



Document 2011 GW693

Book 2011 Page 693 Type 43 001 Pages 5

Date 3/14/2011 Time 1:18 PM

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Kirk E. Naber and Stacey L. Naber

Address 1839 Fox Trail, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Jennifer L. Hirakawa

Address 126 - 380th Avenue, Grinnell, IA 50112

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

1839 Fox Trail, Winterset, IA 50273

Number and Street or RR

City, Town, or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) The Southeast Quarter (SE 1/4) of the Northeast Quarter (NE 1/4) of Section Nine (9), Township Seventy-five (75) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, EXCEPT Parcel "B" located thereon, containing 21.913 acres, as shown in Plat of Survey filed in Book 2002, Page 1891 on April 22, 2002, in the Office of the Recorder of Madison County, Iowa

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:

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) 462-3129



Time of Transfer Inspection Report

Property Information

Current Owner: Kirk & Stacey Naber

Buyer: Jennifer Herakawa Realtor: Larry Corkrean/Madison Co Realty

Mailing Address: 1839 Fox Trail Winterset IA 50273

Site Address/County: 1839 Fox Trl Winterset IA 50273

Legal Description _____

No. of bedrooms: _____ Last occupied: currently Records available: yes

Permit/ installation date: 048-05 6/2/05 Separation distances (ok/no?): ok

Septic System Information

Septic tank(s): Size: 1500 gal Material: plastic Condition: good

Tank pumped? Y N Date: 3/2/11 Licensed pumper: Forest Septic Svc

Septic/Trash/Processing tank: Size: _____ Material: _____ Condition: _____

Tank pumped? Y N Date: _____ Licensed pumper: _____

Aerobic treatment unit (ATU) mfr _____ Size _____

Tank pumped? Y N Date: _____ Licensed pumper: _____

Maintenance contract? Y N Expiration date: _____ Service provider: _____

Condition: _____

Pump tanks/vaults: Type: plastic Size: 500 gal Condition: good

Distribution system: Distribution box _____ Outlets used _____ Condition: _____

Header pipe(s): manifold No. of lines: 1 Pressure dosed? yes

Secondary Treatment:

Length of absorption fields: 170' Determined by: as built plans

Condition of fields: good Determined by: no leaking or ponding

Type of trench material: at grade mound/rock covered by dirt

Size of sand filter: _____ Determined by: _____

Vent pipes above grade? Y N Discharge pipe located? Y N

Effluent sample taken _____ Results: _____

Media Filters: Type: _____

Maintenance contract? Y N Expiration date: _____ Service provider: _____

Condition: _____



NPDES General Permit No. 4: Required? Y N Permitted? Y N NOI provided: _____

Time of Transfer Inspection Report

Other components:

Alarms: Y N Working: Y N Disinfection: Y N Working: Y N

Control Box: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:

Report system status: _____

Explain (attach additional pages as needed): _____

Comments: all components are in good shape and at time of inspection are in good working order

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.

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: Mike Golightly Date: 3-4-11

Name (print): Mike Golightly Certificate #: 6942

Address: 105 NW Elm Po Box 36 Earlham IA 50072

Phone #: 515-758-3926

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office in the county the inspection was conducted, the county recorder and to:

Iowa DNR Onsite Wastewater Program

Permit # 048-05 Nabeu Inspection 6/2/05
1859 Fox TRL

squint height 30"

