



Document 2021 GW3622

Book 2021 Page 3622 Type 43 001 Pages 8

Date 8/30/2021 Time 7:59:54AM

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**

**TRANSFEROR:**

Name Stephen Ray Weisenbach

Address 3311 200th Ln Prole IA 50229  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name Gary Lawrance

Address \_\_\_\_\_  
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

3311 200th Ln Prole IA 50229  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

**SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF**

**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:**

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

Signature: Stephen R. Weirich Telephone No.: (515) 371 0285  
(Transferor or Agent)



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

Property information

Current owner Stephen Weisenbach
Buyer GARY + CONNIE LAWRENCE Realtor JUE SPICK
Mailing address 3311 200th LN PROLE IA 50229
Site Address/County SAME AS ABOVE / MADISON CO
Legal Description AS ABSTRACT
No. of bedrooms 4 Last occupied? PRESENT Records available YES
Permit/installation date 109-20 Separation distances ok/no?

Septic system information

Septic tank(s): size 1250 GAL material Poly condition Good
Tank pumped? YES date 3-9-21 licensed pumper Countryside Septic
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

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 see NOTES
Header pipe(s) # of lines Pressure dosed?

Secondary treatment:
length of absorption fields (5) 85' / (5) 15' (see NOTES)
condition of fields OK - DRY determined by County Records
type of trench material SP2 / chamber 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 NONE

Overall condition of the private sewage disposal system

Report system status See ATTACHED PAGES

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

Comments: D-BOX AND (5) LATERALS WAS INSPECTED BY MADISON CO ON 12-1-20 LATERALS HAD ADDITIONAL 15' ADDED TO THEM.

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.

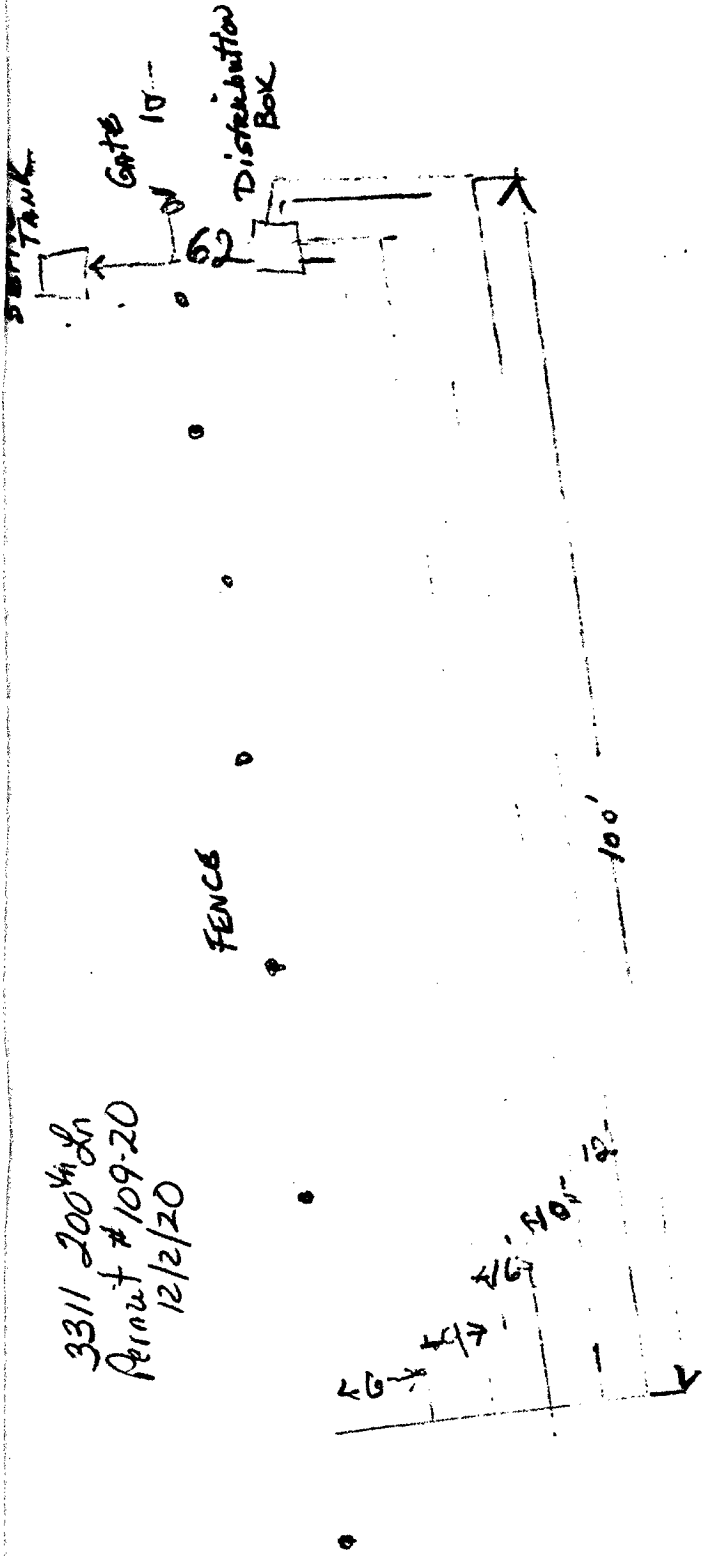
This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified inspector: [Signature] Date: 1-7-21  
 Name (print): BRIAN RINARD 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

3311 200<sup>th</sup> Ln  
 Permit #109-20  
 12/2/20



1-2020

TEVE WEISENBACH 5 - 85' ORIGINAL SOCK LATERALS  
 3311 200<sup>th</sup> LN. 5 - 15' - added of 4' x 36" LOW PROFILE LATERAL  
 RO/E, IA.

Time of Transfer Report System Status

Address: 3311 200<sup>th</sup> LN

Date: 7-7-21

Comments: PROLE, FA 50229

Technician: Brian Rinard

All WASTEWATER FROM SEPTIC SYSTEM GOES INTO SEPTIC  
SYSTEM. 1250 GALLON (3) COMPARTMENT POLY SEPTIC TANK PUMPED  
ON 3-9-21 WAS IN GOOD WORKING CONDITION. PLASTIC D-BOX  
AND (5) LATERALS WERE INSPECTED AFTER WORK WAS  
DONE TO EXTEND LATERALS 15' BY KOPHART CONSTRUCTION  
ON 12-1-20. ALL LATERALS PROBED DRY AT  
TIME OF INSPECTION ON 7-7-21. D-BOX WAS ALSO  
RELEVELLED AT TIME OF LATERAL WORK.

THIS IS NOT A GUARANTEE  
THIS CERTIFIES THAT THE SEPTIC SYSTEM  
WAS IN WORKING CONDITION AT THE  
TIME OF PUMPING ON 3-9-21 AND INSPECTION  
ON 7-7-21

DIAGRAM OF SYSTEM

See  
County  
Records.

Madison County  
Office of Zoning and  
Environmental Health

**Authorization to Construct a  
Private On-site Wastewater  
Treatment System (POWTS)**

112 N. John Wayne Drive  
P.O. Box 152  
Winterset, IA 50273-0152  
Telephone: (515) 462-2636

**Permit Number: 109-20**

**12/1/2020**

**Issued to: Stephen Weisenbach**  
**Address: 3311 200<sup>th</sup> Ln.**  
**Prole, IA 50229**

**Legal Description: FRL SW SW Ex Par K P10 # 430082466010000**  
**Sec 24 T76N R26W Crawford TWP**

**POWTS Components Specifications: Relevelled D-Box & added 15' of 36" chambers to existing 85' of 5 laterals**

**General Conditions:**

1. System must be constructed in conformance with attached system layout, profiles, and cross-sections.
2. Structures must be constructed in conformance with 567 IAC Chapter 69 and the Madison County Environmental Health Regulations.
3. Permit shall be null and void if system is not constructed within one year of permit issuance. The Environmental Health Officer must approve any request for extension of permit.
4. The Environmental Health Officer must approve any design modifications to the permitted system prior to construction.
5. Once constructed, all system components must be uncovered for inspection and the system must be approved before it can be put into operation. Notice for inspection must be received with 24 hours in advance (8 a.m. through 4:30 p.m., Monday - Friday). If weather necessitates the need to cover the system components, then the system owner or contractor must notify and follow the procedures given by the Environmental Health Officer.

**Special Conditions:**

**At least a 24-hour notice for inspections.**



**Environmental Health Officer Assistant  
Madison County  
Office of Zoning and Environmental Health**

## **EXHIBIT "A"**

**The Fractional Southwest Quarter (1/4) of the Southwest Quarter (1/4) of Section Twenty-four (24), Township Seventy-six (76) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, EXCEPT Parcel "K" located therein, containing 20.72 acres, more or less, as shown in Plat of Survey filed in Book 2016, Page 3232 on October 28, 2016 in the Office of the Recorder of Madison County, Iowa.**