

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

**TRANSFEROR:**

Name Sericon, LLC  
Address 11890 NW Brookview Lane Grimes, IA 50111  
Number and Street or RR City, Town or PO State Zip

**TRANSFeree:**

Name Martha Thomas and Kim J. Thomas  
Address 1835 195th Ln, Winterset, IA 50273  
Number and Street or RR City, Town or PO State Zip

Address of Property Transferred:

1835 195th Ln, Winterset, IA 50273  
Number and Street or RR City, Town or PO State Zip

Legal Description of Property: (Attach if necessary)

See attached.

**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:

*An old abandon well is located on the property. already described to the buyer*

**I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.**

Signature: *David Carlson*  
(Transferor or Agent)

Telephone No.: *515 580-2202*

Legal Description:

Parcel "A", located in the Southeast Quarter (1/4) of the Northwest Quarter (1/4) and in the Northeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Twenty-one (21), Township Seventy-six (76) North, Range Twenty-eight (28) West of the 5<sup>th</sup> P.M., Madison County, Iowa, containing 25.044 acres, as shown in Plat of Survey filed in Book 3, Page 548 on February 22, 2000, in the Office of the Recorder of Madison County, Iowa.



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

Property information

Current owner WALTER JAHUCKE III
Buyer PAUL ERICKSON Realtor SARAH COWMAN
Mailing address 1835 195th LN, Winterset, IA 50273

Site Address/County SAME AS ABOVE / MADISON CO
Legal Description AS ABSTRACT

No. of bedrooms 3 Last occupied? present Records available yes

Permit/installation date 9-25-2003 Separation distances ok/no? ok

Septic system information

Septic tank(s): size 1500 gallon material poly condition ok
Tank pumped? YES date 2-16-18 licensed pumper Countryside Septic
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

New tank pump Invoice attached

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

Pump tanks/vaults: type size condition

Distribution system: distribution box yes outlets used 5 condition ok
Header pipe(s) # of lines Pressure dosed?

Secondary treatment:
length of absorption fields 5 160'
condition of fields OK - Dry
type of trench material CHAMBER
determined by County Records
determined by Probing & Hydraulic Test

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 Report

Other components:

Alarms NO Working? — disinfection NO working? —

Control box — Timers — inspection ports —

Other components Rough in plumbing for bathroom in basement.

Overall condition of the private sewage disposal system

Report system status See attached pages

Explain (attach additional pages as needed): \_\_\_\_\_

Comments: Septic tank was pumped on 2-16-18 and at time of pumping everything look ok baffles in place and effluent filter cleaned.

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: [Signature] Date: 1-29-20  
 Name (print): Brian Kinard Certificate #: 8805  
 Address: P.O. Box 204 NORWALK IA 50211  
 Phone #: 202-4895

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. 9<sup>th</sup> St.  
Des Moines, IA 50319

Time of Transfer Report System Status

Address: 1835 195<sup>th</sup> 2nd

Date: 1-29-20

Comments: Winterset, FA 50273

Technician: Brian Rinard

ALL WASTEWATER FROM HOUSE APPEARS TO DRAW  
INTO SEPTIC SYSTEM

1500 GALLON POLY (2) COMPARTMENT SEPTIC  
TANK WITH RISERS AND EFFLUENT FILTER WAS  
IN GOOD WORKING CONDITION.

PLASTIC DISTRIBUTION BOX WITH INLET BATTLE  
AND SPEED LEVELERS USED WAS IN WORKING CONDITION

(5) 100' CHAMBER LATERALS ALL TOOK WATER  
EVENLY AND ALSO PROBED DRY AT TIME OF INSPECTION

THIS IS NOT A GUARANTEE

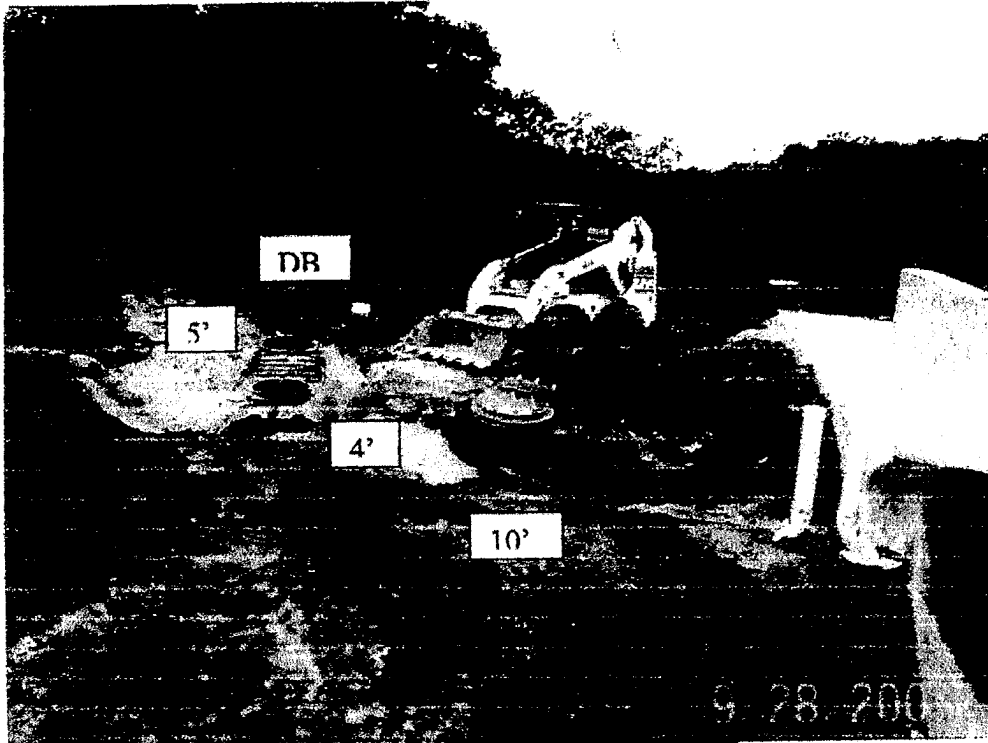
THIS CERTIFIES THAT THE SEPTIC SYSTEM WAS  
IN WORKING CONDITION AT TIME OF INSPECTION

DIAGRAM OF SYSTEM

See

County

Records (pictures)



1500 gal  
Nash tank

1835 195<sup>th</sup> 2N