Document 2009 GW2372

Book 2009 Page 2372 Type 43 001 Pages 2 Date 7/27/2009 Time 8:32 AM Rec Amt \$ 00 IND

INDX V ANNO V SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

Document 2009 GW2124

Book 2009 Page 2124 Type 43 001 Pages 2 Date 7/01/2009 Time 3:06 PM

Rec Amt \$.00

INDX IV ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

## REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFE Name	EROR: Greg Criswell and Trisha	Criswell			
Address	1406 W Mills		Winterset	IA	50273
	Number and Street or RR	en e	City, Town or P.O.	State	Zip
TRANSFE Name	EREE: Christopher Thornton				
Address	622 W South		Winterset	IA	50273
	Number and Street or RR		City, Town or P.O.	State	Zip
Address of	of Property Transferred:				
	1406 W Mills		Winterset	IA	50273
	Number and Street or RR	THENTY (20)	City, Town or P.O.	State	Zip

Legal Description of Property: (Attach if necessary): LOT EXPLOT BLOCK FOUR BIRCHWOOD ESTATES PLAT NO 1

## 1. Wells (check one)

- There are no known wells situated on this property.
- ☐ 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)

- There is no known solid waste disposal site on this property.
- ☐ There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.
- ☐ There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

## 3. Hazardous Wastes (check one)

- There is no known hazardous waste on this property.
- ☐ There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.

4.	Underground Storage Tanks (check one)					
	small farm and residential motor fuel tanks, most heating oil tanks, cisterns and septic tanks, in					
	instructions.)					
	☐ 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)					
•-	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.					
6.	Private Sewage Disposal System (check one)					
	<ul> <li>☐ There are no known private sewage disposal systems on this property.</li> <li>☐ There is a private sewage disposal system on this property. A certified inspector's report is</li> </ul>					
	There is a private sewage disposal system on this property. A certified inspector's report is provided 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.					
	☐ 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 acknowledgment					
	is provided with this form.					
	☐ 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.					
Inf	ormation required by statements checked above should be provided here or on separate					
	eets attached hereto:					
_						
_						
	west to the second					
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM					
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.					
Sic	nature:					
Oic	(Transferor or Agent)					