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LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR: Name Ronald McDowell, Trustee of the James D. Jamison Irrevocable Trust Dated April 25, 2007						
Αc	Address 9827 Brookview Drive, Urbandale, Iowa 50322					
	Number and Street or RR (ity, Town or P.O.	State	Zip		
	TRANSFEREE: Name_Kent Kiburz					
Αc	Address 2303 W. Summit Street, Winterset, Iowa	50273 City, Town or P.O.	State	Zip		
Ac A	Address of Property Transferred: Ag Land	7,				
<u></u>	Number and Street or RR	City, Town, or P.O.	State	Zip		
	 Wells (check one) There are no known wells situated on this properties a well or wells situated on this properties at the below or set forth on an attached set 	perty. The type(s), loc		tus are		
۷.	 Solid Waste Disposal (check one) There is no known solid waste disposal site There is a solid waste disposal site on this Attachment #1, attached to this document. 		on related thereto is p	provided in		
3.	 Hazardous Wastes (check one) There is no known hazardous waste on this There is hazardous waste on this property attachment #1, attached to this document. 		d thereto is provided in	n .		
4.	4. Underground Storage Tanks (check one) There are no known underground storage t small farm and residential motor fuel tanks instructions.)	most heating oil tank	s, cisterns and septic	tanks, in		
	 There is an underground storage tank on the substance(s) contained are listed below or 					

5	Priv	vate Burial Site (check one)					
٠.		There are no known private burial sites on this property.					
	П	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.	Priv	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.					
		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]: *					
	Ц	The private sewage disposal system has been installed within the past two years pursuant to permit number					
		permit number					
nf	orm	ation required by statements checked above should be provided here or on separate					
sh	eets	attached hereto:					
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS					
	FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.						
		James & Jamisun Irrevocable Tract.					
Sig	ınatı	ure:					
-		(Transferor or Agent)					

Addendum

1. All that part of the North Half (N1/2) of the Southeast Quarter (SE1/4) of the Southeast Quarter (SE1/4) and all that part of the Southeast Quarter (SE1/4) of the Southeast Quarter (SE1/4) of the Southeast Quarter (SE1/4) of Section Seventeen (17) lying East of the Center line of the channel of Grand River; and the West Sixty (60) Acres of the South Half (S1/2) of the Southwest Quarter (SW1/4), and the Northeast Quarter (NE1/4) of the Southwest Quarter (SW1/4), and the North Half (N1/2) of the Southeast Quarter (SE1/4) of Section Sixteen (16); all in Township Seventy-four (74) North, Range Twenty-nine (29) West of the 5th P.M., Madison County, Iowa.