Recorded: 3/12/2021 at 12:20:44.0 PM
County Recording Fee: $0.00
Iowa E-Filing Fee: $0.00
Combined Fee: $0.00
Revenue Tax:
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2021 PG: 899

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

TRANSFEROR:
Name: Tracy L. Grage and Edward A. Grage
Address: 19044 171st Avenue, Manchester, IA 52057
TRANSFEREE:
Name: Zachary A. Muller
Address: 1922 Hwy 13, Manchester, IA 52057

Address of Property Transferred:
19044 171st Avenue, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)
Lot Three (3) of Frankenfeld's Replat of Part of Block Three (3) of Sunset Beach Subdivision, Delaware County, Iowa, according to plat recorded in Book 3 Plats, Page 159, being also described as that part of Lot Two (2) of Block Three (3), and of the alley in said Block Three (3) of Sunset Beach, a Subdivision of parts of Sections Seventeen (17), Eighteen (18) and Twenty (20), Township Eighty Nine (89) North, Range Five (5), West of the Fifth Principal Meridian, according to plat recorded in Book 2 Plats, Page 20, described as commencing at the Northeast corner of Lot Eight (8) of Block Three (3) of said Subdivision, and running thence North 70° 08'
West one hundred eighteen and seventy eight one-hundredths (118.78) feet to the Easterly line of Lakeview Road of said Subdivision, said point being also the Northwest corner of Lot Nine (9) of Block Three (3) of said Subdivision, thence North 22° 10' East along the Easterly line of said Lakeview Road eighty Five (85.0) feet, thence South 77° 34' East to a point which is North 19° 52' East one hundred (100.0) feet from the point of beginning, thence South 87° 35' East sixty one (61.0) feet, thence South 27° 50' West ninety six and three-tenths (96.3) feet, thence North 70° 08' West fifty (50.0) feet, thence South 19° 52' West twenty (20.0) feet to the point of beginning

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. *Located in the basement*
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) 431-0208
(Transferor)

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

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

Property information

Current owner Ed Gray
Buyer _____ Realtor Teresa Turnis 920-299
Mailing address _____

Site Address/County 19044 17st Ave Manchester
Legal Description per permit

No. of bedrooms 3 Last occupied? still Records available yes

Permit/installation date 8-2-05 Separation distances ok/ no? ok

Septic system information

Septic tank(s): size — material — condition —
Tank pumped? — date — licensed pumper —
Septic/trash/processing tank: size — material — condition —
Tank pumped? — date — licensed pumper —

Aerobic treatment unit (ATU) mfgr multi flow size 750 gallons
Tank pumped? yes date 1-21-21 licensed pumper Stag
Maintenance contract? no expiration date _____ service provider _____
Condition good / no eggs Discharge

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 20'by30 Bed determined by probed
condition of fields good determined by water test
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 provider —
Condition —

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

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

Report system status cleaned filters Fall 2019/replaced pump

Explain (attach additional pages as needed): Dont use baby wipes or female products in this system Plug up our pump

Comments: water test OK/ replaced pipe going in to Bed Full of Roots/ Sealed open with tar strip to keep Roots out

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: Bill Davis Date: 1-21-21
Name (print): Bill Davis Certificate #: 5550
Address: 1462 110th Ave Dundee IA
Phone # 563-924-2225

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office in the county the inspection was conducted and to:

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319

140 17 01 043 00

DELAWARE COUNTY
BOARD OF SUPERVISORS (Print or Type) **Permit No.** 1349

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 19044 171 st Ave Section 17 Township Delaware

LOCATION: SE¼ SW¼ SW¼ sec 17 T-89N R-5-W

Owner: Tracy Woods Tenant: _____ Plumber: Harter

Lot Size: 150 x 150 Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Stools 2 Lavatories ___ Bath Tubs 1 Showers 1 Sinks 3 Automatic Laundry 1 Sump Pump ___

Septic Tank made by _____ Garbage Grinder _____ Construction Material _____ Gallons Cap. _____

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

Absorption Field: Total length of laterals _____ No. of lateral lines _____

This system is new ___ Existing ___. Mult: - F/o 10 x 45' 2 @ x 30

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 8-2-05

By Dennis Lyons
INSPECTOR

_____
APPLICANT'S SIGNATURE

SEAL

OSWAP Approval Form

Requires County Signatures for (1) Onsite System Plan and (2) Final Inspection

County Delaware County Permit # 1349

Owner's Name: Tracy L. Woods

Address: 19044 171st Ave. Manchester, Iowa 52057

Phone: (Home) 563-927-2787 (Work) 319-431-0208 (Cell)

Property Address: 19044 171st Ave. Manchester, Iowa 52057

Legal Description SE ¼ SW ¼ SW ¼ Section 17 Tier 89 Range 5

Lat. 42.5134 Long. -91.4682

Problem with Existing System: Backing Up

Type of Building (check one box below):

☒ Home: # Bedrooms (BRs) 3 ☐ Other (e.g. Shop, Office, etc):

System Design Flow in Gallons/Day (150 x # BRs, if a home): 450

Soil Evaluation: Is Site Suitable for Soil Absorption System? Yes X No

Soil Test Method (check one or both boxes): Percolation Test ☐ Soil Evaluation ☒ Other:

Soil Absorption Rate: (Minutes/Inch) Other Factors:

Limiting Layer Depth: >7' Limitation Type (Rock, Impervious Clay, Groundwater):

Onsite Wastewater System Plan:

1. Septic Tank: # Tanks 1 Total Capacity (Gallons) 1000 Material (Concrete, Plastic)
2. Secondary Treatment System:
   a. Soil Absorption: Type (e.g. Chamber, Gravel, etc) Bed Length 20' Width 30' Depth 2'
   b. Other: (e.g. Sand Filter, Peat Filter, etc) Type Multi-Flo Size 750
      Brand (if applicable) Additional Treatment (if applicable)
3. Is This a Surface Discharging System? Yes No X Is NPDES Permit Applied For? Yes No
4. System Management Plan: Thru Multi-Flo into 20x30' Bed - Gravity discharge

Signature of Applicant Tracy L Woods Date 8/1/05

(1) Plan Approved Dennis Lyons Date 8/1/05
County Representative

Final Inspection: OSWAP Loan Approved? Yes X No Lender:
Is Completed System Same as Plan? Yes X No If not, describe completed system:
OSWAP # (Co., Yr., #) __-__-___

(2) Completed System Approved Dennis Lyons Date 9-27-05
County Representative



