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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

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

**TRANSFEROR:**

Name: Jason Swanson and Shelby Swanson  
Address: 2220 204th Ct., Winterset, IA 50273

**TRANSFeree:**

Name: David L. Thompson and Jean A. Thompson  
Address: 2220 204th Ct., Winterset, IA 50273

Address of Property Transferred:  
2220 204th Ct., Winterset, Iowa 50273

Legal Description of Property: (Attach if necessary)

Parcel "D", located in the Northwest Quarter (1/4) of the Northwest Quarter (1/4) of Section Thirty (30), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., City of Winterset, Madison County, Iowa, and containing 3.10 acres as shown in the Amended Plat of Survey filed on May 21, 2003, in Book 2003, Page 2990 in the Office of the Recorder of Madison County, Iowa, and as amended by Affidavit filed on August 19, 2003, in Book 2003, Page 4934 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.

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

**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)**

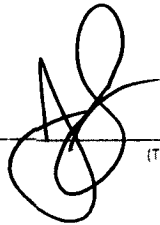
- All buildings on this property are served by a public or semi-public sewage disposal system.
- This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
- There is a building served by private sewage disposal system on this property 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:**

\_\_\_\_\_

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

Signature: \_\_\_\_\_



(Transferor)

Telephone No.: \_\_\_\_\_

(940) 300-4920



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

Property information

Current owner Jason Swanson  
Buyer Jan + David Thomson Realtor Weichert, Realtors Ryan Hoyer/Kory Swan  
Mailing address 2220 204th Ct. Winterset, IA 50273

Site Address/County 2220 204th Ct Winterset IA 50273  
Legal Description Same as address

No. of bedrooms 3 Last occupied? still there Records available yes

Permit/installation date 1-16-01 Separation distances  no? \_\_\_\_\_

Septic system information

Septic tank(s): size 1000 + 500 material Cement condition Look so ok at this time  
Tank pumped? yes date 2-16-21 licensed pumper 237  
Septic/trash/processing tank: size \_\_\_\_\_ material \_\_\_\_\_ condition \_\_\_\_\_  
Tank pumped? \_\_\_\_\_ date \_\_\_\_\_ licensed pumper \_\_\_\_\_

Aerobic treatment unit (ATU) mfg no size \_\_\_\_\_  
Tank pumped? no date \_\_\_\_\_ licensed pumper \_\_\_\_\_  
Maintenance contract? \_\_\_\_\_ expiration date \_\_\_\_\_ service provider \_\_\_\_\_  
Condition \_\_\_\_\_

Pump tanks/vaults: type no size \_\_\_\_\_ condition \_\_\_\_\_

Distribution system: distribution box no outlets used \_\_\_\_\_ condition \_\_\_\_\_  
Header pipe(s) no # of lines \_\_\_\_\_ Pressure dosed? no

Secondary treatment:

length of absorption fields no determined by \_\_\_\_\_  
condition of fields \_\_\_\_\_ determined by \_\_\_\_\_  
type of trench material \_\_\_\_\_

Size of sand filter no determined by \_\_\_\_\_  
Vent pipes above grade? yes discharge pipe located? yes  
Effluent sample taken? yes Results CBODS 3 TSS 10  
7-20-21

Media filters: type ECO-flo 5+650 Part Filter  
Maintenance contract? yes expiration date 1-1-22 service provider Allen Akers Septic  
Condition looks ok at this time

NPDES General Permit No. 4: required? no permitted? no NOI provided \_\_\_\_\_



### Time of Transfer Inspection Report

Other components:

Alarms No Working? — disinfection No working? —

Control box No Timers No inspection ports yes

Other components has Filter in each tank

Overall condition of the private sewage disposal system

Report system status \_\_\_\_\_

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

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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: Allen Akers Date: 8-7-21  
 Name (print): Allen Akers Certificate #: 1023  
 Address: 2204 175<sup>th</sup> St Winterset IA 50273  
 Phone #: 515-462-1015

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

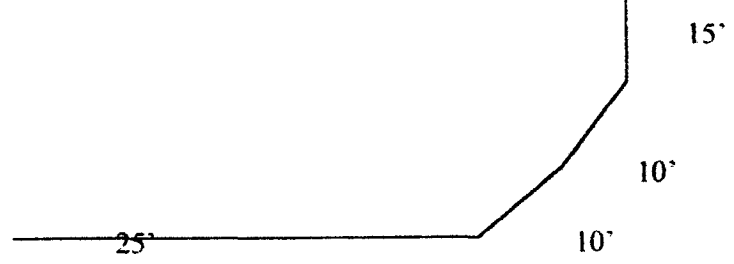
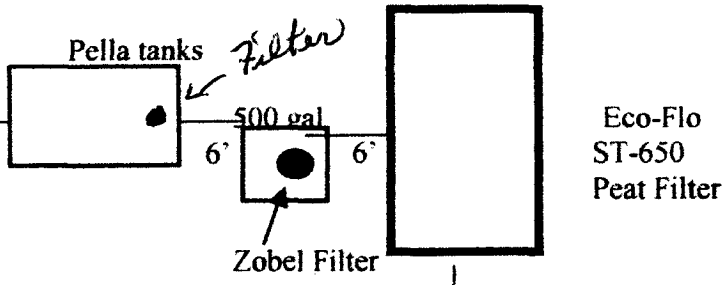
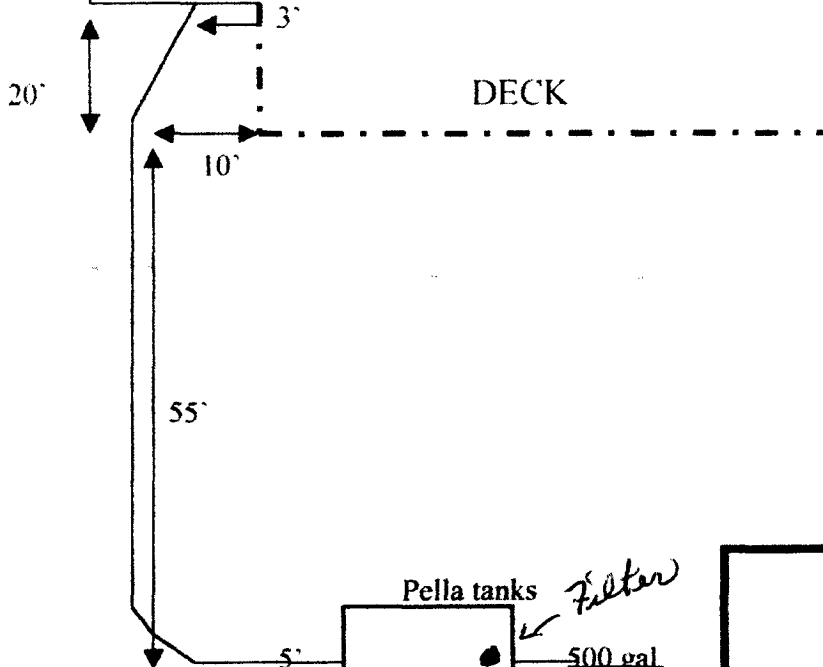
Iowa DNR Onsite Wastewater Program  
 502 E. 9<sup>th</sup> St.  
 Des Moines, IA 50319

Ronald Wass  
Permit No. 2045

Parcel D NW NW Section 30 - Union Twp

*1/16/01*  
*2220 204th Ct*

*House*



Driveway to Cliftons house