



Document 2020 GW3609

Book 2020 Page 3609 Type 43 001 Pages 16
Date 9/23/2020 Time 12:50:09PM
Rec Amt \$.00

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name See 1 in Addendum
Address 2548 Elderberry Avenue, Winterset, IA 50273
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Chris Neuenkirk and Renee Neuenkirk
Address 1494 260th Street, Winterset, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
1494 260th Street, Winterset, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) See 2 in Addendum

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: *Kevin B. Holder* Telephone No.: (515) 462-4426
(Transferor or Agent)

Addendum

1. David G. Holder and Karin B. Holder, Trustees, or their successors in trust, under the David G. Holder Living Trust, dated October 13, 2016, and any amendments thereto
2. Parcel "B" located in the Northeast Quarter (NE ¼) of the Northeast Quarter of Section Twenty-six (26), Township Seventy-five (75) North, Range Twenty-nine (29) West of the 5th P.M., Madison County, Iowa, containing 5.00 acres, as shown in Plat of Survey filed in Book 2015, Page 833 on April 1, 2015, in the Office of the Recorder of Madison County, Iowa.



Time of Transfer Inspection Report

9/7/2020

Property Information

Current Owner: David G Holder Living Trust

Buyer: Chris and Renee Newkirk Realtor: Ian Sparks

Mailing Address: 1831 Macksburg Rd Lorimor IA 50149

Site Address/County: 1494 260th St Winterset IA 50273

Legal Description Par B 5.00A

No. of bedrooms: 2 Last occupied: 08/2020 Records available: Yes

Permit/installation Date: 06/30/2003 Separation distances (ok/no?): OK

Septic System Information

Septic tank(s): Size: 1500 gal Material: Concrete Condition: Good

Tank pumped? Y N Date: 09/04/2020 Licensed pumper: Wiegert Disposal

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 Yes Outlets used 3 Condition: Good

Header pipe(s): _____ No. of lines: _____ Pressure dosed? No

Secondary Treatment:

Length of absorption fields: 98 ft Each (3 Laterals) Determined by: Records & Inspection.

Condition of fields: Good Determined by: Inspection

Type of trench material: Rock

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

9/7/2020

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 is in good working order at this time -

Explain (attach additional pages as needed): _____

Comments: Passed

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:  Date: 9/7/2020

Name (print): Robert "Matt" Jackson Certificate #: 12273

Address: 1541 NE 66th Ave Des Moines, IA 50313

Phone #: 515-244-4646

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

DNR Time of Transfer Narrative

I (Robert "Matt" Jackson) inspector #12273 on above date performed the Time of Transfer Inspection on the private sewage disposal system

At this time all components of system (which consists of a 1500gal concrete septic tank, distribution box using three (3) outlets that feed three (3) 98ft laterals spaced 9ft apart,) were inspected and found to be in good working order.

A 30 minute hydraulic loading test was performed and no backflow into the d-box or unit was observed.

Unit is in good working order at this time.

Robert "Matt" Jackson

Matt Jackson

12273

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

Office Use Only				Temp E911s			
Tracking No.	Date Received	Date Issued	Date Inspected	Date Approved	Section/Township	NPDES Authorization #	
02-05	3-22-03	3-22-03					

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)			2. Contractor Information		
First Name	Rolland		Last Name	Rasmussen	
Address	5051 Ashworth Rd		Address	Same as Rolland	
City	State	Zip	City	State	Zip
WEST DES MOINES	IA	50266			
Phone Number (area code)	Fax or E-mail	Cell Phone	Phone Number (area code)	Fax or E-mail	Cell Phone
563-225-1723					

3. System Requirements	4. Site and Soil Evaluation (Percolation Test)
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED	PERCOLATION TEST MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT
Minimum Tank Size Required	Date test taken _____ Test taken by _____
1-3 Bedroom 1000	Test Results: Hole 1 _____ min/in Hole 2 _____ min/in
4 Bedroom 1250	Hole 3 _____ min/in Hole 4 _____ min/in
5 Bedroom 1500	Average _____ min/in Depth of Test Holes _____
6 Bedroom 1750	Number of Laterals Required _____
	Length of Laterals Required _____ ft. ea

5. Type of Submittal	6. Address Information
<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	Location, Number & Street of project (if unknown, indicate nearest road): 260th
Previous Permit #:	Legal Description: 026 075 029 Webster Twp NE NE

<input checked="" type="checkbox"/> Residential	Number of Bedrooms: 2	<input type="checkbox"/> Commercial/Other Non-Residential	Use:
Other buildings served by this system: NONE		<input checked="" type="checkbox"/> Garbage Disposal <input type="checkbox"/> High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: ____	

8. Primary and/or Mechanical Treatment	Type: Concrete	Manufacturer: Sinter	Model:	Size (gal): 1500
9. Pump/Siphon	Type:	Manufacturer:	Model:	Dosing Frequency:
<input type="checkbox"/> Not Applicable				

10. Secondary Treatment Area Type: <input type="checkbox"/> Not Applicable					
Type of Laterals	Number of Laterals	Length of ea. Lateral	Other	Other	Maximum Trench Depth (inches)
EQ24	3	100			30"

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 Records 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: <i>Rolland Rasmussen</i>	Date: 3/26/03	

Date taken: 3-24-03

By: Jim Vance

Owner: Ryan Rasmussen

Site Address: 1494-260th Street

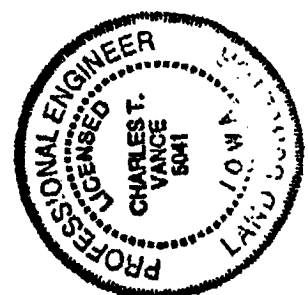
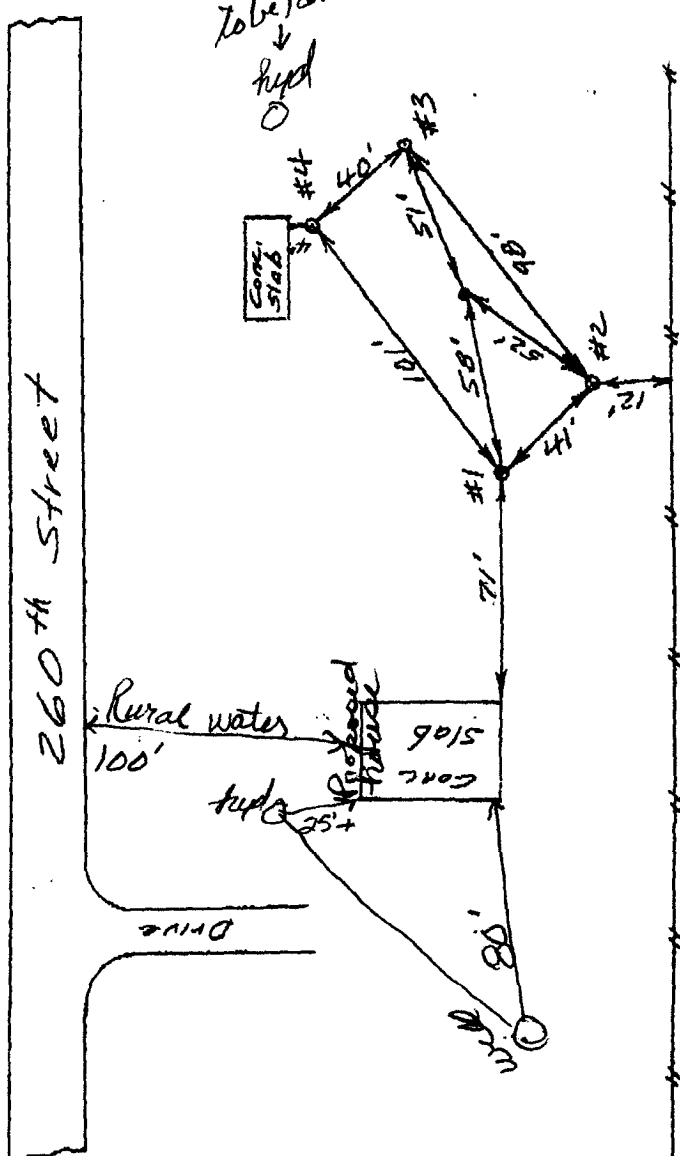
Phone No. 208-1563

Lot Size: 3 acres Legal Description: Part of the NE1 of the Sec. 26-75N-29W
Structure: X New Existing # Bedrooms: 2 Installer:
Owner's Current Mailing Address: 551 Ashworth Rd. West Des Moines, Iowa 50266

Time for 1 inch of water: 1. 26.7 min 2. 24.0 min 3. 21.8 min 4. 21.8 min
Depth of holes tested: 1. 30" 2. 30" 3. 30" 4. 30"
Results of 6 foot hole: No Rock No Water

Min. recommended lateral footage per IAC Ch. 69: 300 feet Drawing of perc site below.
Number of laterals required: 3 each Average length of laterals: 100 feet

Handwritten notes: 2nd hole, 3rd hole, 4th hole, 5th hole, 6th hole



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: 24 March 2003 Reg. No. 5041 Exp. Date: 31 Dec. 2003

RLI1002 PID 590122622000000 00 Tax Dist 590 00 Class A INQUIRY
 2002 061 Map# 000000926200002 GIS#

Property 004951000 DED R & L Corporation
 Ownership 5051 Ashworth Road
 W.Des Moines IA 50266-

000000000
 Location 000000 Street City
 Recorded REC 134 157

Documents

Misc Exempt Code No Ag Cr VIN#
 Sec-Twp-Rng 026 075 029 Cty-Adn-Blk

Legal Desc NE NE

Applications Typ 1 AGL Ovr Amt 17,100 Typ 2 Ovr Amt
 Typ 3 Ovr Amt Typ 4 Ovr Amt

	100%	Rollback Gr	Acres	Typ Desc	Value	Rollback	Acres
Grs	17,790	17,790	40.00	LND Land	17,100	17,100	39.00
Mil			1.00	BLD Building	690	690	
Net	17,790	17,790	.00	DWL Dweling			
			.00	EXM Exempt			1.00
		Net	39.00				

F3=Exit F10=Ownership F12=Prev F13=Rec Doc F15=Legal
 F18=Tax History F19=Applc F20=Value F21=Print

Permit No 016-03 Name: R&I Corp. 911 Sign Locate

Date of Inspection: 6/30/03 Inspected by: Elton Root

Contractor: Self

Dwelling under construction or moved in Yes No

Setbacks

Meets required setbacks.

- Rural Water Yes No
- Private wells/Groundwater heat pump bore holes/suction water lines/lakes
 - Outside required 50-foot setback for tank Yes No
 - Outside required 100-foot setback for laterals Yes No
- Streams/ponds (25-25 ft)-ditches (10-10 ft) Yes No
- Indications of water lines under pressure Yes No

Comments:

Building Sewer

- Clean outs – one right outside of house Yes No
- location of cleanout inside house and set requirement
- Pipe is sch 40 and has a 4-inch diameter. Yes No
- Grade – has adequate fall. Yes No

Comments:

Tank

- Tank. Manufacture Lister Concrete Plastic
- Capacity 1500 -gallon
- Two compartments, both meet the specs for capacity. Yes No
- Baffle Yes No
- Inlet/Outlet tees are ok. Yes No
- Effluent filter in the outlet. Yes No Manuf.
- Tank depth. 6 inches
- Risers Yes No
- Lids above grade screwed on Yes No Will be

Comments:

Distribution Box

- Brand Tuf-Tite Other
- Bedded in cement. Yes No Will be
- Has required inlet baffle. Yes No Will be
- Outlet levels –are level. Yes No Unknown

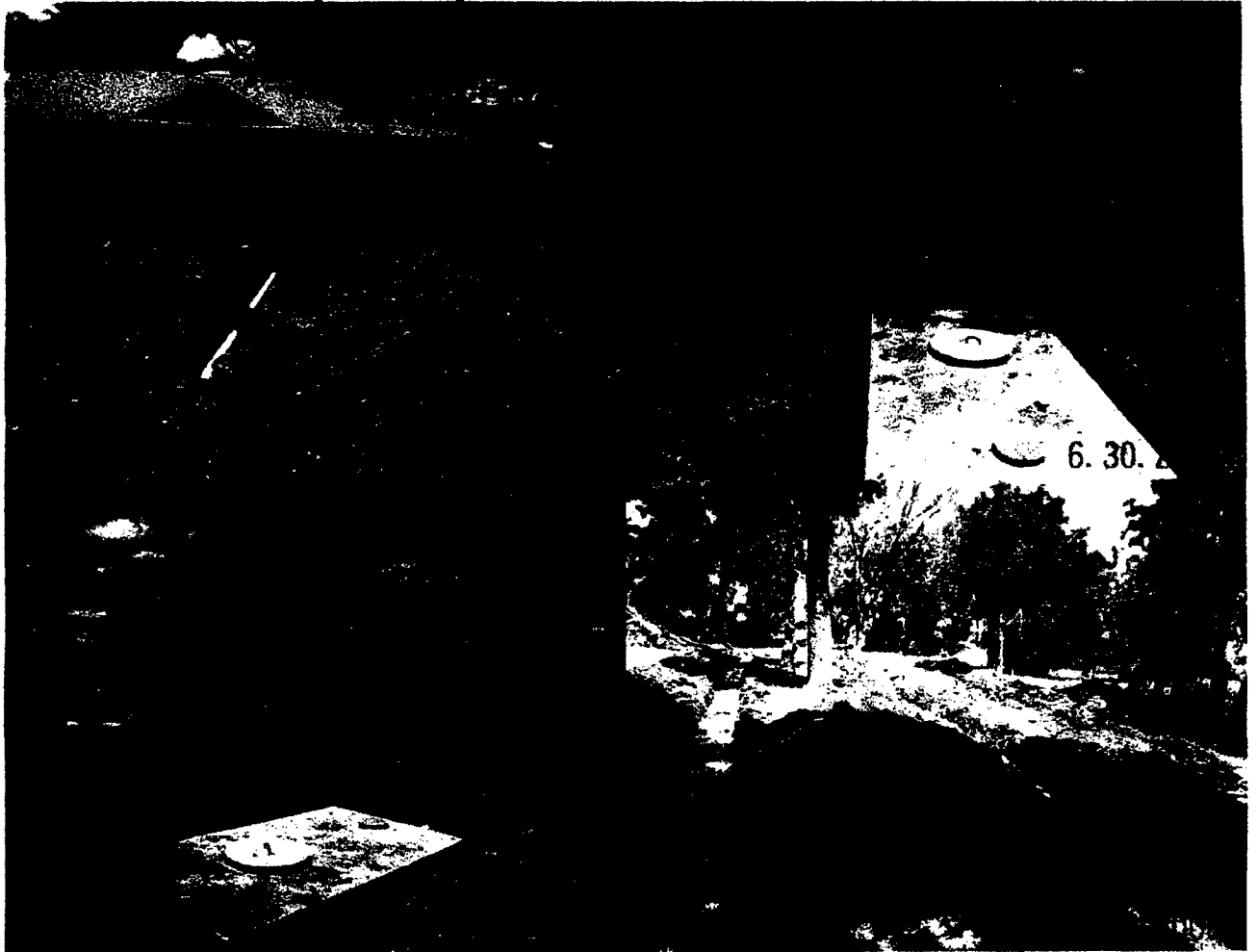
Comments:

Laterals

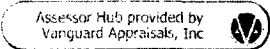
- Distribution lines: 4-inch PVC pipe – SDR 35
- Distribution lines screwed to laterals. Yes No Will be
- Lateral used. Rock Reduction? Yes No
- Lateral depth 24 inches Perc depth 30 inches
- Laterals were level. Yes No
- Adequate amount of undisturbed soil between laterals. Yes No
- Distance 9 feet between laterals.

Comments:

Permit # 016-03 R&I Corporation Inspection 6/30/03



MADISON COUNTY ASSESSOR



Parcel Number: 590122622010000
Deed Holder: HOLDER, DAVID G LIVING TRUST
Property Address: 1494 260TH ST
 WINTERSET, IA 00000-0000 [MAP THIS ADDRESS](#)
Mailing Address: HOLDER, DAVID G LIVING TRUST
 2548 ELDERBERRY AVE
 WINTERSET, IA 50273 USA
PDF Name: RURAL RESIDENTIAL
Class: RESIDENTIAL
Map Area: WEBSTER
Tax District: 590 WB W WFD
Subdivision: (EMPTY)
Sec-Twp-Rng: 026-075-029
Lot-Block: 029-075
Deeded Acres: 5.0000
Legal Description: PAR B 5.00A
Property Report: [PROPERTY REPORT \(PDF FILE\)](#)



Pin 590122622010000 Photo

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Current value as of January 01, 2020 Taxes payable September 2021 and March 2022

Land Value	Dwelling Value	Improvement Value	Total Value
\$46,500	\$119,000	\$0	\$165,500

[Get Current Year Tax Estimate](#)

Land Information

Lot Type	Square Feet	Acres
Site and Excess	191,664	4.400

Assessor's lot sizes are for assessment purposes only and may NOT represent actual dimensions. For more accurate, complete data refer to GIS maps, plat maps, or legal documents.

Residential Building Information

Occupancy	Style	Year Built	Total Living Area
Single-Family / Owner Occupied	1 Story Frame	2003	960

Agricultural Building Information

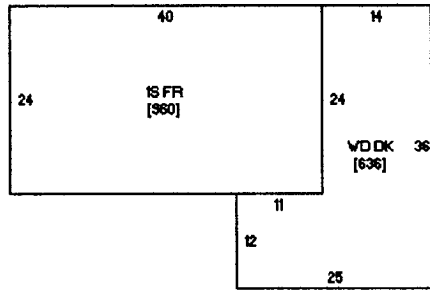
Building Type	Building Count	Year Built

▼ Steel Utility Building (Width - 40, Length - 60, Height - 0)

Sale Information

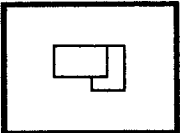
Sale Date	Amount	Non-Useable Transaction Code	Recording
▼ 03/03/2017	\$0	38 - No consideration	B2017 P719
▼ 05/01/2015	\$150,000	26 - Split of division	B2015 P1114
▼ 02/25/1975	\$0	036 - Prior Year Sales	B 134 P 157

Sketch



Sketch of Pin 590122622010000

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GIS Map Information

Views

Base Layer

- Imagery 2018
- Imagery 2015
- Imagery Off

Overlays

Townships

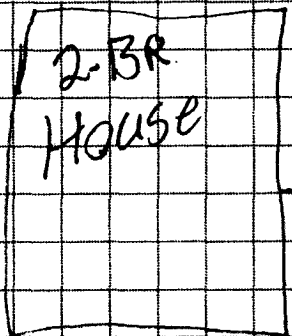
- Annotations
- Cadastral Line
- Parcel Number
- Roads
- RailRoads
- Water
- Soils

Search

Legend

Help

Tools



2-BR
HOUSE

cleanout
Pipe

35 ft

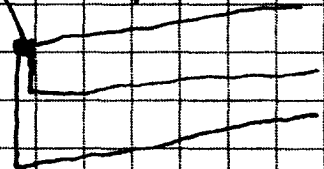
1500 GAL
SEPTIC TANK



30 ft

Laterals
98 ft x 3

D-Box



Sept - 4th - 2020