Recorded: 2/28/2025 at 2:45:03.0 PM
County Recording Fee: $0.00
Iowa E-Filing Fee: $0.00
Combined Fee: $0.00
Revenue Tax: $0.00
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2025 PG: 524

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

If the transaction is exempt from filing a declaration of value pursuant to Iowa Code 428A.1(2), **STOP HERE**. Pursuant to Iowa Code section 558.69(1), when no declaration of value is submitted during a transaction, you are not required to submit a groundwater hazard statement or include the statutory language in Iowa Code section 558.69(8A). Please consult your realtor or legal counsel for further advice, including on whether a declaration of value is required. The Department provides this information for statutory reference only.

Instructions for this document can be found at:
https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960%20Instructions.pdf

Attachment 1, if required, can be found at: https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960a.pdf

TRANSFEROR:
Name: Flatliner, LLC
Address: 702 2nd Ave. NW, Farley, IA 52046
Number and Street or RR, City, Town or P.O., State Zip

TRANSFEREE:
Name: Chris D. Eibey and Tammy M. Eibey
Address: 2810 State Highway 13, Ryan, Iowa 52330
Number and Street or RR, City, Town or P.O., State Zip

Address of Property Transferred: 2810 State Highway 13, Ryan, Iowa 52330
Number and Street or RR, City, Town or P.O., State Zip

Legal Description of Property: **Parcel A, A part of the NW frl. ¼ NW ¼ of Section 6, Township 87 North, Range 5 West of the 5th Principal Meridian, Delaware County, Iowa, according to Plat recorded in Book 2005, Page 3762.**

1. Wells (check one)

☐ No Condition - There are no known wells situated on this property.

☒ Condition Present - 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)

☒ No Condition - There is no known solid waste disposal site on this property.

☐ Condition Present - 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)

☒ No Condition - There is no known hazardous waste on this property.

☐ Condition Present - 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)

☒ No Condition - 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.)

☐ Condition Present - 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)

☒ No Condition - There are no known private burial sites on this property.

☐ Condition Present - 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)

☐ No Condition - All buildings on this property are served by a public or semi-public sewage disposal system.

☐ No Condition - This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.

☒ Condition Present - 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.

☐ Condition Present - 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.

☐ Condition Present - There is a building served by private sewage disposal system on this property. The system is failing to ensure effective wastewater treatment or is otherwise improperly functioning, and 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.

☐ Condition Present - 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 #7]

☐ Condition Present - There is a building served by private sewage disposal system on this property. This property is exempt from the private sewage disposal inspection requirements pursuant to the following Exemption [Note: for exemption #7 use prior check box]:

_____.

☐ Condition Present - There is a building served by private sewage disposal system on this property. The private sewage disposal system has been installed within the past two years pursuant to permit number:

_____

_____

Review the following two directions carefully:

A. **If you selected a box stating "No Condition" for every numbered section above, STOP HERE. Do not submit this form.** Instead, pursuant to Iowa Code section 558.69(8A), you must include the following language on the first page of the recorded deed, instrument, or other writing:

> "There is no known private burial site, well, solid waste disposal site, underground storage tank, hazardous waste, or private sewage disposal system on the property as described in Iowa Code section 558.69, and therefore the transaction is exempt from the requirement to submit a groundwater hazard statement."

Please consult your realtor or legal counsel for further advice on this exemption. By law, the owner of the property is responsible for the accuracy of this statement, and the Department provides this information for statutory reference only.

B. **If you checked any box stating "Condition Present" for any of the numbered sections above, continue below.** You must complete this form, including providing all required information, and you must submit this form to the county recorder's office with declaration of value.

Information required by statements checked above should be provided here or on separate sheets attached hereto:

Well location: Southeast corner of lot

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.: 563-599-8898

(Transferor)

IOWA DNR

IOWA DEPARTMENT OF NATURAL RESOURCES

[illegible] KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 12666 ROBB HARTER CERT # 9343

Site Information

Parcel Description: **330060000200**

Address: **2810 State Hwy 13, Ryan, IA 52330** County: **Delaware**

Owner Information

Property is owned by a business: **No**

Business Name:

Owner Name: **Taz & Kayla Kammiller**

Email Address:

Address: **2810 State Hwy 13, Ryan, IA 52330**

Phone No:

Site related information

No Of Bedrooms: **4**

Facility Type: **Residential**

Last Occupied:

Permit issued by County: **Yes**

All plumbing fixtures enter septic system: **Yes**

Property Information Comments:

Inspection Date: **10/09/2024**

Currently Occupied: **Yes**

System Installation Date:

Permit Number: **2073**

County contacted for records: **Yes**

Primary Treatment

Tank 1

Tank Name: **Tank 1**

Tank Material: **Concrete**

No. of Compartments: **2**

Date Pumped: **10/9/2024**

Distance To Well (Ft.): **over 200ft**

Risers Intact: **Yes**

Type: **Septic Tank**

Tank Corrosion Type: **Slight**

Pump Tank Chamber: **Yes**

Meets Setback to Well: **Yes**

Is Accessible: **Yes**

Effluent Filter Present: **Yes**

Tank Size (Gal): **1500**

Liquid Level Type: **Normal**

Licensed Pumper Name: **Harter**

Well Type: **Private**

Lid Intact: **Yes**

Watertight: **Yes**

Tank/Vault Pumped: **Yes** Inlet Baffle Present: **Yes** Outlet Baffle Present: **Yes** Functioning as Designed: **Yes**

Tank Comments:

General Primary Treatment Comments:

Distribution Type

Distribution Box 1

Label: **Distribution Box 1**
Box Opened: **Yes**
Watertight: **Yes**

Material Type: **Plastic**
Baffle Present: **No**
Functioning As Designed: **Yes**

Accessible: **Yes**
Speed Levelers Present: **Yes**

General Distribution System Comments :

Secondary Treatment

Absorption Bed1

Distribution Type: **Distribution Box**
Absorption Bed Length: **74**
Gallons Loaded: **300**
Distance To Well (Ft.): **over 200**
Grass Cover Present: **Yes**
Functioning as Designed: **Yes**
Comments:

Material Type: **Rock and PVC Pipe**
Total Absorption Area: **1332**
Meets Setback to Well: **Yes**
Absorption Bed Probed: **Yes**
System Located on Owner Property: **Yes**

Absorption Bed Width: **18**
System Hydraulic Loaded: **Yes**
Well Type: **Private**
Saturation or Ponding Present: **No**
Easement Present: **N/A**

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **Everything is in good working condition at the time of inspection. Septic was pumped at the time of inspection. Filter needs to be cleaned out one time per year. Keep tank pump every 3 to 4 years. Do not drive or plant anything on the absorption field.**

IOWA DNR

IOWA DEPARTMENT OF NATURAL RESOURCES

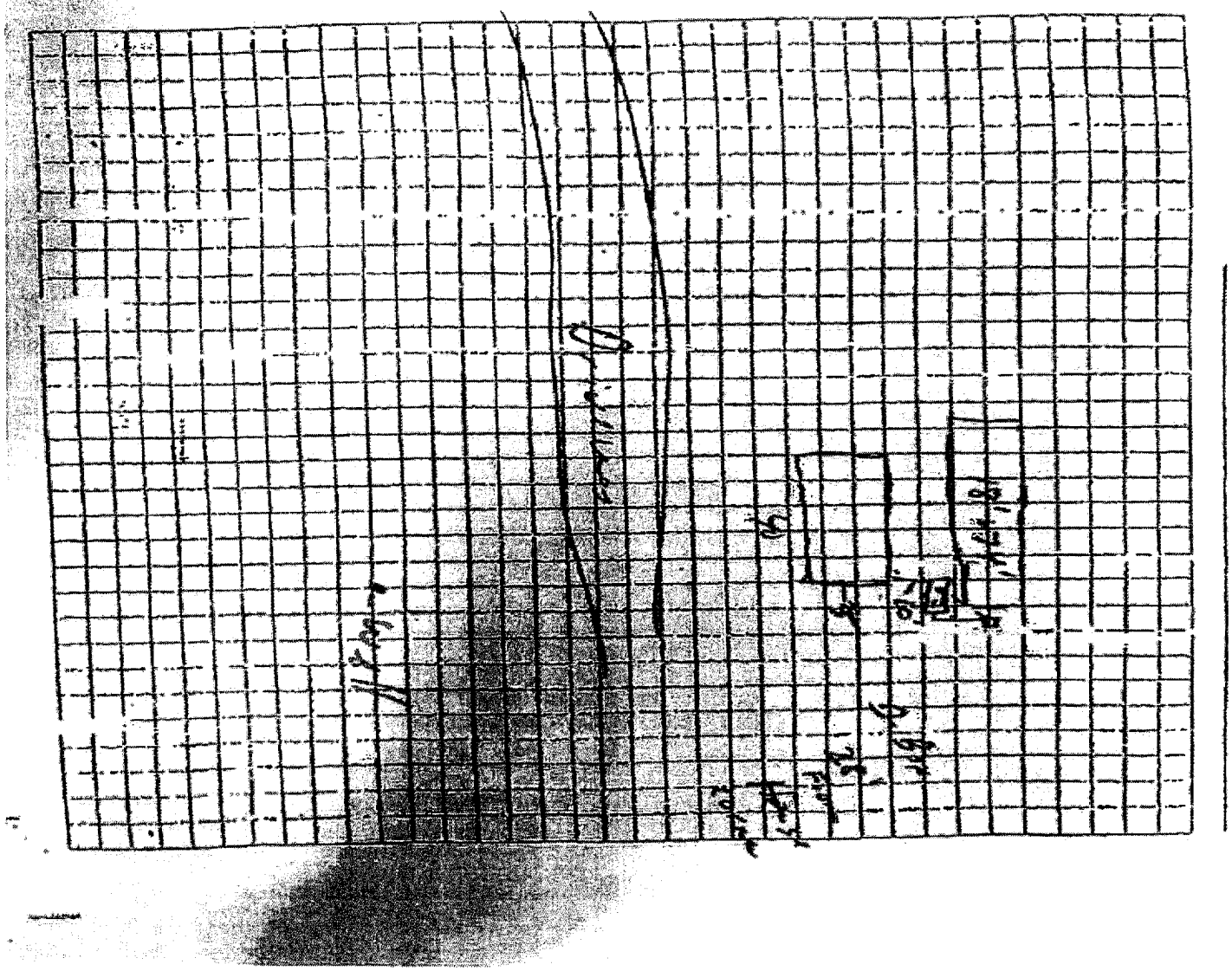
KIM REYNOLDS
KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 12666 ROBB HARTER CERT # 9343

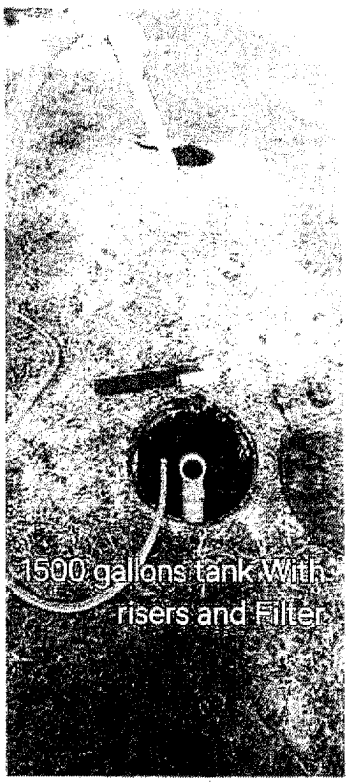
Owner Name:	**Taz & Kayla Kammiller**		
Address:	**2810 State Hwy 13 , Ryan , IA 52330**		
County:	**Delaware**		
Inspection Date:	**10/09/2024**	Submitted Date:	**10/14/2024**

This page certifies a Time of Transfer inspection was conducted and submitted for the property listed above in accordance with Subrule 567 IAC 69.2(8).

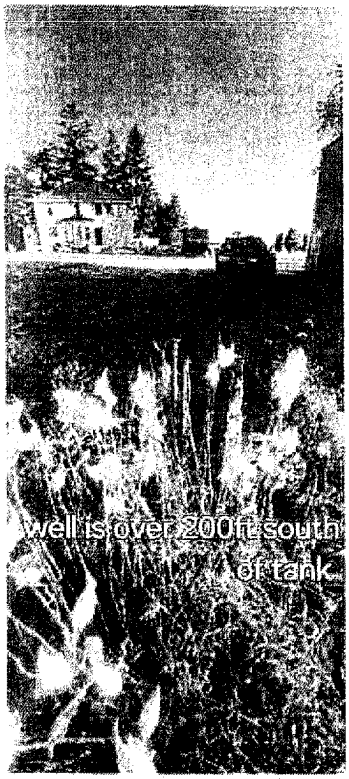
As-built Diagrams



Documents

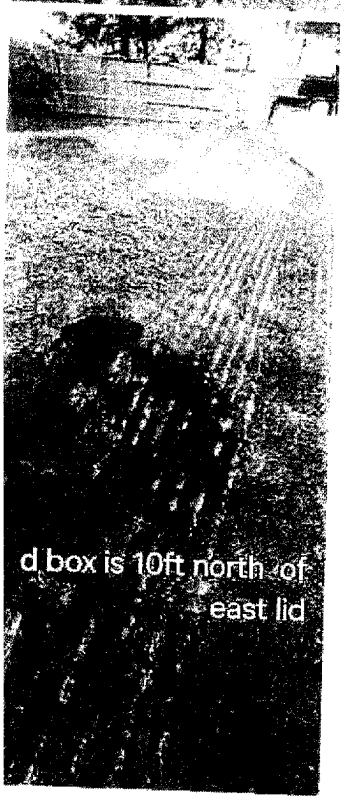





well is over 200ft south
of tank


d box is 13" dee


D box has 1 outlines
with speed level


d box is 10ft north of
east lid

42, 3815
-91, 48067

DELAWARE COUNTY
BOARD OF SUPERVISORS

APPLICATION FOR PERMIT TO INSTALL, REPAIR, ABANDON SEPTIC SYSTEM

(Print or Type)

Permit No. 2073

ADDRESS: 3876 Hurley Rd Delhi

LOCATION: L J Tabb Tenant: _____ Section 16 Township Hamden

Owner: _____ Type Construction _____ Number of Bedrooms 4

Lot Size: 146 acres Type Construction _____ Number of Bedrooms 4

Pictures Needed: Location Both Tubs 2 Showers 2 Sinks 2 Automatic Washer 1 Floor Drains _____

Septic Tank made by Sunnite Garbage Grinder _____ Dishwasher _____ Sump Pump _____

Percolation Time 1 _____ 2 _____ 3 _____ Load Area _____

Absorption Field: Total length of laterals 180 ft Width of trench 24 in Depth of trench 24 in

This system is new X Existing _____

I certify that the above information is correct and that all proposed work will be [illegible]

Delaware County Regulations.

Date Approved 5-10

By _____

APPLICANT'S SIGNATURE

MAIL

[redacted]

Time of Transfer Inspection Worksheet

Other Components

Alarm _____ Working? _____ Disinfection _____ Working? _____

Control Box _____ Timers _____ Inspection Ports _____

Other Components: Has A Filter need to Be Cleaned Every year.

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): All in Good working Condition

Comments: Keep Pump ever 3-5 years

Other items or conditions of Time of Transfer inspection:

[redacted]

330. 06 00. 002. 00

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

Property Information
Current Owner: name and Phone Num
Buyer: Realtor:
Mailing Address: 2015 State Hwy 2, PO Box 82 Ryan, Iowa

Site Address/County: 1818 State Hwy 14 Ryan, Iowa - Delaware County

No. of Bedrooms 4 Last Occupied? ____ Disposal? Y/N Softener? Y/N H2O Supply? ____

Records Available X Permit/Installation Date: ____ Installer: ____

Septic System Information
Septic Tank(s): Size 1500 Material Cement Condition Good
Tank Pumped? Y N3 Date 11-3-14 Licensed Pumper N3
Second Tank/Settling Tank: Size ____ Material ____ Condition ____
Tank pumped? N3 Date 11-3-14 Licensed Pumper JS Y

Aerobic Treatment unit (ATU) MFGR ____ Size ____
Tank Pumped? ____ Date ____ Licensed Pumper ____
Maintenance Contract? ____ Expiration Date ____ Service Provider ____
Condition ____

Pump Tanks/Wells: Type ____ Size ____ Condition ____

Distribution System: Distribution Box Yes Outlets Used 4 Condition Good
Header Pipe(s) ____ Number of Lines 3
Pressure Dosed? No

Absorption Treatment
Length of Absorption Fields 18' x 74' Bed Determined by Prob
Condition of Fields Good
Type of Trench Material Rock & Pipe Determined by ____

Size of Sump Pipe: ____
Water Piped Above Grade? ____ Determined by ____
Softener Backwash Piped? ____ Discharge Pipe Located? ____
Results ____

Aerobic Filters: Type ____
Maintenance Contract? ____ Expiration Date ____ Service Provider ____
Condition ____

NPDES General Permit No. # Received? ____ Permitted? ____ NOI submitted ____

542-0191