Recorded: 12/31/2019 at 11:26:35.0 AM
County Recording Fee: $0.00
Iowa E-Filing Fee: $0.00
Combined Fee: $0.00
Revenue Tax:
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2019 PG: 3714

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name: Dodd D./Mary A. Scroggin

Address: 410 Douglas Street (Number and Street or RR) | Hereford (City, Town or PO) | Texas (State) | 79045 (Zip)

TRANSFEREE:

Name: David C./Mary B. Marks

Address: 1549 190th Street (Number and Street or RR) | Manchester (City, Town or PO) | Iowa (State) | 52057 (Zip)

Address of Property Transferred:

1549 190th Street (Number and Street or RR) | Manchester (City, Town or PO) | Iowa (State) | 52057 (Zip)

Legal Description of Property: (Attach if necessary)

Parcel H;Part of the SW1/4-SE1/4 Sec.13 T89N R6W of the 5th PM Delaware County, Iowa. according to Plat recorded in Book 2005, Page 4039

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.

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 west of the southwest corner of the house

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.: 563-930-9290

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

Property information

Current owner Dodd & Mary Scroggin (563-920-9290)
Buyer _____ Realtor Remax / Diane Goerdt
Mailing address 410 Douglas Street Hereford Texas 79045
563-513-9378

Site Address/County 1549 190th St Manchester
Legal Description _____

No. of bedrooms 3 Last occupied? April 2019 Records available yes

Permit/installation date 10-31-05 Separation distances ok/ no? OK

Septic system information

Septic tank(s): size 1500 material Concrete condition good
Tank pumped? yes date 1-20-18 licensed pumper ST 49
Septic/trash/processing tank: size — material — condition —
Tank pumped? — date — licensed pumper —

Aerobic treatment unit (ATU) mfgr — size —
Tank pumped? — date — licensed pumper —
Maintenance contract? — expiration date — service provider —
Condition —

Pump tanks/vaults: type — size — condition —

Distribution system: distribution box yes outlets used 3 condition good
Header pipe(s) — # of lines — Pressure dosed? —

Secondary treatment:
length of absorption fields 300' determined by map
condition of fields good determined by water test
type of trench material rock & pipe

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 provided _____

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

Report system status _____

Explain (attach additional pages as needed): _____

Comments: System in good shape was redone in 8-28-10 new lines / curtain Drain water test 35 minute 6/gallons minute

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: Bill Downs Date: 5-29-19
Name (print): Bill Downs Certificate #: 8880
Address: 1491 110th Ave Dundee Iowa 52038
Phone # 563-924-2225

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 and to;

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319

130 - 03- 00 [illegible]

DELAWARE COUNTY
BOARD OF SUPERVISORS (Print or Type) **Permit No.** 1387

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 1549 190th St Section 13 Township C. G

LOCATION: SW¼ SW¼ SW¼ Sec 13 T-89-N R-6-W

Owner: Dan Kaleka Tenant: _____ Plumber: Erickson

Lot Size: 200 x 200 Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Stools 3 Lavatories ___ Bath Tubs 1 Showers 2 Sinks 4 Automatic Laundry 1 Sump Pump ___

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

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

Absorption Field: Total length of laterals 270 Ft No. of lateral lines 3

This system is new X Existing ___.

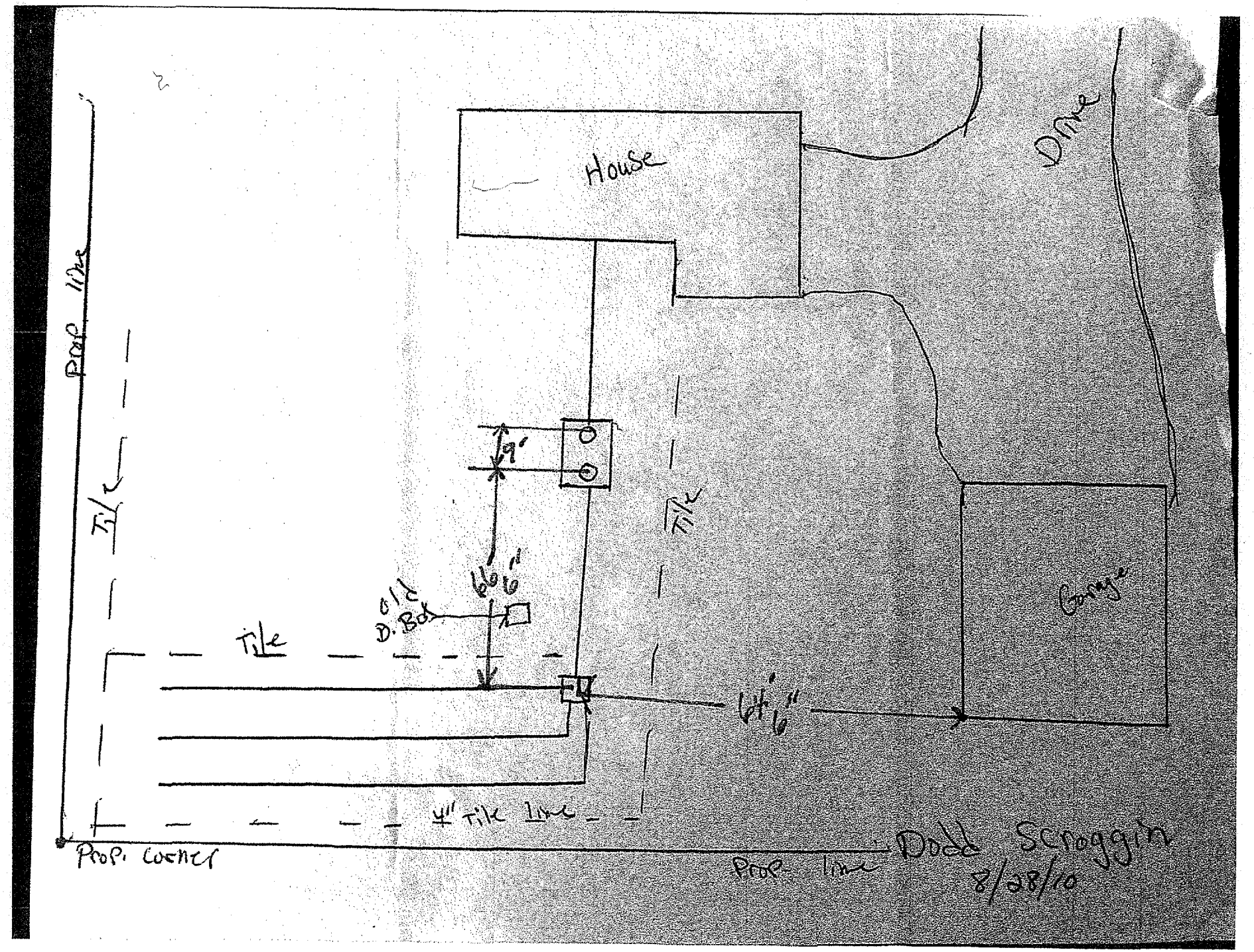
I certify that the above information is correct and that all proposed work will be completed in accordance with the Delaware County Regulations.

Date Approved 10-31-05

By Dennis Lynn
INSPECTOR

+ Roger Erickson
APPLICANT'S SIGNATURE

SEAL


House
Drive
Prop. line
Tile
9'
Tile
60'6"
D. Box
Tile
Garage
64'6"
4" Tile Line
Prop. corner
Prop. line
Dodd Scroggin
8/28/10