



Document 2020 GW3048

Book 2020 Page 3048 Type 43 001 Pages 5

Date 8/19/2020 Time 11:54:22AM

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INDX  
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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 Debra E. Wignall

Address 2343 St. Charles Rd., Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

**TRANSFeree:**

Name Phillip Mainprize and Kris Mainprize

Address 103 SW 3rd St., #329, Des Moines, IA 50309

Number and Street or RR

City, Town or P.O.

State

Zip

**Address of Property Transferred:**

2343 St. Charles Rd., Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

**Legal Description of Property: (Attach if necessary)** Parcel "B" located in the Southeast Quarter (1/4) of the Northwest Quarter (1/4) and in the Northeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Eight (8), Township Seventy-five (75) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, as shown in Plat of Survey filed on June 26, 2002, in Book 2002, Page 3109 of the Recorder's office of Madison County, Iowa.

**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 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 \_\_\_\_\_.

**Information required by statements checked above should be provided here or on separate sheets attached hereto:**

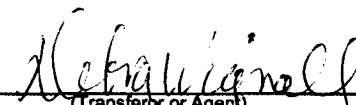
Well is located approximately 20'-30' from the SW side of the blue pole building.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**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.: (641) 670-7093

(Transferor or Agent)

# Time of Transfer Inspection Report

## Property Information

Current Owner: Debra Wignall

Buyer: \_\_\_\_\_ Realtor: Toni Tindle

Mailing Address: \_\_\_\_\_

Site Address/County: 2343 St Charles Rd, Winterset/ Madison County

## Legal Description

No. of bedrooms: 3 Last occupied: Current Records available: \_\_\_\_\_

Permit/ installation date: 4-13-88 Separation distances (ok/no?): ok

## Septic System Information

Septic tank(s): Size: 1,000 gal Material: Concrete Condition: Good

Tank pumped?  Y  N Date: 8-11-20 Licensed pumper: Wiegert

Septic/Trash/Processing tank: Size: \_\_\_\_\_ Material: \_\_\_\_\_ Condition: \_\_\_\_\_

Tank pumped?  Y  N Date: \_\_\_\_\_ Licensed pumper: \_\_\_\_\_

Aerobic treatment unit (ATU) mfr \_\_\_\_\_ Size \_\_\_\_\_

Tank pumped?  Y  N Date: \_\_\_\_\_ Licensed pumper: \_\_\_\_\_

Maintenance contract?  Y  N Expiration date: \_\_\_\_\_ Service provider: \_\_\_\_\_

Condition: \_\_\_\_\_

Pump tanks/vaults: Type: \_\_\_\_\_ Size: \_\_\_\_\_ Condition: \_\_\_\_\_

Distribution system: Distribution box Concrete Outlets used 6 Condition: good

Header pipe(s): 4"sdr135 No. of lines: 6 Pressure dosed? no

## Secondary Treatment:

Length of absorption fields: 6x85' Determined by: County Map

Condition of fields: good/ dry Determined by: Hydraulic test

Type of trench material: 8" ADS

Size of sand filter: \_\_\_\_\_ Determined by: \_\_\_\_\_

Vent pipes above grade?  Y  N Discharge pipe located?  Y  N

Effluent sample taken \_\_\_\_\_ Results: \_\_\_\_\_

Media Filters: Type: \_\_\_\_\_

Maintenance contract?  Y  N Expiration date: \_\_\_\_\_ Service provider: \_\_\_\_\_

Condition: \_\_\_\_\_

NPDES General Permit No. 4: Required?  Y  N Permitted?  Y  N NOI provided: \_\_\_\_\_



### Time of Transfer Inspection Report

Other components:

Alarms:  Y  N Working:  Y  N Disinfection:  Y  N Working:  Y  N

Control Box: Timers: Inspection Ports:

Other components:

Overall condition of the private sewage disposal system:

Report system status: System working properly during Inspection

Explain (attach additional pages as needed): Tank is in good condition. All plumbing goes to the Septic. D-box is in good condition. Hydraulic test was good. Lateral field was dry.

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: Ben Bedwell Date: 8-12-20

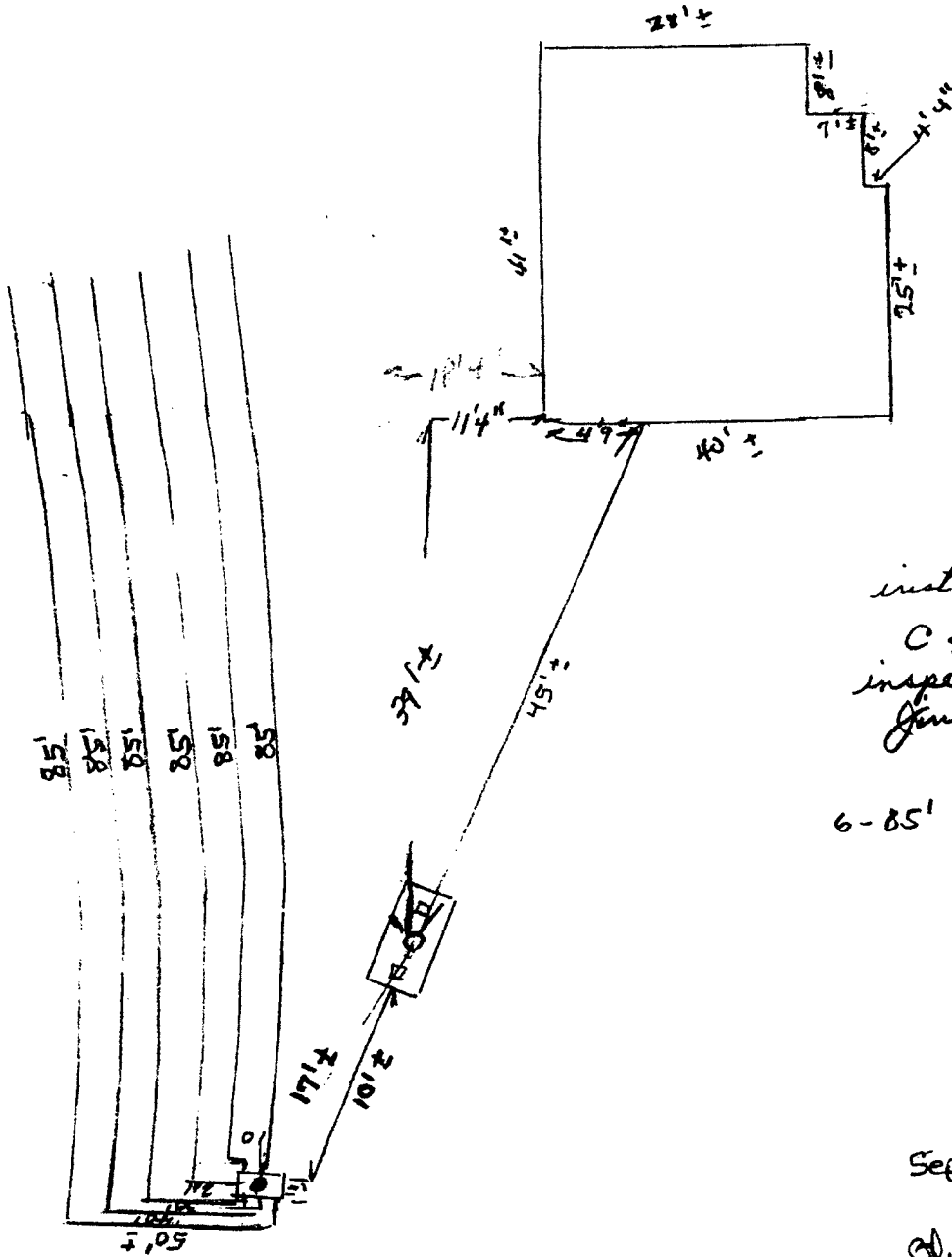
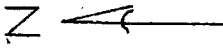
Name (print): Ben Bedwell Certificate #: 11612

Address: 1500 N B St, Indianola

Phone #: 515-681-2053

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



installed - 4/13/88

C & L Const.

inspected: - 4/13/88

Jimmy K. Sewell, Sanitarian

6 - 85' gravelless 8" pipe -

Septic tank -  $18'' \pm$   
below ground surface -

Dist box -  $26'' \pm$   
below ground surface