



Document 2023 GW1255

Book 2023 Page 1255 Type 43 001 Pages 10

Date 6/05/2023 Time 11:16:28AM

Rec Amt \$.00

INDX
ANNO
SCANBRANDY MACUMBER, COUNTY RECORDER
MADISON COUNTY IOWA

CHK

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

If the transaction is exempt from filing a declaration of value pursuant to Iowa Code 428A.1(2), **STOP HERE**. Pursuant to Iowa Code section 558.69(1), when no declaration of value is submitted during a transaction, you are not required to submit a groundwater hazard statement or include the statutory language in Iowa Code section 558.69(8A). Please consult your realtor or legal counsel for further advice, including on whether a declaration of value is required. The Department provides this information for statutory reference only.

Instructions for this document can be found at:

<https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960%20Instructions.pdf>

Attachment 1, if required, can be found at: <https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960a.pdf>

TRANSFEROR:

Name Amanda M. DePhillips and Frank M. DePhillips

Address <u>1324 Utopia Court</u>	<u>Van Meter</u>	<u>Iowa</u>	<u>50261</u>
Number and Street or RR	City, Town or PO	State	Zip

TRANSFeree:

Name Charles Dean Holdings LLC

Address _____	_____	_____	_____
Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

<u>1324 Utopia Court</u>	<u>Van Meter</u>	<u>Iowa</u>	<u>50261</u>
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

*See attached Legal Description

1. Wells (check one)

- ☒ No Condition - There are no known wells situated on this property.
- ☐ Condition Present - 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)

- ☒ No Condition - There is no known solid waste disposal site on this property.
- ☐ Condition Present - 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)

- ☒ No Condition - There is no known hazardous waste on this property.
- ☐ Condition Present - 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)

- ☒ No Condition - 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.)
- ☐ Condition Present - 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)

- ☒ No Condition - There are no known private burial sites on this property.
- ☐ Condition Present - 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)

- ☐ No Condition - All buildings on this property are served by a public or semi-public sewage disposal system.
- ☐ No Condition - This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
- ☒ Condition Present - 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.
- ☐ Condition Present - 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.
- ☐ Condition Present - There is a building served by private sewage disposal system on this property. The system is failing to ensure effective wastewater treatment or is otherwise improperly functioning, and 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.
- ☐ Condition Present - 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 #7]
- ☐ Condition Present - There is a building served by private sewage disposal system on this property. This property is exempt from the private sewage disposal inspection requirements pursuant to the following Exemption [Note: for exemption #7 use prior check box]: _____
- ☐ Condition Present - There is a building served by private sewage disposal system on this property. The private sewage disposal system has been installed within the past two years pursuant to permit number: _____

Review the following two directions carefully:

- A. If you selected a box stating "No Condition" for every numbered section above, **STOP HERE**. Do not submit this form. Instead, pursuant to Iowa Code section 558.69(8A), you must include the following language on the first page of the recorded deed, instrument, or other writing:

"There is no known private burial site, well, solid waste disposal site, underground storage tank, hazardous waste, or private sewage disposal system on the property as described in Iowa Code section 558.69, and therefore the transaction is exempt from the requirement to submit a groundwater hazard statement."

Please consult your realtor or legal counsel for further advice on this exemption. By law, the owner of the property is responsible for the accuracy of this statement, and the Department provides this information for statutory reference only.

- B. If you checked any box stating "Condition Present" for any of the numbered sections above, continue below. You must complete this form, including providing all required information, and you must submit this form to the county recorder's office with declaration of value.

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:

Amanda DePhillips

(Transferor or Agent)

dotloop verified
05/16/23 11:02 AM CDT
L7ER-B9OZ-JTWJ-BWCC

Telephone No.: 5159759031

LEGAL DESCRIPTION

Lot Twenty-three (23) of WOODLAND VALLEY ESTATES PLAT NO. 2 SUBDIVISION located in the South Half (1/2) of the Northwest Quarter (1/4) of Section Twenty-one (21), Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, together with an undivided interest in all common areas as set forth in the Declaration of Association for Woodland Valley Estates Subdivision filed in Book 2004, Page 6107 and in Book 2006, Page 2763 and any supplements and amendments thereto

**TIME OF TRANSFER INSPECTION TOT# 3020 SETH BROWN CERT # 13190**

Site Information

Parcel Description: **03101214023000**Address: **1324 Utopia Ct, Van Meter, IA 50261**County: **Madison**

Owner Information

Property is owned by a business: **No**

Business Name:

Owner Name: **Amanda & Frank DePhillips**Email Address: **amanda.m.dephillips@gmail.com**Address: **1324 Utopia Ct, Van Meter, IA 50261**

Phone No:

Additional Contact Information

Name	Email Address	Affiliate Type
Matt Klein	fdephillips@hotmail.com	Realtor

Site related information

No Of Bedrooms: **5**Inspection Date: **11/03/2022**Facility Type: **Residential**Currently Occupied: **Yes**

Last Occupied:

System Installation Date:

Permit issued by County: **N/A**

Permit Number:

All plumbing fixtures enter septic system: **Yes**County contacted for records: **Yes**

Property Information Comments:

Primary Treatment

Tank 1

Tank Name: **Tank 1**Type: **Septic Tank**Tank Size (Gal): **1500**Tank Material: **Concrete**Tank Corrosion Type: **Slight**Liquid Level Type: **Normal**No. of Compartments: **2**Pump Tank Chamber: **No**Licensed Pumper Name: **Forest Septic**

Date Pumped: **11/3/2022** Meets Setback to Well: **N/A** Well Type:
Distance To Well (Ft.): Is Accessible: **Yes** Lid Intact: **Yes**
Risers Intact: **Yes** Effluent Filter Present: **Yes** Watertight: **Yes**
Tank/Vault Pumped: **Yes** Inlet Baffle Present: **Yes** Outlet Baffle Present: **Yes** Functioning as Designed: **Yes**
Tank Comments:

Tank 2

Tank Name: **Tank 2** Type: **Pump Tank** Tank Size (Gal): **500**
Tank Material: **Concrete** Tank Corrosion Type: **Slight** Liquid Level Type: **Normal**
No. of Compartments: **1** Pump Tank Chamber: **Yes** Licensed Pumper Name: **Forest Septic**
Date Pumped: **11/3/2022** Meets Setback to Well: **N/A** Well Type:
Distance To Well (Ft.): Is Accessible: **Yes** Lid Intact: **Yes**
Risers Intact: **Yes** Effluent Filter Present: Watertight: **Yes**
Tank/Vault Pumped: **Yes** Inlet Baffle Present: **No** Outlet Baffle Present: **No** Functioning as Designed: **Yes**
Tank Comments:

General Primary Treatment Comments:

Distribution Type

Pump System 1

Label: **Pump System 1** Accessible: **Yes** Control Box Functioning: **Yes**
Alarm(s) Present and Functioning: **Yes** Functioning As Designed: **Yes**

General Distribution System Comments :

Secondary Treatment

Sand Filter1

Filter Type: **Subsurface** Distribution Type: **Distribution Box** Material Type: **Rock and PVC Pipe**
Absorption Area: **750** System Hydraulic Loaded: **Yes** Gallons Loaded: **300**
Discharge At Time of Inspection: **Yes** CBOD Results: **<8** TSS Results: **9**
Disinfection Present: **No** Disinfection Type: Tertiary Treatment Present: **No**
Tertiary Treatment Type: Meets Setback to Well: **N/A** Well Type:
Distance To Well (Ft.): Sand Filter Probed: **Yes** Vent(s) Located: **Yes**
Saturation or Ponding Present: **No** Grass Cover Over System: **Yes** Outlet Found: **Yes**
Sample Taken: **Yes** GP4 Permitted: GP4 Required:
System Located on Owner Property: **Yes** Easement Present: **N/A** Functioning as Designed: **Yes**

Comments:

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **All wastewater goes to septic. 1500 gallon watertight concrete septic tank in working condition with none to slight deterioration. Accessible by inlet and outlet risers and lids. Inlet and outlet baffle tees present, outlet filter present. 500 gallon watertight concrete pump tank in working condition with none to slight deterioration. Accessible by riser and lid. Pump and floats present and working, alarm panel located inside home and float present and in working condition. Pumps to 15x50 equaling 750 sq ft sand filter. Vent present, probed dry and clean. Discharge pipe located, WATER SAMPLE COLLECTED.**



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR ADAM GREGG
DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 3020 SETH BROWN CERT # 13190

Owner Name: **Amanda & Frank DePhillips**

Address: **1324 Utopia Ct , Van Meter , IA 50261**

County: **Madison**

Inspection Date: **11/03/2022**

Submitted Date: **11/10/2022**

This page certifies a Time of Transfer inspection was conducted and submitted for the property listed above in accordance with Subrule 567 IAC 69.2(8).



600 East 17th Street South
Newton, IA 50208
641-792-8451 Phone
641-792-7989 Fax

ANALYTICAL REPORT

Work Order: 1FK0544

November 09, 2022
Page 1 of 1

Report To
Amanda Kouski Rogers Septic Maintenance and Repair 6288 NE 14th St. Des Moines, IA 50313

Work Order Information
Date Received: 11/04/2022 11:12AM Collector: Unknown Collector Phone: (515) 282-0777 PO Number:

Project: Septic Sampling
Project Number: Septic Sampling

1FK0544-01 1324 Utopia Ct.

Matrix: Water

Collected: 11/03/22 10:00

Analyte	Result	MRL	Method	Analyst	Analyzed	Qualifier
CBOD (5 day)	<8 mg/L	8	SM 5210 B	AJE	11/04/22 16:00	
Solids, total suspended	9 mg/L	4	USGS I-3765-85	MEAH	11/07/22 15:18	

End of Report

Keystone Laboratories, Inc.
Dara Hanson
Project Manager I

The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety. Samples were preserved in accordance with 40 CFR for pH adjustment unless otherwise noted.
MRL = Method Reporting Limit. 1FK0544-01