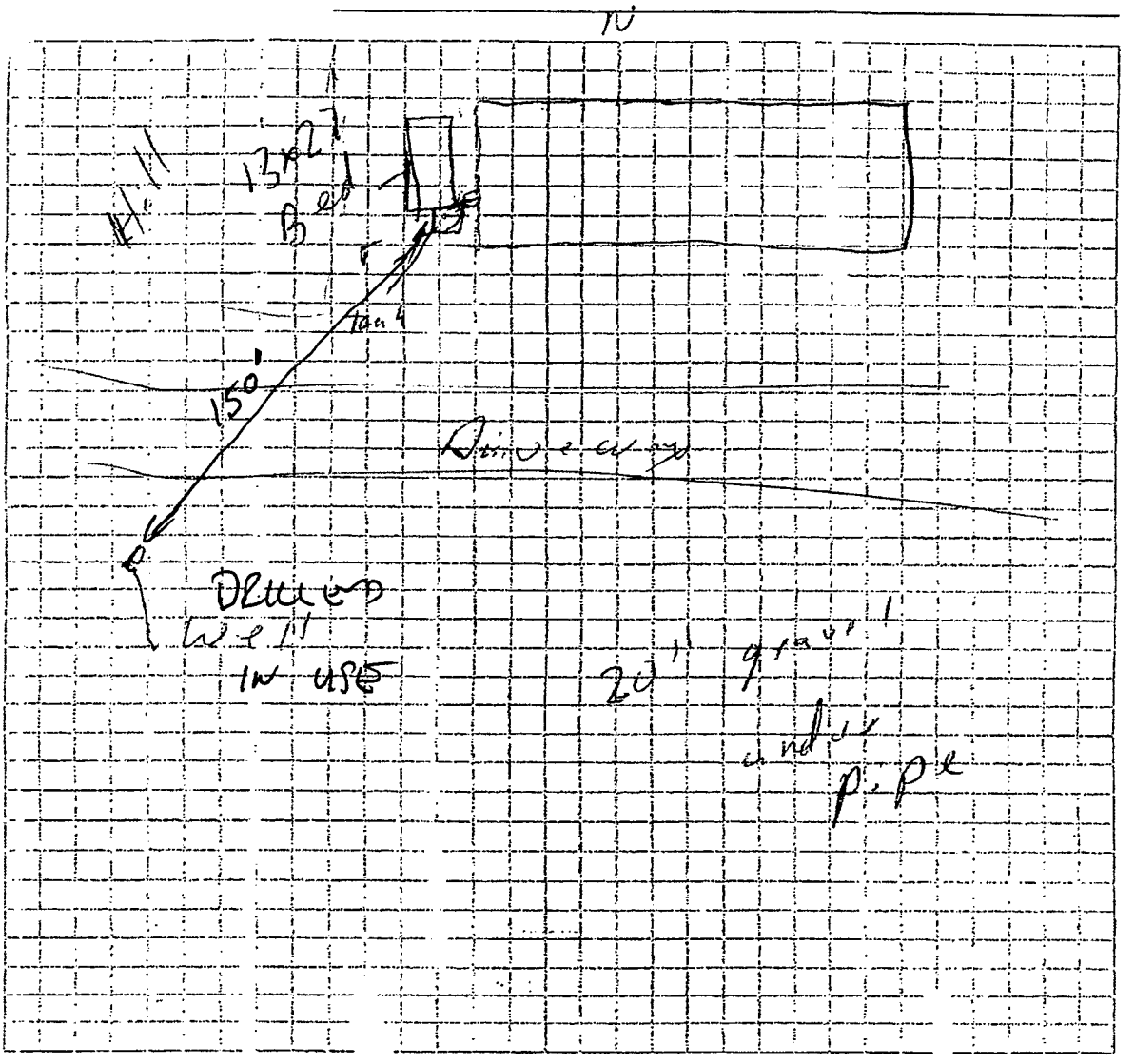
___ lot dimensions/property lines
___ dwellings and other improvements
___ existing and/or proposed system(s)
___ replacement area
___ unsuitable area(s)
___ public water supply wells
___ pumping access
___ inner wellhead zone

___ easements
___ phone
___ electric
___ gas
___ elevations
___ borings
___ benchmark
___ perc tests
___ horiz&vert reference pts

___ setbacks
___ building
___ all water wells within 100ft
___ pressure pipe
___ water suction pipe
___ streams, lakes, rivers
___ floodway and fringe

ation Map page 2 of 2 Designer Fink

Construction Issues: Hughes



Mapping Check ist

Map scale: _____ ___ indicate north ___ show slope _____ % direction ___

Locate

___ lot dimensions/property lines
___ dwellings and other improvements
___ existing and/or proposed system(s)
___ replacement area
___ unsuitable area(s)
___ public water supply wells
___ pumping access
___ inner wellhead zone

___ easements
___ phone
___ electric
___ gas
___ elevations
___ borings
___ benchmark
___ perc tests
___ horiz&vert reference pts

___ setbacks
___ building
___ all water wells within 100ft
___ pressure pipe
___ water suction pipe
___ streams, lakes, rivers
___ floodway and fringe