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Fee Amount: Revenue Tax:

LISA SMITH RECORDER Madison County, lowa

INDX V ANNO SCAN

CHEK

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

TRAM Name	ISFEROR: Amanda Louise Christensen f/k/a	n and Paula Jean Waldron Interset, IA 50273 IR Ony, form of P.O. State Zp. Tred: A 50273		
Addre	sec.			
receire	Number and Street of RR	City, Town or P.O.	State	Zip
	ISFEREE: Patrick Kelly Waldron and Paula J	ean Waldron		
Addre	ess 1671 Hwy 169, Winterset, IA 50	0273 City, Town at P.O.	State	<i>Z</i> :p:
Addre 1671	ess of Property Transferred: Hwy 169, Winterset, IA 50273			
	Number and Street or RR	City, Town, or P.O.	State	Zip
П	ells (check one) There are no known wells situated	on this property.		
	There is a well or wells situated or	this property. The type(s), locat		tus are
9 E-	stated below or set forth on an att	ached separate sheet, as necess	ary.	
	lid Waste Disposal (check one) There is no known solid waste disp	nocal cita on thic properly		
ם d	There is a solid waste disposal site Attachment #1, attached to this do	on this property and information	related thereto is	provided in
	zardous Wastes (check one)	in an internation		
	There is no known hazardous was There is hazardous waste on this particular Attachment #1, attached to this do	property and information related t	hereto is provided	in
	derground Storage Tanks (check	one)		
×	There are no known underground small farm and residential motor fi instructions.)	storage tanks on this property. (I uel tanks, most heating oil tanks,	Note exclusions su- cistems and septic	ch as tanks, in
	There is an underground storage t			

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DNR form 542-0960 (Sept. 1, 2010)

5.		vate Burlal Site (check one)
	X	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
_	D-1	necessary. vate Sewage Disposal System (check one)
0.		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
	w	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
Inf	orm	ation required by statements checked above should be provided here or on separate
		attached hereto:
Ls.		located mst of smaller farm pond
		•
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS
		FORM
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
: -	·	ire: Amanda J. Christing Telephone No.: (5/5) 979-0628
ΣίC	ınatı	ire: Umanda 3. Chartensia Telephone No.: (515) 979-0628

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DNR form 542-0960 (Sept. 1, 2010)

GROUNDWATER HAZARD STATEMENT.

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

ь н У	There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous. There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary. azardous Wastes (check one) There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules. There is hazardous waste on this property and the appropriate response or remediation actions, as the need therefore, have not yet been determined.
Fuithe	or the need therefore, have not yet been determined.
	otic located directly north of house-next moss system
	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Signa	ture: Canada & Christense Telephone No.: (5/5) 979-0628

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DNR form 542-0960 - Attachment #1 (Sept. 1, 2010)

Addendum

1. Parcel "D", located in the Southeast Quarter (¼) of Section One (1), Township Seventy-six (76) North, Range Twenty-eight (28) West and in the Southwest Quarter (¼) of Section Six (6), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., all in Madison County, Iowa, containing 63.004 acres, as shown in Amended Plat of Survey filed in Book 3, Page 505 on October 29, 1999 in the Office of the Recorder of Madison County, Iowa, EXCEPT Parcel "E", a part of Parcel "D", containing 23.323 acres, as shown in Plat of Survey filed in Book 2002, Page 5913 on December 4, 2002, in the Office of the Recorder of Madison County, Iowa, AND EXCEPT Parcel "F", a part of Parcel "D", containing 19.174 acres as shown in Plat of Survey filed in Book 2002, Page 5913 on December 4, 2002, in the Office of the Recorder of Madison County, Iowa.



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

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Time of Transfer Inspection Report

Other components			
Alarms	Working?	disinfection	working ⁷
Control box	Timers	inspection port	
Other components _			
Overall condition of	the private sewage disposal system	on good wor	HING TONOTON
Explain (attach addit	the private sewage disposal system Landfor AT To ional pages as needed): SCF	ATTACHED	page.
Comments.			
 Verify Power Revision Gather 	sion of Time of Transfer inspection that controls are set on the approximation to all components it all components to verify lids as all tools for removal from the synthat no sewage is on the ground	opriate mode re secure. ite.	
Using this worksheet	write a narrative report of the in	nspection results and a	tach a site sketch
the inspection. It does	the condition of the private sews es not guarantee that it will conti	oue to function satisfac	torily.
Signature of Certifier Name (print): 50 Address. 6.0 Phone # 20	d inspector Branches CAN KINARY 191 AN 2-4895	They, 70	Date: 7-10-09 Certificate # 133
Provide a copy of thi	s report, the narrative report and vironmental health office, county	sketch to the seller/age	ent, buyer/agent, the
Iowa DNR Onsite W 502 E. 9 th St. Des Moines, IA 503 I	_		

DNR Time of Transfer Report System Status

	11 Hwy 169 Date: 7-10-09 Technician BRIAN RINARS Sample From Dischnice pipe	
AT TIME	OF INSPECTION DO to NO FLOW	
Coming or	OF PIPE	
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خيف السيسيان الشريب		
2/E 3/2	DIAGRAM OF SYSTEM	
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