



Document 2010 GW1926

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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

**REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT  
TO BE COMPLETED BY TRANSFEROR**

**TRANSFEROR:**

Name Arthur Neal Day and Marilyn Marie Day

Address 2432 160th St., Van Meter, IA 50261

Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name Kirk Dimler and Britta Dimler

Address PO BOX 133, St. Charles, IA 50240

Number and Street or RR City, Town or P.O. State Zip

**Address of Property Transferred:**

2432 160th St., Van Meter, IA 50261

Number and Street or RR City, Town, or P.O. State Zip

Legal Description of Property: (Attach if necessary) See Attached

**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)**

- All buildings on this property are served by a public or semi-public sewage disposal system.
- This transaction does not involve the transfer of any building.
- There is a building served by private sewage disposal system on this property or a building without any lawful sewage disposal system. 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 building served by 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.
- There is a building served by private sewage disposal system on this property. The buyer has executed a binding acknowledgment with the county board of health to install a new private sewage disposal system on this property within an agreed upon time period. A copy of the binding acknowledgment is provided with this form.
- There is a building served by 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. [Exemption #9]
- This property is exempt from the private sewage disposal inspection requirements pursuant to the following exemption [Note: for exemption #9 use prior check box]: \_\_\_\_\_.
- 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:**

One well 300 feet South of the house.

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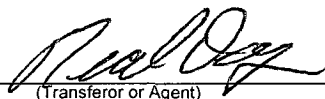
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**I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM  
AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.**

Signature: \_\_\_\_\_

  
(Transferor or Agent)

Telephone No.: ( 515 ) 462-1290

EXHIBIT "A"

A tract of land in the Northeast Quarter ( $\frac{1}{4}$ ) of the Northwest Quarter ( $\frac{1}{4}$ ) of Section Four (4), Township Seventy-six (76) North, of Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, described as follows: Commencing at the Northwest corner of the Northeast Quarter ( $\frac{1}{4}$ ) of the Northwest Quarter ( $\frac{1}{4}$ ) of Section Four (4), Township Seventy-six (76) North, Range Twenty-seven (27) West, thence 700 feet East to the point of beginning, thence West 700 feet to the Northwest corner of said quarter section, thence South along the West line of said quarter section 550 feet, thence Northeasterly to a point that is 700 feet Northeasterly from last described point and 440 feet Southwesterly from point of beginning, thence Northeasterly 440 feet to the point of beginning,



*Jordan's office*

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

Property information

Current owner Neal Day  
Buyer \_\_\_\_\_ Realtor Self  
Mailing address \_\_\_\_\_

Site Address/County 2432 - 1600 ch. St. Van Meter, Ia. Madison Co  
Legal Description \_\_\_\_\_

No. of bedrooms 3 Last occupied? is now Records available yes

original permit # 1476  
Permit/installation date 7-9-09 Separation distances ok/ no? OK  
Permit dated 9-13-09 # 058-09 to replace laterals

Septic system information

Septic tank(s): size 1000 gal material concrete condition good  
Tank pumped? yes date 7-12-2010 licensed pumper Mayer S.T. 75  
Septic/trash/processing tank: size \_\_\_\_\_ material \_\_\_\_\_ condition \_\_\_\_\_  
Tank pumped? \_\_\_\_\_ date \_\_\_\_\_ licensed pumper \_\_\_\_\_

Aerobic treatment unit (ATU) mfr \_\_\_\_\_ 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 good  
Header pipe(s) 2 # of lines 3 Pressure dosed? \_\_\_\_\_

Secondary treatment:  
length of absorption fields 400 ft. determined by Walking 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 \_\_\_\_\_

*Map on back* →

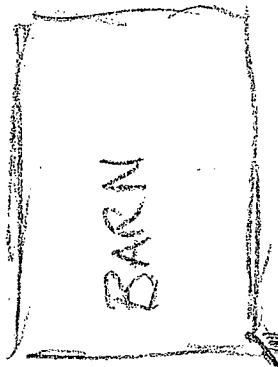
OLD HOUSE

FOR MODULAR ABM E



1000 GAL. SEPTIC TANK CONCRETE

DAD RD CO ROAD

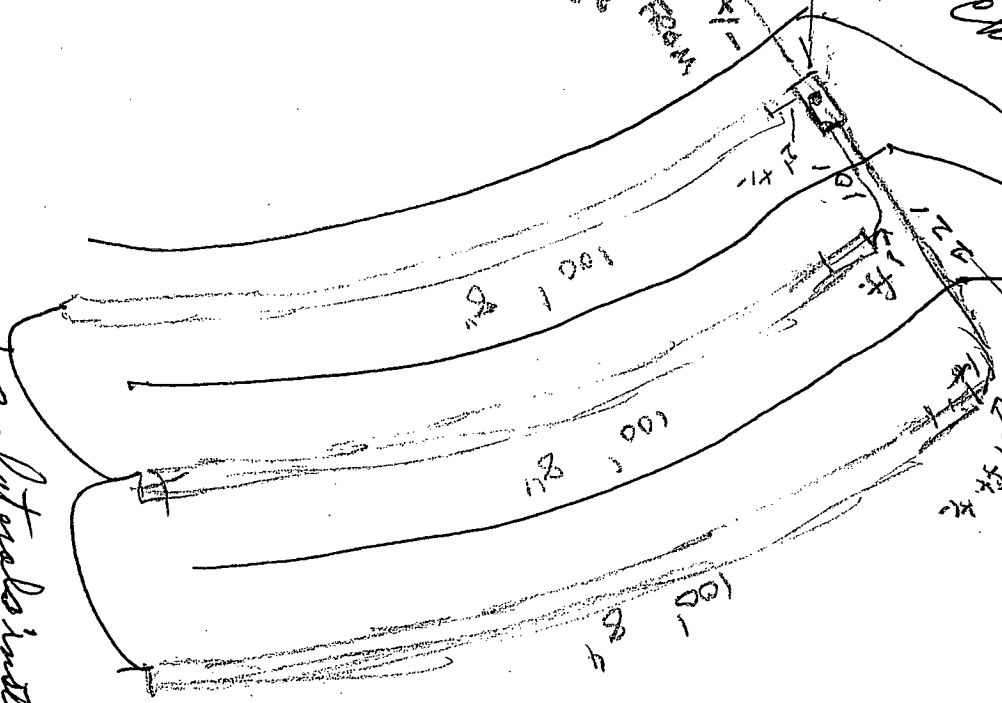


45-50' 1/2" TO BOX FROM

fence

New laterals  
Character-36" installed  
9-13-09

Permit # 058-09



3 - Laterals installed  
June - 1994  
Permit # 1436



### 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 septic tank was opened & pumped on 7-12-10*

*tank has two compartments & is in good cond on 7-12-2010*  
Explain (attach additional pages as needed): *the intake & outflow*  
*pefflers are in good cond. also has effluent filter in outflow tee.*

Comments: *The lateral field was replaced in 9-13-09 and is*  
*in good cond.*  
*also no water is on top of ground on 7-12-10*

#### 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*

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* Date: *7-12-10*  
 Name (print): JOHN MAYER Certificate #: *8979*  
 Address: SEPTIC TANK PUMPING  
 Phone # *515-402-2624* 1509 St. Hwy. 92  
Winterset, IA 50273-8411

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. 9<sup>th</sup> St.  
Des Moines, IA 50319

*Pictures on Back →*