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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

CHEK

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

TRANSFEROR:

Name PATRICIA J. ELLIS

Address 2059-130TH ST. EARLHAM IOWA 50072
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Jeremy and Jill Soenen

Address 4014 68th St Urbandale IA 50322
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
2059-130TH ST. EARLHAM IA 50072
Number and Street or RR City, Town, or P.O. State Zip

Legal Description of Property: (Attach if necessary) 21 ACEN PT SWSE, PLUS 10 AC
PARCEL

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 and information related thereto is provided in Attachment #1, attached to this document.

3. Hazardous Wastes (check one)

- There is no known hazardous waste on this property.
- 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)

- 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.)
- 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)

- There are no known private sewage disposal systems on this property.
- 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 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 acknowledgment 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 permit number _____.

Information required by statements checked above should be provided here or on separate sheets attached hereto:

THE WELL IS LOCATED SE OF THE MAIN PART OF THE 10 ACRE PARCEL.

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

Signature: _____

Patricia Lewis
(Transferor or Agent)

Telephone No.: (515) 408-3783



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

Property information

Current owner Patty Ellis
Buyer Jeremy Pitt Soenen Realtor Jones Realty - 200 Army Post Rd
Mailing address 11014-684 St Urbansdale, Ia P, IA 50315
Site Address/County 2059-130 St. Earlham, Ia Madison Co.
Legal Description

No. of bedrooms 3 Last occupied? is now Records available yes

Permit/installation date 3/9/2009 Separation distances ok/no? ok
Permit # 57650-003-09

Septic system information

Septic tank(s): size 1500 gal material plastic condition like new
Tank pumped? no date licensed pumper
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfg size
Tank pumped? date licensed pumper
Maintenance contract? expiration date service provider
Condition

Pump tanks/vaults: type size condition

Distribution system: distribution box outlets used condition
Header pipe(s) # of lines Pressure dosed?

Secondary treatment:
length of absorption fields determined by
condition of fields determined by
type of trench material

Size of sand filter determined by
Vent pipes above grade? discharge pipe located?
Effluent sample taken? Results

Media filters: type Peter Moss
Maintenance contract? yes expiration date ?? service provider River to River
Condition like new

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 disposal system

Report system status septic system is like new-

Explain (attach additional pages as needed): system is 4 months old.

Comments: _____

Site status at conclusion of Time of Transfer inspection:

- Verify that controls are set on the appropriate mode.
- Power is on to all components.
- Revisit all components to verify lids are secure.
- Gather all tools for removal from the site.
- Verify that no sewage is on the ground surface. none

Using this worksheet, write a narrative report of the inspection results and attach a site sketch.

This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified inspector: John M. Mayer Date: 7-21-09
 Name (print): _____ Certificate #: 8979
 Address: **JOHN MAYER**
SEPTIC TANK PUMPING
 Phone # 515-462-2624 **1509 St. Hwy. 92**
Winterset, IA 50273-8411

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319

map on back ->

003-09 Permit #
ST650
Madison 14

Patricia Ellis

