Book 2020 Page 3094
Document 2020 GWH-3094 Type 53 001 Pages 6
Date 9/10/2020 Time 11:40:50AM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Michael J. Cambridge & Marlene A. Cambridge

Address 3410 Sue Ln. NW, Cedar Rapids, IA 52405

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

TRANSFEREE:

Name Jon E. Wedewer & Darla K. Wedewer

Address 31582 Castle Ct., Dyersville, IA 52040

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

Address of Property Transferred:
26001 216th Ave., Delhi, IA 52223

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

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

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)**
   - ✓ 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: _____ Telephone No.: (319) 396-8920
(Transferor or Agent)

ADDENDUM

26001 216th Ave., Delhi, IA 52223 – Parcel No. 250250502600

Lot Twenty Eight (28) of the Plat of Hartwick Lake Club West Subdivision of Part of the South One-Half (S 1/2) of Section Twenty-Four (24) and of Part of the North One-Half (N 1/2) of Section Twenty-Five (25), all in Township Eighty-Eight North (T88N), Range Five West (R5W) of the Fifth P.M., Delaware County, Iowa, according to plat recorded in Book 5 Plats, Page 40; also all lake frontage, running to the waterfront and then at right angles to the middle of Hartwick Lake, in respect to and adjoining said Lot Twenty Eight (28); also Parcel A - Part Of The NE 1/4 - NE 1/4 Section 25 And Parcel B - Part Of The SE 1/4 - SE 1/4 Section 24, All In T88N, R5W Of The Fifth P.M., Delaware County, Iowa according to plat recorded in Book 6 Plats, Page 175

Transfer tax: $333,500.00

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

Property information
Current Owner Michael & Marion Cambridge
Buyer _____ Realtor _____
Mailing Address 3410 Sue Ln NW Cedar Rapids IA 52405

Site Address/County 26001 216th Ave

No. of Bedrooms 4 Last Occupied? was and CABIN Disposal? Y (N) Softener? Y / (N) H_2O Supply? over 200 Ft West

Records Available NO Permit/Installation Date NO Installer N/A

Septic System Information
Septic Tank(s): Size 500 gal Material Concr Condition OK old
Tank Pumped? Yes Date Aug 15-20 Licensed Pumper 358
Septic/Trash/Processing Tank: Size — Material _____ Condition _____
Tank pumped? Yes Date Aug 15-20 Licensed Pumper 358

Aerobic treatment unit (ATU) MFGR N/A Size _____
Tank Pumped? _____ Date _____ Licensed Pumper _____
Maintenance Contract? _____ Expiration Date _____ Service Provider _____
Condition _____

Pump Ttanks/Vaults: Type NO Size _____ Condition _____

Distribution System: Distribution Box NO Outlets Used _____ Condition _____
Header Pipe(s) _____ Number of Lines _____
Pressure Dosed? _____

Secondary Treatment 300 gal [redacted] well. THIS IS A OLD
Length of Absorption Fields _____ Determined by But it is working.
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 _____ Working? _____ Disinfection _____ 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): Old WAS working when system was test.

Comments: load tested system at 950 gal And did PASS test.

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.

Old system NO. 9 MANHOLES

Using this worksheet, write a narrative report of the inspection results.

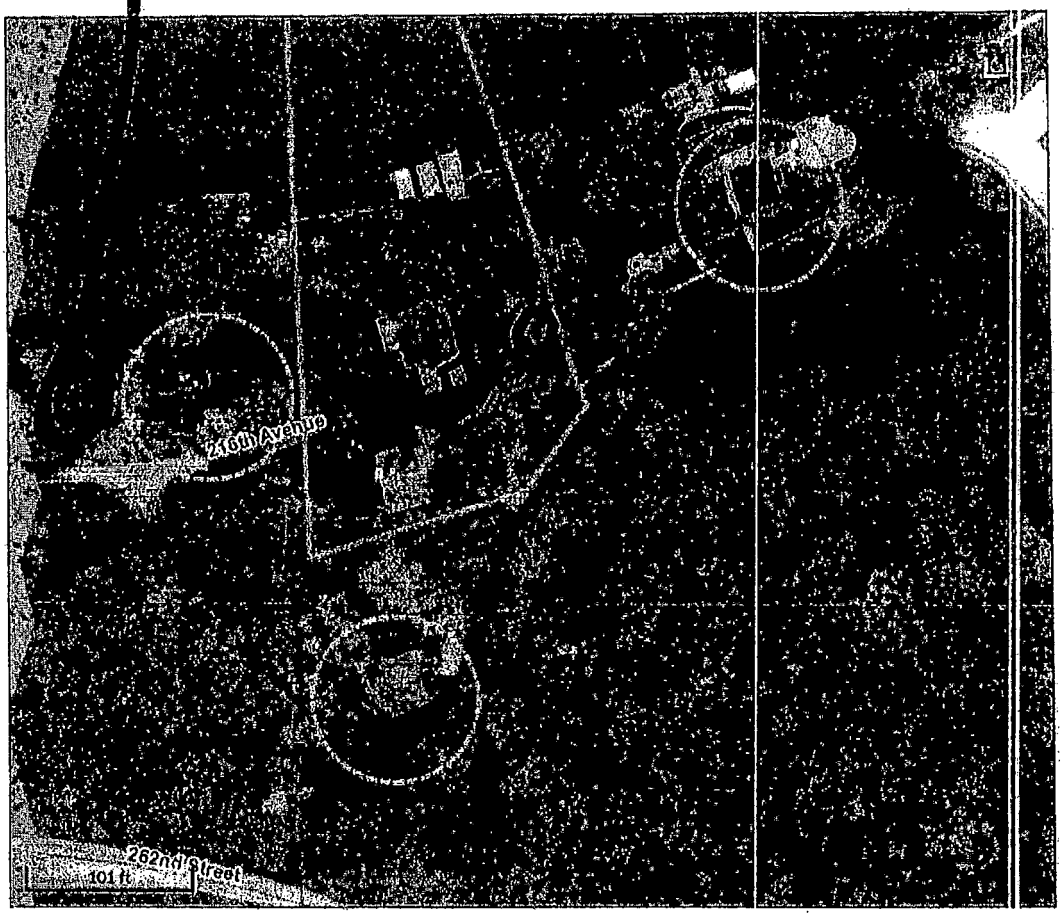
Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

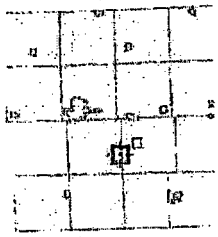
This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified Inspector: _____ Date: Aug 15- 2020
Name (print): Robb Harter Certificate #: 358
Address: 3031 160th Street Dyersville, Iowa 52040
Phone # 563-542-1010

well is over OVER 200Ft west of tank

Beacon™ Delaware County, IA





Legend
- Corporate Limits
- Political Township

Parcels
- BLL
- Parcel
- Roads

Parcel ID	250250502600	Alternate ID	n/a	Owner Address	Cambridge, Michael J & Marlene
Sec/Twp/Rng	25-88-5	Class	R		3410 Sue Ln Nw
Property Address	26001 216TH AVE DELHI	Acreage	n/a		Cedar Rapids, IA 52405

District: MILO MAQ. V. LAKE FD 12

Brief Tax Description: LOT 28 HARTWICK LAKE CLUB WEST SUBDIV PT 24 & 25 & PARCEL A & B AS DESC
(Note: Not to be used on legal documents)

THIS is AN OLD NO GUARANTEES ON Future PERFORMANCE.

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Developed by Schneider GEOSPATIAL

THIS TANK IS 500 gAl with 2 CABIN ON it with 4 Bed Room total
Does Not HAVE A LEACH Field. HAS WET well That is Old. But working when SEPTIC INSPECTION WAS PERFOMED.