

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

TRANSFEROR:

Name Colin M. Betts

Address 301 W. Council Dr. St. Charles IA 50240
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Kornelius Louis Simon De Vries

Address 2671 Cumming Rd Van Meter IA 50261
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

3392 197th Ct Prole IA 50229
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

Lot One (1) of Bevington Estates, a subdivision located in the Northeast Quarter (1/4) of the Southeast Quarter (1/4) of Section Twenty-four (24), Township Seventy-six (76) North, Range Twenty-six (26) West of the 5th P.M., 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:

**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) 681 9297*
(Transferor or Agent)



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

Property information

Current owner Collin + Patricia Betts 515-681-2457
Buyer
Realtor Becky Knight 515-707-3446
Mailing address 301 West Council Dr. St. Charles Ia 50240

Site Address/County 3392 197th Court, Bevington Ia 50273
Legal Description Lot 1 Bevington Estates 24-76-26

No. of bedrooms 5 Last occupied? month ago Records available yes

Permit/installation date 11-19-04 Separation distances (ft) no? yes
128-045

Septic system information

Septic tank(s): size 1,500 gal material Poly Vinyl condition Very Good
Tank pumped? yes date 7-7-20 licensed plumber S.T. 307 yes
Septic/wash/processing tank: size material condition
Tank pumped? date licensed plumber

Aerobic treatment unit (ATU) mfr size
Tank pumped? date licensed plumber
Maintenance contract? expiration date service provider
Condition

Pump tanks/vaults: type size condition

Distribution system: distribution box yes outlets used no condition Good
Header pipe(s) 1 # of lines 4 Pressure dosed? no

Secondary treatment:
length of absorption fields 4 x 100 400 ft. determined by Vance Smith
condition of fields excellent determined by Vance Smith
type of trench material E.D. 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? permitted? NOI provided



Time of Transfer Inspection Worksheet

Other Components

Alarms no Working? _____ Disinfection no Working? _____

Control Box no Timers no Inspection Ports no

Other Components yes effluent filter, clean once a year!

Overall condition of the private sewage disposal system

Acceptable? yes Unacceptable? _____

Explain (attach additional pages as needed): _____

Comments: Pump septic tank every 3 to 5 years!

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.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: 7-7-20
 Name (print): Deane Smith Certificate #: 2992
 Address: 502 West Main St, St. Charles, IA 50240
 Phone #: 641-396-3440

**ANYTIME SEPTIC SERVICES II
VANCE SMITH
ST. CHARLES, IA 50240
641-396-2440**

REAL ESTATE SEPTIC INSPECTION

On July 7th, 2020. Anytime Septic Services II did Time of Transfer Real Estate Inspection on septic tank, distribution box and lateral field at 3392 197th Court, Bevington, Iowa 50273. Colin and Patricia Betts residence.

Septic tank is a 1,500 gallon two compartment Poly Vinyl Rochester septic tank which I pumped and cleaned with clean water. On both inlet and outlet ends of septic tank are 18 inch by 24 inch plastic risers with 22 inch screwed down plastic lids above 4 inch schedule 40 piped tee baffles with drops. On the outlet end of tank is a 4 inch round yellow colored effluent filter inserted into tee baffle that needs cleaned at least once a year! Very important to do! By lifting filter straight upward from baffle and hosing off and reinserting into baffle which I did. Septic tank is in excellent condition.

Distribution box is a plastic Tuff Tite box, which I also pumped and cleaned with clean water. Distribution box is 16 inches below ground surface with a concrete surrounding for support. Inside box is a 4 inch schedule 40 piped tee baffle with 4 lines leaving box through 4, 4 inch schedule 40 pipe lines and 4 speed levelers equally distributing effluence's to lateral field.

Lateral field is on flat level ground and consist of 4 runs of 24 inch E.Q. Plastic infiltrated chambers at 100 feet each totaling 400 feet of laterals that varies from 22 to 24 inches below ground surface with no evidence of any ponding or surfacing above absorption field and no popping sound from probing all 4 laterals.

Mark Mease Construction installed 4 inch perforated drainage tile to relieve ground water from septic system. Tile line is 12 feet North of distribution box an 12 feet West of lateral field turning straight East discharging through 4 inch schedule 40 pipe into greater ditch.

NOT RESPOSIBLE FOR ANY FAILED SEPTIC SYSTEMS.

Warren Ave

Colin & Patty Betts Permit # 128-041

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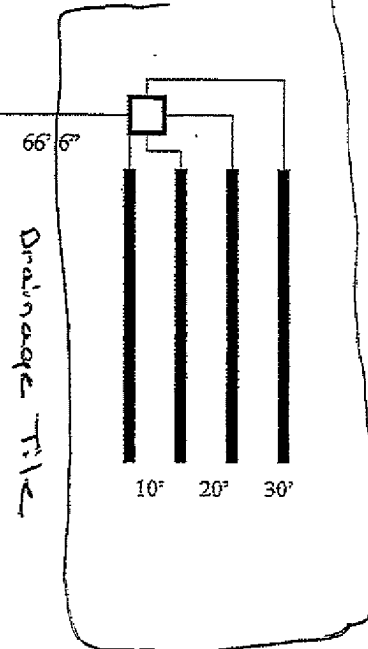
12' 21'

49'



1500 Rockchester plastic tank

20'



Drainage Tile

10' 20' 30'

Madison County
Office of Zoning and
Environmental Health

*Authorization to Construct a
Private On-site Wastewater
Treatment System (POWTS)*

112 N. John Wayne Drive
P.O. Box 152
Winterset, IA 50273-0152
Telephone: (515) 462-2636

Permit Number: 128-04

Date Issued: 10/4/04

Issued to: Colin & Patricia Betts
Address: 2716 Sheridan Ave
Des Moines, IA 50310

3398 197th Ct.
430682482010000

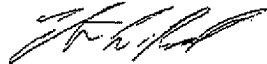
Legal Description: Lot 1 Bevington Estates NE SE Section 24-76-26 Crawford Twp.

POWTS Components Specifications: 1500gal. Septic Tank & 4ea. EQ24 Lateris @ 100ft.

General Conditions:

1. System must be constructed in conformance with attached system layout, profiles, and cross-sections.
2. Structures must be constructed in conformance with 567 IAC Chapter 69 and the Madison County Environmental Health Regulations.
3. Permit shall be null and void if system is not constructed within one year of permit issuance. The Environmental Health Officer must approve any request for extension of permit.
4. The Environmental Health Officer must approve any design modifications to the permitted system prior to construction.
5. Once constructed, all system components must be uncovered for inspection and the system must be approved before it can be put into operation. Notice for inspection must be received with 24 hours in advance (8 a.m. through 4:30 p.m., Monday - Friday). If weather necessitates the need to cover the system components, then the system owner or contractor must notify and follow the procedures given by the Environmental Health Officer.

Special Conditions:



*Environmental Health Officer
Madison County
Office of Zoning and Environmental Health*

Application to Construct
Private On-Site Wastewater Treatment
System (POWTS)

Office Use Only				Temp. E911			
Tracking No.	Date Received	Fees Paid	Date Issued	Date Inspected	Date Approved	Section/Township	NPDES Authorization #
128-09	10/4/04	9150	10/4/04			24 Crawford	

Application will not be accepted until site and soil analysis/percolation information, and two diagrams of the system layout, profiles and cross-sections have been received; and fee has been paid. For systems requiring an NPDES General Permit #4 (surface discharge), its application must be submitted to this office and appropriate forms recorded before a permit will be issued.

Please Print All Information.

1. Owner Information (Applicant) First Name: <u>John</u> Last Name: <u>Betts</u> Address: <u>2716 Sheridan Ave.</u> City: <u>Des Moines</u> State: <u>IA</u> Zip: <u>50310</u> Phone Number (area code): <u>515-255-3932</u> Fax or E-mail: Cell Phone:		2. Contractor Information First Name: <u>Glenn</u> Last Name: <u>Bedwell</u> Address: <u>296 Quaker</u> City: <u>St. Charles</u> State: <u>IA</u> Zip: <u>50246</u> Phone Number (area code): <u>(641) 396-2462</u> Fax or E-mail: Cell Phone:	
3. System Requirement Information IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED Minimum Tank Size Required 1-3 Bedroom 1000 4 Bedroom 1250 5 Bedroom 1500 6 Bedroom 1750		4. Site and Soil Evaluation (Percolation Test) PERCOLATION TEST MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT Date test taken: <u>9/1/04</u> Test taken by: <u>Charles Vance</u> Test Results: Hole 1 <u>20.0</u> min/in Hole 2 <u>14.1</u> min/in Hole 3 <u>21.8</u> min/in Hole 4 <u>30.0</u> min/in Average <u>21.7</u> min/in Depth of Test Holes <u>36"</u> Number of Laterals Required <u>4 each</u> Length of Laterals Required <u>100</u> ft. ea	
5. Type of Submittal <input checked="" type="checkbox"/> New <input type="checkbox"/> Revision <input type="checkbox"/> Repair, Tank <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement Previous Permit #:		6. Address Information Location, Number & Street of project (if unknown, indicate nearest road): <u>Bewington Estates Lot 1</u> <u>197th Lane & Warren Ave.</u> Legal Description: <u>Lot One (1) of Bewington Estates, a subdivision located in the Northeast quarter (1/4) of the Southeast quarter (4/4) of Section Twenty-four (24), Township Seventy-six (76) North, Range twenty-six (26) West of the 5th P.M., Madison County, Iowa.</u>	
7. Type of Building(s) Completed by Owner <input checked="" type="checkbox"/> Residential Number of Bedrooms: <u>3</u> Other buildings served by this system:		<input type="checkbox"/> Commercial/Other Non-Residential Use: <input checked="" type="checkbox"/> Garbage Disposal <input checked="" type="checkbox"/> High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: <u>1</u>	
Your contractor or system designer should complete the remaining portion of this application.			
8. Primary and/or Mechanical Treatment Type: <u>Poly</u> Manufacturer: <u>Rochester</u> Model: Size (gal): <u>1,500</u> Type: Manufacturer: Model: Size (gal):		9. Pump/Siphon <input type="checkbox"/> Not Applicable Type: Manufacturer: Model: Dosing Frequency:	
10. Secondary Treatment Area Type: <input type="checkbox"/> Not Applicable Type of Laterals: <u>24"</u> Number of Laterals: <u>4</u> Length of ea. Lateral: <u>100</u> Other: Other: Maximum Trench Depth (inches): <u>36</u> <u>ADS Chamber</u>			
I hereby attest the truth and accuracy of all facts and information presented on this application. Request for inspection of the system must be made 24 hours in advance. Water at the site to test the distribution box must be available. Mechanical systems require use of a free-access sand filter and must be covered by a maintenance agreement, which must be recorded in the Madison County Recorder's Office. Discharge from mechanical systems and sand filters require periodic testing as set forth in IAC Chapter 69 and the results submitted to BOH.		It is unlawful to start construction, reconstruction, or repair of any POWTS prior to issuance of a POWTS permit by the Environmental Health Officer.	
Applicant Signature: <u>John Betts</u>		Date: <u>10/4/04</u>	

MADISON COUNTY ENVIRONMENTAL HEALTH

PERCOLATION TEST REPORT

TEST #

Date taken: 8-21-04

By: Jim Vance

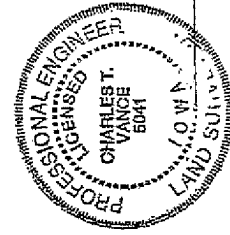
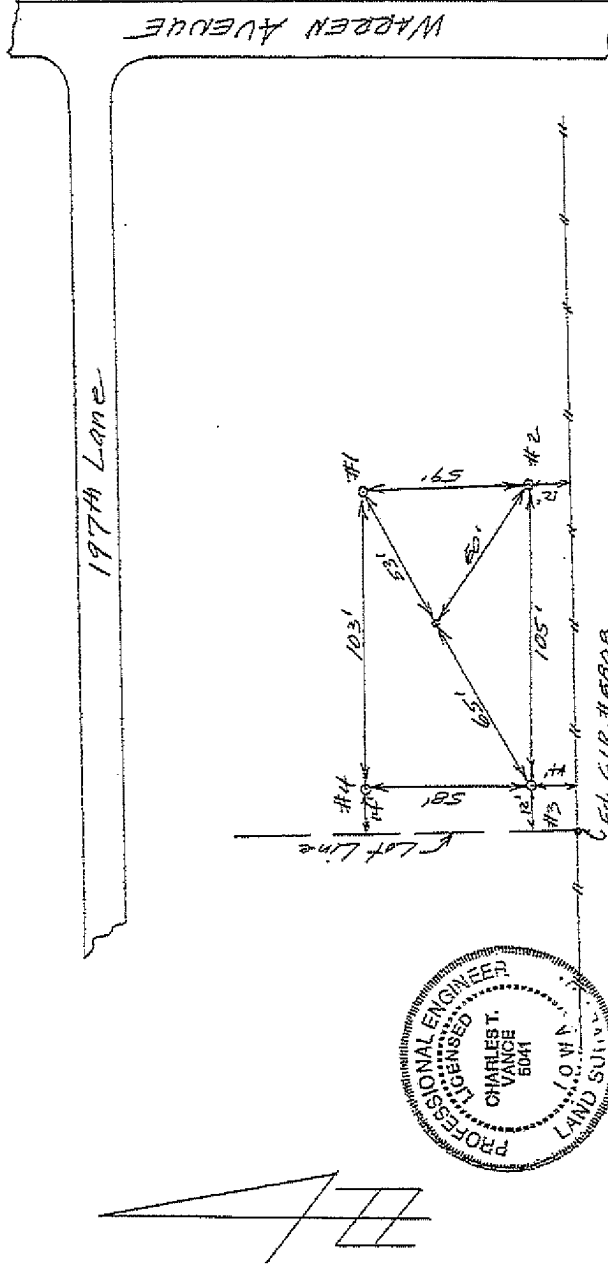
Phone No. 244-0606

Site Address:

Lot Size: 3.1 Ac Legal Description: Lot 1, Bevington Estates, Sec. 24-T76N-R26W
Structure: X New Existing # Bedrooms: 3 Installer:
Owner's Current Mailing Address: 2716 Sheridan Ave., Des Moines, Iowa 50310

Time for 1 inch of water: 1. 20.0 min, 2. 14.1 min, 3. 21.8 min, 4. 30.0 min, 5. 6.
Depth of holes tested: 1. 36" 2. 36" 3. 36" 4. 36" 5. 6.
Results of 6 foot hole: No rock, No water, 5. 6.

Min. recommended lateral footage per IAC Ch. 69: 400 feet Drawing of perc site below.
Number of laterals required: 4 each Average length of laterals: 100 feet



I hereby certify that this engineering document was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the laws of the State of Iowa.

Signed: *Charles T. Vance* Date: 23 August 2004 Reg. No. 5041 Exp. Date: 31 Dec 2005

Preparer Information: John E. Casper, 223 E. Court Avenue, Winterset, (515) 462-4912

Individual's Name: _____ Street Address: _____ City: _____ Phone: _____



Address Tax Statement: Colin and Patricia Bets
2716 Sheridan Avenue
Des Moines, IA 50310

SPACE ABOVE THIS LINE
FOR RECORDER

WARRANTY DEED - JOINT TENANCY

For the consideration of Twenty-eight Thousand Two Hundred Fifty and No Cents—(\$28,250.00)
Dollar(s) and other valuable consideration,
Donald J. Lynch, a single person

do hereby Convey to
Colin M. Bets and Patricia A. Bets, husband and wife

as Joint Tenants with Full Rights of Survivorship, and not as Tenants in Common, the following described
real estate in Madison County, Iowa:

Lot One (1) of Bevington Estates, a subdivision located in the Northeast Quarter (1/4) of 1/4 Southeast Quarter (1/4) of
Section Twenty-four (24), Township Seventy-six (76) North, Range Twenty-six (26) West of the 5th P.M., Madison
County, Iowa.

Grantors do Hereby Covenant with grantees, and successors in interest, that grantors hold the real
estate by title in fee simple; that they have good and lawful authority to sell and convey the real estate;
that the real estate is free and clear of all liens and encumbrances except as may be above stated; and
grantors Covenant to Warrant and Defend the real estate against the lawful claims of all persons except as
may be above stated. Each of the undersigned hereby relinquishes all rights of dower, homestead and
distributive share in and to the real estate.

Words and phrases herein, including acknowledgment hereof, shall be construed as in the singular or
plural number, and as masculine or feminine gender, according to the context.

STATE OF IOWA, ss:
MADISON COUNTY,

Dated: 9-23-04

On this 23 day of September,
before me, the undersigned, a Notary
Public in and for said State, personally appeared
Donald J. Lynch

Donald J. Lynch (Grantor)

to me known to be the identical persons named in
and who executed the foregoing instrument and
acknowledged that they executed the same as their
voluntary act and deed.

(Grantor)

(Grantor)

Lawrence G. Watts Notary Public
(This form of acknowledgment is for grantors only)
Commission No. 762428
My Commission Expires 12/31/96

(Grantor)

