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LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

		SFEROR: Maurice R. Hay and Joyce A. H	Iay		
Αc	ldre	ss 2828 St. Charles Road, St. C.	harles, IA 50240		
		Number and Street or RR	City, Town or P.O.	State	Zip
		SFEREE: Jason Myli and Kristin J. Myli			
Αc	ldre	ss 401 S. 8th Avenue, Winterse	et, IA 50273 City, Town or P.O.	State	Zip
		ss of Property Transferred: con County			
		Number and Street or RR	City, Town, or P.O.	State	Zip
N W	ortho	east Quarter (NE ¹ / ₄) of Section Eight of the 5th P.M., Madison County, Id	if necessary) Parcel "C" located in the nteen (18), Township Seventy - five (75) owa, containing 15.360 acres, as shown 8, in the Office of the Recorder of Madie	i) North, Range Twent in Amended Plat of S	y - six (26)
		, <u>Q</u>			
		stated below or set forth on an	d on this property. The type(s), local attached separate sheet, as neces		atus are
2.		lid Waste Disposal (check one			
		in Attachment #1, attached to t	I site on this property and information	on related thereto is	provided
3.		zardous Wastes (check one)			
		Attachment #1, attached to this	his property and information related s document.	I thereto is provided	in
4.	Un	derground Storage Tanks (ch			
	\mathbf{x}		und storage tanks on this property. or fuel tanks, most heating oil tanks		
		There is an underground stora	ge tank on this property. The type(ted below or on an attached separa		

5.	Pri	vate Burial Site (check one)
	x	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 acknowledgmen
		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
In	farm	nation required by statements checked above should be provided here or on separate
		s attached hereto:
31	ieeta	s attached hereto.
_		
_		
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
		mar offer
Si	gnat	ure: 1) Qures 12 Hours (515) 462-6825
		(

FILE WITH RECORDER

DNR form 542-0960 (June 26, 2009)



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

Property information	
Current owner Morris AND JOYCE HAY Buyer KRISTIN MAYLI Realtor Mailing address 401 S. 87h AVE WINTERSET IA. 50273	
Buyer KRISTIN WINYLI Realtor	
Mailing address 401 S. 87h AVE WINTERSET IA. 50273	
Site Address/County 2828 ST. CHARLES Rd. MADISON COLL. Legal Description Clear STREAM	V
Legal Description CIERR STREAM	
No. of bedrooms 3 Last occupied? Records available 755	
Permit/installation date 8-13-79 Separation distances ok/no? <u>OK</u>	
Septic system information	
Septic tank(s): size material condition	
Tank pumped? date licensed pumper	
Septic/trash/processing tank: size 500 91/ material Plantic condition OK	
Tank pumped? YES date 5-7-2010 licensed pumper Thomas Bed'S	
Aerobic treatment unit (ATU) mfgr <u>C/EAR STREAM</u> size <u>500 9Al</u> Tank pumped? <u>YES</u> date <u>5-7-2010</u> licensed pumper <u>Thomas BROS</u> Maintenance contract? <u>YES</u> expiration date <u>2-28-201</u> service provider <u>Owled</u> T	
Condition O'K	
Pump tanks/vaults: type size condition	
Distribution system: distribution box outlets used condition	
Header pipe(s) # of lines Pressure dosed?	
Secondary treatment:	
length of absorption fields determined by	
condition of fields determined by	
type of trench material	
Size of cand filter determined by	
Size of sand filter determined by discharge pipe located?	
Effluent sample taken? YES Results 4-18-1016	
Media filters: type FARE ACCESS SAUD	
Maintenance contract? YES expiration date 2-28-20//service provider OWW I	
Condition	
NPDES General Permit No. 4: required? \(\square\ \frac{\fir\f{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}\fir\f{\frac{	



Time of Transfer Inspection Report (page 2)

Current owner	MORRIS	AND J	OYCE)	HAY	
Other compo	nents: Working?	5	disinfection	N/A wor	king?
Control box _	Ti	imers	inspection	ports	
Other compo	nents				
Overall cond	ition of the private sewa				
Acceptable?	YES		Unacceptable?		
	ch additional pages as ne				
Comments:	1				
Site status at	conclusion of Time of T		on;		
0 0 0 0	Verify that controls ar Power is on to all com Revisit all components Gather all tools for rer Verify that no sewage	ponents. s to verify lids ar noval from the s	e secure. ite.		
Using this wo	orksheet, write a narrativ	e report of the in	spection results.		
	y of this report, includin NR and the county Reco				
	dicates the condition of a. It does not guarantee				of
Name (print): Address:		W. Upsh	The Ve		5-6-2010 #: 88 11
THORE I	(3-A77-76)	46			

Feb. 08 2000 11:52AM PL

FHOWE NO. :

34 : HUSEL BINGS