

Document 2009 GW3404

Book 2009 Page 3404 Type 43 001 Pages 9 Date 11/12/2009 Time 10:30 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

		SFEROR: Lynn R. Godbersen and Muriel R. Godbersen		
	•			
A	dre	ss 2431 St. Charles Road, Winterset, Iowa 50273	_	
		Number and Street or RR City, Town or P.O.	State	Zip
TF	RAN	SFEREE:		
Na	ame	Prudential Relocation, Inc.	· · · · · · · · · · · · · · · · · · ·	
Ad	ldre	ss 16260 N. 71st Street, Scottsdale, AZ 85254 Number and Street or RR City, Town or P.O.	State	Zip
Ac	ldre	ss of Property Transferred: St. Charles Road, Winterset, Iowa 50273		
		Number and Street or RR City, Town, or P.O.	State	Zip
Le	gal	Description of Property: (Attach if necessary) See 1 in Addendum		
	····			
			<u> </u>	

1.		ills (check one)		
		There are no known wells situated on this property.		
	X	There is a well or wells situated on this property. The type(s), location(s)) and legal sta	atus are
		stated below or set forth on an attached separate sheet, as necessary.		
2.		lid Waste Disposal (check one)		
	X	There is no known solid waste disposal site on this property.		
		There is a solid waste disposal site on this property and information related	ed thereto is	provided
		in Attachment #1, attached to this document.		
3.		zardous Wastes (check one)		
		There is no known hazardous waste on this property.		
		There is hazardous waste on this property and information related theret	o is provided	in
		Attachment #1, attached to this document.		
4.		derground Storage Tanks (check one)		
	X	There are no known underground storage tanks on this property. (Note small farm and residential motor fuel tanks, most heating oil tanks, cister instructions.)		
		There is an underground storage tank on this property. The type(s), size	e(s) and any k	nown
		substance(s) contained are listed below or on an attached separate shee		

5.	Pri	vate 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.	Pri	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						
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						
14		- At						
		nation required by statements checked above should be provided here or on separate						
Sn	eeu	will is located at the SE carner of the						
	 '							
-4	Ph	apenty (see attached Plat of Sunney)						
-								
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS						
		FORM						
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.						
Sig	gnat	ure: Multill & Holle Well Telephone No.: 515-462-4801						
		(Transferor or Agent)						

FILE WITH RECORDER

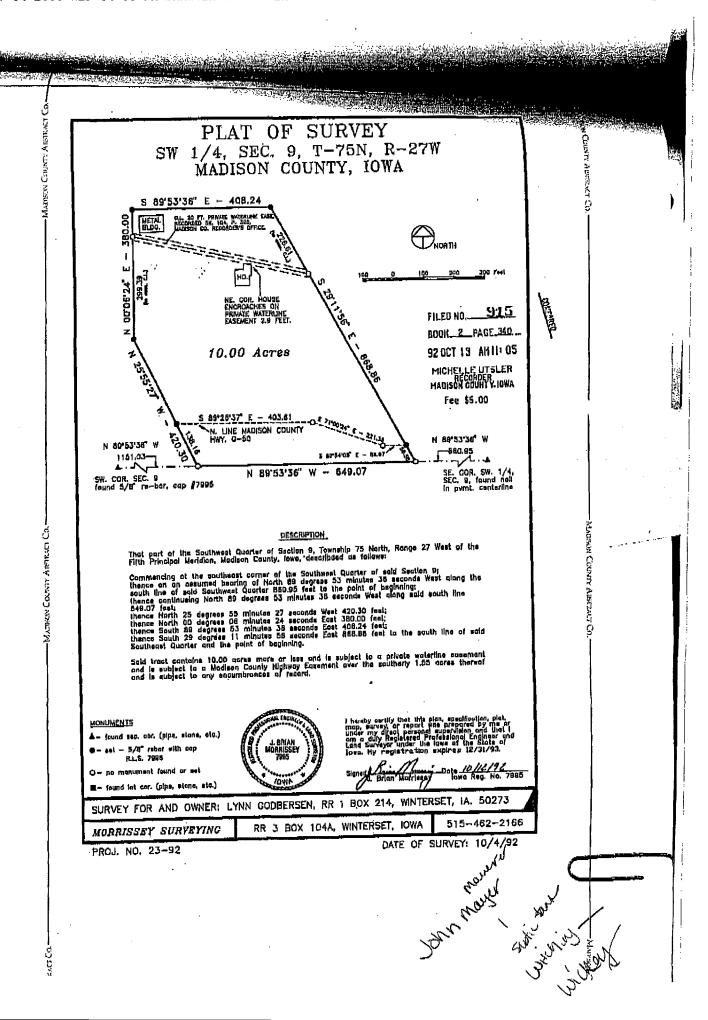
DNR form 542-0960 (June 26, 2009)

Addendum

Real Estate Description

Parcel "A" in the South Half of the Southwest Quarter of Section 9, Township 75 North, Range 27 West of the 5th P.M., Madison County, Iowa more particularly described as follows:

Commencing at the Southwest Corner of Section 9, Township 75 North, Range 27 West of the 5th P.M., Madison County, Iowa; thence along the South line of said Section 9, South 89°35'53" East, 792.55 feet to the Point of Beginning. Thence North 01°25'27" East, 976.98 feet to the North line of the South 30 Acres of the Southwest Quarter of the Southwest Ouarter of said Section 9; thence along said North line extended, North 89°12'00" East, 549.72 feet; thence South 43°30'41" East, 29.10 feet; thence South 08°49'09" West, 243.70 feet; thence South 32°06'48" East, 775.67 feet; thence South 01°23'59" West, 72.25 feet to the South line of the Southwest Quarter of Section 9; thence along said South line, North 89°35'53" West, 429.21 feet to the Southeast Corner of the Southwest Quarter of the Southwest Quarter of said Section 9; thence continuing along said South line, North 89°35'53" West, 538.00 feet to the Point of Beginning, and containing 16.173 acres including 2.454 acres of County Highway Right-of-Way and is subject to a 20 foot wide water line and well easement 10 feet wide on each side of the following line; commencing at the Southwest Corner of Section 9, Township 75 North, Range 27 West of the 5th P.M.; thence South 89°35'53" East, 792.55 feet; thence North 01°25'27" East, 721.18 feet to the Point of Beginning; thence South 76°56'33" East, 811.0 feet to a terminus at the well.





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

Property information	
Constant Line Callerine	
Current owner Lynn Godbersen Buyer	D. H.
Buyer	Realfor
Mailing address	
0'4 Aller (0) 1/21 CT ()	2)
Site Address/County 24/3/ ST Charles A	
Legal Description	
NY C1 1 // T 10	₩ ,,
No. of bedrooms Last occupied?	Records available
Permit/installation date Separation d	listances ok/ no? OK
Septic system information	
Septic tank(s): size material	condition
Tank pumped? date	licensed pumper
Septic/trash/processing tank: size 500 qal m	laterial Plastic condition (5001)
Tank pumped? 4e5 date 6/8/09	licensed pumper 19-1 Septic
4 1: 4 C1	7~~ (22
Aerobic treatment unit (A1U) migr $M_{L_1} + 10$	Size 150 GPD
Tank pumped? <u>VE</u> date <u>©/8/09</u>	licensen pumper 4-1 3ept.C
Aerobic treatment unit (ATU) mfgr Multi flo Tank pumped? yes date 6/8/09 Maintenance contract? yes expiration date 10/3/ Condition (2000)	service provider onsite wastewater
Condition Good	
Pump tanks/vaults: type size	
Pump tanks/vauns: type size	Condition
Distribution system: distribution box ou	itlate wood condition
Header pipe(s)#	of lines Pressure dosed?
Treader pipe(s)#	of this
Secondary treatment:	
length of absorption fields	determined by
condition of fields	11'
type of trench material	determined by
type of french material	
Size of sand filter \underline{SX} (0 \underline{FA} , \underline{F}	determined by Existin Records
Vent nines shows ande?	discharge nine located? L. Q.
Vent pipes above grade?	to CNO - 4 TS 4
Emuent sample taken: Resul	
Media filters: type	
Media filters: type expiration date	service provider
Condition	Scrvice provider
Condition	
NPDES General Permit No. 4: required? \(\frac{\frac{1}{25}}{25} \) pe	ermitted? NO NOI provided
tie 220 Conothe Ciline 110. 11 todation: 7 10 pt	The provided in the same of th
	.
3-2009	542-0191



Time of Transfer Inspection Report (page 2)

Current owner	
Other components: Alarms yes Working? Yes disir	fection working?
Control box Timers	inspection ports
Other components	
Overall condition of the private sewage disposal system	
Acceptable? yes Unac	ceptable?
Explain (attach additional pages as needed): 10 n G/8 Both Pretank + onf. unit. owner is Exchanged filters + claimed. Serviced to be operating property.	FA.F. & Found System
Comments: Would Recommend Installing Currently Tank only has Store of Servicing hard Site status at conclusion of Time of Transfer inspection:	20" Risers + lid on Aretark
 Verify that controls are set on the appropriate 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 	node.
Using this worksheet, write a narrative report of the inspection	results.
Submit a copy of this report, including your narrative, to the office, the DNR and the county Recorder in the county where	115
This report indicates the condition of the private sewage dispethe inspection. It does not guarantee that it will continue to fi	
Signature of Certified inspector: Name (print): ### Address: S 4 N = 6272 N =	Date: 6-8-87 Certficate #: 88//
Phone # 515-244-4646	542-0191
10-2008	342-0191

Contractor Time of Sale Inspection Form (Submit to County Upon Completion of Inspection)

Owner's Name Lynn Godberson Phone# 462-4801
Owner's Address 2431 ST Charles Rd
City Winkeset Fa 50 273 Ze
Property Location: Section ; Township ; County made sow Property Address 2431 67 Charles #2 Lornferset In 50273 Parcel #
Records & Gathered Data Record of septic permit: Current # of household occupants: Current # of bedrooms: Has septic tank ever been pumped? Yes If yes, when: 6/8/09
Septic System Inspection Report Septic Tank Type of tank: Poured Concrete Concrete Block Plastic Metal Other Is the tank lid within 12" of surface? yes no Does tank have risers yes no Tank size: Joo gallons 2-compartment yes no Inlet baffle yes no Effluent filter yes no Problems or Abnormalities:
Secondary Treatment Site No Treatment Surface discharge found: Unknown (Not Found) Suspected: Known secondary treatment Describe: Free acress Sond for the form Problems or Abnormalities: Pump Units: Is a lift pump in use? yes xino If yes, is it functioning? yes \(\text{no} \)
Other Treatment Systems Mechanical Aerobic Units is multiflow 760 941 Peat Filter Sand Filter Is unit being properly maintained? X yes Recent effluent test results:
Requirements: No further action is required at this time. Septic system upgrade or repair is required: Well plugging required:
Recommendations: Other: Need Book + 112 20 has stomping access now. Inspector: Gary Main Signature: Ulling & Main Agency or Company: Onsite waste water Technologies Address: 1541 NE 649h Del moines In Topia
Phone: 515-244-4646 Date: 6/8/09

If diagram of septic system is not available, please provide a map on back or attach:

"ONSITE" WASTE WATER TECHNOLOGIES

1541 N.E. 66th Ave Des Moines, IA 50313 PHONE: 515-244-4646 FAX: 515-244-0269

AFTER HOURS 515-402-3128

USE A-1 SEPTIC: 9/25/08 G checked and sampled.5/12/08 C serviced and sampled.10/16/07 G C checked unit.sample

introduction and a land

6/8/09 9:00AM.A-1 Septic TOS Inspection: Pump and Filter Change If Needed: CBOD/TSS

18400 Option II 10/31/2009 Godbersen Lynn & Muriel 2431 St. Charles Rd

462-4801

W of St. Charles on G50, large brick house on N side of road with big satellite dish.

Winterset, IA 50273

Aerator replaced 10/14/05,11/17/99

Alarm Replaced

Discharge FAF south of house

Pumped Last 10/14/05,m12/05/01, 11/17/9

Last On Job 9/25/08,5/12/08,10/16/07,4/2

Exchanged - Filters 10/14/05,11/17/99 Flushed - Filters Pre/pump/ tank 300g pretank, after tank P - Pre/Desing: 300g, 12/5/01, 11/11/97

Started: 10/28/1992 SAMPLING

Dogs/Type/Name:

750 Sample @ sampling port MULTI-FLO CLEAR STREAM NAYADIC ✓ Unit Riser Sample Port Sample @ final discharge Unit Zabel Fitter ✓ Foam Baffle Sample NOT TAKEN Unit Lid Diffuser County Madison **Additional Treatment** Lid latch, upper External air filter **Testing Required** Testing Area Lid latch, lower Septic tank Internal air filter Madison SE Lid hinge, back Pre-Tank (PT) Float switch Foam cap Discharge Pressure switch Foam Baffle (FB) Polishing Filter (PF) Compressor SERVICEMAN: 3 BK2000 Surge Bowl (SB) REGGIE Alarm Gasket, upper Free Access Filter (FAF) Gary **UV** disinfection Gasket, lower AMERICAN DRIP GEO FLOW Chris Weir Plate Chlorinator Unit Jim. Filter clips Zabel filter Bucc Effluent pump **Filters** Evaporation Bed Spin filter Upper Air Assy Alarm Call Timer setting ☑ Inspection ☑ Service Aerator LEGEND Dosing pump Aerator impelier Blow bag Pumped Alarm float switch Foam on ground Exchanged Removed Left Tag Pump float switch Tower fittings Failed S Serviced Where or Return line pressure Spoke With? Junction Box cap installed Tested Supply line pressure Alarm, Multi-Flo Needs service Checked **RETURN TO JOB** Problem: MATERIALS. CALL OUR OFFICE Trip Charge Fuel surcharge Labor_ hours @ \$90/ hour Labor Material Sample cost Subtotal TAX @ 6% Pumping TOTAL DUE

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SEPTICHECK REPORT U.S. Inspect			2126423			PRINTED DATE
						6/11/2009
3650 Concorde Parkway, #100 Chantilly, VA 20151-1129			U.S. INSPECT	JOB#		
			IL52931			
CLIENT NAME				NAME OF PROPERTY OW	NER/SELL	ER/PURCHASER
PRERS Appraisals			Lynn Godbersen			
CLIENT ADDRESS				ADDRESS OF PROPERTY		
16260 N. 71st St, Suite 400 Scottsdale, AZ 85254				2431 Saint Charles Rd Winterset, IA 50273-8129		
CLIENT CONTACT	TELEPHONE NUMBER	FAX NUMB	ER	HOME TELEPHONE	OFFICE	TELEPHONE
PRERS Appraisals	(480) 778-6559]		

Results:

NO REPAIRS NEEDED.

Inspection Date:

6/8/09.

Age of System:

UNKNOWN.

Regarding:

EVALUATION OF ON-SITE WASTE SYSTEM.

System Information:

- AERATION SYSTEM - ONE 300 GALLON SEPTIC TANK AND ONE 600 GALLON SEPTIC TANK WITH OPEN DISCHARGING.

System Findings:

- 1. CONDITION OF TANK AND BAFFLES IS ACCEPTABLE.
- 2. OPERATION OF SEPTIC SYSTEM IS ACCEPTABLE.

Additional Comments:

- THE TANKS WERE PUMPED AT THE TIME OF THE INSPECTION.

Client: PRERS Appraisals
Contact: PRERS Appraisals
Homeowner: Lynn Godbersen
Page 4 of 4

2431 Saint Charles Rd Winterset, IA 50273-8129 Copyright(C) 1992-99, U.S. Inspect Client File #: 2126423

U.S. Inspect Job #: IL52931 MEMO-1(03/19/2002)

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	OVERALL SUMMARY PAGE			CLIENT FILE		PRINTED DATE	
ė,	U.S.	2126423 U.S. INSPECT JOB#			6/11/2009		
Ē	3650 Concord				}		
2	Criantiny, v	/A 20151-1129		IL52931			
=	CLIENT NAME			NAME OF PROPERTY OWNER/SELLER/PURCHASER			
your	Prudential Relocation				Lynn Godbersen		
5	CLIENT ADDRESS				ADDRESS OF PROPERTY		
suoo ne	16260 N. 71st St, Suite 400 Scottsdale, AZ 85254				2431 Saint Charles Rd Winterset, IA 50273-8129)	
ž	CLIENT CONTACT TELEPHONE NUMBER F			ER	HOME TELEPHONE	OFFICE	TELEPHONE
tua	PRERS Appraisals	(480) 778-6559					
9	SCOPE OF THIS SUMMARY; ORIGINAL ASSESSMENT						
ggeste	This summary only pertains to the first assessment that was performed on the above property. All other re-assessments will be summarized on a						
66	different summary sheet.						
ns s							

SEPTICHECK

RESULTS: NO REPAIRS ARE REQUIRED AT THIS TIME.

This document is being given for informational purposes only. It represents the opinion of the individual or the firm who prepared it. The seller makes no representations as to the accuracy of the information given. If you have any questions, it is suggested you consult your attorney.

Bining to Intale