

Document 2020 GW4130

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Rec Amt \$.00

INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

	TO BI	E COMPLETED BY TRANSFER()R				
TRANSF	EROR:						
Name	Jeremy Conrad Carlsten an	nd Kayla Lea Carlsten					
Address	1612 Taylor Avenue, Muscatine, IA 52761						
	Number and Street or RR	City, Town or P.O.	State	Zip			
TRANSF	EREE:						
Name	Adam Walters and Mandy	Walters					
Address	2290 Holliwell Bridge Road, Winterset, IA 50273						
	Number and Street or RR	City, Town or P.O.	State	Zip			
	of Property Transferred: olliwell Bridge Road, Winters	set, IA 50273					
Nu	mber and Street or RR	City, Town or P.O.	State	Zip			
5th P.M.,	Madison County, Iowa, containing	(3), Township Seventy-five (75) North, l 15.28 acres, as shown in Plat of Survey file Office of the Recorder of Madison Cou	led along with the Contract file				
A 181 11							
	(check one)	rated on this property.					
	here are no known wells situate	pated on this property. The type(s),	location/o) and local stat				
		n attached separate sheet, as ne		us are			
	Waste Disposal (check on		Jessai y.				
		e disposal site on this property.					
		al site on this property and inform	ation related thereto is p	rovided			
	Attachment #1, attached to			. •			
	rdous Wastes (check one)						
	here is no known hazardous						
T	here is hazardous waste on	this property and information rela	ated thereto is provided in	ı			
	ttachment #1, attached to th						
	rground Storage Tanks (cl						
<u>X</u> T	here are no known undergro	ound storage tanks on this proper	ty. (Note exclusions suc	h as			
		tor fuel tanks, most heating oil ta	nks, cisterns and septic t	anks, in			
	nstructions.)	ago tank on this property. The tra	ma(a) sima(a) and assulta				
'	ubstance(s) contained are lis	age tank on this property. The ty sted below or on an attached sep	pe(s), size(s) and any kn arate sheet, as necessar	own 'y.			

5.	Private Burial Site (check one)						
	X 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.						
	X 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						
	permit number						
In	formation required by statements checked above should be provided here or on separate						
	eets attached hereto:						
•							
_							
_							
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM							
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.						
by b							
Sig	gnature: Telephone No.: (515) 608-0640						
	framation or chairth						



TIME OF TRANSFER DETAIL

County: Madison County, tburk@madisonco.ia.us

Complete Address:

2290 Holliwell Bridge Rd., Winterset, IA 50273

Seller Name & Email: Jeremy Carlsten, jcc.993@gmail.com

Seller Complete Address & Phone:

2290 Holliwell Bridge Rd., Winterset, IA 50273, 515-608-2782

Seller Real Estate Agent: For Sale By Owner

Seller Agent Email & Phone: For Sale By Owner

Buyer Name & Email: No Buyer At This Time

Buyer Complete Address & Phone:

No Buyer At This Time

Buyers Real Estate Agent: No Buyer At This Time

Buyers Agent Email & Phone: No Buyer At This Time



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

Property information Contact	
Current Owner Jeremy Carlsten, jcc.993@gmail.com	Low Colo Der Overnor
Buyer No Buyer At This Time Re Mailing Address 2290 Holliwell Bridge Rd., Winterset	Pallor For Sale by Owner
Mailing Address 2290 Holliwell Bridge Rd., Wintersell	t, 1A 302/3, 313-608-2/82
Site Address/County 2290 Holliwell Bridge Rd., Winterset, I	A 50273 Madison County, tburk@madisonco.ia.us
No. of Bedrooms 4 Last Occupied? curre Separ	ration distances ok?
Records Available Permit/Installation Date	
Septic System Information	
Septic Tank(s): Size (2) 1000 gal Material Co	oncrete Condition Working
Tank Pumped? YES Date	Licensed Pumper Forest Septic
Septic/Trash/Processing Tank: Size Ma	terial Condition
Tank pumped? Date	Licensed Pumper
Aerobic treatment unit (ATU) MFGR	Size
Tank Pumped? Date	Licensed Pumper
Aerobic treatment unit (ATU) MFGR Tank Pumped? Date Maintenance Contract? Expiration Date	Service Provider
Condition	
Pump Tanks/Vaults: Type Concrete Size 25	0 gal Condition Working
Distribution System: Distribution Box Plastic Ou	tlets Used 4 Condition Working
Header Pipe(s)	Number of Lines
Pressure Dosed?	
Secondary Treatment	D
Length of Absorption Fields 4x100ft=400ft	Determined by County record/probe
Condition of Fields Working	Determined by Hydraulic load test/probe
Type of Trench Material 36" Chambers	
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? P	Permitted? NOI submitted
141 DES Scholar I crimit 140. 7. Required: 1	Minimod: NOI sublimited



Time of Transfer Inspection Worksheet

Other Components		
Alarms Working?	Disinfection	Working?
Control Box Timers_	Inspection	n Ports
Other Components		
Overall condition of the private sewage disp	oosal system	
Report of system status		
Explain (attach additional pages as needed): All waste water goes from house to septic. second tank in working condition. 250 gal pages condition. Plastic distribution box in working Chambers with 350 gal water. All chambers	(2) 1000 gal concrete tanks pump Chamber in working ng condition. Hydraulic loa	condition. Lift pump in working d tested the 4x100ft=400ft 36"
Site status at conclusion of Time of Transfer	r inspection:	
 Verify that controls are set on the appr Power is on to all components. Revisit all components to verify lids are Gather all tools for removal from the s Verify that no sewage is on the ground 	re secure. ite.	
Using this worksheet, write a narrative repo	rt of the inspection results a	and attach a site sketch.
This report indicates the condition of the pri does not guarantee that it will continue to fu	• •	m at the time of the inspection. It
Signature of Certified Inspector: Name (print): Rick Rogers Address: 401 NE 52nd Ave, Des Moines, IA 5	Roger_	Date: 9/11/2020 Certficate #: 9597
Phone # (515)282-0777		

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
4/2010



SEPTIC DRAWING

Site Address: 2290 Holliwell Bridge Rd., Winterset, IA 50273 Seller Name & Email: Jeremy Carlsten, jcc.993@gmail.com

Seller Address & Phone: 2290 Holliwell Bridge Rd., Winterset, IA 50273, 515-608-2782

Picture:

