

Document 2021 GW2998

Book 2021 Page 2998 Type 43 001 Pages 5 Date 7/19/2021 Time 1:03:33PM

DNR form 542-0960 (July 18, 2012)

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

TR	A	N	SF	E	R	O	R	:
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Name: Richard B. Weidman and Connie S. Weidman Address: 2262 Highway 169, Winterset, IA 50273

TRANSFEREE:

Name: Curtis R. Simmons and Vicky Simmons Address: 1716 W. Ridge Court, Polk City, IA 50226

Address of Property Transferred:

5. Private Burial Site (check one)

☑ There are no known private burial sites on this property.

FILE WITH RECORDER

2262 Highway 169, Winterset, Iowa 50273

Legal Description of Property: (Attach if necessary)

Parcel "A", located in the Northwest Quarter (½) of the Southeast Quarter (½) of Section Two (2), Township Seventy-five (75) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, containing 3.295 acres, as shown in Plat of Survey filed in Book 2003, Page 659 on February 5, 2003, in the Office of the Recorder of 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 or set forth on an attached separate sheet, as necessary.	are stated below
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 pro Attachment #1, attached to this document.	vided in
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 attached to this document.	Attachment #1,
4.	Underground Storage Tanks (check one)	
	☑ There are no known underground storage tanks on this property. (Note exclusions such a residential motor fuel tanks, most heating oil tanks, cisterns and septic tanks, in instruction	
	☐ There is an underground storage tank on this property. The type(s), size(s) and any know contained are listed below or on an attached separate sheet, as necessary	n substance(s)

☐ 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: I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED **ABOVE IS TRUE AND CORRECT.** Signature: Tychard B. Wedman Telephone No.: 515-468-3376



Time of Transfer Inspection Report

Property Information								
Current Owner:	Richar	d and Conn	ie Weidman					
Buyer:	-			Realto	or:	Alyssa	Tadlock	
Mailing Address:								
Site Address/County:	2	2262 Hwy 1	69, Winterse	t IA/ Madison	County			
Legal Description		·						
No. of bedrooms:	3	Las	st occupied:	cui	rent	Records a	vailable:	yes
Permit/ installation dat	te:	7-25-03		Separation d	istances (ol	k/no?):	ok	···
Septic System Informa	ation							
Septic tank(s): Siz	e:	1500 gal	Material	: concre	te Co	ondition:	good	
Tank pumped?	YON	Date:	5-4-21	License	d pumper:		Wiegert	
Septic/Trash/Processin	ig tank:	Size:		Material:		Condition:		
Tank pumped? □	Tank pumped? ☐ Y ☐ N Date: Licensed pumper:							
Aerobic treatment unit (ATU) mfgr								
Tank pumped? □ Y □ N Date: Licensed pumper:								
Maintenance contract? ☐ Y ☐ N Expiration date: Service provider:								
Condition:								
Pump tanks/vaults: Type: Size: Condition:								
Distribution system:	Distrib	ution box	Plast	ic Outle	ts used	4	Condition:	good
Header	sch40 N	o. of lines:	4	Pressur	e dosed?	no		
Secondary Treatment:								
Length of absorption fields: 4x10		00'	Determ	nined by:	Co	ounty Map		
Condition of fields: good/dry Determined by: Hydraulic test								
Type of trench materia	d:	36" cha	ımbers					
Size of sand filter: Determined by:								
Vent pipes above grade? ☐ Y ☐ N				Discharge pipe located? ☐ Y ☐ N				
Effluent sample taken				Results	5 :			
Media Filters: Type	2:	····	· · · · · · · · · · · · · · · · · · ·					
Maintenance contract? ☐ Y ☐ N E			Expiration of	late:	e: Service provider:			
Condition:				· VII ALIANA MATTERN				
NPDES General Perm	it No. 4:	Require	:d? □ Y□	I N Permi	itted?	Y□N	NOI provide	ed:
4/2010 cmz/dao						DNR Form 54	2-0191	



Time of Transfer Inspection Report

Other componer	its:									
Alarms: □Y	□ N Working:	DYDN	Disinfection:	□Ү□И	Working:	DYDN				
Control Box:		Timers:		Inspection Ports:						
Other componer	Other components:									
Overall condition of the private sewage disposal system:										
Report system status: The system was working properly during the Inspection										
Explain (attach additional pages as needed): Tank is in good condition. D-box is in good										
condition. All pl	umbing goes to th	e septic. Hydrauli	c test was good. La	iteral field was	s dry.					
Comments:										
					······································					
Site status at cor	iclusion of Time o	f Transfer inspect	ion:							
 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 Cer	tified Inspector:	Bu to	Beeld	Da	te: 5-	31-21				
Name (print):	Ben Bedwe	ell		Certificate	: #:	11612				
Address:	1500 N B Street	, Indianola IA			***************************************					
Phone #:	515-681-2053					<u></u>				
			d sketch to the selle nmental health offi		r/agent or th	e person				
Jova DNR										

4/2010 cmz/dao DNR Form 542-0191

Private Sewage Disposal Program

502 E 9th St

Des Moines IA 50319

