Recorded: 10/27/2026 at 8:21:36.0 AM
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: 2026 PG: 3152

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	Steven E. Alber and Staci M. Alber			
Address	2179 267th St.	Delhi	IA	52223
	Number and Street or RR	City, Town or PO	State	Zip

TRANSFEREE:

Name	Larry D. Wiley, as Trustee of the Larry D. Wiley Revocable Intervivos Trust under date of May 16, 2007			
Address	4370Comp Road	Palo	IA	52324
	Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

2179 267th St.	Delhi	Iowa	52223
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)
Parcels T and R, Part Of The NW 1/4 Of The NE 1/4 Of Section 25, T88N, R5W Of The Fifth P.M., Delaware County, Iowa, according to plat recorded in Book 8 Plats, Page 121

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)

- [X] 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)

- [X] 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)

- [X] 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.
- [X] 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 <u>any</u> box stating "Condition Present" for <u>any</u> 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 Front of Home North

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) 350-4307
(Transferor or Agent)

Well Location Front of Home North

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 23845 BILL DOWNS CERT # 8880

Site Information

Parcel Description: **Steve Alber**

Address: **2179 267th St., Delhi, IA 52223** County: **Delaware**

Owner Information

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

Business Name:

Owner Name: **Steve Alber**

Email Address:

Address: **2179 267th St., Delhi, IA 52223**

Phone No: **319-350-4307**

Additional Contact Information

Name	Email Address	Affiliate Type
Susie Meyer	**skmeyer76@gmail.com**	**Realtor**

Site related information

No Of Bedrooms: **2**

Inspection Date: **10/11/2026**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date: **12/10/2015**

Permit issued by County: **Yes**

Permit Number: **2461**

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): **1250**

Tank Material: **Concrete**

Tank Corrosion Type: **None**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **Yes**

Licensed Pumper Name: **Bill Downs**

Date Pumped: **10/11/2026** | Meets Setback to Well: **Yes** | Well Type: **Private**

Distance To Well (Ft.): **100+** | 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

Other 1

Label: **Other 1**

Tank Comments: **Eco-Flow peat tank with 40' leaching chamber on with open discharge.**

General Distribution System Comments : **Eco-Flow Peat tank with 40' leaching chamber on with open discharge**

Secondary Treatment

Eco-Flow

Media Type: **Other** | Manufacturer: **Eco-Flow** | Model Number: **.**

Serial Number: **AAL944** | Maintenance Contract: **Yes**

Maintenance Provider: **.**

System Hydraulic Loaded: **Yes** | Gallons Loaded: **300** | Discharge At Time of Inspection: **No**

CBOD5 Results (mg/L): | TSS Results (mg/L): | DisInfection Present: **Yes**

Disinfection Type: **Other** | Tertiary Treatment Present: **Yes** | Tertiary Treatment Type: **Other**

Meets Setback to Well: **Yes** | Well Type: **Private** | Distance To Well (Ft.): **100+**

GP4 Permitted: | GP4 Required: | Vent(s) Present: **Yes**

Media Present: **No** | Outlet Found: **Yes** | Sample Taken: **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: **Peat tank functioning well at time of inspection.**

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

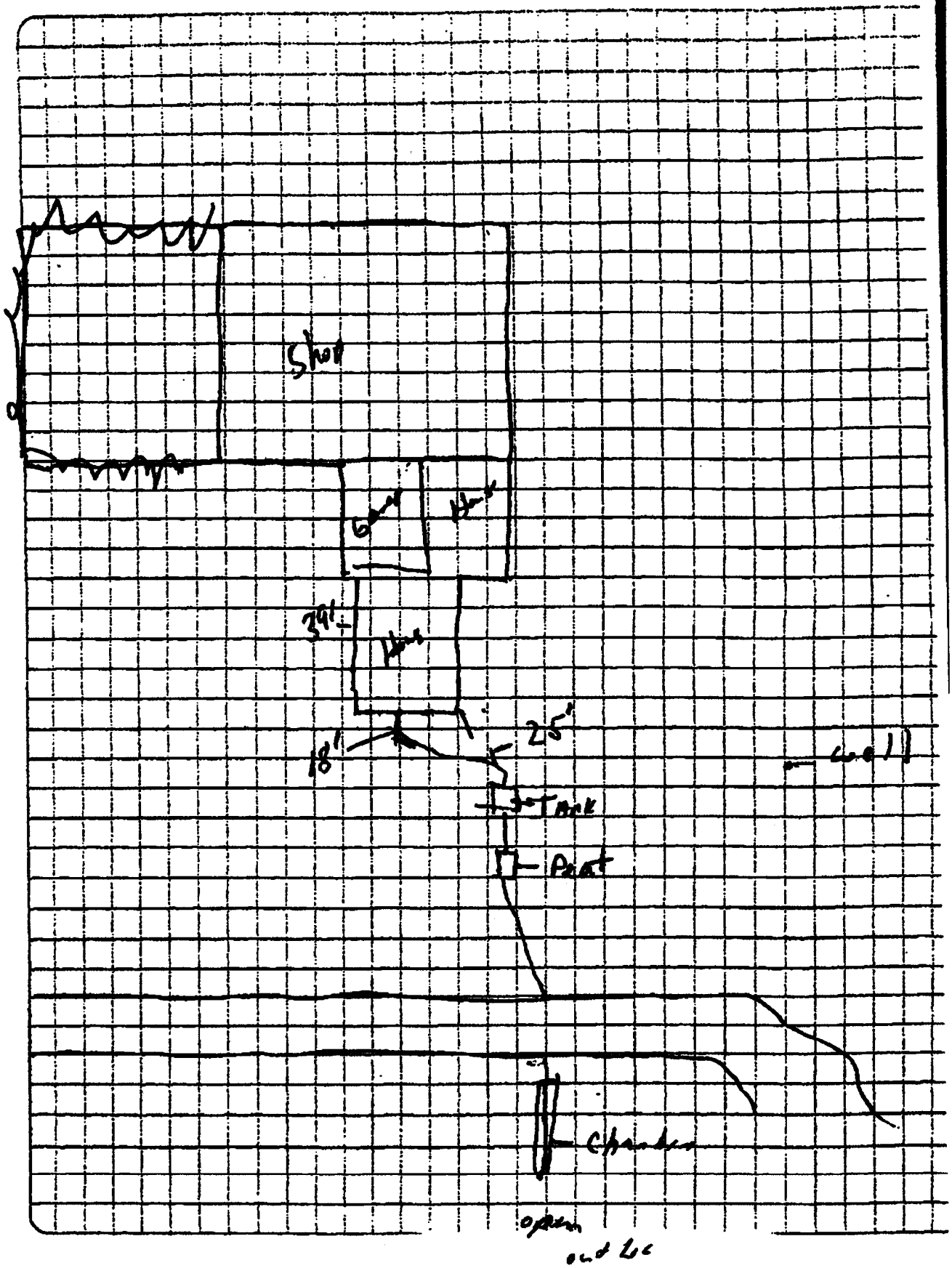
DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 23845 BILL DOWNS CERT # 8880

Owner Name:	**Steve Alber**
Address:	**2179 267th St. , Delhi , IA 52223**
County:	**Delaware**

Inspection Date:	**10/11/2026**	Submitted Date:	**10/14/2026**

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).


Shot
6"
4"
39"
4"
18"
25"
Coil
Tank
Part
Chamber
open
end Lc

DELAWARE COUNTY

BOARD OF SUPERVISORS

PERMIT NO. 2461

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 2179 267th St SECTION 25 TOWNSHIP Milo

LOCATION QT____ QT____ SEC 25 T 88 N R 5 W Parcel# 25025000 3900

Owner Steve Albert Plumber Oasis

Lot size 505 Type Commercial____ Residential (No. Bedrooms) 2

Fixtures: Stools 3 Bath tubs____ Showers 2 Sinks 4 Automatic Laundry 1 Lift Pump____

Septic tank made by Snyder Construction Material Cmtk Gallon Cap. 1250 Garbage disposal____

Absorption Field: Total length of Laterals 1 No. of lateral lines 40' Size of leach bed____

Trench Material Chambers Secondary Treatment Type Eco-Flo 42.409642 -91.370282

This system is new construction X Existing____ Lat. 42.409684 Long. -91.370266

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

Date Approved 12-10-15

X _____

APPLICANT'S SIGNATURE

By Dennis Lyon

INSPECTOR

OPEN Out Lot aFter Chamber

DELAWARE COUNTY SANITATION

Application # _____ EnvTrack # _____ Permit # 2487

Completion Report for Private Sewage Disposal System

Owner: Steve Albon

Site Address: 2179 267th St Township: M. Lo

Parcel #: 25025000 3900 Lot # _____ Legal S-T-R 25-88-5

Mailing Address: _____

Contractor: Oasis Bedroom #: 2

Water Supply: private well 42.409745 - 91. 369917

Primary Treatment: Latitude: 42. 409684 Longitude: -91.370264

Septic Tank Volume (g): 1250 Manuf: Sucle Material: Cncrt # Pieces: 1 # Cmp: 2

Riser Ht Lid 1 (in): 12" Riser Ht Lid 2 (in): 12" Filter Brand: Poly Diameter (in): ____ Distance to well (ft): ____

Note: Effluent filter requires frequent cleaning.

Dose Tank Volume(g): ____ Pump or Siphon Dose: _____ Gallons/dose: ____ Riser Ht (in): _____ Alarm: ____

D-Box: Latitude: NA Longitude: _____ Depth: _____

Subsurface Absorption Type: _____ Chamber Manuf: infiltrator Lineal Ft: 60 # Trenches: 1

Inches rock under pipe: ____ Trench Depth (in): _____ Trench width (in): _____ Distance to well (ft): _____

Surface Absorption Type: _____ Overall length (ft): _____ Overall width (ft): _____

Rock bed length (ft): _____ Rock bed width (ft): _____ Length of laterals (ft): _____ # Laterals: _____

Header pipe diameter (in): ____ Rock type: _____ Distance to well (ft): _____ Depth to bottom of trench (in): _____

Packed Bed Media Filter: _____ Sand filter length(ft): _____ Sand filter width (ft): _____ Sand filter sq ft: _____

Liner: _____ Distance to well (ft): _____ # Distributor lines: _____ # Collector lines: _____

Distributor line type: _____ Separating layer: _____ Discharge GPS (lat x long): _____

*Peat Filter: Serial #: AAL 944 Closed or Open bottom: _____ Lineal Ft absorption: _____ # Laterals: _____

crushed rock, river rock or chamber _____ Trench width (ft): _____ Rock under pipe (in): _____

Distance to well (ft): _____ Inches soil cover over trench: _____ Discharge GPS (lat x long): _____

*Recirculating Textile Filter: Brand Name: _____ Distance to well (ft): _____

Discharge GPS (lat x long): _____ Absorption field installed after (no discharge) _____

*Note: A maintenance agreement with a manufacturer-approved contractor must be maintained for the life of the septic system.

Comments: Effluent filter requires frequent cleaning.

Was any portion of the field covered before the inspection: no System installation approved: yes

Date of Final Inspection: 9/2-10-15 Environmental Health Specialist: Dennis Lee

Scanned ☐

This APPROVAL in no way makes the County responsible for the continued operation of this sanitation system