

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

TRANSFEROR:

Name CHRIS M. ALLEN & JENNIFER L. ALLEN

Address 5411 19th St Urbankdale IA 50323
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name GAREN PALMER & CAROLYN PALMER

Address 2176 - 148th Street Winterset Iowa 50273
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
2176 - 148th Street 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:

There is an old unused, non working well located south by creek

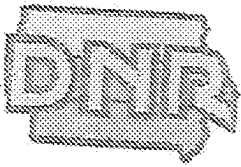
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: [Handwritten Signature] Telephone No.: (515) 988-9144

Exhibit A

Lot Ten (10) of LIMESTONE ESTATES located in the West Half (1/2) of the Southeast Quarter (1/4) of Section Twenty-five (25), Township Seventy-seven (77) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa,

Lot Nine (9) of LIMESTONE ESTATES located in the West Half (1/2) of the Southeast Quarter (1/4) of Section Twenty-five (25), Township Seventy-seven (77) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa,



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

Property information

Current owner CHRIS ALLEN
 Buyer Galen + CAROLYN PALMER Realtor Cy Phillips
 Mailing address 2176 148th St Wintersville, IA 50273
 Site Address/County SAME AS ABOVE / MADISON Co
 Legal Description 1/2 ABSTRACT
 No. of bedrooms 3 Last occupied? present Records available YES
 Permit/installation date 054-05 Separation distances ok/no? ok
5-16-05

Septic system information

Septic tank(s): size 1500 gal material Concrete condition ok
 Tank pumped? Yes date 12-1-18 licensed pumper Central State
 Septic/trash/processing tank: size _____ material _____ condition _____
 Tank pumped? _____ date _____ licensed pumper _____
 Aerobic treatment unit (ATU) mfr _____ size _____
 Tank pumped? _____ date _____ licensed pumper _____
 Maintenance contract? _____ expiration date _____ service provider _____
 Condition _____

Pump tanks/vaults: type pressure size 500 gal condition ok

Distribution system: distribution box NO outlets used _____ condition _____
 Header pipe(s) _____ # of lines _____ Pressure dosed? _____

Secondary treatment: AT grade MOUND
 length of absorption fields 150' determined by County Record
 condition of fields ok - Dry determined by Pressure & Hydraulic
 type of trench material Rock/Sand TEST

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? _____ permitted? _____ NOI provided _____



Time of Transfer Inspection Report

Other components:

Alarms yes Working? yes disinfection _____ working? _____

Control box _____ Timers _____ inspection ports 3

Other components Jump pump for ground water

Overall condition of the private sewage disposal system

Report system status See Attached pages

Explain (attach additional pages as needed): _____

Comments: _____

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: 8-5-20
 Name (print): Kevin R. [unclear] Certificate #: 8805
 Address: PO Box 204 Waverly, IA 50248
 Phone #: 202-495-XXXX

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. 9th St.
Des Moines, IA 50319

Time of Transfer Report System Status

Address: 2176 148th ST

Date: 8-5-20

Comments: Winterset, FA 50273

Technician: Brian Rinard

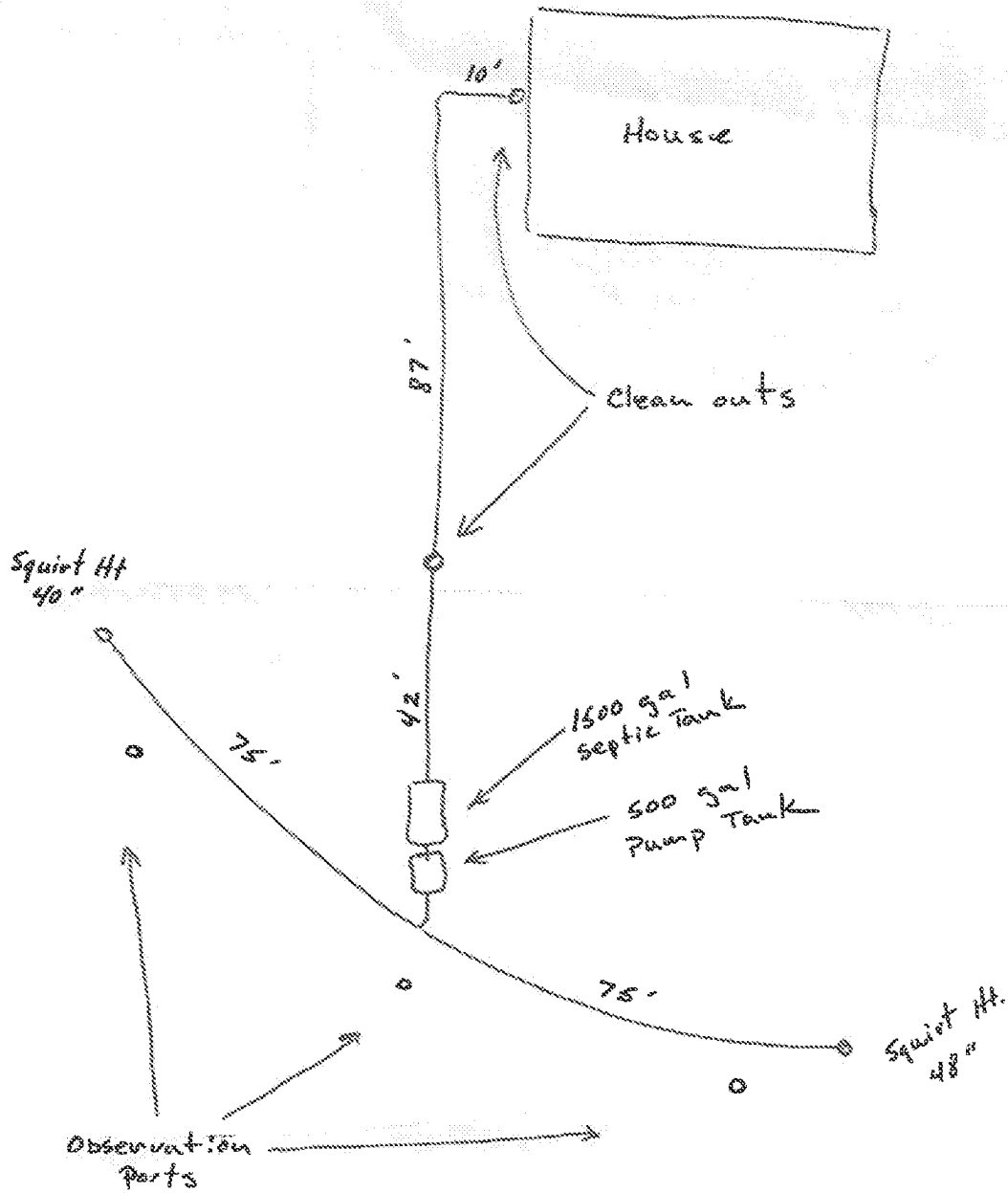
All wastewater from house appears to drain
into same system 1500 gallon concrete @ compartment
same tank with risers & effluent filter was
in working condition 500 gal pump at tank with
all components working (float, motor, etc)
at time of the inspection cycled pump
several times and at grade around probed
dry at time of inspection.

THIS IS NOT A GUARANTEE
THIS CERTIFIES THAT THE SEPTIC SYSTEM WAS
IN WORKING CONDITION AT TIME OF
THE INSPECTION.

DIAGRAM OF SYSTEM

See
County
Records

Permit # 054-05 Allen Mound Inspection 8/16/05





CountrySide Septic & Grease Service
P.O. Box 204, Norwalk, IA 50211 | 515.202.4895



Customer Name: CHRIS ALLEN

Address: 2176 148th ST Date: 12-11-18

City, State, Zip: Winterset IA 50273

Phone (Home): _____ Phone (Cell): 988-8128

Email Address: _____

Cleaned 1500 gal
Septic TANK

DISPOSAL AT A.D.S
theater

(INVOICE)
TO
Follow

Total \$400

Location of Septic System: Septic system in
working condition
at time of pumping

Riser
Yes or No

Customer Signature: _____

Service Provider Signature: [Signature]