BK: 2021 PG: 685

Recorded: 2/19/2021 at 1:44:26.0 PM

Pages 5

County Recording Fee: lowa E-Filing Fee: \$0.00

Combined Fee: Revenue Tax:

LISA SMITH RECORDER Madison County, Iowa

#### **REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT**

TO BE COMPLETED BY TRANSFEROR

TRANSFE	ROR:						
Name	Bobbi A. Orton, F/K/A Bobbi A. Frushe	er					
Address	s 2011 Woody Ct., Prole, IA 50229-8533						
	Number and Street or RR	City, Town or PO	State	Zip			
TRANSF	FEREE:						
Name	Brent Lee Newland						
Address	2011 Woody Ct., Prole, IA 50229-8533						
	Number and Street or RR	City, Town or PO	State	Zip			
Address	of Property Transferred:						
	oody Ct., Prole, IA 50229-8533						
	d Street or RR	City, Town or PO	State	Zip			
Legal De	escription of Property: (Attach if necessary)	m (( 4    4 mm 4 Cl 10 D 11 D D D D					
	SEE EXHIBI	T "A" ATTACHED HERETO	10. 10.				
<ol> <li>Wells (check one)         <ul> <li>There are no known wells situated on this property.</li> <li>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.</li> </ul> </li> <li>Solid Waste Disposal (check one)         <ul> <li>There is no known solid waste disposal site on this property.</li> <li>There is a solid waste disposal site on this property and information related thereto is provided in Attachment #1, attached to this document.</li> </ul> </li> </ol>							
<ul> <li>Hazardous Wastes (check one)</li> <li>There is no known hazardous waste on this property.</li> <li>There is hazardous waste on this property and information related thereto is provided in Attachment #1, attached to this document.</li> </ul>							
4. Und	derground Storage Tanks (check one)  There are no known underground storage tank motor fuel tanks, most heating oil tanks, cistern There is an underground storage tank on this page listed below or on an attached congrete she	s and septic tanks, in instruc roperty. The type(s), size(s)	tions.)				

5.	5. Private Burial Site (check one)							
	$\square$	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.						
	and a manager of the second of							
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						
	abla	disposal system. There is a building served by private sewage disposal system on this property or a building without any lawful						
	بحر	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.						
	Ш	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						
	ш	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						
		tion required by statements checked above should be provided here or on separate sheets attached hereto:						
	Hon	ne is served by Sophic tank + Lanch faile						
		<u>'</u>						
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.								
R 1100 FLA 011								
Sig	natur	e: Bylli A. Otton & Rolli A Furthey Telephone No.: 515-249-0679						

July 18th 2012 cmz



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

Property information							
Current Owner Tyler Orton, tjorton@hotmail.com							
Buyer Brent Newland, brnewl01@hotmail.com Realtor For Sale By Owner							
Mailing Address 2011 Woody Ct., Prole, IA 50229, 51	5-210-6161						
Site Address/County 2011 Woody Ct., Prole, IA 50229 Madis	on County, tburk@madisoncoia.us						
No. of Bedrooms 4 Last Occupied? <u>curre</u> Separ	ation distances ok?						
Records Available Permit/Installation Date							
Septic System Information							
Septic Tank(s): Size 1250 gal Material Co	ncrete Condition Working						
Septic Tank(s): Size 1250 gal Material Co Tank Pumped? YES Date 5/12/2020	Licensed Pumper Forest Septic						
Septic/Trash/Processing Tank: Size Mar	erial Condition						
Tank pumped? Date	Licensed Pumper						
Aerobic treatment unit (ATII) MFGR	Size						
Aerobic treatment unit (ATU) MFGR Tank Pumped? Date	Licensed Pumper						
Maintenance Contract? Expiration Date	Service Provider						
Condition							
Pump Tanks/Vaults: Type Size							
Distribution System: Distribution Box Plastic Out	lets Used 3 Condition Working						
Header Pine(s)	Number of Lines						
Pressure Dosed?							
Secondary Treatment Length of Absorption Fields 3x95ft=285ft	Determined by County record/probe						
Condition of Fields Working	Determined by Hydraulic load test/probe						
Type of Trench Material 36" Chambers.	Determined by 113 and 10 and 1						
Type of Treffert Material 20 Chambers.							
Size of Sand Filter	Determined by						
Size of Sand Filter Vent Pipes Above Grade?	Determined by						
Effluent Sample Taken?	Results						
Media Filters: Tyne							
Media Filters: Type Expiration Date	Service Provider						
Condition							
NPDES General Permit No. 4: Required? P	ermitted? NOI submitted						

4/2010 542-0191



Iowa DNR

502 E. 9th St.

Des Moines, IA 50319

4/2010

Private Sewage Disposal Program

### Time of Transfer Inspection Worksheet

Other Components			
Alarms	Working?	Disinfection	Working?
Control Box	Timers	Inspection Ports	3
Other Components			
Overall condition of	the private sewage disposal sy	<u>stem</u>	
Report of system sta	tus		
All waste water goe condition. Plastic di	tional pages as needed): es from house to septic. 1250 gristribution box in working condition gal water. All chambers took v	dition. Hydraulic load teste	ed the 3x95ft=285ft 36"
Site status at conclus	sion of Time of Transfer inspec	etion:	
<ul><li>Power is on to</li><li>Revisit all com</li><li>Gather all tools</li></ul>	trols are set on the appropriate all components.  ponents to verify lids are secures for removal from the site.  sewage is on the ground surfac	re.	
Using this workshee	t, write a narrative report of the	e inspection results and att	ach a site sketch.
	the condition of the private se hat it will continue to function		ne time of the inspection. It
Signature of Certifie	• • • • • • • • • • • • • • • • • • • •		Date: _5/12/2020
Name (print): Rick   Address: 401 NE 52r	Rogers and Ave, Des Moines, IA 50313	C	ertficate #: <u>9597</u>
Phone # (515)282-			
Provide a copy of the person ordering the i	is report, the narrative report and inspection, the county sanitaria	nd sketch to the seller/ager n/environmental health of	nt, buyer/agent or the fice, and to:

542-0191



## **SEPTIC DRAWING**

Site Address: 2011 Woody Ct., Prole, IA 50229

Seller Name & Email: Tyler Orton, tjorton@hotmail.com

Seller Address & Phone: 2011 Woody Ct., Prole, IA 50229, 515-210-6161

#### Picture:

