Book 2026 Page 3029
Document 2026 GWH – 3029 Type 53 001 Pages 16
Date 10/14/2026 Time 2:43:18PM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED IN FULL 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/media/5465.

Attachment 1, if required, can be found at: https://www.iowadnr.gov/media/5466.

TRANSFEROR:

Name	Samuel D. Helmuth and Ruby P. Helmuth			
Address	2531 310th Street	Hopkinton	IA	52237
	Number and Street or RR	City, Town or PO	State	Zip

TRANSFEREE:

Name	Perry J. Nisley and Sara J. Nisley			
Address	2926 220th Ave	Delhi	IA	52223
	Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

2531 310th Ave	Hopkinton	Iowa	52223
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

Lot One (1) of Lot Two (2) and Lot Two (2) of Lot Three (3) of the Plat of Lot Two (2) and Lot Three (3) of the Subdivision of the Southeast Quarter (SE¼) of the Southwest Quarter (SW¼) of Section Fifteen (15), Township Eighty Seven (87) North Range Four (4), West of the Fifth P.M., Delaware County, Iowa, according to plat recorded in Book 5 Plats, Page 93

AND

Parcel 2021-113 Part of the Southwest Quarter (SW¼) of the Southwest Quarter (SW¼) of Section Fifteen (15), Township Eighty-Seven North (T87N), Range Four West (R4W) of the Fifth Principal Meridian Delaware County, Iowa, according to plat recorded in Book 2021, Page 3419

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:

1- functional well approximately 100' from west side of the house

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

Signature: + Samuel Helmuth Telephone No.: + 563-920-1178

GROUNDWATER HAZARD STATEMENT

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

a. Solid Waste Disposal (check one)

☐ There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.

☐ There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

b. *Hazardous Wastes (check one)*

☐ There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.

☐ There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

_____

_____

_____

_____

_____

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.: _____

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 23313 ROBB HARTER CERT # 9343

Site Information

Parcel Description: **370150002200**

Address: **2531 310th Street, Hopkinton, IA 52237** County: **Delaware**

Owner Information

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

Business Name:

Owner Name: **Samuel D Helmuth**

Email Address:

Address: **2531 310th Street, Hopkinton, IA 52237**

Phone No:

Site related information

No Of Bedrooms: **3**

Inspection Date: **09/04/2026**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date:

Permit issued by County: **Yes**

Permit Number: **2334**

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

County contacted for records: **Yes**

Property Information Comments:

Primary Treatment

Tank 1

Tank Name: **Tank 1**

Type: **Septic Tank**

Tank Size (Gal): **1000**

Tank Material: **Concrete**

Tank Corrosion Type: **Slight**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **Yes**

Licensed Pumper Name: **Harter Custom Pumping**

Date Pumped: **9/4/2026**

Meets Setback to Well: **Yes**

Well Type: **Private**

Distance To Well (Ft.): **160+**

Is Accessible: **Yes**

Lid Intact: **Yes**

Risers Intact: **Yes** Effluent Filter Present: **No** Watertight: **Yes**

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

Tank Comments:

Tank 2

Tank Name: **Tank 2** Type: **Septic Tank** Tank Size (Gal): **500**

Tank Material: **Plastic** Tank Corrosion Type: **None** Liquid Level Type: **Normal**

No. of Compartments: **1** Pump Tank Chamber: **Yes** Licensed Pumper Name: **Harter Custom Pumping**

Date Pumped: **9/4/2026** Meets Setback to Well: **Yes** Well Type: **Private**

Distance To Well (Ft.): **165+** Is Accessible: **Yes** Lid Intact: **Yes**

Risers Intact: **Yes** Effluent Filter Present: **No** 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** Material Type: **Plastic** Accessible: **Yes**

Box Opened: **Yes** Baffle Present: **Yes** Speed Levelers Present: **Yes**

Watertight: **Yes** Functioning As Designed: **Yes**

General Distribution System Comments :

Secondary Treatment

Lateral Field1

Distribution Type: **Distribution Box** Material Type: **Leaching Chamber** Trench Width: **24**

Lines: **4** Total Length of Absorption Line: **160** System Hydraulic Loaded: **Yes**

Gallons Loaded: **300** Meets Setback to Well: **Yes** Well Type: **Private**

Distance To Well (Ft.): **165+** Lateral Lines Probed: **Yes** Saturation or Ponding Present: **No**

Grass Cover Present: **Yes** Lateral Lines Equal Length: **Yes** System Located on Owner Property: **Yes**

Easement Present: **N/A** Functioning as Designed: **Yes**

Comments:

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **Everything in good working order at the time of inspection. The tanks were pumped at the time of inspection. There is a filter in the smaller tank that needs to be cleaned one time per year. The leach field is in a pasture. Recommend not building, parking, planting or allowing livestock near leach field. Recommend pumping every two to three years. This inspection in no way makes Harter Custom Pumping responsible for the continued operation of this septic system.**

IOWA DEPARTMENT OF NATURAL RESOURCES

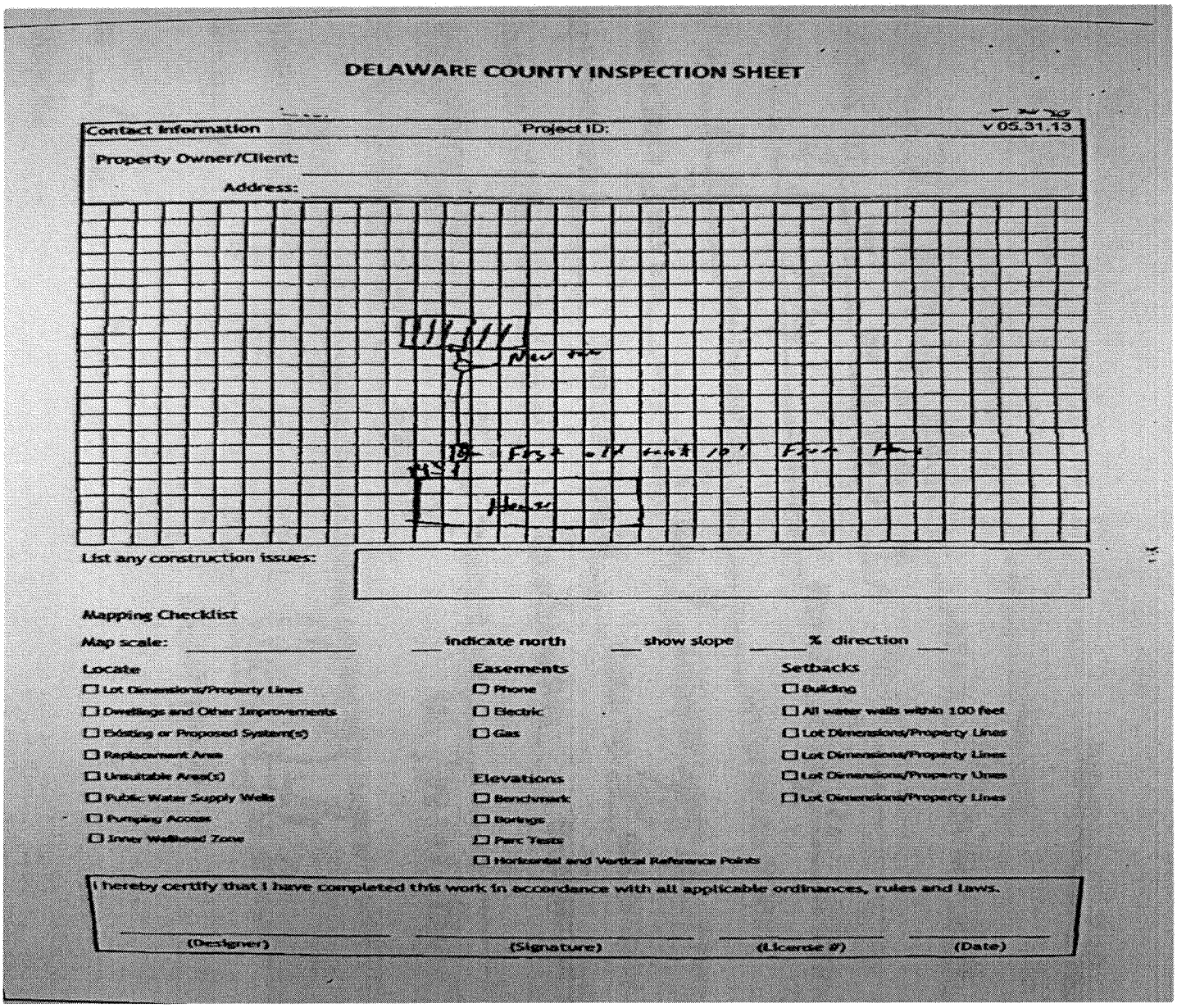
GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER
DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 23313 ROBB HARTER CERT # 9343

Owner Name:	**Samuel D Helmuth**		
Address:	**2531 310th Street , Hopkinton , IA 52237**		
County:	**Delaware**		
Inspection Date:	**09/04/2026**	Submitted Date:	**9/10/2026**

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



DELAWARE COUNTY INSPECTION SHEET

Contact Information | Project ID: | v 05.31.13

Property Owner/Client:

Address:

List any construction issues:

Mapping Checklist

Map scale: ____ ___ indicate north ___ show slope ____ % direction ___

Locate
- ☐ Lot Dimensions/Property Lines
- ☐ Dwellings and Other Improvements
- ☐ Existing or Proposed System(s)
- ☐ Replacement Area
- ☐ Unsuitable Area(s)
- ☐ Public Water Supply Wells
- ☐ Pumping Access
- ☐ Inner Wellhead Zone

Easements
- ☐ Phone
- ☐ Electric
- ☐ Gas

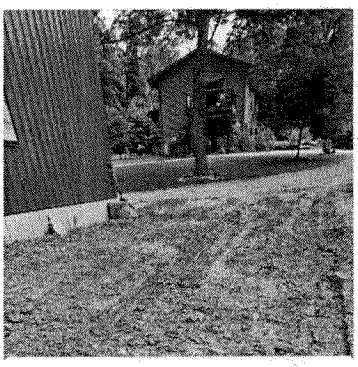
Elevations
- ☐ Benchmark
- ☐ Borings
- ☐ Perc Tests
- ☐ Horizontal and Vertical Reference Points

Setbacks
- ☐ Building
- ☐ All water wells within 100 feet
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

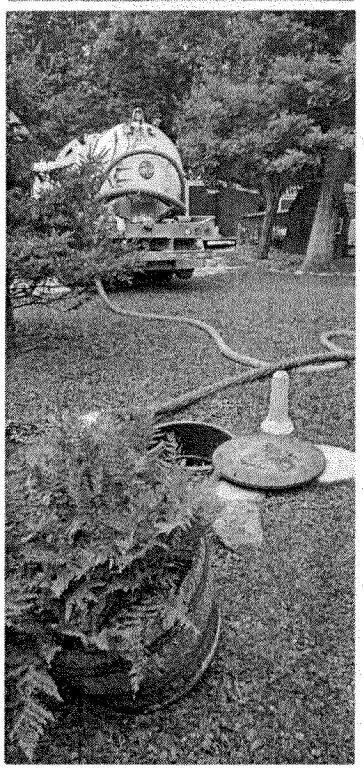
(Designer) (Signature) (License #) (Date)

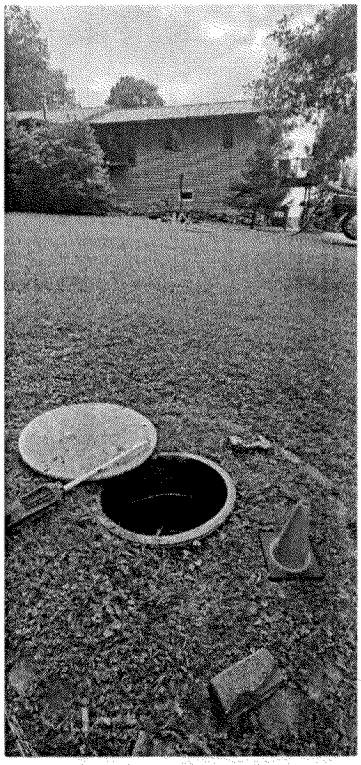
Documents

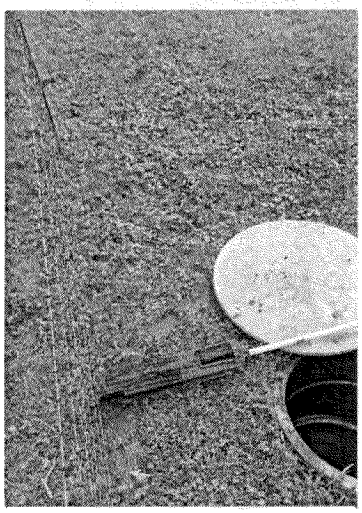


well to tank over 153 ft

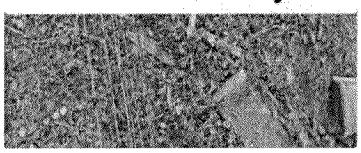


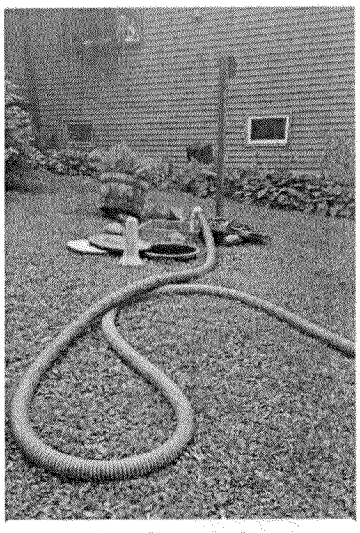




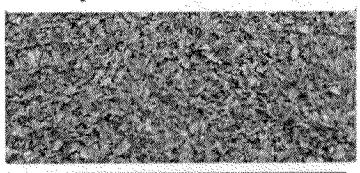


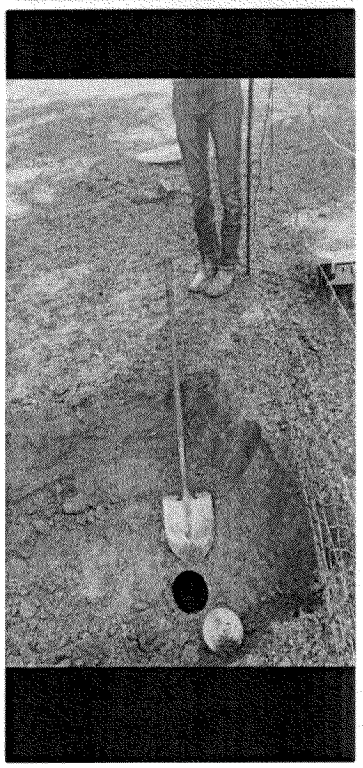
System has filter in second lid. That needs to be cleaned once a year





1000 gallon tank, two compartment with risers





DELAWARE COUNTY 370-15-00 022-00 PERMIT NO. 2334

BOARD OF SUPERVISORS APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 2531 - 310th St Hopkinton SECTION 15 TOWNSHIP Hopkinton

LOCATION QT ___ QT ___ SEC 15 T 87N R 4 W Parcel# ___

Owner B. Ill Foley Plumber Diegel

Lot size 10 Acres Type Commercial ___ Residential (No. Bedrooms) 2

Fixtures: Stools 3 Bath tubs ___ Showers 3 Sinks 4 Automatic Laundry 1 Lift Pump ___

Septic tank made by: ___ Construction Material ___ Gallon Cap. 500 Garbage disposal ___

Absorption Field: Total length of Laterals ___ No. of lateral lines ___ Size of leach bed 24x25

Trench Material Aggregate Secondary Treatment Type Ni 3705516 9/2 NE 9/1

This system is new construction ___ Existing X

I certify that the above information is correct and that all proposed work will be completed in accordance with Delaware county Regulations.

Date Approved 10-24-14

APPLICANT'S SIGNATURE

By Dennis Lyons

INSPECTOR

