Book 2020 Page 1383
Document 2020 GWH-1383 Type 53 001 Pages 9
Date 5/11/2020 Time 8:32:37AM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Kathy J. Dirks & Diane E. Russell, Co-Executors of the Shirley A. Steuri Estate

Address 1915 Northbrook Dr. NE, Cedar Rapids, IA 52402

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

TRANSFEREE:

Name Ethan E. Brehm and Marissa L. Brehm

Address 8655 Bridgewood Blvd. Apt. 8211, West Des Moines, IA 50266-8270

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

Address of Property Transferred:
2216 310th Ave., Earlville, IA 52041

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

Legal Description of Property: (Attach if necessary)
LOTS THREE (4) AND FIVE (5) OF THE SURVEY AND PLAT OF PART OF THE WEST ONE-HALF (W½) OF THE NORTHWEST FRACTIONAL QUARTER (NW FRL¼) OF SECTION THREE, TOWNSHIP EIGHTY-EIGHT (88) NORTH, RANGE THREE (3), WEST OF THE FIFTH PRINCIPAL MERIDIAN, ACCORDING TO PLAT RECORDED IN BOOK 3 PLATS, PAGE 6.

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.

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.

__ 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]

_X_ This property is exempt from the private sewage disposal inspection requirements pursuant to the following exemption [Note: for exemption #9 use prior check box]:
EXEMPTION #3. TRANSFER BY A FIDCUIARY IN THE COURSE OF ADMINISTRATION OF A DECEDENT'S ESTATE.

__ The private sewage disposal system has been installed within the past two years pursuant to permit number #2903.

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.

SHIRLEY A. STEURI ESTATE

BY: Kathy J. Dicks Telephone No.: (319) 389-9002
Kathy J. Dicks, Executor

GROUNDWATER HAZARD STATEMENT

ATTACHMENT #1

NOTICE OF WELL LOCATION

A water system, consisting of a Well, electrical components, pump, pipes, and other and necessary appurtenances thereto, are located on Lot Four. Most of the support equipment for the Well is located in the residential structure on Lot Four. The location of the well is:

The well is located 20 feet away from the back of the house. (North East)

I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

SHIRLEY A. STEURI ESTATE

BY: Kathy J. Dirks Telephone No.: (319) 389-9002
Kathy J. Dirks, Executor

DELAWARE COUNTY

BOARD OF SUPERVISORS

PERMIT NO. 2903

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 2216 310th Ave SECTION 3 TOWNSHIP North fork

Owner Shirley Steuri Estate Plumber Budden

LOCATION SEC 3 T 88 N R 3 W Parcel# 210030000700

Lot size _____ Type Commercial _____ (Residential) (No. Bedrooms) 3

Fixtures: Stools 1 Bath tubs 2 Showers 1 Sinks 3 Lift Pump 1

Septic tank made by Schmolz Construction Material Crete Gallon Cap. 1750

Absorption Field: Total length of Laterals 300 No. of lateral lines 3 Size of leach bed _____

Trench Material Chambers Secondary Treatment Type _____ Serial No. _____

This system is new construction ✓ Existing _____

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

Delaware County Septic System Disclaimer

The issuance of a permit and the completion of the inspection required by Delaware County Ordinance No. 40 do not serve as any type of warranty, guarantee, or certification regarding the proper functioning of a private septic system for any period of time in the future. Delaware County and its employees or agents are unable to supervise or monitor the numerous factors (usage, soil characteristics, previous failures, etc.) that may affect the proper operation or the use and maintenance of the system.

The issuance of a permit and/or the completion of the inspection do not constitute any type of warranty, guarantee, or certification regarding the impact the system is or is not having on the groundwater. Delaware County and its employees or agents are not able to determine the impact a septic system is having on the groundwater.

Delaware County hereby **DISCLAIMS ALL WARRANTIES**, either expressed or implied, associated with this permit and the inspection required under Ordinance No. 40.

By signing below, I acknowledge that I have received and read the above disclaimer.

Name Kathy Dues Date 4/6/20

Applicant

I have studied the information contained herein and certify that the application complies with Delaware County Ordinance No. 40 and Iowa Administrative Code 567—69, Private Sewage Disposal Systems.

Name Alex Lindewell Date 4-6-2020

Delaware County Representative

DELAWARE COUNTY SANITATION

Application # _____ EnvTrack # _____

Permit # 2903

Completion Report for Private Sewage Disposal System

Owner: Shirley Steuri Estate

Site Address: 2216 310th Ave, Earlville, IA 52041 Township: North fork

Parcel #: 2100 30 000700 Lot # Legal S-T-R 3-88-3

Mailing Address: 2216 310th Ave, Earlville, IA 52041

Contractor: Budden Bedroom #: 3

Water Supply: _____

Primary Treatment: **Latitude:** _____ **Longitude:** _____

Septic Tank Volume (g): 1750 Manuf: Sukup Swaps Material: Crete # Pieces: 1 # Cmp: 3

Riser Ht Lid 1 (in): 48 Riser Ht Lid 2 (in): 18 Filter Brand: Orenco Diameter (in): 5 Distance to well (ft): _____

Note: Effluent filter requires frequent cleaning.

Dose Tank Volume(g): 250 (Pump) or Siphon Dose: 250 Gallons/dose: _____ Riser Ht (in): 48 Alarm: Yes

D-Box: **Latitude:** _____ **Longitude:** _____ **Depth:** _____

Subsurface Absorption Type: Chamber Chamber Manuf: _____ Lineal Ft: 300 # Trenches: 3

Inches rock under pipe: _____ Trench Depth (in): _____ Trench width (in): _____ Distance to well (ft): _____

Surface Absorption Type: _____ Overall length (ft): _____ Overall width (ft): _____

Rock bed length (ft): _____ Rock bed width (ft): _____ Length of laterals (ft): _____ # Laterals: _____

Header pipe diameter (in): _____ Rock type: _____ Distance to well (ft): _____ Depth to bottom of trench (in): _____

Packed Bed Media Filter: _____ Sand filter length(ft): _____ Sand filter width (ft): _____ Sand filter sq ft: _____

Liner: _____ Distance to well (ft): _____ # Distributor lines: _____ # Collector lines: _____

Distributor line type: _____ Separating layer: _____ Discharge GPS (lat x long): _____

***Peat Filter:** Serial #: _____ Closed or Open bottom: _____ Lineal Ft absorption: _____ # Laterals: _____

crushed rock, river rock or chamber _____ Trench width (ft): _____ Rock under pipe (in): _____

Distance to well (ft): _____ Inches soil cover over trench: _____ Discharge GPS (lat x long): _____

***Recirculating Textile Filter:** Brand Name: _____ Distance to well (ft): _____

Discharge GPS (lat x long): _____ Absorption field installed after (no discharge) _____

***Note: A maintenance agreement with a manufacturer-approved contractor must be maintained for the life of the septic system.**

Comments: **Effluent filter requires frequent cleaning.**

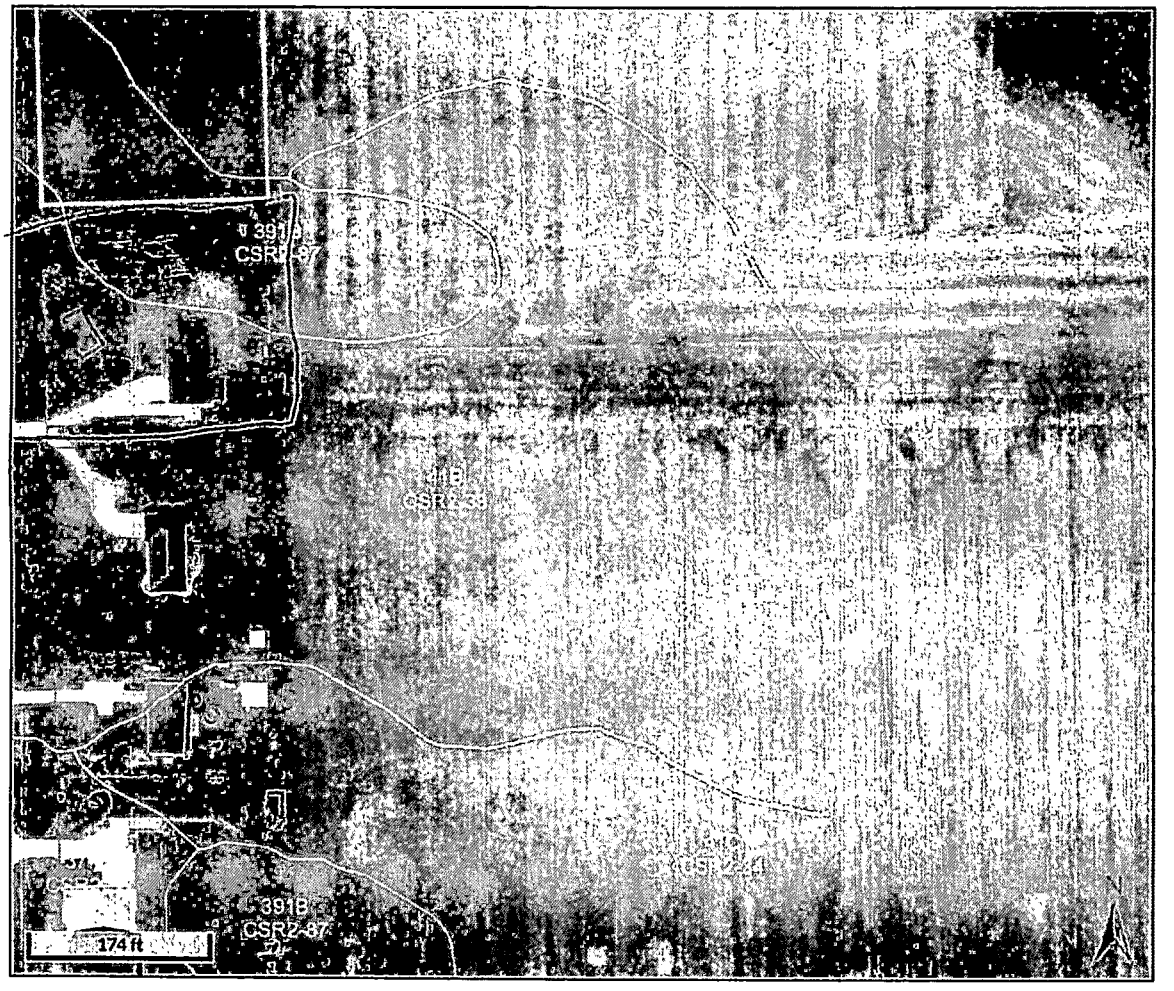
Was any portion of the field covered before the inspection: _____ System installation approved: _____

Date of Final Inspection: _____ **Environmental Health Specialist:** _____

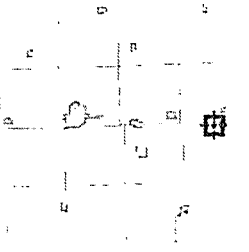
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This APPROVAL in no way makes the County responsible for the continued operation of this sanitation system

Beacon™ Delaware County, IA



Overview



Legend

- Corporate Limits
- Political Township

Parcels

- BLL
- Parcel

Roads

Soils 2019

Parcel ID	210030000700	**Alternate ID**	n/a	**Owner Address**	Steuri, Shirley A
Sec/Twp/Rng	3-88-3	**Class**	R		2216 310th Ave
Property Address		**Acreage**	n/a		Earlville, IA 52041
District	NORTH FORK WESTERN DUBUQUE FD #13				
Brief Tax Description	LOT 3 SUBDIV W 1/2 NW FRL 1/4 (Note: Not to be used on legal documents)				

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Date created: 3/5/2020
Last Data Uploaded: 3/5/2020 8:27:52 AM

Developed by Schneider GEOSPATIAL

1750 +/- Compartment
100 Ft
3 - lines
Chamber
or
Bed -
2 x 50 By Trench

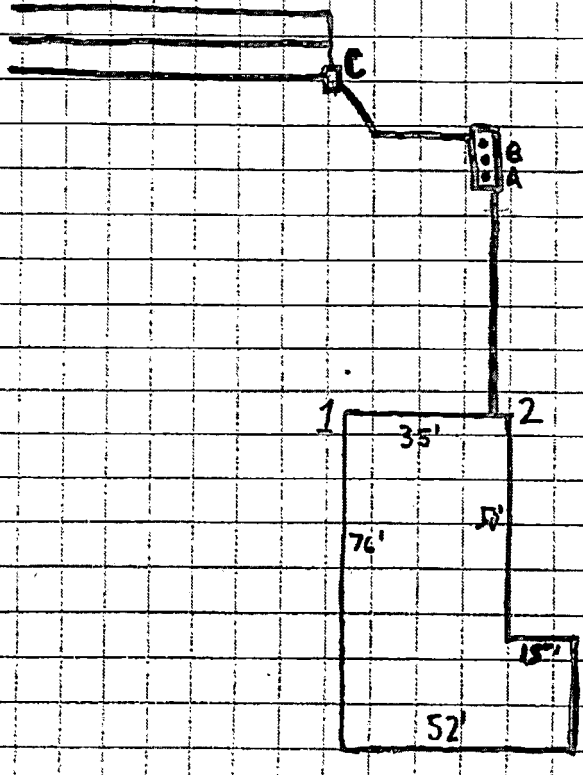
Meet with Toby
Budden



1-C	77'
2-C	52'
1-A	57'
2-A	43'
1-B	54'
2-B	50'
House to tank Lid 1	43'

A = Lid 1
B = Lid 2
C = D-box

GPS Coordinates
End of line =



• well
Locatio

Property line