BK: 2023 PG: 2352

Recorded: 9/26/2023 at 8:32:05.0 AM

Pages 14

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

Revenue Tax:

BRANDY L. MACUMBER, RECORDER

Madison County, Iowa

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

If the transaction is exempt from filing a declaration of value pursuant to lowa Code 428A.1(2), <u>STOP HERE</u>. Pursuant to lowa 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 lowa 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 Jeffory D. Howard			
Address 85 Arrowhead Rd Melrose, IA 52569			
Number and Street or RR	City, Town or PO	State	Zip
TRANSFEREE:			
Name Amber Bonnett			
Address 2478 Bevington Park Road, SAINT CHARL	ES, IA 50240		
Number and Street or RR	City, Town or PO	State	Zip
Address of Property Transferred:			
2478 Bevington Park Road, SAINT CHARLES, IA 50240)		
Number and Street or RR	City, Town or PO	State	Zip
Legal Description of Property: (Attach if necessary)			
See attached.			
1. Wells (check one) No Condition - There are no known wells situ Condition Present - There is a well or wells si stated below or set forth on an attached sep	tuated on this property. The type(s), lo	cation(s) and legal sta	atus are
2. Solid Waste Disposal (check one)			
No Condition - There is no known solid waste			
Condition Present - There is a solid waste dis in Attachment #1, attached to this document		tion related thereto i	s provided

	rdous Wastes (check one)
屋	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. Unde	erground 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.)
	substance(s) contained are listed below or on an attached separate sheet, as necessary.
F 8-4	As Bourted Charles and
	te 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. Priva	te 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]
	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, <u>STOP HERE</u>. Do not submit this form. Instead, pursuant to lowa 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 <u>any box stating "Condition Present" for any of the numbered sections above, continue below.</u> 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 to	nere or on separate s	heets attached hereto:
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS ABOVE IS TRUE AND CORRECT.	FORM AND THAT TH	IE INFORMATION STATED
Signature: Alla Haward	Telephone No.:	515 321 2624
(Transferor or Agent)		

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 7144 BEN BEDWELL CERT # 11612

-Site Information -

Parcel Description: 500091364021000

Address: 2478 Bevington Park Rd, St. Charles, IA 50240 County: Madison

Owner Information

Property is owned by a business: No

Business Name:

Owner Name: Jeffory Howard

Email Address:

Address: 2478 Bevington Park Rd, St. Charles, IA 50240

Phone No:

- Additional Contact Information -

Name Email Address Affiliate Type

Julie Egli julie@precisiondsm.com Realtor

Site related information-

No Of Bedrooms: 3 Inspection Date: 09/01/2023

Facility Type: Residential Currently Occupied: Yes

Last Occupied: System Installation Date: 08/22/2002

Permit issued by County: Yes Permit Number: 080-02

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): 1250

Tank Material: Concrete Tank Corrosion Type: Slight Liquid Level Type: Normal

No. of Compartments: 2 Pump Tank Chamber: No Licensed Pumper Name: Wiegert

Date Pumped: 9/5/2023

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:

General Primary Treatment Comments:

Distribution Type

Distribution Box 1

Label: Distribution Box 1

Material Type: Plastic

Accessible: Yes

Box Opened: Yes

Baffle Present Yes

Speed Levelers Present: Yes

Watertight: Yes Functioning As Designed: Yes

General Distribution System Comments:

Secondary Treatment

Gallons Loaded: 250

Distance To Well (Ft.):

Grass Cover Present: Yes

Easement Present N/A

Lateral Field1

Lines: 5

Distribution Type: Distribution Box

Material Type: Leaching Chamber

Total Length of Absorption Line: 500

Meets Setback to Well: N/A

Lateral Lines Probed: Yes

Lateral Lines Equal Length: Yes

Functioning as Designed: Yes

Trench Width: 24

System Hydraulic Loaded: Yes

Well Type:

Saturation or Ponding Present: No

System Located on Owner Property: Yes

Comments:

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: The system was functioning properly during the Inspection.

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS LT. GOVERNOR ADAM GREGG

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 7144 BEN BEDWELL CERT # 11612

Owner Name:

Jeffory Howard

Address:

2478 Bevington Park Rd , St. Charles , IA 50240

County:

Madison

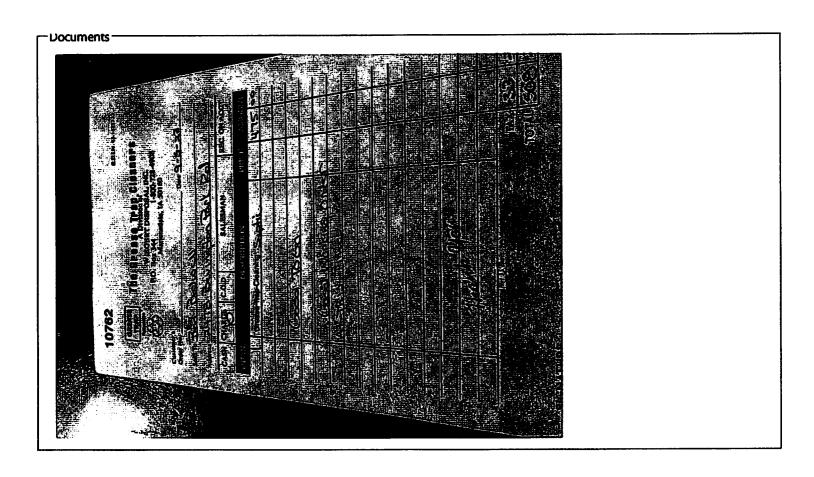
Inspection Date:

09/01/2023

Submitted Date:

9/16/2023

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).



Medison 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: 080-02

Date Issued: 8/20/02

Issued to:

Robert Bell

Address:

2478 Bevington Park Rd

St. Charles, IA 50240

PIO #500091364020000

Legal Description: 5.23A S PT NW SW Sec 13 T75 R26 South Twp

POWTS Components Specifications: 1250 gal. Septic Tank & 5 ea. EQ24 Laterals @ 100 ft. ea.

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:

Environmental Health Officer

The liket

Madison County

Office of Zoning and Environmental Health

Madison County Office of Zoning & Environmental Health

Application to Construct Priyate On-Site Wastewater Treatment System (POWTS)

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

Office Use Only			Temp E911:				
Tracking No. 080-02	Date Received 8/20/02	Fee Paid ₁₁ 50 CK# 4205	Date Issued R/20/0Z	Date Inspected	Date Approved	Section/Township 13/South	NPDES Authorization #

Application will not be accepted until site and soil analysis/percolation information, and two diagrams of the system layout, profiles and cross-sections have been received; and fee has been paid. For systems requiring an NPDES General Permit #4 (surface discharge), its

application must be submitted to this office and appropriate forms recorded before a permit will be issued.					
Please Print All Infor	mation.				
1. Owner Information (A)	pplicant)	2. Contractor			
First Name	Lust Norne	Erst Name	Last Name		
Kohert	Bell_	VALE	Kephoet		
	UGTON PARK Rd (TA)	50240 322	CLANTON ST IN	50240	
Ciny	State	502 40 322	State	Zip	
ST Charle	5 (515)219	-8265 S/C	ARLES	Cell Phone	
Phone Number (area code)	Fax or E-mail Cell Ph	one Phone Number	(area code) Fax or E-mail	Cell Phone	
1641) 396-2			THE REAL PROPERTY AND ADDRESS OF THE PARTY AND		
3. System Requirement li	nformation	4. SHe and Si	il Evaluator (Percolation Test)		
IAC CHAPTER 69 DO	UBLE COMPARTMENT TANK R	EQUIRED PERCOLAT	ON TEST MUST BE COMPLET TO THE ISSUANCE OF I		
	Minimum Tank Si	ze Required			
1-3 Bedroom	1000	Date test ta	ken <i>8/14/02</i> Test taken by <u>J</u>	m Vance	
Bedroom	1250	Test Result	s: Hole I 40 min/in Hole	2 34. 3 min/in	
5 Bedroom	1500		Hole 3 48 min/in Hole		
6 Bedroom	1750	Average 40	. 6 min/in Depth of Test Ho		
o Bediooiii			Laterals Required		
			aterals Required 100	ft. ea	
		Length of L		-	
5. Type of Submittal	6.Address Information		the nearest road): Bening	gton PARK Rd	
₿ New	Location, Number & Stre	et of project (if unknown, indk	ate nearest road):		
☐ Revision	Legal Description: 5.	,23A S PL 71	W SW Sec 13 7	r75 RD6	
Repair, Tank	1	•	1.	th Twp	
Repair, Treatment Area			ZIDIL	en roop	
System Replacement				'	
Previous Permit #:	<u> </u>	•			
7. Type of Building (Com					
7. 15 pe of Building (Com	Number of Bedrooms:	3 Commer	ial/Other Non-Residential Use:		
Other buildings served by the		□ (iarhage			
NoNe		O that W	ter Usage Appliance (i.e. whirlpool b	ath, water softener) Qty . Q.	
10000					
			naining portion of this application.	100000000000000000000000000000000000000	
8. Primary and/or	- COLLEGE	mulicurer Lister	Model:	Size (gul): 1250	
Mechanical Treatment	Type: Me	inufacturer	Model	Size (gal).	
9. Pump/Siphon Not Applicable	Type: Ma	nulacturer	Model:	Dosing Frequency:	
10. Secondary Treatment	Area Type:	□ Not Applicable			
Type of Laterals	Number of Laterals Length	of ea Lateral Other	Other	Maximum Trench Depth	
2024	5	100		(inches): 36	
I hereby attest the truth and accuracy of all facts and information presented on this application.					
Request for inspection of the system must be made 24 hours in advance. Water at the site to test					
the distribution box must be available. Mechanical systems require use of a free-access sand It is unlawful to start construction.					
filter and must be covered by a maintenance agreement, which must be recorded in the Madison County Recorders Office. Discharge from mechanical systems and sand filters require periodic prior to issuance of a POWTS permit by					
County Recorders Of	testing as set forth in IAC Chapter 69 and the results submitted to BOIL. the Environmental Health Officer.				
Applicant Signature			Date the Envir	Amenta meata Amer.	
	7 Bel		8-15-02		
	THEY		15-13-02-	April 2001	
MC-ZEH Form EH01				Vhu 5001	

VANCE + HOCKSTETLET

462-3995

PERCOLATION TEST REPORT

MADISON COUNTY ENVIRONMENTAL HEALTH

Robert Bell

Owner:

5} Ac.

Structure: Lot Size:

Date taken: 8-19-02

TEST #

Jim Vance

Phone No.

641-396-2736

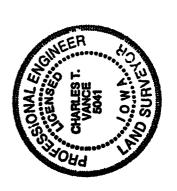
Ste Address: 2478 Bevington Park Rd.

Sec. 13-T75N-R26W Installer: 50240 of Pt. of the NW. tof the SW. X Existing # Bedrooms: 2478 Bevington Park Rd., St. Legal Description:

40.0 min. 36" 48.0 min. Charles, Iowa ધ્યું ધ્યુ 34.3 min. તાં તાં No rock, No water 40.0 min. Owner's Current Mailing Address: Time for 1 inch of water: Results of 6 foot hole: Depth of holes tested:

Drawing of perc site below. Average length of laterals: 500 feet Min. recommended lateral footage per IAC Ch. 69: 5 each Number of laterals required:

25 00H Driveway BELINGTON HURK DD.



hereby certify that this engineering document was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the laws of the State of lowa.

Signed:

Reg. No. 504

Exp. Date: 3/ Dec.

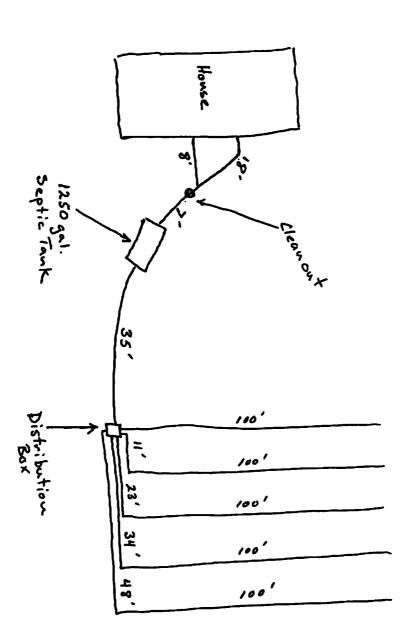
top of page

FRUIT/FOREST 0 0 BRIDGES * * * * * * * * * * * * * * * * * * *	HOMESTEAD INFORMATION Y/N Y APPLICATION NUMBER MILITARY INFORMATION APPLICATION NUMBER HAR# 0 NAME 1 WAR# 0 NAME 2 SPECIFIC SCALES- GROSS 523 EXEMPT 10 DRAINAGE ACCRES- GROSS 523 EXEMPT 10 DRAINAGE		PARCEL# 500091364020000 MAPPING# 0000012 OWNER INFORMATION CHINER NUMBER 0421000 DEED BELL, ROBERT F & BECKY CONTRACT/ HOLD MAIL ADDRESS 2478 BEVINGTON PARK ADDRESS
0 0 BUILDINGS LL 0 0 MINERAL 0 0	DATE 0/00/00 0/00/00 0 0/00/00 - 0/00/00 BOOK 0 0/00/00 - 0/00/00 BOOK 10 0/00/00 - 513	CLASS A SEQUENCE NUMBER 00000 PREVIOUS AG VALUE	000001213300003 TAX DISTRICT 500 0421000 ALTERNATE CHNER 0000000 NTRACT/ DRESS
+ 00	HOMESTEAD AMOUNT MILITARY AMOUNT PAGE PAGE	SPECIAL DISTRICT 0 0 MISC CODES 2700	ADDITION 00013 HOUSE NUMBER STREET ADDRESS I CITY
0 ** TOTAL 58700 31731 0 ** MILIT 0 0 0 ** NET 58700 31731		DEXEMPT CODE DRAINAGE NO AG CREDIT	2478 BEVINGTON PARK ST CHARLES

Permit No 080-02	Name: Koberi		Elem Dank
Date of Inspection: 8/22/0.	2	Inspected by:	Enon Root
Contractor: Kephart	an an manad in	Van 🔯	No 🗌
Dwelling under construction Setbacks	on or moveu in	18 M	140
	lze		
 Meets required setbac Rural Water Yes 			
D:			n water lines/lakes
	d 50-foot setback		Yes No [
Outside required 10			Yes No
04			Yes ⊠ No [
Indications of sustanting			Yes No [
Comments:	s diaer pressure		
Pailding Cours			
Building SewerClean outs – one right of	uteide of house	Yes 🛛	No 🗌
 location of cleanout in 		-	
 Pipe is sch 40 and has a 			No 🗌
 Grade – has adequate fa 		Yes 🔯	No 🗌
Comments:			
Tank	_		_
 Tank Manufacture Liste 	er Concrete		;∐
 Capacity 1250 -gallon 			. .
• Two compartments, bot			′es⊠ No ∐
• Baffle	Yes 🔀	No 🗌	
• Inlet/Outlet tees are ok.		No 🗌	¢ 7-1-1
• Effluent filter in the out	let. Yes 🛚	No Mar	ruf. Zabel
• Tank depth.12 inches	N		
Risers Yes NoLids above grade screw		No 🗌 Will b	- □
• Lius above grade screw Comments:	ed on res	140 🗀 WIII 0	~ Ш
Commence.			
Distribution Box			
• Brand <u>Tuf-Tite</u>	Other		_
• Bedded in cement.	Yes⊠	No∏ Wil	l be <u></u>
 Has required inlet baffle 	:. Yes 🔲		l be
 Outlet levels –are level. 	Yes⊠	No Unkno)Wn
Comments:			
Laterals			
 Distribution lines: 4-inc 	h PVC pine – 35	SDR.	
 Distribution lines screw 		Yes⊠	No Will be
• Lateral used. EQ24		tion? Yes	No⊠
 Lateral depth 36 inches 	Perc d	epth 36 inch	es
• Laterals were level.	Yes⊠ No□		
• Adequate amount of un		ween laterals.	Yes⊠ No□
 Distance 8 feet between 	laterals.		
Comments:			

of page





North