



Document 2020 GW4168

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Stephen H. Foust
Address 2999 St. Charles Road, St. Charles, IA 50240
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Madison County, Iowa
Address Madison County Courthouse, PO Box 152, Winterset, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

Rural Land, Madison County, Iowa, IA
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) See 1 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]: Explained below.
- The private sewage disposal system has been installed within the past two years pursuant to permit number _____.

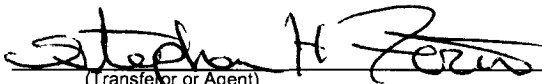
Information required by statements checked above should be provided here or on separate sheets attached hereto:

I well is on on Lot 2 in the corner near where the St. Charles Road intersects the driveway.

The old septic systems serving Lot 1 does not need to be inspected because that lot is not being sold.

The Lot 2 septic system has been installed and passed inspection, but does not really need to be inspected until after platting when it is sold. Attached is a copy of the recent inspection certification.

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.: 515 971 7002
(Transferor or Agent)

Addendum

1. A tract of land located in the Northeast Quarter ($\frac{1}{4}$) of the Northeast Quarter ($\frac{1}{4}$) of Section Twenty (20), and in the Southeast Quarter ($\frac{1}{4}$) of the Southeast Quarter ($\frac{1}{4}$) of Section Seventeen (17), ALL in Township Seventy-five (75) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, containing 14.155 acres, more or less, as shown in Plat of Survey filed in Farm Plat Book 1, Page 162, on June 5, 1981, in the Office of the Recorder of Madison County, Iowa.

**MARION COUNTY ENVIRONMENTAL HEALTH DEPARTMENT
PRIVATE SEWAGE SYSTEM INSPECTION REPORT
SUBSURFACE ADVANTEX FILTER SYSTEM**

GENERAL INFORMATION	
Owner: <u>Steve Foust</u>	Contractor: <u>Hansen Mechanical Mease</u>
Address: <u>2999 St. Charles Rd</u>	Inspector: <u>Krings</u>
Inspection Date: <u>8-13-20</u>	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved

S = Satisfactory U = Unsatisfactory NA = Not Applicable

S U NA	SITE PREPARATION
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Sewer Permit No: <u>050-20</u>
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Percolation/Soil Test No: <u>Douglas Oelmann</u>
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	System Exposed for Inspection

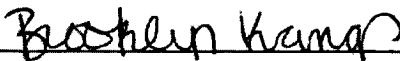
S U NA	SETBACKS
Minimum Setbacks to Closed / Open Portions of Septic System:	
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Private Water Well 50' / 100'
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Shallow Public Water Well 200' / 400'
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Deep Public Water Well 100' / 200'
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Heat Pump Borehole 50' / 100'
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Lake or Reservoir 50' / 100'
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Stream or Pond 25' / 25'
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Edge of Drainage Ditch 10' / 10'
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Dwelling or Other Structure 10' / 10'
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property Lines 10' / 10' (Unless an easement is signed and recorded.)
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Other Subsurface Treatment Systems 5' / 10'
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Water Line under Pressure 10' / 10'
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Suction Water Line 50' / 100'
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Foundation Drain or Subsurface Tiles 10' / 10'

S U NA	SEWER PIPE FROM BUILDING TO PRIMARY TREATMENT
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Min. Setback to Wells Private Wells 10' / Public Wells 25'
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Material Sch. 40 Plastic Pipe (or SDR 26 or Stronger) or Cast Iron
<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Cleanouts At building, every 100', and each change of direction > 45°.

S U NA	PRIMARY TREATMENT - SEPTIC TANK
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Gallon Capacity <input type="checkbox"/> 1000 <input type="checkbox"/> 1250 <input checked="" type="checkbox"/> 1500 <input type="checkbox"/> 2000 <input type="checkbox"/> Other:
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Watertight Material <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Plastic (ribbed const)
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Manufacturer <u>Pella</u>
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Compartments At least 2 compartments or 2 tanks in series.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Influent Compartment 1/2 to 2/3 of total tank capacity.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Effluent Compartment 1/3 to 1/2 of total tank capacity.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Inlet 2" to 4" higher than outlet.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Baffles 4" diameter schedule 40 plastic tees.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Effluent Screen Meets NSF Standard 46 or equivalent.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Watertight Risers Min. 18" diameter at or above ground surface.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Inlet/Outlet Connections Self-sealing gaskets formed or cast into tank material.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Schedule 40 Pipe At least 5' past outlet and 2' past disturbed ground.

S U NA		SUBSURFACE ADVANTEX FILTER		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Size AX1500	Minimum Required: 500 gpd	Installed: 1500 gpd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brand Name/Manufacturer	Brand Name: AX1500	Manufacturer:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Model & Serial Numbers	Model #:	Serial #:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Signed Maintenance Contract	Maintenance Provider:	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Installed per Manufacturer Specifications		

This report and the corresponding permit indicate the condition of the above-mentioned private sewage system at the time of inspection. To the best of my knowledge, all of the listed local and state ordinances have been adhered to. This does not guarantee the future condition or proper function of the system.



 Inspector 8-13-20
Date