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INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

SCAN CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR: Name L. Dick Winkler and Diana F. Winkler								
Address 3108 Fawn Avenue; Lorimor, IA 50149								
		Number and Street or RR	City, Town or P.O.	State	Zip			
	TRANSFEREE: Name_Rosener Farms, Inc., an Iowa corporation							
Ac	ldre	ss 1891 - 345th; Vail, IA 51465	City, Town or P.O.	State	- 7io			
		Number and Street or RR	City, Town or P.O.	State	Zip			
Ac M	ldre adis	ss of Property Transferred: son County, Iowa						
		Number and Street or RR	City, Town, or P.O.	State	Zip			
1.	X	ells (check one) There are no known wells situated on the control of the control	d on this property. n this property. The type(s), location	(s) and legal sta	tus 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 dis There is a solid waste disposal sit Attachment #1, attached to this d	e on this property and information re	lated thereto is p	provided in			
3.		Hazardous Wastes (check one)						
		There is no known hazardous was There is hazardous waste on this Attachment #1, attached to this d	property and information related ther	eto is provided i	n			
4.	Underground Storage Tanks (check one)							
	X		storage tanks on this property. (Not fuel tanks, most heating oil tanks, cis					
			tank on this property. The type(s), si below or on an attached separate sh					

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 sheet, 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
	П	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
Inf	orm	nation required by statements checked above should be provided here or on separate
		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.
		201111111
Sig	ınat	ure: X Deck Wynkler Telephone No.: (641) 768-2260
		(Transferor or Agent)

Addendum

- 1. The following portions of Section 22, Township 74 North, Range 28 West of the 5th P.M., Madison County, Iowa:
 - a) SE¹/₄ NW¹/₄

EXCEPT the East 52½ rods thereof; and EXCEPT, also, the North 80 feet of the West 208 feet thereof;

b) West $107\frac{1}{2}$ rods of the SW $\frac{1}{4}$.

The following portion of Section 27, Township 74 North, Range 28 West of the 5th P.M., Madison County, Iowa:

(a) West $107\frac{1}{2}$ rods of the $N\frac{1}{2}$ $NW\frac{1}{4}$.