Book 2019 Page 2442 Type 43 001 Pages 3 Date 8/08/2019 Time 11:57:48AM

Rec Amt \$.00

INDX **ANNO SCAN**

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

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

TRANSF	FEROR:			
Name	lowa Natural Heritage Foundation		_	
Address	505 5th Ave., Suite 444	Des Moines	IA	50309
	Number and Street or RR	City, Town or PO	State	Zip
TRANSF	FEREE:			
Name	State of Iowa acting through the Dep	ot. of Natural Resources		
Address	502 E 9th Street	Des Moines	IA	50319
	Number and Street or RR	City, Town or PO	State	Zip
Address	of Property Transferred:			
Rural,	vacant land along Oriole Ave	Winterset	IA	50273
Number ar	nd Street or RR	City, Town or PO	State	Zip
1. Wells	d for a full legal description. (check one) There are no known wells situated on this p			
2. Solid	There is a well or wells situated on this proor set forth on an attached separate sheet, waste Disposal (check one) There is no known solid waste disposal site on the proof of the proof o	as necessary. on this property.	-	
™ 1	rdous Wastes (check one) There is no known hazardous waste on this There is hazardous waste on this propert attached to this document. erground Storage Tanks (check one)		is provided in Atta	achment #1,
ד ⊠ ר ד □	There are no known underground storage to residential motor fuel tanks, most heating of there is an underground storage tank on the storage tank of the storage tanks.	oil tanks, cisterns and septic tanks, this property. The type(s), size(s	in instructions.)	

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
	ormation required by statements checked above should be provided here or on separate sheets
att	ached hereto:
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
. .	h No the late of the same of t
Sig	nature: <u>by States (1846)</u> Telephone No.: <u>815-288-1846</u>
	(Trănsferor or Agent)

EXHIBIT A

Real Estate located in Sections 28 & 33-T74N-R27W of the 5th P.M., Madison County, Iowa, described as follows:

That portion of Parcel "B" located in the Northwest Quarter of the Northwest Quarter (NW½-NW½) of Section 33, Township 74 North, Range 27 West of the 5th P.M., Madison County, Iowa, as shown in Amended Plat of Survey filed in Book 2005, Page 2200 on May 16, 2005, in the office of the Recorder of Madison County, Iowa.

AND

Parcel "C" located in the Southeast Quarter of the Southwest Quarter (SE½-SW½) of Section 28 and in the North Half of the Northwest Quarter (N½-NW½) of Section 33, Township 74 North, Range 27 West of the 5th P.M., Madison County, Iowa, containing 58.30 acres, as shown in Plat of Survey filed in Book 2008, Page 1379 on April 30, 2008, and corrected by Affidavit filed in Book 2008, Page 1794 on June 4, 2008, in the office of the Recorder of Madison County, Iowa.

AND

The South Half of the Northwest Quarter (S½-NW¼) of Section Thirty-three (33), Township Seventy-four (74) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa.