

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

Please read the filing instructions on the reverse side **BEFORE** completing this form.

PART I - TO BE COMPLETED BY TRANSFEROR

TRANSFEROR Name Martha J. Jobst

Address 360 East First Street, Earlham, Iowa 50072

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree Name Terry J. Jobst and Gayle L. Jobst

Address 360 East First Street, Earlham, Iowa 50072

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred 1039 130th Street, Dexter, Iowa 50070

Number and Street or RR

City, Town, or P.O.

State

Zip

Legal Description of Property The Southwest Fractional Quarter (1/4) of Section Eighteen (18) in Township Seventy-seven (77) North, Range
Twenty-nine (29) West of the 5th P.M., Madison County, Iowa.

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.

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.

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)

☒ 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 described below.

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) is stated below. The known identifying information of the decedent is stated below.

Information, if any, required by statements checked above:

There is one well on the property. It is located approximately twenty (20) feet north of the residence located on the property.

Attachment for Additional Information? Y / N If so, number of pages _____

I HEREBY DECLARE THAT THE INFORMATION CONTAINED IN PART I OF THIS STATEMENT IS TRUE AND CORRECT.

Signature: _____

(Transferor or Agent)

Martha L. Jobst, Transferor

Telephone Number: (515) 758-2536

Date of Instrument _____

Document 2008 GW76

Date of Recording _____

Book Page Type 43 001 Pages

Date 1/08/2008 Time _____

Deed ☐ Contract ☐ County _____

Rec Amt \$.00

DNR form (November 02)

LISA SMITH, COUNTY RECORDER
MADISON IOWA

INDX

ANNO

SCAN

CHEK

542-0960