

Document 2009 GW3737

Book 2009 Page 3737 Type 43 001 Pages 2 Date 12/14/2009 Time 10:47 AM

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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

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REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR TRANSFEROR: David A. Norman and Sarah E. Norman Name Address 460 N.W. Fifth Street, Earlham, Iowa 50072 City, Town or P.O. Zip Number and Street or RR TRANSFEREE: Name Karen L. Morrell 407 S. Hazel Street, Van Meter, Iowa 50261
Number and Street or RR City, Town or P.D. Address of Property Transferred: 460 N.W. Fifth Street, Earlham, Iowa 50072
Number and Street or RR City, Town, Slale Legal Description of Property: (Attach if necessary) The E2 of Lot 15 of Eivins Addition Plat Two in the Town of Earlham, 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 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, cistems 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.

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DNR form 542-0960 (June 26, 2009)

5.	۲r	Tvate Burial Site (check one)
	X	There are no known private burial sites on this property.
		identifying information of the decedent(s) is stated below or on an attached separate sheet, as
		necessary.
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υ.		ivate 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
	لسية	the following exemption:
		The private sewage disposal system has been installed within the past two years pursuant to
	iJ	permit number
		permit number
Info	rm	ation required by statements checked above should be provided here or on separate
		attached hereto:
5110	.013	attached hereto.
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS
		FORM
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Signa	atur	re: Telephone No.: (515) 240–1873
		(Traffstefor or Agent)
		(David A. Norman, Transferor)
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