Book 2020 Page 2039

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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name William J. Soesbe III

Address 704 Bel Air Dr., Waverly, IA 50677

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

TRANSFEREE:

Name Curtis A. Tauke & Michelle Tauke

Address 17905 Rainbow Dr., Monticello, IA 52310

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

Address of Property Transferred:
20528 258th St., Manchester, IA 52057

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

Legal Description of Property: (Attach if necessary) See 1 in Addendum

1. **Wells (check one)**
   - X 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)**
   - 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.: (319) 415-9852
(Transferor or Agent)

Addendum

1. Leasehold Interest in a frame cabin, 20 by 30 feet built in 1966 and located upon the Beverly L. Schneider farm in the SW 1/4 of Section 23, Township 88, North, Range 5, West of the 5th P.M., Milo Township, Delaware County, Iowa, and being the second cabin on the right side of lane in cabin area after you pass through the gate from the lane on the Beverly L. Schneider farm leading to the cabin area; commonly known as 20528 258th St., Manchester, Iowa, rights, easements, and access necessary or appurtenant thereto owned by Sellers, included, if not now in or on said premises and owned by the Sellers, are all fixtures. Parcel No. 250230100109

   The cabin is located upon land leased from the title holder of the real estate.

Hold TANK ONLY

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

Property information
Current Owner William J III Soesbe
Buyer _____ Realtor _____
Mailing Address 704 BEL Air DR. WAVERLY IA 50677

Site Address/County PH 250230100109 20528 258th ST MANCHER

No. of Bedrooms 2 Last Occupied? Weekend Disposal? Y / N Softener? Y / N H_2O Supply? Yes Over 300 FT ACROSS

Records Available Yes Permit/Installation Date 8-15-15 Installer _____

Septic System Information
Septic Tank(s): Size 1500 Material Concrete Condition Good
Tank Pumped? Yes Date 5-10-20 Licensed Pumper 358
Septic/Trash/Processing Tank: Size Hold tank Material Concrete Condition Good
Tank pumped? Yes Date 5-10-20 Licensed Pumper 358

Aerobic treatment unit (ATU) MFGR — Hold TANK Size ONLY
Tank Pumped? — Date — Licensed Pumper _____
Maintenance Contract? — Expiration Date _____ Service Provider _____
Condition —

Pump Ttanks/Vaults: Type — Size _____ Condition _____

Distribution System: Distribution Box — Outlets Used — Condition —
Header Pipe(s) _____ Number of Lines _____
Pressure Dosed? _____

Secondary Treatment
Length of Absorption Fields _____ Determined by _____
Condition of Fields _____ Determined by _____
Type of Trench Material _____

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 submitted _____

Time of Transfer Inspection Worksheet

Other Components

Alarms Yes Working? Yes Disinfection No Working? —

Control Box — Timers — Inspection Ports _____

Other Components _____

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): _____

Hold Tank Only

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: Robb Harter Date: 5-10-20

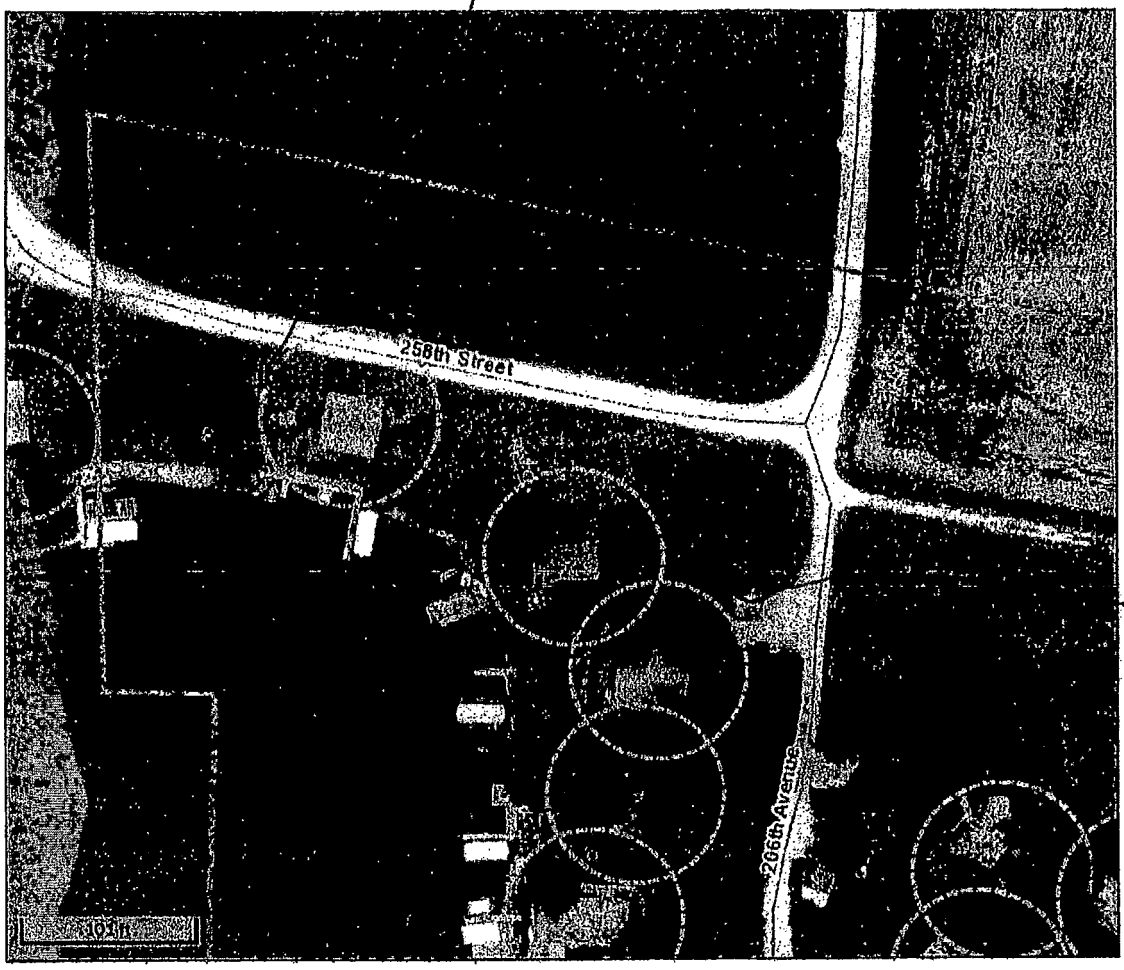
Name (print): Robb Harter Certficate #: 358

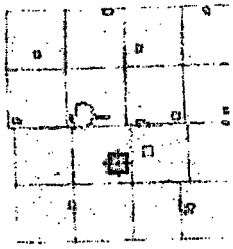
Address: 3031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1010

1500 gal tank only

Beacon™ Delaware County, IA





Overview

Legend

- Corporate Limits
- Political Township

Parcels

- BLL
- Parcel
- Roads

well 300 Ft to tank

Parcel ID	250230105200	Alternate ID	n/a	Owner Address	Schneider, Beverly L Declaration of Trust
Sec/Twp/Rng	23-88-5	Class	R		Schneider, Beverly L Trustee
Property Address	206TH AVE	Acreage	n/a		200 McCarren Dr
	MANCHESTER				Manchester, IA 52057
District	MILO MAQ. V. LAKE FD 12				
Brief Tax Description	PT PARCEL 2018-41 PT SW & PT SE (Note: Not to be used on legal documents)				

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Developed by Schneider GEOSPATIAL

1500 gal tank only

Tank has alarm

lid's are ground level.