

BK: 2024 PG: 1744  
Recorded: 7/22/2024 at 8:25:12.0 AM  
Pages 10  
County Recording Fee: \$0.00  
Iowa E-Filing Fee: \$0.00  
Combined Fee: \$0.00  
Revenue Tax: \$0.00  
BRANDY L. MACUMBER, RECORDER  
Madison County, Iowa

**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: Katrina A. Blatnick-Gagne and Bradley L. Gagne

Address: 1917 105th Street, EARLHAM, IA 50072

Number and Street or RR, City, Town or P.O., State Zip

**TRANSFeree:**

Name: Treyor Jackson and Kelcy Jackson

Address: 1917 105th Street, EARLHAM, IA 50072

Number and Street or RR, City, Town or P.O., State Zip

Address of Property Transferred:

1917 105th Street, EARLHAM, IA 50072

Number and Street or RR, City, Town or P.O., State Zip

Legal Description of Property: See Attached

**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:

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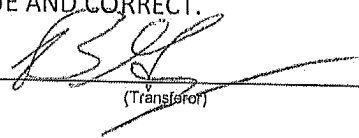
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I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature:   
(Transferor)

Telephone No.: 720-207-7403

## Legal Description

A tract of land located in the Southwest Quarter (1/4) of the Northwest Quarter (1/4) of Section Three (3), Township Seventy-seven (77) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, more particularly described as follows, to wit: Commencing at the West Quarter Corner of said Section Three (3), thence North 90°00'00" East 945.00 feet along the Quarter Section line to the point of beginning, thence continuing North 90°00'00" East 268.20 feet, thence North 00°30'57" West 248.99 feet, thence North 15°22'27" West 199.54 feet, thence North 90°00'00" West 204.93 feet, thence South 01°03'18" West 441.45 feet to the point of beginning, containing 2.543 acres.



# TIME OF TRANSFER INSPECTION TOT# 10954 ALLEN AKERS CERT # 1023

### Site Information

Parcel Description: **200030346020000**

Address: **1917 105th St, Earlham, IA 50072**

County: **Madison**

### Owner Information

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

Business Name:

Owner Name: **Brad & Katy Gagne**

Email Address: **gagne1976@gmail.com**

Address: **1917 105th St, Earlham, IA 50072**

Phone No: **720-207-7403**

### Additional Contact Information

Name	Email Address	Affiliate Type
<b>Luanne Myers</b>	<b>luanne.myers@redfin.com</b>	<b>Realtor</b>
<b>Treyor Jackson</b>		<b>Buyer</b>
<b>Nancy Nastruz</b>	<b>nastruzrealestateteam@gmail.com</b>	<b>Realtor</b>

### Site related information

No Of Bedrooms: **3**

Facility Type: **Residential**

Last Occupied:

Permit issued by County: **Yes**

All plumbing fixtures enter septic system: **Yes**

Property Information Comments:

Inspection Date: **07/04/2024**

Currently Occupied: **Yes**

System Installation Date: **05/09/2017**

Permit Number: **025-17**

County contacted for records: **Yes**

### Primary Treatment

#### Tank 1 Listers

Tank Name: **Tank 1 Listers**

Type: **Septic Tank**

Tank Size (Gal): **1500**

Tank Material: <b>Concrete</b>	Tank Corrosion Type: <b>None</b>	Liquid Level Type: <b>Normal</b>
No. of Compartments: <b>2</b>	Pump Tank Chamber: <b>No</b>	Licensed Pumper Name: <b>Weigert Septic</b>
Date Pumped: <b>7/7/2024</b>	Meets Setback to Well: <b>N/A</b>	Well Type:
Distance To Well (Ft):	Is Accessible: <b>Yes</b>	Lid Intact: <b>Yes</b>
Risers Intact: <b>Yes</b>	Effluent Filter Present: <b>Yes</b>	Watertight: <b>Yes</b>
Tank/Vault Pumped: <b>Yes</b>	Inlet Baffle Present: <b>Yes</b>	Outlet Baffle Present: <b>Yes</b>
Tank Comments:	Functioning as Designed: <b>Yes</b>	

General Primary Treatment Comments:

Distribution Type

Distribution System : **No**

General Distribution System Comments :

Secondary Treatment

**Pkg Treatment Media Filter1**

Media Type: <b>Coco</b>	Manufacturer: <b>Premier Tech</b>	Model Number: <b>RM2400</b>
Serial Number: <b>AAT833</b>	Maintenance Contract: <b>Yes</b>	
Maintenance Provider: <b>Allen Akers Septic</b>		
System Hydraulic Loaded: <b>Yes</b>	Gallons Loaded: <b>600</b>	Discharge At Time of Inspection: <b>Yes</b>
CBOD Results (mg/L): <b>2</b>	TSS Results (mg/L): <b>8</b>	Disinfection Present: <b>No</b>
Disinfection Type:	Tertiary Treatment Present: <b>No</b>	Tertiary Treatment Type:
Meets Setback to Well: <b>N/A</b>	Well Type:	Distance To-Well (Ft.):
GP4 Permitted: <b>No</b>	GP4 Required: <b>No</b>	Vent(s) Present: <b>Yes</b>
Media Present: <b>Yes</b>	Outlet Found: <b>Yes</b>	Sample Taken: <b>Yes</b>
System Located on Owner Property: <b>Yes</b>	Easement Present: <b>N/A</b>	Functioning as Designed: <b>Yes</b>
Comments:		

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **FAD**



**TIME OF TRANSFER INSPECTION TOT# 10954 ALLEN AKERS CERT # 1023**

Owner Name: Brad & Katy Gagne

Address: 1917 105th St, Earlham, IA 50072

County: Madison

Inspection Date: 07/04/2024

Submitted Date: 7/7/2024

# Wiegert Septic Service

A DIVISION OF  
WIDWATER DISPOSAL INC.  
P.O. Box 30001, 400-329-1508  
Indianapolis, IN 46230

DATE: 10/15/04  
CITY: Spencer, Indiana  
COUNTY: Spencer  
ADDRESS: 1000 E. Main St.

NO.	DESCRIPTION	DATE	TIME	BY
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NO.	DESCRIPTION	DATE	TIME	BY
1	1st floor			
2	2nd floor			
3	3rd floor			
4	4th floor			
5	5th floor			
6	6th floor			
7	7th floor			
8	8th floor			
9	9th floor			
10	10th floor			
11	11th floor			
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100	100th floor			

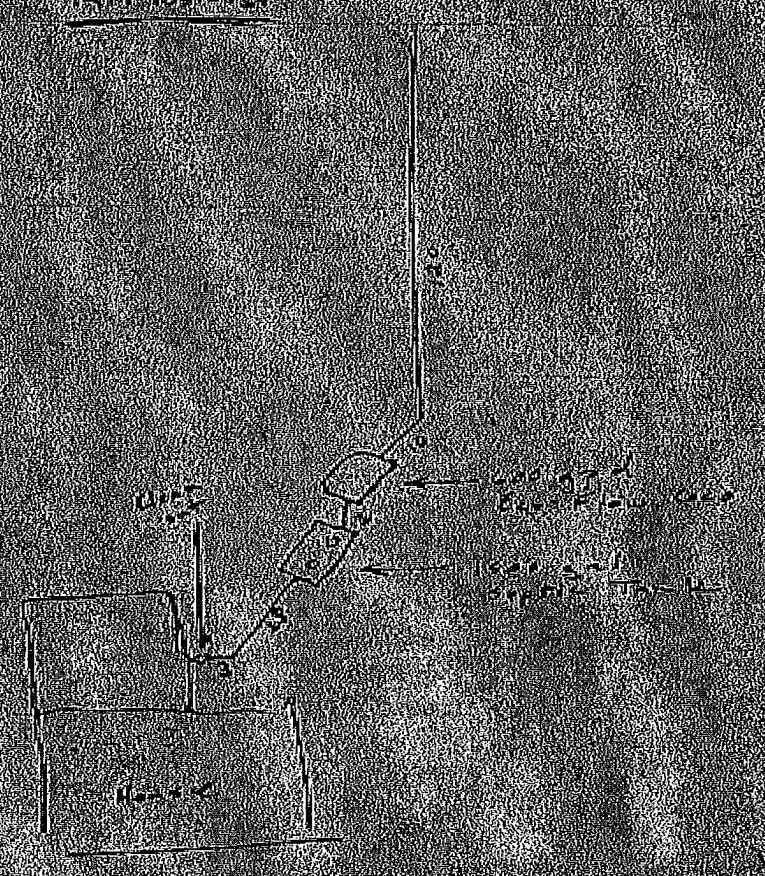
Thank You

WIEGERT SEPTIC SERVICE

INDIANAPOLIS, IN



General description  
of the machine  
and its parts



Client Name MILLEN, ARSIS	Project No. 2485789
Client Address 12345 MAIN ST CITY, STATE 12345	Project Name MILLEN ARSIS
Client Phone (123) 456-7890	Project Description MILLEN ARSIS
Client Fax (123) 456-7890	Project Status MILLEN ARSIS

RESULTS OF ANALYTICAL REPORT

ITEM	REQUIREMENT	TEST METHOD	ANALYSIS METHOD
1	2	3	4
5	6	7	8

SAMPLE INFORMATION

Information regarding the sample and its collection should be provided to the analyst in the report. Please provide a detailed description of the sample and its collection, including the date, time, and location of collection.

ANALYSIS INFORMATION

ITEM	ANALYSIS	REMARKS	ANALYST
1	2	3	4
5	6	7	8

DESCRIPTION OF UNIT

DATE OF ANALYSIS

ANALYST'S SIGNATURE

This report is the property of Standard Industrial Laboratories. It is to be used only for the purpose for which it was prepared. The analyst is not responsible for the handling or storage of the sample after it has been analyzed. The analyst is not responsible for the results of the analysis if the sample is not handled or stored properly. The analyst is not responsible for the results of the analysis if the sample is not analyzed in a timely manner. The analyst is not responsible for the results of the analysis if the sample is not analyzed in a proper environment. The analyst is not responsible for the results of the analysis if the sample is not analyzed in a proper manner.