

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

**TRANSFEROR:**

Name: Dennis A. Bautch  
Address: 1404 190th Street, Winterset, IA 50273

**TRANSFeree:**

Name: Hannah Wood and Jeremiah Wood  
Address: 1404 190th Street, Winterset, IA 50273

Address of Property Transferred:  
1404 190th Street, Winterset, Iowa 50273

Legal Description of Property: (Attach if necessary)

Parcel "B" located in the Northeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Twenty-three (23), Township Seventy-six (76) North, Range Twenty-nine (29) West of the 5th P.M., Madison County, Iowa, containing 3.43 acres, as shown in Plat of Survey filed in Book 2008, Page 3594 on December 15, 2008, in the Office of the Recorder of Madison County, Iowa; AND Parcel "C," located in the Northeast Quarter (1/4) of the Northwest Quarter (1/4) of said Section Twenty-three (23), containing 6.79 acres, as shown in Plat of Survey filed in Book 2009, Page 2427 on July 30, 2009, 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 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)**

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

- 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:

Deed

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

Signature: Dennis Bantel Telephone No.: 956-249-9329  
(Transferor)

**1404 190<sup>th</sup> St, Winterset IA**

Seller says there is a well located on the NE corner of the property along the creek and closer to 190<sup>th</sup> St. He says the well is capped and hasn't been in use for many years.

**GROUNDWATER HAZARD STATEMENT**

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

**a. Solid Waste Disposal (check one)**

- There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.
- There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

**b. Hazardous Wastes (check one)**

- There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.
- There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

\_\_\_\_\_

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

Signature: *Dawn Baudy* Telephone No.: 956-249-9329  
(Transferor)



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

Property information

Current Owner DENNIS BAUTCH
Buyer JEREMIAH WOOD Realtor CATHY STEVERMER - KW
Mailing Address 1921 TYLER ST. MISSION, TX 78572 (DENNIS BAUTCH)

Site Address/County 1404 190TH ST. WINTERSET, IA. 50273

No. of Bedrooms 3 Last Occupied? INTERMITTENT 5 YEARS Disposal? (Y) N Softener? Y (N) H2O Supply? RURAL WATER

Records Available YES Permit/Installation Date 10-30-96 Installer C&L CONSTRUCTION

Septic System Information

Septic Tank(s): Size 1000 GALLON Material CONCRETE Condition FAIR
Tank Pumped? YES Date 5-21-21 Licensed Pumper DJ SERVICE - PERRY, IA.
Septic/Trash/Processing Tank: Size Material Condition
Tank pumped? Date Licensed Pumper

Aerobic treatment unit (ATU) MFGR Size
Tank Pumped? Date Licensed Pumper
Maintenance Contract? Expiration Date Service Provider
Condition

Pump Tanks/Vaults: Type Size Condition

Distribution System: Distribution Box PLASTIC Outlets Used 3 Condition GOOD
Header Pipe(s) YES Number of Lines 3
Pressure Dosed? NO

Secondary Treatment

Length of Absorption Fields 100 FEET Determined by COUNTY MAP - PROBE
Condition of Fields GOOD Determined by HYDRAULIC LOAD TESTING
Type of Trench Material 8" GRAVELESS

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? NA Permitted? NOI submitted



Time of Transfer Inspection Worksheet

Other Components

Alarms NA Working? \_\_\_\_\_ Disinfection NA Working? \_\_\_\_\_

Control Box NA Timers NA Inspection Ports NA

Other Components \_\_\_\_\_

Overall condition of the private sewage disposal system

Acceptable? YES Unacceptable? \_\_\_\_\_

Explain (attach additional pages as needed): THE HOME HAS BEEN VACANT FOR EXTENDED PERIODS OF TIME FOR AT LEAST THE LAST 5 YEARS. UPON INSPECTION THE SYSTEM OPERATED AS IT NORMALLY SHOULD. THE TANK WAS PUMPED AND THE D-BOX WAS OPENED AND INSPECTED. ALL LATERALS WERE TAKING WATER AND BACK FLOW WAS OBSERVED. THERE WAS NO EVIDENCE OF ANY SURFACE DISCHARGE IN THE LATERAL AREA AFTER LOAD TEST WAS COMPLETED.

\* Comments: THE AREA OF THE LATERAL ABSORPTION FIELD SHOULD BE FENCED OFF AND PROTECTED FROM ANY HEAVY EQUIPMENT TRAFFIC IN THE FUTURE.

Site status at conclusion of Time of Transfer inspection:

NA Verify that controls are set on the appropriate mode.

NA Power is on to all components.

YES - Revisit all components to verify lids are secure.

YES - Gather all tools for removal from the site.

YES - Verify that no sewage is on the ground surface.

NONE

Using this worksheet, write a narrative report of the inspection results.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: Jon Cornish Date: 5-21-21  
Name (print): JON CORNISH - WEST CENTRAL SERVICE Certificate #: 2007  
Address: 1020 130TH DEXTER, IA. 50010  
Phone #: 515-249-9483

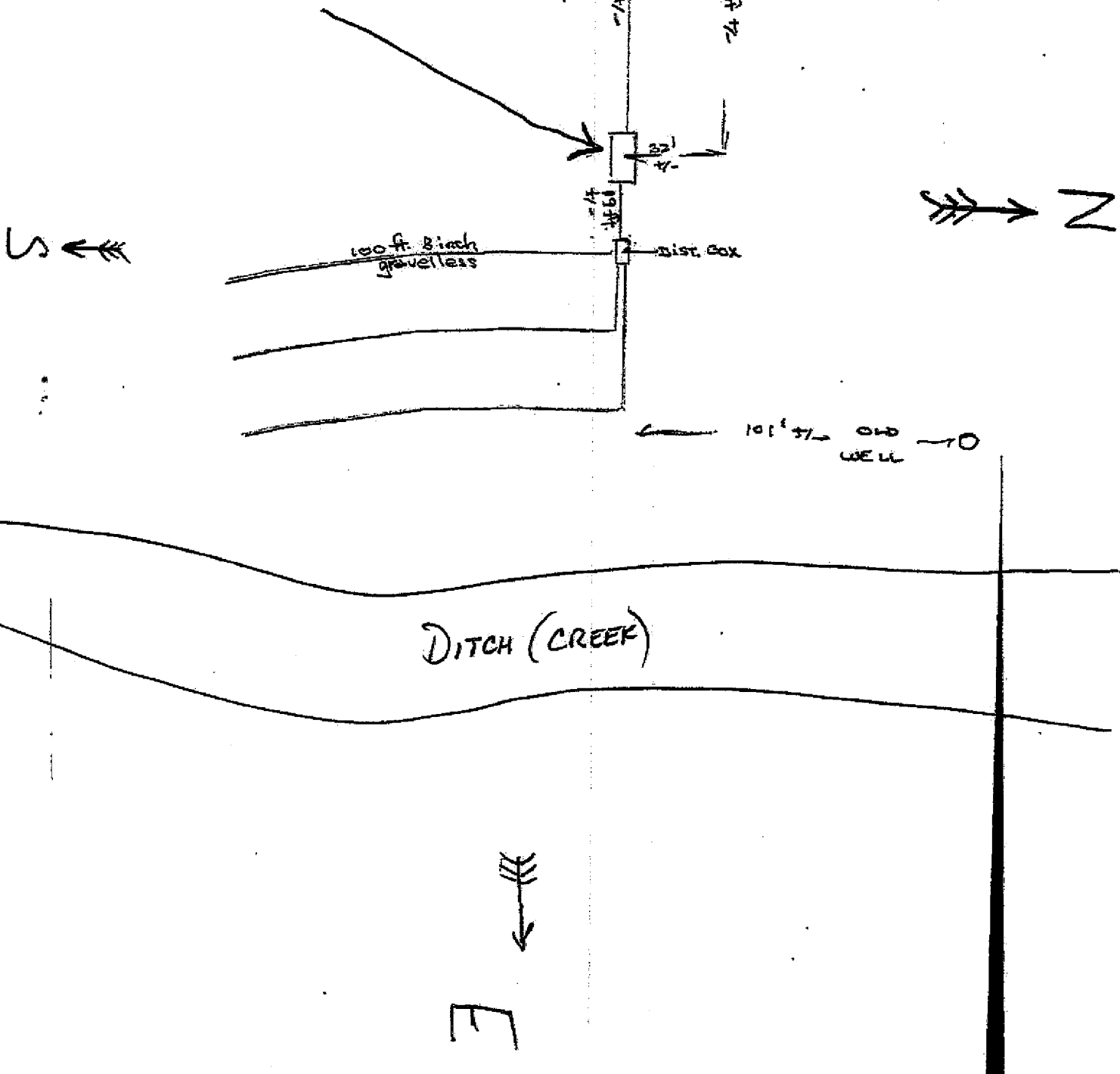
Dennis & Sandra Bautch - owners  
C & L Construction - contractor  
Section 23 - Jackson Township  
new dwelling - new sewer system  
1000 gallon dbl. compartment concrete septic tank  
plastic distribution box  
3- 100 ft. 8 inch gravelless laterals  
inspected: 10/30/96  
Jerry K. Trevillyan, Sanitarian

GPS COORD. FOR TANK

LATITUDE 41.372738°

LONGITUDE -94.15901°

1000 GALLON CONCRETE  
SEPTIC TANK.





MADISON COUNTY  
BOARD OF HEALTH  
COURT HOUSE  
WINTERSET, IOWA 50273

PHONE  
515-462-2536

SEPTIC SEWAGE DISPOSAL TREATMENT SYSTEM  
PERMIT APPLICATION

290052342012000

PERMIT NO. 1585

FEE PAID: 10/21/96

PERMIT ISSUED: 11/7/96

Applicant: Dennis & SANDY BAUTCH Telephone No. 462-3139 Home  
244-7161 Business

Address: 1004-190<sup>th</sup> Street, RRA Winterset, IA 50273

Tenant: owners Telephone No. (2 ABOVE)

Address: N/A same as above

Proposed Structure: 3 bdrm home Legal Description: NE1/4 NW1/4 EX .40A RD  
Existing Structure: \_\_\_\_\_ Section: 23 Township: T76N R29W (JACKSON)

Number of: Bedrooms: 3 Stools: 2 Lavatories: 2 Showers: 2 Tubs: 1 Sinks: 2

**PERCOLATION TEST MUST BE TAKEN AND APPROVED PRIOR TO ISSUANCE OF THE SEWAGE DISPOSAL TREATMENT SYSTEMS PERMIT.....**

Darrel Woods for:

Percolation Test Taken: 10/24/96 By: Vance & Hochstetler

Results: Test hole: #1 8.9 min./in. #2 7.3 min./in. #3 7.5 min./in. #4 9.2 min./in.

Average: 8/2 min./in. No. of Laterals Required: 3 Length of Laterals: 88.33 ft. ea.

**DOUBLE COMPARTMENT SEPTIC TANKS REQUIRED / STATE APPROVED**

2 Bedrooms: 800 gal. 3 Bedrooms: 1000 gal. 4 Bedrooms: 1250 gal. 5 Bedrooms: 1500 gal.

**FEEES: Check payable to Madison County Treasurer - Return with application.....**  
**SEPTIC TANKS/ABSORPTION FIELDS - (ALTERNATIVE SYSTEMS) - MOUNDS - DOUBLE SAND FILTERS - APPROVED MECHANICAL SYSTEMS.....\$ 15.00**

TYPE OF SYSTEM INSTALLED: conventional system: 1000 gal. dbl. comp. septic tank (concrete)  
distribution box - 3 - 100 ft. 8 inch gravelless laterals

Contractor: C & L Construction Telephone No. (515) 462-4782

Address: P.O. Box 327 Winterset, Iowa 50273

I hereby certify that the above information is correct to the best of my knowledge and I agree that the system will be installed in accordance with the rules and regulations of Madison County Board of Health and Chapter 69, I.A.C. I further acknowledge that the system must remain open so that proper inspection and approval can be made by the local Health Sanitarian and that the system cannot be put into operation until approved.

Date: 21 Oct 1996 Applicant: Sandy Bautch

**NOTE: Request for inspection of the system must be made 24 hours in advance, if possible. Water at the site to test the distribution box must be available.**

**Mechanical systems require use of a free-access sand filter and must be covered by maintenance agreement. Maintenance agreement must be recorded in the Madison County Recorder's office.**

**Discharge from mechanical systems or double sand filters must be sampled and tested in the early spring, midsummer and early fall. Results to be submitted to the local Board of Health office.**

DATE OF INSPECTION: 10/30/96 INSPECTION BY: Frank Trullinger  
County Sanitarian





## MADISON COUNTY HEALTH

Jerry K. Trevillyan  
County Sanitarian  
Courthouse P.O. Box 152  
Winterset, Iowa 50273-0152

Telephone 515-462-2936

### MEMO

PERMIT NO. 1585

DATE ISSUED: November 7, 1996

NAME: Dennis & Sandra Baurch SEC. 23 TOWNSHIP: T76N R29W (JACKSON)

for: new dwelling Contractor: C&L Const. - Winterset (10/30/96)

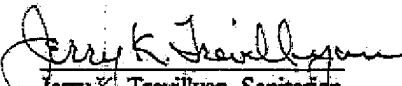
Dear Permit Holder:

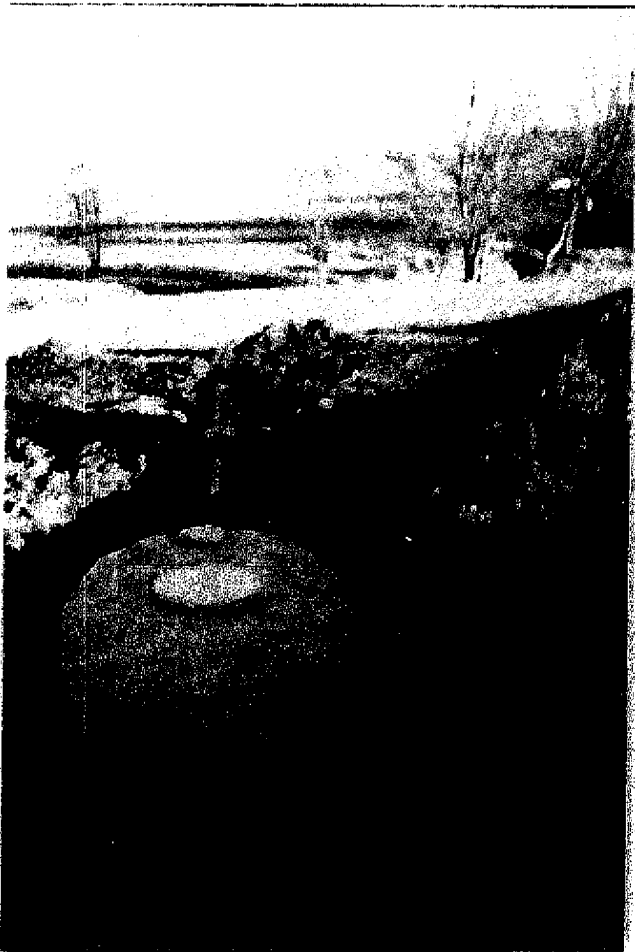
A sewage treatment disposal system permit has been issued to you for installation of a sewage treatment disposal system to be installed on your property.

It is required that this system be inspected by the Madison County Board of Health Sanitarian prior to the system being covered and put into service, for compliance with the Madison County Board of Health Rules and Regulations on Private Sewage Treatment Systems, and Chapter 69, Iowa Administrative Code, Department of Natural Resources.

Issuance of a permit and the inspection of the system provides no guarantee of the functioning of this system. Madison County accepts no liability for this system.

It is recommended that septic tanks be cleaned every three (3) to five (5) years to prevent overflow of solids into the secondary treatment portion of the system. Failure to do so could cause damage to the system and malfunction of the system.

  
Jerry K. Trevillyan, Sanitarian  
Madison County Board of Health



#1585



#1585

