

Book 2011 Page 568 Type 43 001 Pages 5 Date 2/28/2011 Time 3:42 PM Rec Amt \$.00

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

			MIPLETED BY TRANSFEROR						
		SFEROR: Heidi L. Coburn							
Δd	dra	ss 1739 320th St., Lorimor, IA 501-	49						
Λu	uie	Number and Street or RR	City, Town or P.O.	State	Zip				
		Nomber and direct of the	Only, Town of T.O.	Oldic	214				
		SFEREE:							
Na	me	Daniel Kirkland and Heidi Kirkland	<u>d</u>						
		2600 O '1 D'1 E '1 W'	L I A 50073						
Ad	dre	SS 2699 Quail Ridge Trail, Winters	et, IA 502/3 City, Town or P.O.	State	Zip				
		Nomber and direct of Title	only, rounder to	Oldic	2.10				
hΑ	dre	ss of Property Transferred:							
17	39	320th St., Lorimor, IA 50149							
		Number and Street or RR	City, Town, or P.O.	State	Zip				
				(1) (1) (2)					
Le	gal	Description of Property: (Attach if no	ecessary) The Southeast Quarte	er (1/4) of the Southw	est				
		er (1/4) of Section Twenty (20), in To		n, Range Twenty-eig	ght (28)				
_W	est	of the 5th P.M., Madison County, Id	owa						
4	١٨/ ـ	lle (aback ana)							
١.		ells (check one)	and their managements.						
		There are no known wells situated		<i></i>					
	X	There is a well or wells situated on		` '	itus are				
_	ο.	stated below or set forth on an atta	acned separate sneet, as necess	sar y.					
۷.		lid Waste Disposal (check one)							
	X	There is no known solid waste disp							
	\sqcup	There is a solid waste disposal site		n related thereto is p	provided in				
_		Attachment #1, attached to this document.							
ა.		zardous Wastes (check one)							
		There is no known hazardous wast							
		There is hazardous waste on this p		thereto is provided	in				
		Attachment #1, attached to this do							
4.	Un	derground Storage Tanks (check							
	X	There are no known underground s							
		small farm and residential motor fu	uel tanks, most heating oil tanks	, cisterns and septic	tanks, in				
		instructions.)							
		There is an underground storage to							
		substance(s) contained are listed to	oelow or on an attached separat	e sheet, as necessa	r y.				

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.			
		This transaction does not involve the transfer of any building.			
	X	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.			
	X	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				
Inf	orm	nation required by statements checked above should be provided here or on separate			
		s attached hereto:			
Tł	ere	is a well located SE of the house by the light pole.			
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS			
		FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT			
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.			
Sig	gnat	ure: Telephone No.: (515) 462-9292			
`		Mransferor or Agent)			



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

Froperty information	
Current owner, Heidi Cobern Buyer Kirkland Realtor Cowned Bridge Real	
Buyer Kirkland Realtor Coward Bridge Real	tyllis
Mailing address	
Site Address/County 1739-320 th ff. Sorimor, La-Manager Legal Description	dison
No. of bedrooms 3 Last occupied? is now Records available Mo	
Permit/installation date Separation distances ok/ no?	
Septic system information	
Septic tank(s): size 750 gal. material concrete condition Pool	
Tank pumped? <u>Mes</u> date 1-7-1/ licensed pumper Mayor 51.75	<u></u>
Septic/trash/processing tank: size material condition	
Tank pumped? date licensed pumper	
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 Mone outlets used condition	
Header pipe(s) # of lines Pressure dosed?	
Secondary treatment: did not find	
length of absorption fields determined by	
condition of fields determined by	
type of trench material—	
Size of sand filter determined by	
Vent pipes above grade? discharge pipe located?	
Effluent sample taken? Results	
Media filters: type	
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 component		41-1-2	
Alarms	Working?	disinfection	working?
Control box	Timers	inspection port	s
Other component	is		***·
O , 			
Overall condition	of the private sewage disposa	l system	
Report system sta	atus the septic syst	en et 1939-320	the foremon
has a Ron	ditional pages as needed:	For De	
Explain (attach a	dditional pages as needed):	retark has one	constant o
has no in	let & outlet baffles	- did not find	a destibox ond
Comments: dis	Inot find a latera	I field offer gro	
wasterf	bitchen goes out on	back Hard fr	m sump sugar
basement	- He sentio tank	was pilmped at	time of inspe
The seption	tack is 15 ft-Morth a clusion of Time of Transfer ins	of fathroom with	owjon North s.
Site status at con	clusion of Time of Transfer ins	spection:	ouse-
	erify that controls are set on the	e appropriate mode.	
• Pe	ower is on to all components.		
• R	evisit all components to verify	lids are secure.	
• G	ather all tools for removal fron	n the site.	
• V	erify that no sewage is on the	ground surface.	
•	sheet, write a narrative report o	-	
the inspection. I	It does not guarantee that it will	continue to function satisfa	ctorily.
	rtified inspector:	• / /	Date: /- 7-20
Name (print):		JOHN MAYER	Certificate #:89/19
Address:Phone # 515-9	W. 2-26-24 8	EPTIC TANK PUMPING	\$ a
\		- 1509 St. Hwy. 92	
Dunasida a annu a	of this report, the narrative repo	Interset, IA 50273-8411	
Provide a copy of	or this report, the narrative repo	ort and sketch to the sellerage	gent, buyer/agent, the
	n/environmental health office,	county Recorder in the coun	ty the inspection was
conducted and to	0;		
Ious DND Oss	ita Wastawatar Drassa		
502 E. 9 th St.	ite Wastewater Program		
=	50319		
Des Moines, IA	. JUDIA	· *	÷

TIME OF TRANSFER INSPECTION WAIVER BINDING ACKNOWLEDGEMENT for FUTURE INSTALLATION

This agreement is entered into this 18th day of February 2011 by and between Madison County Board of Health and Heidi Kirkland.

WHEREAS, it is understood the Iowa Administrative Code 567-69 requires an inspection of the private sewage disposal system on all property located in Iowa at the time of transfer.

WHEREAS, the property located at 1739 320th Street, Lorimor, Iowa is subject to the inspection, and the buyer Heidi Kirkland understands there is not a private sewage disposal system serving this property.

NOW THEREFORE, it is hereby agreed that the time of transfer inspection will not be required and agrees that the necessary private sewage disposal system to serve the property shall be installed and completed no later than the 1st day of August, 2011.

Dated the 18th day of August 2011.

PROPERTY BUYER

MADISON COUNTY BOARD OF HEALTH OR AUTHORIZED REPRESENTATIVE

Haidi Kirkland

Elton A Root

This instrument was acknowledged before me on Feb. 18, 2011 by Heide Richard

Notary Public