

Document 2021 GW2755

Book 2021 Page 2755 Type 43 001 Pages 7 Date 7/02/2021 Time 2:11:20PM Rec Amt \$.00

INDX **ANNO SCAN**

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

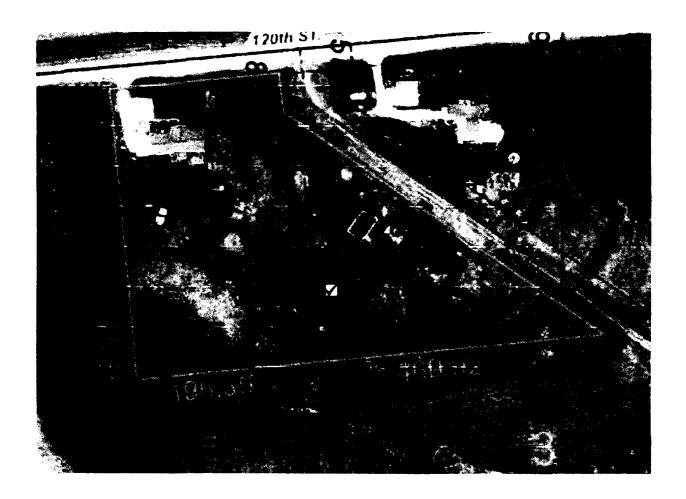
TRANSF	FEROR:			
Name	Steven S. Rusk and Sheila R. Rust Trust			
Address	3086 120th Street, Cumming, IA 50061 Number and Street or RR	City, Town or PO	State	Zip
TRANSF	FEREE:			
Name	Clark Blackford			
Address	S 3086 120th Street, Cumming, IA 50061			
۸ddrace	s of Property Transferred:	City, Town or PO	State	Zip
	h Street, Cumming, IA 50061			
	and Street or RR	City, Town or PO	State	Zip
Legal D	escription of Property: (Attach if necessary)	•		·
See attac	hed			
2. Solid	There are no known wells situated on this property forth on an attached separate sheet, as necessal Waste Disposal (check one) There is no known solid waste disposal site on the There is a solid waste disposal site on this property attached to this document.	y. The type(s), location(s) and legal s ary. his property.		
	There is no known hazardous waste on this property and it this document.	•	ded in Attachment #1	, attached to
	rground Storage Tanks (check one) There are no known underground storage tanks motor fuel tanks, most heating oil tanks, cistern there is an underground storage tank on this prare listed below or on an attached separate she	is and septic tanks, in instructions.) roperty. The type(s), size(s) and any		

	g 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.
	e 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]
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
	The private sewage disposal system has been histalied within the past two years pursuant to permit number
Informat	tion required by statements checked above should be provided here or on separate sheets attached hereto:
ABOVE I	e: Heren Rusk Trustee Telephone No.: 515-537-0022 There Rusk Trustee
	Sheer Rusk Frustee

3086 120th Street, Cumming, IA 50061 Madison County

WELL LOCATION

THIS WELL IS USED FOR WATERING THE YARD ONLY.





4/2010 cmz/dao

Time of Transfer Inspection Report

Property Information								
Current Owner:	Steve R	usk						
Buyer:	· · · · · · · · · · · · · · · · · · ·	7 11.8 10 10 10 10 10 10 10 10 10 10 10 10 10		Realtor				
Mailing Address:								
Site Address/County:	3086	5 120th St,	Cumming IA	✓ Madison Cou	nty			
Legal Description								
No. of bedrooms:	3	Last	occupied:	curren	ıt	Records a	vailable:	yes
Permit/ installation date		7-13-01		Separation dist	ances (ok	/no?):	ok	
Septic System Informat	ion						<u> </u>	
Septic tank(s): Size	•	1500 gal	Material:	concre	ete Co	ndition:	good	
Tank pumped?	\square N	Date:	5-25-21	Licensed	pumper:		Wiegert	
Septic/Trash/Processing	g tank:	Size:		Material:	-	C	Condition:	
Tank pumped? □ Y	ΠN	Date:	***************************************	Licensed	pumper:			
Aerobic treatment unit	(ATU) mfg	ŗ					Size	
Tank pumped? □ Y	ΠN	Date:		License	d pumper	## •		
Maintenance contract?	□Y	ΠN	Expiration d	ate:	Se	rvice prov	ider:	
Condition:								
Pump tanks/vaults:	Type:		S	size:		Conditio	n:	
Distribution system:	Distribu	tion box	Plasti	c Outlets	used	3	Condition:	crack
Header	pipe(s):	4"s	ch40 No	o. of lines:	3	Pressu	re dosed?	no
Secondary Treatment:								
Length of absorption fields: 3x100'			Determin	Determined by: County Map				
Condition of fields: First lateral not taking water			r Determin	Determined by: Hydraulic test				
Type of trench material	•	24" cha	mbers					
Size of sand filter:				Determin	ned by:	-		
Vent pipes above grade? ☐ Y ☐ N			Discharg	Discharge pipe located? ☐ Y ☐ N				
Effluent sample taken				Results:				
Media Filters: Type:							· · · · · · · · · · · · · · · · · · ·	
Maintenance contract? ☐ Y ☐ N Expiration date:			ate:	Service provider:				
Condition:								
NPDES General Permit	No. 4:	Require	d? □ Y□	N Permitt	ed?	Υ□N	NOI provide	d:

DNR Form 542-0191

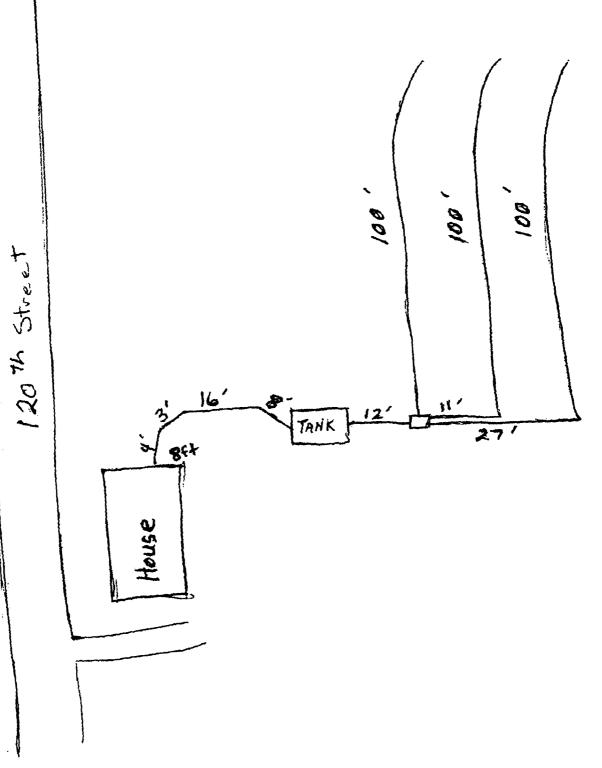


Des Moines IA 50319

Time of Transfer Inspection Report

Other comp	ponents:								
Alarms: [□ Y □ N	Working:	\Box Y \Box N	Disinfection:	\square Y \square N	Working:	$\square Y \square N$		
Control Box:		Timers:		Inspecti	Inspection Ports:				
Other comp	Other components:								
Overall con	ndition of the	e private sew	age disposal s	system:					
Report syst	tem status:	Septi	ic system was	working properly du	ring the Inspec	tion			
Explain (attach additional pages as needed): Tank is in good condition. All plumbing goes to the									
septic. D-b	ox is cracked	d .	-			-			
Comments	: T	he first latera	l did not take	water during the hyd	raulic test.				
Site status	at conclusion	n of Time of	Transfer insp	ection:					
 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, v	vrite a narrati	ive report of t	the inspection results	and attach a sit	e 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	of Certified I	nspector:	Bur	health	Dat	e: 5-3	31-21		
Name (prin	nt):	Ben Bedwel	1		Certificate	#:	11612		
Address:	1500	N B St, Indi	ianola IA						
Phone #:	515-	681-2053		47.					
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 th St									

4/2010 cmz/dao DNR Form 542-0191



Legal Description:

Parcel "H", except the West Sixteen (16) feet thereof, located in the Northeast Quarter (¼) of the Northeast Quarter (¼) of Section Sixteen (16) and in the Northwest Quarter (¼) of the Northwest Quarter (¼) of Section Fifteen (15), all in Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, lowa, as shown in Plat of Survey filed in Book 3, Page 44 on July 2, 1997 in the Office of the Recorder of Madison County, lowa