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Document 2020 GWH-2833 Type 53 001 Pages 9
Date 8/21/2020 Time 3:55:42PM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Verlon R. Huston

Address	1000 West Marion Street #9	Manchester	IA	52057
	Number and Street or RR	City, Town or PO	State	Zip

TRANSFEREE:

Name Lucas Kahl

Address	135 Devon Drive	Dubuque	IA	52001
	Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

26011 216th Avenue	Delhi	IA	52223
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)
See attached Exhibit A for 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.
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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DNR Form 542-0960 July 18th 2012 cmz

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:

Well is located on the SW Corner of the lot, Approximately 10 feet from the road.

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

Signature: Vernon R Huston (Transferor or Agent) Telephone No.: 563-822-1430

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DNR Form 542-0960 July 18th 2012 cmz

Exhibit A

Description of 26011 216th Avenue, Delhi, Delaware County, Iowa

Cabin on leased land Lot #27, Hartwick Lake Club West, in the Southeast Quarter of the Southwest Quarter of the Southeast Quarter of Section 24, Milo Township at Lake Delhi and all personal property presently contained therein, or a part thereof including: Dock and Shore Station; and including Assignment of Lease to said property with Marcheta Cooey; locally known as 26011 216th Ave., Delhi, IA 52223; Parcel No. 000250250502509.

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

Property information

Current owner Verlon Huston
Buyer _____ Realtor _____
Mailing address 26011 216th Ave Delhi, Iowa 52223

Site Address/County 26011 216th Ave Delhi, Iowa 5223
Legal Description Section 24 Range 88-N

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

Permit/installation date 9/28/11 Separation distances ok/ no? ok

Septic system information

Septic tank(s): size 1500 material Poly condition Good
Tank pumped? Yes date 6/12/20 licensed pumper Kraus Plumbing & Heating, LLC
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 _____ outlets used _____ condition _____
Header pipe(s) _____ # 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 EcoFlo Coco Filter
Maintenance contract? yes expiration date 12/31/20 service provider Kraus Plumbing & Heating, LLC
Condition Good

NPDES General Permit No. 4: required? _____ permitted? _____ NOI provided _____

Time of Transfer Inspection Report

Other components:
Alarms no Working? _____ disinfection no working? _____

Control box no Timers no inspection ports yes

Other components _____

Overall condition of the private sewage disposal system

Report system status System is in good working condition

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: Brian Kraus Date: 8/18/20
Name (print): Brian Kraus Certificate #: 7232
Address: 317 S Locust St Monticello, Ia 52310
Phone # 319-465-5129

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

319-465-5129
317 S. Locust St.
Monticello, Ia 52310

Date: August 18, 2020

RE: Verlon Huston
26011 216thth Ave
Delhi, Iowa 52223

At the time of inspection, June 12, 2020, we found the septic system in good working condition at the time of inspection. The septic tank is a plastic tank. We pumped the septic tank at the time of inspection. We have attached the copy of the maintenance report from 6/12/20. At the time of inspection, the Coco filter was in good working condition.

This inspection does not guarantee that the system is free from defects nor does it guarantee the continued performance or operation of the system. Health departments recommend septic tanks be pumped every 3-4 years, depending on the number of people living in the house and the amount of water usage. Wet wipes, tampons, condoms, disposable diapers, paint, cigarette butts, cat litter, facial tissues & paper towels should not be flushed into the system, even if the box says it is "septic safe". In addition, it is preferable to use liquid laundry detergent rather than a powder. Fabric softener sheets should be used in the dryer rather than a liquid in the washing machine. Please keep all vehicles off of the system. The inspection is an assessment of the current functioning of the system, not a guarantee of its future performance. If you have any questions, please call.

Brian Kraus
317 S. Locust
Monticello, Iowa 52310
President & Owner
Operator ID # 7232

Kraus
PLUMBING & HEATING
319-465-5129
317 S Locust St. Monticello, IA 52310

Maintenance Report

Type of Equipment:
- X ST650
- O Other

Serial No: 9389 Last 4 digits

GPS Location
Latitude: _____
Longitude: _____
Map: _____

Name: Verlon Huston Date: 6/12/20
Address: 26011 216th Ave Delhi IA 52223 Work Order # N/A
Phone 563-922-3053 Cellphone: _____

Did you access the biofilter? ✓ Yes O No
Is the lid (cover) accessible to perform maintenance? ✓ Yes O No
NO? Why? _____
Is this property in front of a lake or a river? ✓ Lake O River O N/A
Were you able to remove the tipping bucket and/or the distribution plates to do maintenance? ✓ Yes O No
Is there water in zone? (only >4" of concern) O Yes How many inches? ____ ✓ No
Is the central support Cap in place? ✓ In place O Replaced O Broken
Is the tear drop vent clear or obstructed? ✓ Clear O Obstructed
Is the tipping bucket functional or not functional? ✓ Functional O Non Functional
What is the level status of the tipping bucket? ✓ At grade O Impossible to adjust O Level Adj done
Are the distribution plates & supports in good condition? ✓ Yes O No
Are the distribution plates in place? ✓ Yes O No
Are the distribution plate supports in good condition? ✓ Yes O No
Is there water on the filtering media BEFORE raking? O Yes ✓ No
Indicate if there is still water on the filtering media AFTER raking: O Yes ✓ No
Are there roots in the filter? ✓ No O Few O Some O Many
If there are roots, what is the distance between the filter and the trees? _____ feet
Is the shell in good condition or broken? ✓ Good Condition O Broken
Indicate the zone where the shell is broken: _____
What is the compaction level of the filter media? (distance between the peat and the distribution plates) O <12" ✓ 12-15" O >15"
In what condition is the filtering media? ✓ Good O Degraded O Very Degraded
What flyer(s) did you leave? O Inaccessible O Infiltration Problem O Maintenance Proof O None

Enter here the comments about information for the coordinator. Enter any comments about: detailed problems, components broken, landscape modifications, water infiltration problems, etc...

_____

_____

42.41264
-91.36892

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type)

Permit No. 2009

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 26011 216th Ave Section 24 Township M:lo

LOCATION: Sec 24 T-88-N R-5-W

Owner: Verlin ~~Kruse~~ Huston Tenant: ~~Ed Kruse~~ Plumber: ~~Verlin Huston~~

Lot Size: .6 Type Commercial: Residential: (No. Bedrooms) 2

Fixtures: Stools 1 Lavatories Bath Tubs 1 Showers 1 Sinks 2 Automatic Laundry 1 Sump Pump 1250 gal

Septic Tank made by In F. Water Garbage Grinder Construction Material Poly Gallons Cap. 1500

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

Absorption Field: Total length of laterals Peat F. Filt No. of lateral lines

This system is new X Existing 1-1.5 - 80' 10 x 30 - Bed

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 9-28-11

By Dennis Lyons
INSPECTOR

* Melchan & Pat
APPLICANT'S SIGNATURE

SEAL

DISTANCE FROM HOUSE: 20' WELL:

TRENCH #1 LENGTH: WIDTH: DEPTH:

TRENCH#2 LENGTH: WIDTH: DEPTH:

TRENCH#3 LENGTH: WIDTH: DEPTH:

TRENCH#4 LENGTH: WIDTH: DEPTH:

Peat Filt

10-21-11

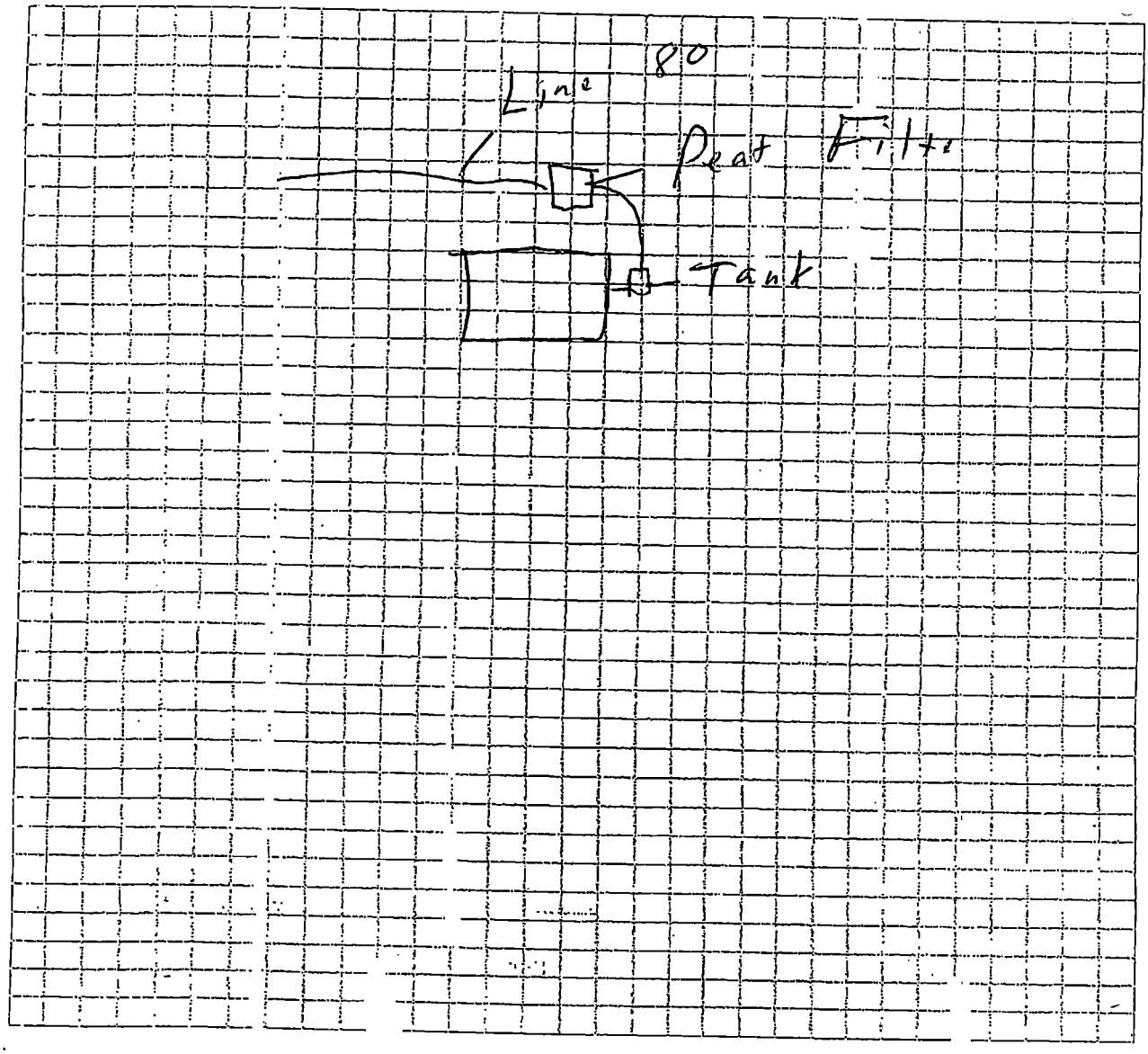
APPROVED (X) REJECT ( ) INSPECTED BY: Dennis Lyons

Site Evaluation Map

page 2 of 2

Designer _____

List any construction issues: _____



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