

Document 2021 GW2152

Book 2021 Page 2152 Type 43 001 Pages 3 Date 5/25/2021 Time 11:44:48AM

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INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

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

I KANSPEKUK:							
Name Derek	Varme Derek A. Brotherson and Erin K. Brotherson						
Address _	SUBJECT 513 11	1. Carpenter St. Char	les IA 50	240			
	Number and Street or RR	City, Town or P.O.	State	Zip			
TRANSFE	REE:						
Name Shawn	Name Shawn M. Kelly and Kala Kelly						
Address <u>50</u>	9 West Market Street, Saint Charles, IA 50240	CIV. Town of P.O.	55.006	766			
				-			
Address of	Property Transferred:						
	t Street, Saint Charles, IA 50240						
	Number and Street or FCR	City, Town, or P.O.	State	Zip			
See Attached.							
1. Wells (check one)						
	re are no known wells situated	d on this property.					
		n this property. The type(s), loca	ation(s) and legal st	atus are			
stat	ted below or set forth on an att	tached separate sheet, as neces					
	/aste Disposal (check one)						
	re is no known solid waste dis						
		e on this property and informatio	n related thereto is	provided in			
	achment #1, attached to this de	ocument.					
	ous Wastes (check one)						
_	re is no known hazardous was			_			
		property and information related	thereto is provided	in			
	achment #1, attached to this de						
	round Storage Tanks (check		/N.11	•			
		storage tanks on this property.					
	ali farm and residential motor f tructions.)	fuel tanks, most heating oil tanks	, cisterns and septi	c (anks, in			
_	•	tank on this property. The type(s	a) eize(e) and any l	cnoum			
		talik oil tills property. The type(t helow or on an attached senara					

		vate Burial Site (check one)
	ጆ	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.
Б.		/ate Sewage Disposal System (check one)
	幫	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]
	Ц	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
Inf	form	ation required by statements checked above should be provided here or on separate
sh	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.
		E' VO HOUR
Sią	gnati	ure:

ADDENDUM

A tract of land located in the Northeast Quarter (¼) of the Northeast Quarter (¼) of Section Twenty-three (23), Township Seventy-five (75) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, and more particularly described as follows, to-wit: Beginning 173 feet West of the Southwest Corner of Block Two (2) of Clanton's Addition of 1888 to the Town of St. Charles, Madison County, Iowa, thence West 200 feet more or less to the West line of the Northeast Quarter (¼) of the Northeast Quarter (¼) of said Section Twenty-three (23), thence North 500 feet, thence East to a point due North of the place of beginning, thence South 500 feet to the place of beginning.