

Book 2012 Page 196 Type 43 001 Pages 2 Date 1/23/2012 Time 2:47 PM

Rec Amt \$.00

INDX **ANNO** SCAN

CHEK

LISA SMITH, COUNTY RECORDER

MADISON COUNTY IOWA

## **REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT**

TO BE COMPLETED BY TRANSFEROR

		NSFEROR: Exchange State Bank, an Iowa Cor	poration				
Αc	ddre	ess 322 Audubon Street, Adair, IA	50002				
		Number and Street or RR	City, Town or P.O.	State	Zip		
		Stephen W. Hood and Laura A. Ho	ood				
Αc	ldre	ess 424 West Washington Street, W	interset, Iowa 50273	State	Zip		
Αc	ddre	ess of Property Transferred: West Washington Street, Winterset, I		State	Zip		
		Number and Street or RR	City, Town, or P.O.	State	Zip		
M	ADIS We	ONE (1), OF WARD & TIDRICK'S ADDITION ON COUNTY, IOWA.  Pells (check one)  There are no known wells situated		DETICN), TO WINTER			
		There is a well or wells situated on stated below or set forth on an atta	this property. The type(s), location		tus are		
2.		Solid Waste Disposal (check one)					
		There is no known solid waste disp There is a solid waste disposal site Attachment #1, attached to this do	on this property and information r	related thereto is p	provided in		
3.		Hazardous Wastes (check one)					
		There is no known hazardous was: There is hazardous waste on this p Attachment #1, attached to this do	property and information related the	ereto is provided i	n		
4.	Un	derground Storage Tanks (check					
	X	There are no known underground s small farm and residential motor fu instructions.)	storage tanks on this property. (Neuel tanks, most heating oil tanks, c	ote exclusions suc isterns and septic	ch as tanks, in		
		There is an underground storage to substance(s) contained are listed to					

5.	Pri	Private Burial 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			
_		necessary.			
6.		vate Sewage Disposal System (check one)			
	<b>⊠</b>	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 whet her 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 cert ified 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 demoli sh 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			
		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.			
Sig	ınat	ure: Mule Flaffer Telephone No.: (641) 742-3201			
		Charles J. Gaffey, President			

FILE WITH RECORDER