

Document 2021 GW4751

Book 2021 Page 4751 Type 43 001 Pages 5 Date 11/17/2021 Time 12:36:01PM

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INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name: Harley Jones and Tammy Jones

Address: 2811 Cedar Bridge Road, Winterset, IA 50273

TRANSFEREE:

Name: Austin McKinney and Kendra McKinney Address: 6101 SW 5th Street, Des Moines, IA 50315

Address of Property Transferred:

2811 Cedar Bridge Road, Winterset, Iowa 50273

Legal Description of Property: (Attach if necessary)

A tract of land located in the Southwest Quarter (%) of the Southeast Quarter (%) of Section Nineteen (19), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, more particularly described as follows, to-wit: Commencing at the South Quarter corner of said Section Nineteen (19), thence North 90°00' East 654.40 feet along the south line of the Southeast Quarter (%) of said Section Nineteen (19) to the centerline of a county road and the point of beginning, thence North 90°00' East 141.70 feet along said south line, thence North 03°23' East 148.44 feet, thence North 87°32' West 150.25 feet to the centerline of said county road, thence South 00°08' West 154.65 feet to the point of beginning; AND Parcel "H" located in the South Half (%) of the Southeast Quarter (%) of said Section Nineteen (19), containing 2.491 acres, as shown in Plat of Survey filed in Book 2007, Page 1001, on March 13, 2007, in the Office of the Recorder of Madison County, Iowa.

1. Wells (check one)

2.

	There are no known wells situated on this property.
X	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.
Soli	d Waste Disposal (check one)
\boxtimes	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.	Priv	ate Burial Site (check one)					
	Ø	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.	Priv	ate 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:						
		There is a non-working well located: 3' from the house on the south side.					
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.					
Sig	natu	Telephone No.: 515-865-5671					



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

Property information
Current owner Hawley Jones
Rouse A. W. J. A. M. Jan Backing C. J. B. C. T. V.
Current owner Harley Jones Buyer Aust, thendra millinney Realter Coursed Bridge Top. Tradle Mailing address 2811 Cedan Bridge Rd Winterest It 50273
Site Address/County 2811 Ordar Bridge Rd Winterset IA 50273
Legal Description Same as address
No. of bedrooms 4 Last occupied? Still the Records available 4.226
Permit/installation date #017-06 Separation distances Ok no?
Septic system information
Septic system information Septic tank(s): size 1500gd 2 compartment Tank pumped? yes date 10-4-21 licensed pumper 5t 237 Septic/trash/processing tank: size material condition
Tank number 3 date 10-4-21 licensed number 5 t- 237
Sentialtrach/modessing tents: 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
Tank pumped? mate licensed pumper
Maintenance contract? expiration date service provider Condition
Pump tanks/vaults: type size condition
-
Distribution system: distribution box 400 outlets used 6 condition Header pipe(s) 400 # of lines 6 Pressure dosed?
Secondary treatment: length of absorption fields 961456 determined by Proble 4 grass map condition of fields 7 b 24 flower determined by Order Map
length of absorption needs 1017 determined by 10000
Condition of heids
type of trench material Chamber
Size of sand filter determined by
Vent pipes above grade? discharge pipe located?
Effluent sample taken? Kesults
Media filters: type
Maintenance contract? expiration date service provider

NPDES General Permit No. 4: required? <u>no</u> permitted? _____ NOI provided _____



Time of Transfer Inspection Report

Other component	s: Working?	11 · C · · · · · · · · · · · · · · · · ·	11 2 10
Adams 700	_ Working! _//_	disinfection //	o working? 10
Control box	D Timers 1	10 inspection p	orts
Other componen	ts		
~ ** **.		•	
	of the private sewage dispos		
Report system st	atus <u>Execting loo</u>	tok at this ?	time
Explain (attach a	additional pages as needed); L	as 2 Compart	ment Come
Ru	25	- og	the state of the s
Comments:	-		
its status at any	nclusion of Time of Transfer i	nanastion.	
7. §			
	Verify that controls are set on the	~ ~ ~	
1	ower is on to all components.		
	Revisit all components to verif		
	Gather all tools for removal fro		
•	Verify that no sewage is on the	ground surface.	
Using this work	sheet, write a narrative report	of the inspection results a	nd attach a site sketch.
	cates the condition of the priv		
the inspection.	It does not guarantee that it w	ill continue to function sa	tisfactorily.
Signature of Ce	ertified inspector:	_akon	Date: /0-8- 02
Name (print):	Allen Akers		Certificate #: 1023
	64 175 Ct WI	interset TA	50213
	15-462-1015		
FHOME #	13 The		*
Provide a conv	of this report, the narrative re	port and sketch to the sell-	er/agent, buver/agent, the
	an/environmental health offic		
conducted and		of months transminated the site of	econtrol and smakenmans as my
COMMUNICATE AND			
Iowa DNR On	site Wastewater Program		
502 E. 9 th St.	pro manovator i logialit		
	A 50210		
Des Moines, I	A 30319		

422-06 #017-06 1/254 from Tank to East of Stine 13fr then South 77 ft then East 21 ft to J Box Zoble Silker flarley Jones