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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

## REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR: Name Michael W. Hamilton and Angelica H. Hamilton						
Αc	ddress 2391 148th St., Winterset, IA 502	273				
,	Number and Street or RR	City, Town or P.O.	State	Zip		
	RANSFEREE: ame Paul B. Nardini					
Ac	ddress 2390 Hwy 30, Tama, IA 52339 Number and Street or RR	City, Town or P.O.	State	Zip		
Αc	ddress of Property Transferred:					
	Number and Street or RR	City, Town, or P.O.	Slate	Zip		
	Wells (check one)  ☑ There are no known wells situated on to stated below or set forth on an attack Solid Waste Disposal (check one)	this property. The type(s), loc		tus are		
۷.	<ul> <li>There is no known solid waste disposal site on this property.</li> <li>There is a solid waste disposal site on this property and information related thereto is provided in Attachment #1, attached to this document.</li> </ul>					
3.	Hazardous Wastes (check one)  ☑ There is no known hazardous waste ☐ There is hazardous waste on this pr Attachment #1, attached to this doo	e on this property. Toperty and information related	I thereto is provided i	n		
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 tar	nk on this property. The type(	s), size(s) and any kr	nown		

substance(s) contained are listed below or on an attached separate sheet, as necessary.

5.	Pri	vate 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 s heet, as
		necessary.
6.	Pri	vate Sewage Disposal System (check one)
		All buildings on this property are served by a public or semi-public sewage disposal system.
	X	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 acknowl edgment
		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 acknowledgm ent 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
		pormit number
Inf	form	nation required by statements checked above should be provided here or on separate
sh	eets	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.
		To Mashol Drawitton
Si	gnat	ure:

## Addendum

1. The North 100 Rods of the West Fractional Half (½) of the Southwest Quarter (¼) excepting therefrom a tract of land in the Southwest corner thereof 15 Rods in length North and South and 12½ Rods in width East and West, and excepting therefrom a tract of land in the Northwest corner thereof described as commencing at the intersection of the South and East lines of the public highway on the North and West sides thereof and running South 320 feet, thence East 558 feet, thence North 320 feet, thence West 558 feet to the point of beginning, all in Section Thirty-one (31), Township Seventy-seven (77) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa