

Book 2009 Page 2751 Type 43 001 Pages 6 Date 9/02/2009 Time 10:37 AM

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INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

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

		<b>SFEROR:</b> Cory R. Kiddoo and Pam <b>o</b> la M. K <u>i</u> d	ldoo						
Ná	ame	Cory R. Kiddoo and I ambia W. Kid	1000	·					
Αc	ldre	ss 3233 Fawn Avenue, Lorimor, IA	50149						
		Number and Street or RR	City, Town or P.O.	State	Zip				
TF	RAN	SFEREE:							
		Steven R. Hagemann and Linda L.	Hageman						
	•								
Αc	dre	ss 705 - 3rd Street, Lorimor, IA 50	)149						
		Number and Street or RR	City, Town or P.O.	State	Zip				
۸۵	Idro	os of Proporty Transferred:							
		ss of Property Transferred: - 330th Street Macksburg IA 5015	55						
	.13	- 330th Street, Macksburg, IA 5015 Number and Street or RR	City, Town, or P.O.	State	Zip				
Le	gal	Description of Property: (Attach if ne	ecessary) <u>See 1 in Addendum</u>						
_									
_	10/-	Ha dala ala awa)							
1.		ells (check one)	an this musicants						
	-	There are no known wells situated		ation(a) and local at	atua ara				
	F	There is a well or wells situated on		` '	alus are				
2	6.	stated below or set forth on an attached separate sheet, as necessary.							
۷.		olid Waste Disposal (check one)  There is no known solid waste disposal site on this property.							
	ш	in Attachment #1, attached to this document.							
3	Ha	zardous Wastes (check one)	document.						
J.		There is no known hazardous was	te on this property						
				thereto is provided	in				
		There is hazardous waste on this property and information related thereto is provided in Attachment #1, attached to this document.							
1	Hn	Inderground Storage Tanks (check one)							
₹.									
	بما	small farm and residential motor fu		•					
		instructions.)	ior tarino, most notaring on tarino	, ciotorrio aria coptio	carno, m				
		There is an underground storage to	ank on this property. The type	(s) size(s) and any k	nown				
		substance(s) contained are listed by							

5.	5. Private Burial Site (check one)							
	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.						
6.	Pri	vate Sewage Disposal System (check one)						
		There are no known private sewage disposal systems on this property.						
	$\mathbf{x}$	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						
		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 covered disposal eveters on this preparty. The building to which the covered						
		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.						
	П	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 pursuan								
	_	permit number						
Inf	form	nation required by statements checked above should be provided here or on separate						
		s attached hereto:						
		is one well east of the house on this real estate. NO WEIL						
_								
_								
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS							
	FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.							
Sig	gnati	Telephone No.: (515) 205-7813						

## Addendum

1. Commencing 515 feet West of the Southeast corner of the West Half (W 1/2) of the Southwest Quarter (SW 1/4) in Section Twenty-eight (28), Township Seventy-four (74) North, Range Twenty-nine (29) West of the 5th P.M., Madison County, Iowa, running thence North 527 feet; thence West 425 feet; thence South 527 feet; thence East along the Section line to the Point of Beginning, containing approximately 5.14 acres, more or less

Rec



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

Property information
Current owner Cory Kiddor  Buyer fin Hageman formere Realtor Covered Bridge Realty  Mailing address 3233- Haven one former, as
Mailing address 1233- flaxing and Follows, as
Site Address/County 1215-330 Alt Markobusy; de  Legal Description
No. of bedrooms 7 Last occupied? in row Records available
Permit/installation date 3/7/06 Separation distances ok/ no? 5
Septic system information
Septic tank(s): size 1500 material contact condition Vorga food  Tank pumped? 401 date 8-6-09 licensed pumper 4015 57 75  Septic/trash/processing tank: size material condition  Tank pumped? date licensed pumper 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 <u>flatin</u> outlets used <u>H</u> condition <u>frod</u> Header pipe(s) <u>3</u> # of lines <u>4</u> Pressure dosed? <u>no</u>
Secondary treatment:  length of absorption fields 100 determined by <u>lengthing</u> condition of fields <u>food</u> determined by <u>walking t profing</u> type of trench material <u>plantin down</u>
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 component			··
Alarms	Working?	disinfection	working?
Control box	Timers	inspection po	rts
Other component	s		
Overall condition	of the private sewage disposal	system	
Report system sta	itus <u>System is</u>	in Very good.	condinuvin 2000
	dditional pages as needed):		
Comments:			
<ul><li>Ve</li><li>Po</li><li>Re</li><li>Ga</li></ul>	clusion of Time of Transfer inserify that controls are set on the ower is on to all components. Exist all components to verify ather all tools for removal from erify that no sewage is on the general controls.	e appropriate mode.  lids are secure.  the site.	
Using this works	heet, write a narrative report of	f the inspection results and	attach a site sketch.
	ates the condition of the private does not guarantee that it will		
I Holic # 312 7	150	19 St. Hwy. 92	
Provide a copy o	Winters f this report, the narrative report lenvironmental health office of	rt and sketch to the seller/s	agent, buyer/agent, the
conducted and to	/environmental health office, c		my me mehoonem was
Iowa DNR Onsid 502 E. 9 <sup>th</sup> St. Des Moines, IA	te Wastewater Program		

Map on back > 542-0191

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