



Document 2010 GW502

Book 2010 Page 502 Type 43 001 Pages 6

Date 3/15/2010 Time 12:07 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 Jeffery S Clark

Address 1295 Old Portland Rd

Number and Street or RR

Van Meter

City, Town or P.O.

IA

State

50261

Zip

TRANSFeree:

Name Bradley E Meyer and Crista Angie Meyer

Address 210 Walnut St, Ste 573

Number and Street or RR

Des Moines

City, Town or P.O.

IA

State

50309

Zip

Address of Property Transferred:

1295 Old Portland Rd

Number and Street or RR

Van Meter

City, Town or P.O.

IA

State

50261

Zip

Legal Description of Property: (Attach if necessary): 3A Se Cor SE SE

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:

**I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS
FORM**

AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: Jeffery A. Clark Telephone No.: (573) 289-2279



Realtor

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

Property information

Current owner Jeff Clark
Buyer Bradley + Christa Meyer Realtor Louva Realty
Mailing address _____

Site Address/County 1295 - Old Portland Road - Madison Co.
Legal Description _____

No. of bedrooms 4 Last occupied? is now Records available yes

Permit/installation date 8-2-05 Separation distances ok/ no? OK
4057-05

Septic system information

Septic tank(s): size 1500 material concrete condition Very good
Tank pumped? yes date 6-16-08 licensed pumper Mayer ST 75
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ 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 Plastic outlets used 6 condition Good
Header pipe(s) 4 # of lines 6 Pressure dosed? yes

Secondary treatment:

length of absorption fields 95 ft determined by no map + Probing
condition of fields Good determined by walking + Probing
type of trench material Chamber

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 components:

Alarms _____ Working? _____ disinfection _____ working? _____

Control box _____ Timers _____ inspection ports _____

Other components _____

Overall condition of the private sewage disposal system

Report system status The concrete tank is 2 compartment & has

Explain (attach additional pages as needed): inlet out let baffles also effluent filter on outlet & - from tank - filter was cleared

Comments: Tank was pumped by Mayer (515) in June of 08

Tank has risers -

The dest bot is good cond. No sewage on ground surface

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. None on 2-20-10

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: John W. Mayer

Name (print): _____

Address: _____

Phone # 515-462-2624

JOHN MAYER

SEPTIC TANK PUMPING

1509 St. Hwy. 92

Winterset, IA 50273-8411

Date: 2-20-10

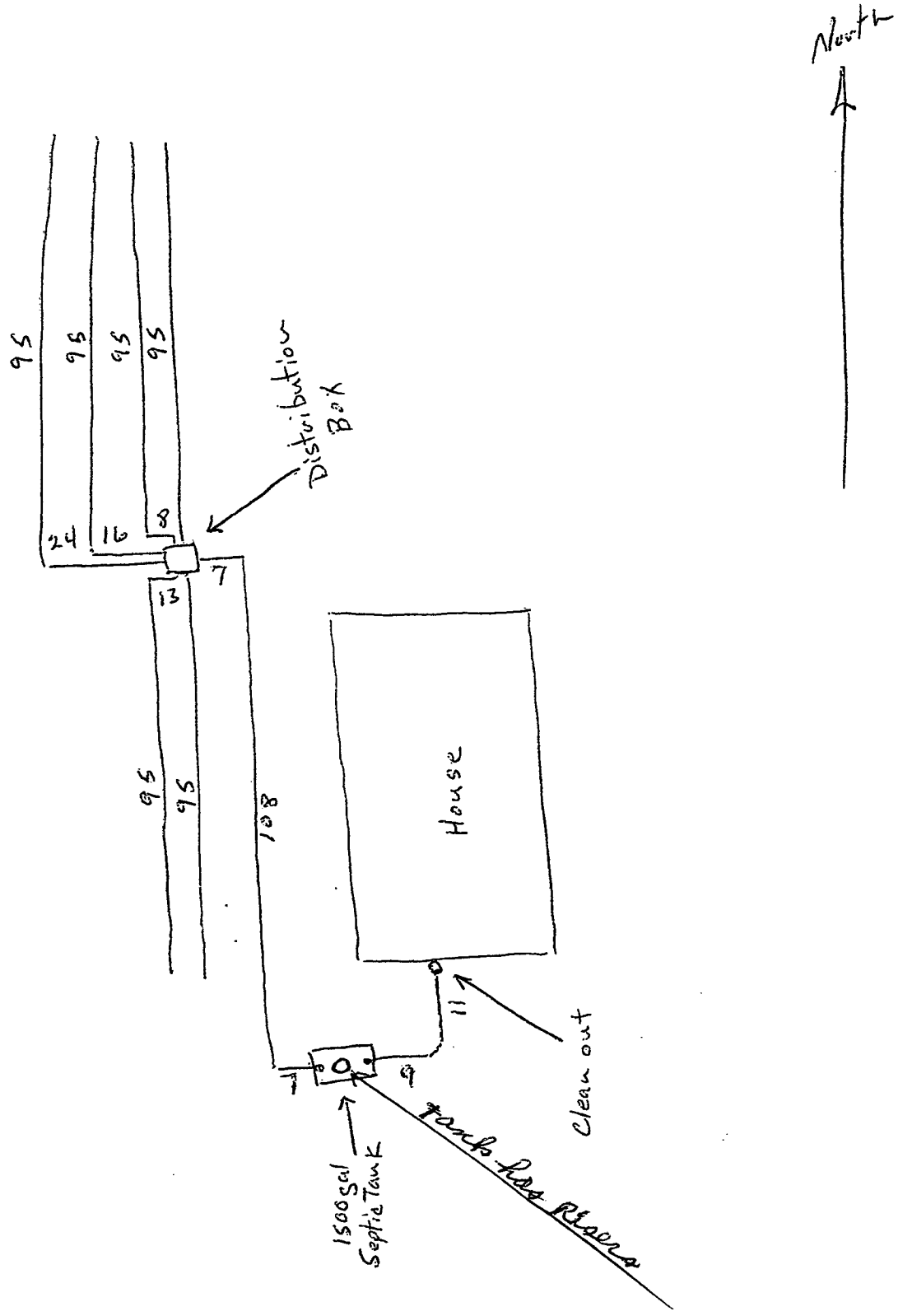
Certificate #: 8979

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

Map on Back →

Permit # 057-05 Mills Inspection 7/5/05



Permit - 057-05 Mills Inspection 7/5/05

