

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

TRANSFEROR:

Name Brian R. Reed and Lisa A. Reed
Address 6534 Patmore Road, Memphis , TN 38134
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name James R. Harrison and Leslee J. Harrison
Address 2245 Holliwel Valley Court, Winterset, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

2245 Holliwel Valley Court, Winterset, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) Lot Thirteen (13) of Holliwel Valley Subdivision, located in the Northeast Quarter (1/4) of Section Five (5) in Township Seventy-Five (75) North, Range Twenty-seven (27) 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:

Septic is Northeast of House

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) 745-0541
(Transferor or Agent)
Lisa Reed



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

Property information

Current owner Brian Reed
Buyer James & Leslee Harrison Realtor HomeFront Sarah Cozeman
Mailing address 1805 SE Parkview Crossing Waukegan, Iowa 50023
Site Address/County 2245 Holliswell Valley Ct Winterset IA 50272
Legal Description Same as address
No. of bedrooms 3 Last occupied? Nov 28, 2000 Records available yes
Permit/installation date 026-04 Separation distances 60' no?

Septic system information

Septic tank(s): size 1500 material Cement condition OK at this time
Tank pumped? yes date 11-18-2000 licensed pumper SF 237
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper
Aerobic treatment unit (ATU) mfrg size
Tank pumped? date licensed pumper
Maintenance contract? expiration date service provider
Condition

Pump tanks/vaults: type size condition

Distribution system: distribution box NO outlets used condition
Header pipe(s) # of lines Pressure dosed? NO

Secondary treatment:

length of absorption fields 120m determined by
condition of fields Sand filter looks ok determined by
type of trench material

Size of sand filter 18' x 50' determined by Map of Probe
Vent pipes above grade? yes discharge pipe located? yes
Effluent sample taken? yes 11-18-2000 Results E, B, C, D, 5 Day 2 TSS 1

Sand filter type
Media filters: type
Maintenance contract? No expiration date service provider Home Services
Condition

NPDES General Permit No. 4: required? No permitted? NOI provided



Time of Transfer Inspection Report

Other components:

Alarms No Working? — disinfection No working? —

Control box No Timers No inspection ports yes once

Other components Has filter in tank need to clean every year

Overall condition of the private sewage disposal system

Report system status _____

Explain (attach additional pages as needed): _____

Comments: needed 250 gal water to test

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.

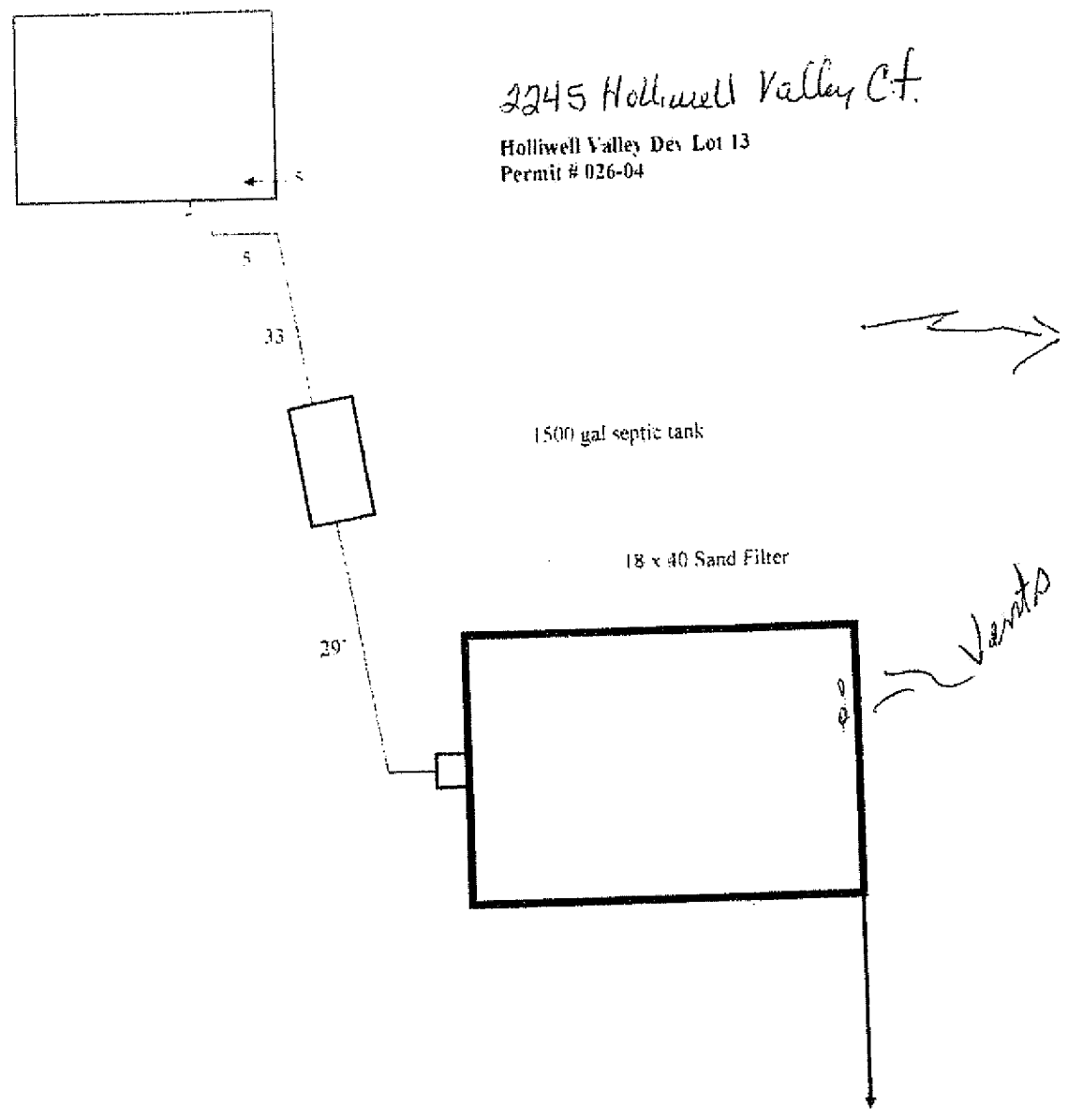
This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified Inspector: Allen Aless Date: 11-27-2020
 Name (print): Allen Aless Certificate #: 1023
 Address: 2704 175th Ct Winterset IA 50273
 Phone #: 515-462-4015

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319

2245 Holliswell Valley Ct.
Holliswell Valley Dev Lot 13
Permit # 026-04





Collection Location discharge	Collector and Phone akers alien 515/462-1015	Client Reference reed brian	Accession # 1435044
2245 HOLLIWELL VALLEY CT	Collected 2020-11-18 11:00	Received 2020-11-18 12:57	Project
Report To ALLEN AKERS 2204 175TH CT WINTERSET, IA 50273-	Sample Description waste water		
	Sample Type Non-Drinking Water		
	Sample Source		
	Sample Note(s) 1		

RESULTS OF ANALYSIS - FINAL REPORT

TEST	RESULT (mg/L)	QUANT LIMIT	ANALYSIS N
BOD, Carbonaceous 5 Day, SM 5210 B CBOD, 5 Day	<2	2	
Total Suspended Solids, USGS I-3765-85 Total Suspended Solids	1	1	

SAMPLE AND ANALYSIS NOTES

1. Upon arrival, sample met container and preservation requirements for the analysis requested. Please review carefully sample results for additional analyte comments or method exceptions.

ANALYSIS INFORMATION

TEST	ANALYZED	SITE	RELEASED	ANALYS
1. BOD, Carbonaceous 5 Day, SM 5210 B	2020-11-18 14:00 AMG	3201	2020-11-23 16:15 DLS	
2. Total Suspended Solids, USGS I-3765-85	2020-11-20 10:35 KAR	3201	2020-11-23 16:01 AMG	

DESCRIPTION OF UNITS

mg/L = Milligrams per Liter

SITE(S) PERFORMING TESTING

3201 STATE HYGIENIC LABORATORY ANKENY, IOWA LABORATORIES COMPLEX, 2220 S ANKENY BLVD, ANKENY, IA 50023; Phone 515/725-1642; Fax 515/725-1642; Michael D. Schueller, M.S., Associate Director; Wade K. Aldous, Ph.D. (D)ABMM, Associate Director; IOWA ENVIRONMENTAL ID #397

The result(s) of this report relate only to the items analyzed. Where the laboratory has not been responsible for the sampling, the results apply only to the sample as received. This report shall not be reproduced except in full without the written approval of the laboratory. If you have any questions, please call Client Services at 800/421-IOWA (4692) or 319/335-4500.

Allen Akers
 2204 175th Ct
 Winterset IA 50273

515-468-2091 295175

customer's order no.	phone	date <u>28</u> <u>11-18-2020</u>
name <u>Brian Reed</u>		
address <u>2245 Hollowell Valley Ct</u>		
city, state, zip <u>Winterset IA 50273</u>		
sold by	cash <input type="checkbox"/> charge <input type="checkbox"/> check <input type="checkbox"/> card <input type="checkbox"/> on acct <input type="checkbox"/>	shipping information

quantity	description	price	amount
1	pumpout tank		350.00
2			
3	lime trans fur		400.00
4			
5	haul 250 gal water		75.00
6			
7			
8			
		total	\$825.00
9			
10			
11			
12			
13			
14			
15			
16			

adams

keep this slip for reference

DCS0807/10-11



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

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Current owner Brian Reed
Buyer James & Leslie Harrison Realtor Home Front Sarah Coleman
Mailing address 1805 SE Kirkview Crossing, Oakdale Iowa 50023
Site Address/County 2245 Hollisell Valley Ct Winterset IA 50270
Legal Description Same as address
No. of bedrooms 3 Last occupied? Nov 08 2000 Records available yes
Permit/installation date 026-04 Separation distances OK/ no?

Septic system information

Septic tank(s): size 1500 material Concrete condition OK at this time
Tank pumped? yes date 11-18-2000 licensed pumper St 237
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

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

Pump tanks/vaults: type size condition

Distribution system: distribution box NO outlets used condition
Header pipe(s) # of lines Pressure dosed? NO

Secondary treatment:
length of absorption fields 110w. determined by
condition of fields Sand filter backwash determined by
type of trench material

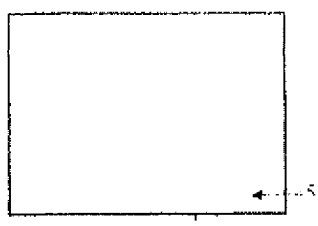
Size of sand filter 18' x 50' determined by Map of Pchloe
Vent pipes above grade? yes discharge pipe located? yes
Effluent sample taken? yes 11-18-2000 Results 200D, 5 Day 2 TSS 1

Media filters: type
Maintenance contract? No expiration date service provider Home owner
Condition

NPDES General Permit No. 4: required? No permitted? NOT provided

2245 Holliswell Valley Ct.

Holliswell Valley Dev Lot 13
Permit # 026-04



33'



1500 gal septic tank

20'

18 x 40 Sand Filter



Vents



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Report To	ALLEN AKERS			Sample Description waste water
	2204 175TH CT			Sample Type Non-Drinking Water
	WINTERSET, IA 50273-			Sample Source
				Sample Note(s) 1

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