



Document 2009 GW2793

Book 2009 Page 2793 Type 43 001 Pages 4

Date 9/08/2009 Time 1:31 PM

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Roxanne LeMoine

Address 3295 Woodbrook Lane New Virginia IA 50210
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Ryan J. Buhr

Address 1003 SW 3rd St. Ankeny IA 50021
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
3295 Woodbrook Lane New Virginia IA 50210
Number and Street or RR City, Town, or P.O. State Zip

Legal Description of Property: (Attach if necessary) _____
LOT 2 & E 1/2 LOT 3 TIMBER VALLEY

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:

Well located 250 feet West of house and 30 feet North of Clear span building.

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

Signature: _____

[Handwritten Signature]
(Transferor or Agent)

Telephone No.: (515) 577-8063



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

Property information

Current owner ROXANNE LE MOINE
 Buyer RYAN BURK Realtor (REMARK) (DEAN LEE)
 Mailing address 3295 Woodbrook Ln
New Virginia, VA 50210
 Site Address/County 3295 Woodbrook Ln - MADISON Co.
 Legal Description AS ABSTRACT
 No. of bedrooms 3 Last occupied? PRESENT Records available YES
 Permit/installation date PERMIT # 1772 Separation distances ok/ no? o/c

Septic system information

Septic tank(s): size _____ material _____ condition _____
 Tank pumped? _____ date _____ licensed pumper _____
 Septic/trash/processing tank: size _____ material _____ condition _____
 Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfg White Water size 1000 gallon
 Tank pumped? YES date 8-25-09 licensed pumper FORST SEPTIC
 Maintenance contract? YES expiration date 2010 service provider DAN NASH
 Condition good NASH well co.

Pump tanks/vaults: type _____ size _____ condition _____

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

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

Size of sand filter 4x12 determined by County Record
 Vent pipes above grade? YES discharge pipe located? YES
 Effluent sample taken? No Results NO DISCHARGE OF EFFLUENT AT TIME OF INSPECTION

Media filters: type _____
 Maintenance contract? _____ expiration date _____ service provider _____
 Condition _____

NPDES General Permit No. 4: required? _____ permitted? _____ NOI provided _____



3295 Woodbrook Lane,
New Virginia

Time of Transfer Inspection Report

Other components:
Alarms YES Working? YES disinfection N/A working? N/A
Control box OK Timers N/A inspection ports /

Other components _____

Overall condition of the private sewage disposal system

Report system status: SEPTIC SYSTEM IN GOOD WORKING CONDITION AT TIME OF INSPECTION

Explain (attach additional pages as needed): _____

Comments: NO DISCHARGE FROM PIPE AT TIME OF THE INSPECTION
SAMPLING DONE APR 2009 BY NASH WELL CO.

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.

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: [Signature] Date: 8-25-09
Name (print): BRIAN RINARD Certificate #: 8805
Address: PO Box 197 ANKENY IA 50021
Phone #: 964 1447

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