Book 2021 Page 50
Document 2021 GWH-50 Type 53 001 Pages 4
Date 1/05/2021 Time 12:15:43PM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:
Name Ronald J. and Keri A. Cook
Address 133 Evans Avenue, Manchester, IA 52057
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name Todd and Krista Miller
Address 5038 Kael Trail, Cedar Falls, IA 50613
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
26012 214th Avenue, Delhi, IA 52223
Number and Street or RR | City, Town or P.O. | State | Zip

Legal Description of Property: (Attach if necessary) Lot 6 of Cedar Acres Subdivision in the SW1/4, Section 24, Township 88 North, Range 5 West of the 5th P.M., Delaware County, Iowa, according to the plat recorded in Book 4 Plats, Page 135, as resurveyed in the Boundary Survey recorded in Book 2000, Page 1480

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.: (563) 599-5219
(Transferor or Agent)

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

Property information
Current Owner Rod & Keri Cook
Buyer _____ Realtor _____
Mailing Address 133 Ellams Ave Manchester IA 52057
Site Address/County 26012 214th Ave Pt 250.240/00600

No. of Bedrooms 3 Last Occupied? Old Disposal? Y (N) Softener? Y (N) H_2O Supply? Well 57 ft
Records Available Yes Permit/Installation Date 4-7-15 Installer Anthem

Septic System Information
Septic Tank(s): Size 2000 Material Concrete Condition Good
Tank Pumped? Yes Date 11-28-20 Licensed Pumper 358
Septic/Trash/Processing Tank: Size 1500 Material Concrete Condition Good
Tank pumped? Yes Date 11-28-20 Licensed Pumper 358

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) _____ Number of Lines _____
Pressure Dosed? _____

Secondary Treatment ~
Length of Absorption Fields _____ Determined by Holding Tank
Condition of Fields _____ Determined by _____
Type of Trench Material _____ only

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 _____

Holding tank only

Time of Transfer Inspection Worksheet

Other Components

Alarms Yes Working? Yes 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): All in working condition
Has Alarm in tank. When Alarm Sounds you will have
250 gal of storage left.
See Photos

Comments: Hold tank only.

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: [signature] Date: 11-20-20

Name (print): Robb Harter Certificate #: 3411

Address: 8031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1019