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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Chad W. Wessels and Jessica D. Wessels f/k/a Jessica D. Iserman

Address 3068 285th St, Hopkinton, IA 52237

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

TRANSFEREE:

Name Curtis M. Kramer and Emily S. McDermott

Address 107 2nd Ave SE, Farley, IA 52046

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

Address of Property Transferred:
3068 285th St, Hopkinton, IA 52237

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)**
   - ___ 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.

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 is located at SE corner of house

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

Signature: Chad W. Wunder (Transferor or Agent) Telephone No.: (563) 590-6455

Addendum

1. That part of the Northwest Quarter (NW¼) of the Southeast Quarter (SE¼) of Section Four (4), Township Eighty Seven (87) North, Range Three (3), West of the Fifth Principal Meridian described as commencing at a point two hundred forty (240.0) feet West of the Northeast corner of said Northwest Quarter (NW¼) of the Southeast Quarter (SE¼), and running thence West two hundred twenty six (226.0) feet, thence South one hundred eighty eight (188.0) feet, thence East two hundred twenty six (226.0) feet, thence North one hundred eighty eight (188.0) feet to the point of beginning.

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

Property information
Current Owner Chad Wessels
Buyer N/A Realtor N/A
Mailing Address 3068 285th St Hopkinton 52237

Site Address/County 3068 285th St Hopkinton

No. of Bedrooms 3 Last Occupied? Now Disposal? Y (N) Softener? (Y)/N H2O Supply? well 102 Ft

Records Available Yes Permit/Installation Date 2012 Installer Hanson

Septic System Information
Septic Tank(s): Size 1250 Material Concrete Condition Good
Tank Pumped? Yes Date 11-11-20 Licensed Pumper 353
Septic/Trash/Processing Tank: Size 1000 Material Concrete Condition Good
Tank pumped? Yes Date 11-11-20 Licensed Pumper JSE

Aerobic treatment unit (ATU) MFGR — Size —
Tank Pumped? — Date — Licensed Pumper —
Maintenance Contract? — Expiration Date — Service Provide —
Condition —

Pump Ttanks/Vaults: Type — Size — Condition —

Distribution System: Distribution Box Yes Outlets Used 3 Condition Good
Header Pipe(s) No Number of Lines —
Pressure Dosed? Yes

Secondary Treatment
Length of Absorption Fields 3x 100 Determined by Dug up
Condition of Fields Good Determined by Dug up
Type of Trench Material Chamber

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 Provide —
Condition —

NPDES General Permit No. 4: Required? — Permitted? — NOI submitted —

Time of Transfer Inspection Worksheet

Other Components

Alarms Yes Working? Yes Disinfection NO Working? NO

Control Box Yes Timers NO Inspection Ports NO

Other Components THIS SYSTEM HAS Lift Pump. IN Pump THE GRAY WATER TO 1250 TANK. WITH ALARM.

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): SYSTEM HAS Filter Need to Be Cleaned EVER YEAR. SEEPIC.

Comments: Keep TANK Pump EVER 3-5 YEARS.

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: _____ Date: 11-11-20

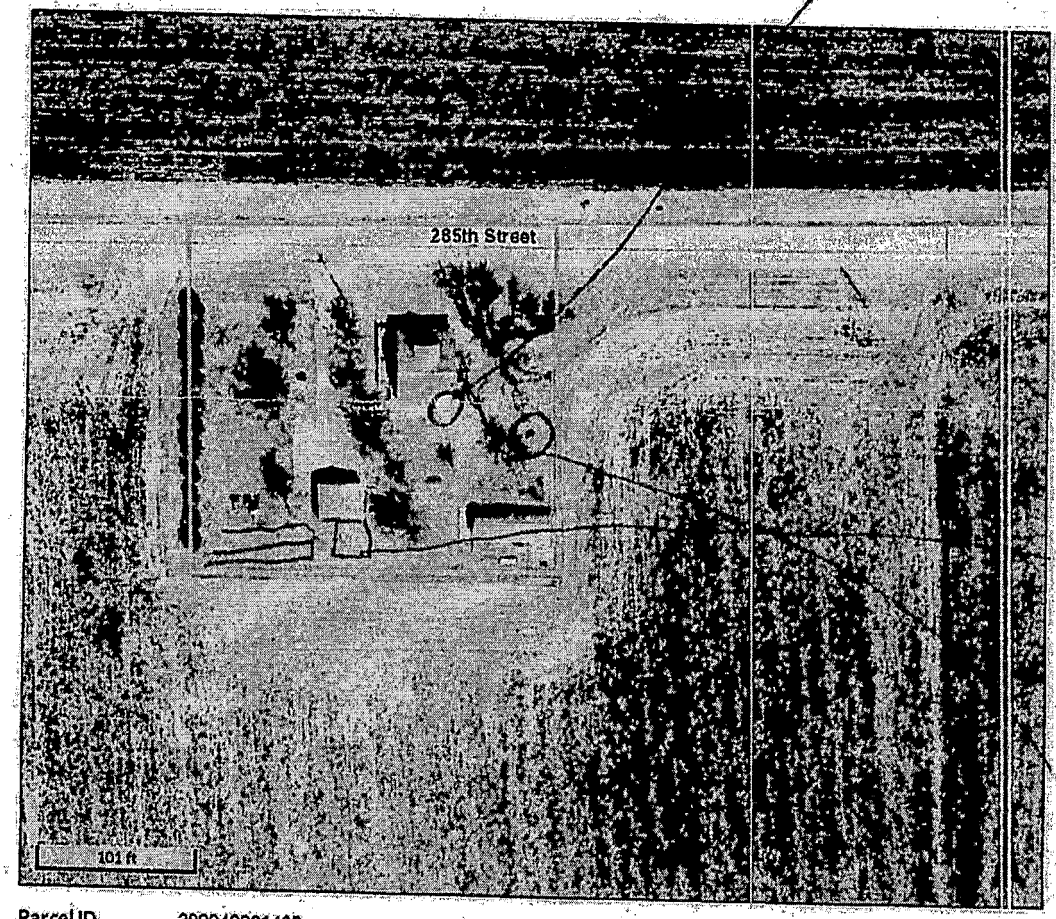
Name (print): ROBB HARLAN Certificate #: 158

Address: 303 160th DYERSVILLE 52040

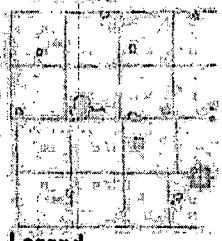
Phone # 563-542-1010

Beacon™ Delaware County, IA

well 102 to tank



Overview



Legend

- Corporate Limits
- Political Township

Parcels

- BLL
- Parcel

Roads

1250 gal tank

Parcel ID	380040001400	Alternate ID	n/a	Owner Address	Wessels, Chad W &
Sec/Twp/Rng	4-87-3	Class	R		Iserman, Jessica D
Property Address	3068 285TH ST	Acreage	n/a		3068 285th St
	HOPKINTON				Hopkinton, IA 52237
District	SOUTH FORK WESTERN DUBUQUE FD#3				
Brief Tax Description	N 188' W 226' E 466' NW SE (Note: Not to be used on legal documents)				

lift Pump

Disclaimer: All critical information should be independently verified. If you have questions about this site please contact either the Delaware County Auditor's Office at 563 927-4701 or the Delaware County Assessor's Office at 563 927-2526

Date created: 11/15/2020
Last Data Uploaded: 11/14/2020 11:38:00 PM

Developed by Schneider GEOSPATIAL

1250 gal tank with Filter.

D Box is 8 Ft west of tank with R.Z. on it.

lids for tank are At ground level. See Photos.

well is [redacted] 102 Ft to tank.