Book 2018 Page 234
Document 2018 GWH-234 Type 53 001 Pages 8
Date 1/30/2018 Time 12:44:53PM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Crop Production Services, Inc.

Address	3005 Rocky Mountain Ave.	Loveland	CO	8-538
	Number and Street or RR	City, Town or PO	State	Zip

TRANSFEREE:

Name Klostermann Bros., Inc.

Address	2998 197th St.	Earlville	IA	52041
	Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

1964 300th Ave.	Earlville	IA	52041
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

Parcel A, A Division of Lot 1 of the Southwest Quarter (SW1/4), Section 21, Township 89 North, Range 3 West of the Fifth Principal Meridian, Delaware County, Iowa Plat recorded in Book 2004 Page 4283.

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.: 970-685-3330

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

Property information

Current Owner Crop Production Services Inc

Buyer Klostermeier Bros, Inc. Realtor Travis Smock - Peoples Company

Mailing Address

Site Address/County 1964 300th Ave Earlville Iowa

No. of Bedrooms — Last Occupied? uk Disposal? Y / (N) Softener? Y / (N) H_2O Supply? well

Records Available Yes Permit/Installation Date permit # 1494 1/4/2007 Installer John Bonart

Septic System Information

Septic Tank(s): Size 1500 Material Concrete Condition Good

Tank Pumped? Yes Date 1/19/18 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 N/A Outlets Used N/A Condition N/A

Header Pipe(s) N/A Number of Lines N/A

Pressure Dosed? N/A

Secondary Treatment

Length of Absorption Fields None Determined by Permit + visual inspection

Condition of Fields N/A Determined by Holding tank

Type of Trench Material N/A

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? Yes Unacceptable? _____

Explain (attach additional pages as needed): Separate Sheet.

Comments: Seperate Report

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: _____ Date: 1/19/18
Name (print): Luke Ogden Certficate #: 6715
Address: 207 Quaker Mill Dr. Manchester Iowa
Phone # 563-927-6503

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

Septic Inspection
Crop Production Services
1964 300th Ave.
Earlville, IA

On January 19, 2018 a septic inspection was performed at the above address.

Description:

Property at 1964 300th Ave. Earlville, IA.

Septic Description/Condition:

Site has an office building with a toilet and sink. 1 – 1500 gallon concrete holding tank with no outlet. Installed January 4, 2007. Holding Tank was pumped and inspected on January 19, 2018. Tank is in good condition, north riser and lid are damaged and will be repaired.

*NOTE – Septic permit notes that all pumping records of the holding tank need to be reported to the Delaware County Sanitarians office.

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.

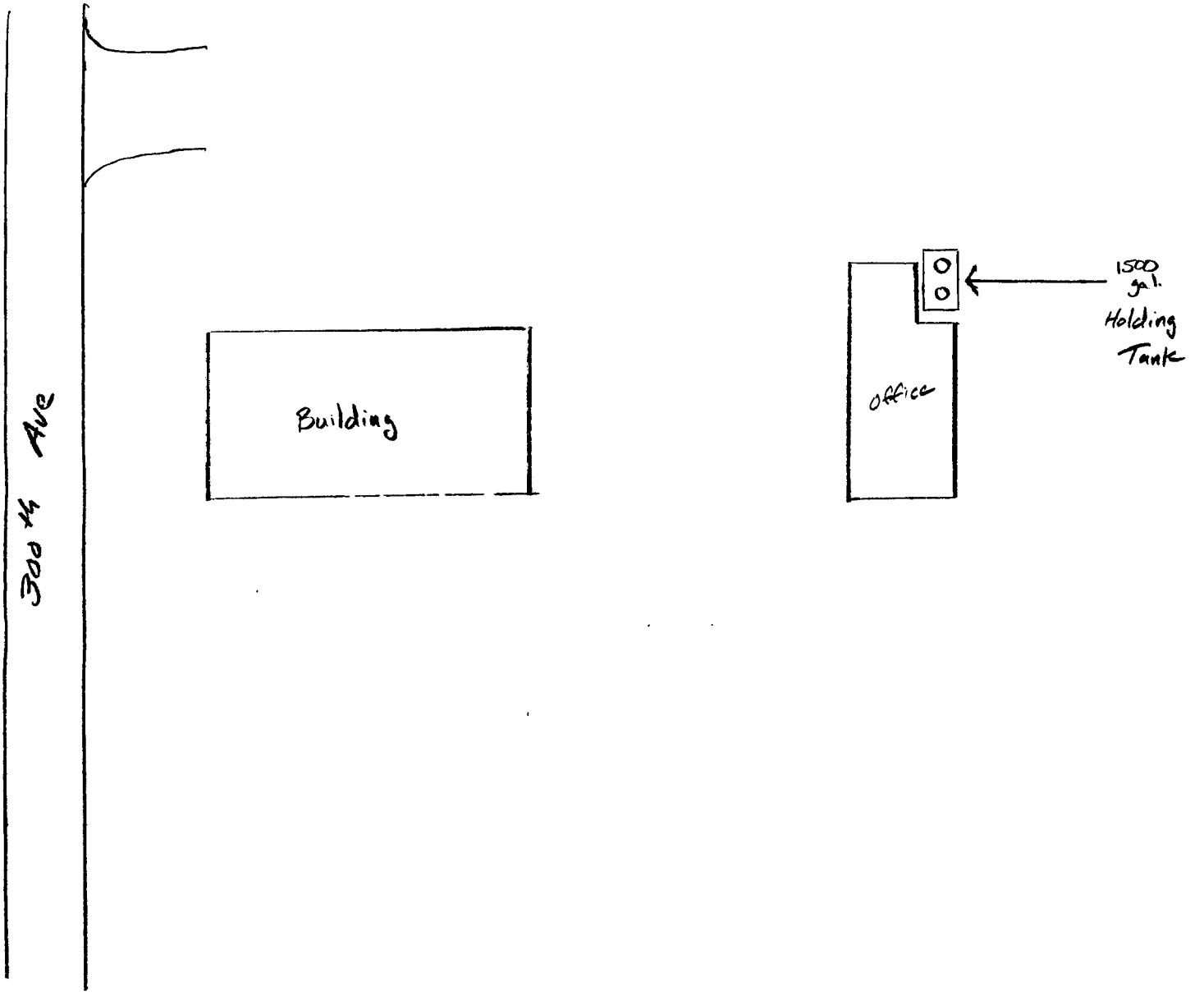
Certified by Luke Ogden #6715

Luke Ogden T.O. **Date** 1/19/18

Owner: **Crop Production Services 1964 300th Ave. Earlville, IA**

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

OWNER: Crop Productions **DATE:** 1/19/2018
SITE ADDRESS: 1964 300th Ave **TOWN/COUNTY:** Earlville / Delaware Co.
GPS: Long: -91.212315 Lat: 42.303345
TANK SIZE: 1500 Plastic **OR** Concrete **D-BOX:** 7 or 9 **OUTLETS USED:** None
SECONDARY TREATMENT: This is a Holding tank No outlets.



DELAWARE COUNTY
BOARD OF SUPERVISORS (Print or Type) Permit No. _____

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 1966 30th Ave ~~1977~~ St Section 21 Township Bruce

LOCATION: 1966 ~~-~~ 30th Ave 21-89-3

Owner: The Spurr Tenant: _____ Plumber: Bonnet

Lot Size: 60 x 160 Type Commercial: _____ Residential: (No. Bedrooms) _____

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

Septic Tank made by Swiss Garbage Grinder _____ Construction Material _____ Gallons Cap. 1500

Percolation Test: 1. _____ 2. _____ 3. _____ 4. _____ Made by: 42 30 30 - 91 21 25

Absorption Field: Total length of laterals _____ No. of lateral lines _____

This system is new X Existing ____. Send record of pumping

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 1-4-07

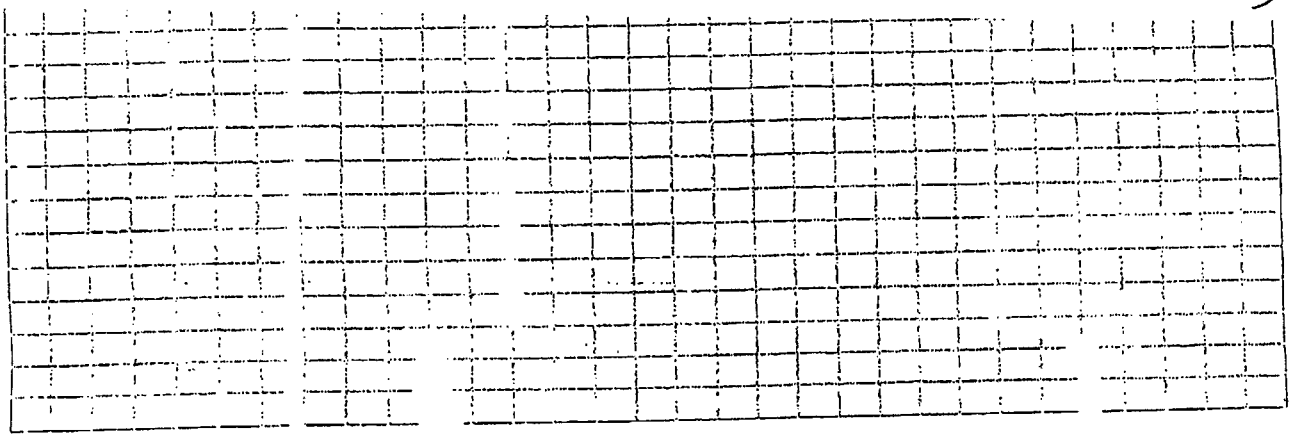
By Dennis Lyons
INSPECTOR

X [signature]
APPLICANT'S SIGNATURE

SEAL

N. W corner

Tank to sit Beside the Building.



Mapping Checklist

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

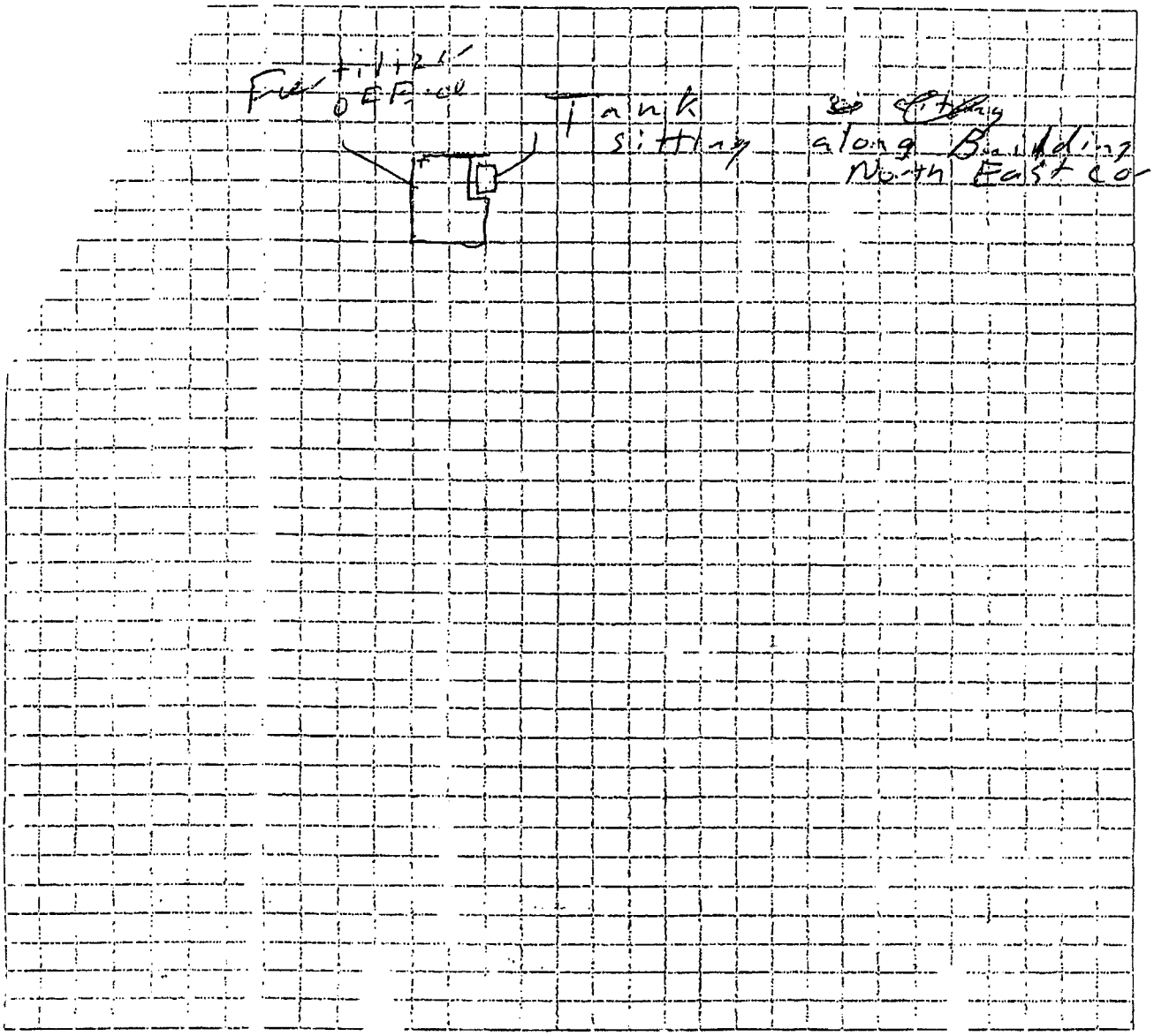
- ___ easements
  - ___ phone
  - ___ electric
  - ___ gas
- ___ elevations
  - ___ borings
  - ___ benchmark
  - ___ perc tests
  - ___ horiz&vert reference pts

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

1-4-07

n Map page 2 of 2 Designer Bonnet

ues: C.P.S The Spa



Mapping Checklist

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Locate

___ lot dimensions/property lines
___ dwellings and other improvements
___ existing and/or proposed system(s)
___ replacement area
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___ **easements**
___ phone
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___ gas
___ **elevations**
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___ benchmark
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___ horiz&vert reference pts

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

1-4-07