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CHEK

LISA SMITH, COUNTY RECORDER

MADISON COUNTY IOWA

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

TO BE COMPLETED BY TRANSFEROR

	. <b>NSFEROR:</b> ne Gary E. Jacobs; Donnna J. Jacobs a/k	/a Donna J. Jackson and Jeff	ery Jackson			
	ss 1868 Highway 92, Winterset, Iowa 50273					
, luui	Number and Street or RR	City, Town or P.O.	State	Zip		
	NSFEREE: ne Ralph J. Vasey and Betty L. Vasey					
Addı	ress 2769 280th Street, St. Charles, Iow	va 50240				
	Number and Street or RR	City, Town or P.O.	State	Zip		
Addı 2450	ress of Property Transferred: O Highway 169, Winterset, Iowa 50273					
	Number and Street or RR	City, Town, or P.O.	State	Zip		
Nort Wes	al Description of Property: (Attach if nectheast Quarter (1/4) of Section Fourteen (14), at of the 5th P.M., Madison County, Iowa, co	Township Seventy-five (75) No ontaining 3.372 acres, as shown	orth, Range Twenty-eig in Plat of Survey filed	ht (28)		
Page	e 89 on August 12, 1997, in the Office of the	e Recorder of Madison County,	Iowa.			
2. S 5 6 7 3. H	Vells (check one)  ☐ There are no known wells situated on the stated below or set forth on an attact olid Waste Disposal (check one)  ☐ There is no known solid waste disposal of the state of the stat	his property. The type(s), looked separate sheet, as necestal site on this property. On this property and information this property.  On this property.  On this property.  Operty and information relate	ssary. for related thereto is	provided		
	Attachment #1, attached to this docu					
5	Inderground Storage Tanks (check o  ☐ There are no known underground st small farm and residential motor fue instructions.)  ☐ There is an underground storage tar	orage tanks on this property. I tanks, most heating oil tank nk on this property. The type	s, cisterns and septic (s), size(s) and any k	tanks, in		
	substance(s) contained are listed be	low or on an attached senar:	ata chaat ac nacacc	an.		

5.	Priv	vate Burial Site (check one)
	$\mathbf{x}$	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.
ô.		vate Sewage Disposal System (check one)
		There are no known private sewage disposal systems on this property.
	X	There is a private sewage disposal system on this property. 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
	r-1	Resources. A certified inspection report must be accompanied by this form when recording.
		There is a 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 acknowledgmen
		is attached to this form. When the inspection is completed, an amended Groundwater Hazard
		Statement shall be recorded with the certified inspection and shall include the document
		numbers of both the real estate transfer document and the original Groundwater Hazard
		Statement.
		There is a 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.
		This property is exempt from the private sewage disposal inspection requirements pursuant to
		the following exemption:  The private sewage disposal system has been installed within the past two years pursuant to
	LJ	permit number
		pormit number.
Inf	form	ation required by statements checked above should be provided here or on separate
		s attached hereto:
<u>O</u> 1	ne (1	) active well exists Southwest of the house.
_		
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS
		FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
٠.		Tolombons No. (515) 469 7850
<b>5</b> 1	gnat	ure: Telephone No.: (515) 468-7859



Resorder

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

<u>Property information</u>
Current owner Gary + Donna Jacobs  Buyer Ralph+ Betty Vasey Realtor Anglison to Realty  Mailing address 2799-280th til. It charles da 50240
Buyer Ralpht Betty Vasey Realtor Anglison Co Realty
Site Address/County 2450- Hgy 169 Minterset, da - machison C
Legal Description
No. of bedrooms 3 Last occupied? The year Records available
Permit/installation date 19/21/97 Separation distances ok/no? OK
Septic system information
Septic tank(s): size 1000 gol material Plastic condition fair  Tank pumped? 400 date 7/10/09 licensed pumper 40040 - ST 7.5  Septic/trash/processing tank: 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  Condition
Pump tanks/vaults: type size condition
Distribution system: distribution box plastic outlets used 3 condition good Header pipe(s) # of lines Pressure dosed?
Secondary treatment:  length of absorption fields for ft determined by comor flooring determined by walking flooring type of trench material for gravelless
Size of sand filter determined by  Vent pipes above grade? discharge pipe located?  Effluent sample taken? Results
Media filters: type  Maintenance contract? expiration date service provider  Condition
NPDES General Permit No. 4: required? permitted? NOI provided



## **Time of Transfer Inspection Report**

Other components:		·
Alarms Working?	disinfection	working?
Control box Timers	inspection	ports
Other components		
Overall condition of the private sewage dis	sposal system	
Report system status <u>The system</u>	noverallis in	fair cond.
Explain (attach additional pages as needed	He lateral boxx	field is in good a
Comments: The plastic sepsition	tic tank has 2 les	det delitewere b
the truly has 2 ft of list on;	lido	
Site status at conclusion of Time of Transfe  Verify that controls are set of Power is on to all component Revisit all components to ve Gather all tools for removal Verify that no sewage is on	on the appropriate mode.  nts.  erify lids are secure.	on ground surface
Using this worksheet, write a narrative rep	ort of the inspection results a	nd attach a site sketch.
This report indicates the condition of the p the inspection. It does not guarantee that it		
Signature of Certified inspector:  Name (print):  Address:  Phone # 515-462-2624  Provide a copy of this report, the narrative county sanitarian/environmental health off conducted and to;	SEPTIC TANK PUMPING 1509 St. Hwy. 92 Winterset, IA 50273-8411 report and sketch to the selle	aragent, buyerragent, the
Iowa DNR Onsite Wastewater Program 502 E. 9 <sup>th</sup> St. Des Moines, IA 50319		

100' 10" GRAYELLESS 10" GRAVETTESS 10" CRAVELLESS 100 D 0 ايم SQUARE BLK RAFTE CONSTRUCTION OF BELOW 1110 18" BELOW GRADE (more of less) 1000 GALLON DEL. COMP. SEPTIO TANK NORWESED 601 × 19, WDUL PR MAN AND CARY & DONNA JACOBS -C&L CONST. - 10/21/97 Surperted: 10/22/917 DRIVEWAY

MAIT

70 Q.,

> 1000 GALLON MORESES TAME. DIST. 130X

electrotes las 11.