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Book 2020 Page 2610 Type 43 001 Pages 7

Date 7/22/2020 Time 10:08:57AM

Rec Amt \$.00

INDX  
ANNO  
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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

CHEK

**REAL ESTATE TRANSFER – GROUNDWATER HAZARD STATEMENT  
TO BE COMPLETED BY TRANSFEROR**

**TRANSFEROR:**

Name STEVEN R. DROZ & DEBRA S. DROZ

Address 109 East Summit Street Wilton Iowa 52778  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name ANTHONY VOSHELL & SHIRLEY VOSHELL

Address 2196 Terrace Avenue Winterset Iowa 50273  
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:  
2196 Terrace Avenue Winterset Iowa 50273  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) \_\_\_\_\_  
Long Legal - See Attached Exhibit A

**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.

**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 a 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 a 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 acknowledgement 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 acknowledgement is attached to this form.
- There is a building served by private sewage disposal system on this property. The buyer has executed a binding acknowledgement with the county board of health to install a new private sewage disposal system on this property with an agreed-upon time period. A copy of the binding acknowledgement 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 acknowledgement with the county board of health to demolish the building within an agreed-upon time period. A copy of the binding acknowledgement 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:**

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

Signature: Steve R. Gray Telephone No.: (319) 530-2107  
(Transferor or Agent)

## **Exhibit A**

**Parcel "E" located in the Southwest Quarter (SW1/4) of the Southwest Quarter (SW1/4) of Section Thirty-Two (32), Township Seventy-Six (76) North, Range Twenty-Six (26) West of the 5th P.M., Madison County, Iowa, containing 9.88 acres, as shown in Plat of Survey filed in Book 2007, Page 1083 on March 19, 2007, in the Office of the Recorder of Madison County, Iowa.**

Thomas Brothers Septic

8347 SE 6th Ave

Runnells, IA

Time of Transfer Inspection Report

Inspection report for the property at 2196 Terrace Ct. Madison County

I have inspected and serviced this system and found a 1500 gal concrete septic tank in ok condition. This septic tank is a 2 compartment tank. The poly distribution box was uncover and found in good condition. I hydraulically loaded the system and the EQ 24 lateral field accepted the load. I assume both the lateral field and the tank are original to the home . All water drains to the septic system. At the time of this inspection the system was working normally . This report is not a guarantee of the future working of the system. This report reflects the condition of the system at the time and on the day of the inspection only . All systems require maintenance and eventually repairs/replacement

Larry Thomas

Insp #8809

515- 681 1178

07/01/2020



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

Property information

Current owner: Jean Huz
Buyer:
Realtor:
Mailing address:
Site Address/County: 2196 Terrace Ct. Patterson
Legal Description:
No. of bedrooms: 4
Last occupied?: Current
Records available: yes
Permit/installation date:
Separation distances (ok/no?): 10 ft

Septic system information

Septic tank(s): size: 500 gal material: concrete condition: ok
Tank pumped?: yes date: 7/20 licensed pumper: Thomas Boos
Septic/trash/processing tank: size: material: condition:
Tank pumped?: date: licensed pumper:
Aerobic treatment unit (ATU) mfg: size:
Tank pumped?: date: licensed pumper:
Maintenance contract?: expiration date: service provider:
Condition:

Pump tanks/vaults: type: size: condition:
Distribution system: distribution box: Poly outlets used: 5 condition: ok
Header pipe(s): # of lines: Pressure dosed?: NO

Secondary treatment:
length of absorption fields: 500 ft determined by: Records
condition of fields: ok determined by: Hydraulic Load
type of trench material: Eg. 24

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?: NO permitted?: NOI provided:



### Time of Transfer Inspection Report

Other components:

Alarms N Working? — disinfection N working? —

Control box N Timers N inspection ports N

Other components \_\_\_\_\_

Overall condition of the private sewage disposal system \_\_\_\_\_

Report system status \_\_\_\_\_

Explain (attach additional pages as needed): \_\_\_\_\_

Comments: System was working normally  
at the time of this inspection

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: [Signature] Date: 7/1/20  
 Name (print): Larry Thomas Certificate #: 8805  
 Address: 8347 SE 6th Ave  
 Phone #: 515-681-1178

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent or the person ordering the inspection, the county sanitarian/environmental health office, and to;

Iowa DNR  
 Private Sewage Disposal Program  
 502 E. 9<sup>th</sup> St.  
 Des Moines, IA 50319

Permit # 123-04 Maxwell inspection 6/17/05

