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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

Name_	Walter W. Witchie		· · · · · · · · · · · · · · · · · · ·	·
Address	3 2107 120TH ST. Winterset, IA 50273			
	Number and Street or RR	City, Town or P.O.	State	Zip
TRANS	FEREE:			
Name_	Monte E. Miller			
Addres	2455 142ND ST. Urbandale, IA 50323	City. Town or P.O.	Sizio	
	Manney Willia Associations		-	
Address	s of Property Transferred:			
2107	120TH ST. Winterset, IA 50273	Cay, Tokin, 67 P.O.	State	Zip
Legal D	lescription of Property: (Attach if nece	essarv)		
•	"A" located in the Southwest Quarter of the South	• • • • • • • • • • • • • • • • • • • •	on 12. Township 77 North R	ange 28 We
	5th P.M., Madison County, Iowa.			
	is (check one)			
	Phere are no known wells situated on			
	There is a well or wells situated on thi			us are
	stated below or set forth on an attach	ied separate sheet, as neces	ssary.	
	<b>d Waste Disposal (check one)</b> There is no known solid waste dispos	al site on this property		
	There is no known solid waste dispos There is a solid waste disposal site or		n related therets is n	muidad i
	Attachment #1, attached to this docui		u seraten merem 19 h	i Dylucu i
	ardous Wastes (check one)	anora.		
	There is no known hazardous waste o	on this property.		
	There is hazardous waste on this proj	- · ·	thereto is provided i	n
	Attachment #1, attached to this docu			-
4. Ung	erground Storage Tanks (check or	ne)		
	There are no known underground sto			
	small farm and residential motor fuel instructions.)	tanks, most heating oil tanks	, cisterns and septic	tanks, in
	There is an underground storage tank	on this property. The type(	s), size(s) and anv kn	own
ш !	substance(s) contained are listed belo	ow or on an attached separa	te sheet, as necessa	ry.

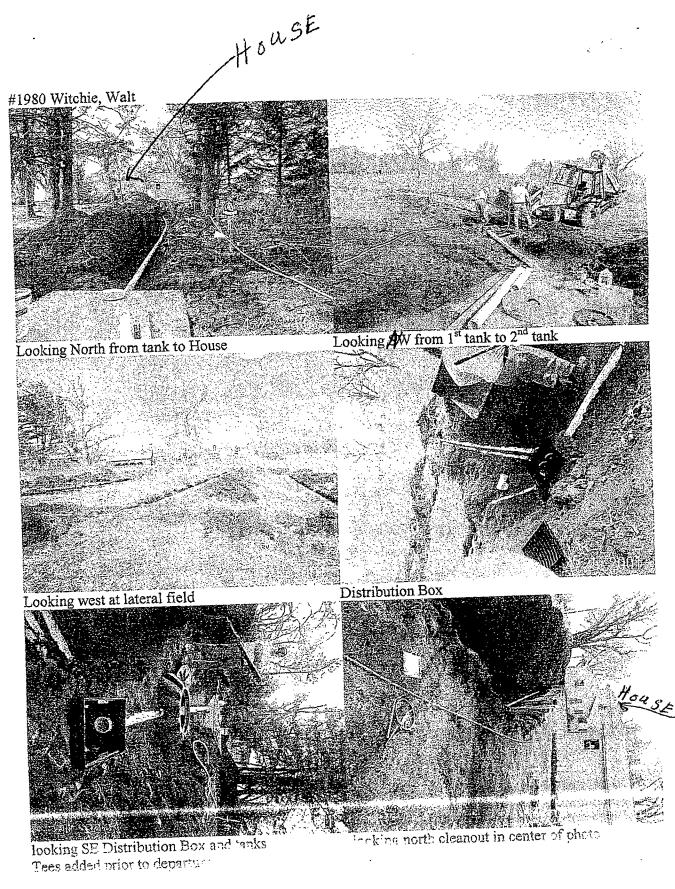
<b>5</b> .	Pri	yate Burial Site (check one)						
	Ø	There are no known private burial sites on this property.						
		There is a private burial site on this property. The location(s) of the site(s) and known						
		identifying information of the decedent(s) is stated below or on an attached separate sheet, as						
		necessary.						
6.		yate Sewage Disposal System (check one)						
		There are no known private sewage disposal systems on this property.						
	D/	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						
	7*4	Statement. There is a private course dispused outline or this present. The building to which the accuracy						
	Ц	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 biriding acknowledgment is provided with this						
		form.						
	r3	This property is exempt from the private sewage disposal inspection requirements pursuant to						
•	L							
the following exemption:  The private sewage disposal system has been installed within the past two years pursuant to								
		permit number						
Inf	form	ation required by statements checked above should be provided here or on separate						
sh	aats	attached hereto:						
	2-	wells Located on property (both working for autordo use only)  Hon 1-NE Corner of Dorch, 1-E of house  were 36/ deep Ewell 47': Both hand dug.						
7	010	tion 1- NECRAMENT AND LANGE TO						
<u> </u>		The to cover of paren, 1- 2 of paren						
L	100	were 36 deep Eweil 47' both hand dug.						
		,						
	<del></del>							
	<del>,,</del>							
_								
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS						
		FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.						
		AND INAL INCINFORMATION STATED ABOVE IS TRUE AND CORRECT.						
		$\mathcal{L}$						
Qir	nati	ire: Mathlen Dan Ind Telephone No.: (515) 834-9494						
~ !?	3. 142 F	(Transferor or Agent)						



Seller agent

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

Property information
Current owner Walt Witchie + Kathleon Sanford Buyer Monte + Galadrich miller Realtor Coldwell Banker - Gary Johns Mailing address 2107-120th + Winterset de 50273
Buyer Monte & Galadrial miller Realtor Cold wall Banker - Gary John
·
Site Address/County 2/07-120th St. Minters t, do. 50273- Medison Legal Description
No. of bedrooms 3 Last occupied? in nour Records available yes
Permit/installation date 4-25-7861 Separation distances ok/no? Of The Separation distances ok/no?
Septic system information
Septic tank(s): size 15 1500 gal material Consiste condition good  Tank pumped? 10 date 3-19-10 licensed pumper major 5775  Septic/trash/processing tank: size 300 gal material Plastic condition good  Tank pumped? 10 date 3-19-10 licensed pumper major 5775
Aerobic treatment unit (ATU) mfgr size
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 3 condition food  Header pipe(s) 4 of lines 3 Pressure dosed?
Secondary treatment:  length of absorption fields 100 for determined by company from determined by well-single type of trench material 36 chamfer
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  6-2009
6-2009





## Time of Transfer Inspection Report

Other compo	nents:			· ·				
Alarms	Working?	<u> </u>	disinfection	working?				
Control box	Т	Timers	inspection por	ts				
Other compo	nents							
Overall cond	Overall condition of the private sewage disposal system from lateral book to laterals							
Report system	n status there a	re two s	epter tails	-/stone concrete				
Explain (atta	1500 Gaptional pages as red-there is	etwo comp	Continent tin	lettoutlet fafle				
Comments: 2	2 and tank is	300 gal	Claster Fir					
Slopets	ves are good c			but no sources				
Site status at	conclusion of Time of							
•	Verify that controls a							
•	Power is on to all cor	nponents.						
•	Revisit all componen	ts to verify lids are	secure.					
•	Gather all tools for re	moval from the sit	te.					
•	Verify that no sewage	e is on the ground	surface.					
Using this we	orksheet, write a narrati	ive report of the in	spection results and a	attach a site sketch.				
<del>-</del>	ndicates the condition on. It does not guarantee	-	, ,					
Signature of	Certified inspector:	John Me	Maler	Date: 3-19-10				
	:	<b>N</b>	LINI seed	Certificate #: Q979				
Address:		SEPTIC	LIN MAKER	0777				
Phone # <u>52</u>	5-462-2624	1500	TANK PUMPING					
		Winterse	St. Hwy. 92					
Provide a co	py of this report, the na	rrative report and s	sketch to the seller/ag	ent, buyer/agent, the				
county sanita	arian/environmental hea	althoffice, county	Recorder in the coun	ty the inspection was				
	Insite Wastewater Prog	ram		on Back				
502 E. 9th St			An	00-1-				
Des Moines,	IA 50319		May	on back				
			,					

120+2 Street 100 100