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INDX V ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

SCAN CHEK

## REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSF							
Name	Dawn R. Wearmouth n/k/a						
Address	414 W. Carpenter Street, St. Charles, IA 50240						
	Number and Street or RR	City, Town or P.O.	State	Zip			
TRANSF	EREE:						
Name	William Steffens						
Address	2587 Hiatt Apple Trail, Wi	nterset, IA 50273					
	Number and Street or RR	City, Town or P.O.	State	Zip			
	of Property Transferred: att Apple Trail, Winterset, IA	A 50273					
Nun	nber and Street or RR	City, Town or P.O.	State	Zip			
1. Wells	Madison County, Iowa.  (check one)  nere are no known wells situate is a well or wells situate ated below or set forth on ar  Waste Disposal (check on	ed on this property. The type(s), local attached separate sheet, as necess	tion(s) and legal sta				
Th in <b>3. Hazaro</b> <b></b> Th Th	nere is a solid waste disposa Attachment #1, attached to dous Wastes (check one) nere is no known hazardous nere is hazardous waste on	al site on this property and information this document.  waste on this property. this property and information related the property and information related.					
Att  4. Under  Th  sm  ins  Th	tachment #1, attached to thi ground Storage Tanks (ch nere are no known undergro nall farm and residential mot structions.) nere is an underground stora	s document.	Note exclusions succisterns and septic	ch as tanks, in			

	rivate 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. P	rivate 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 which has or is required by law to
	have a sewage disposal system.
_	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 8982
	permit indinber 1914 4
Infor	mation required by statements checked above should be provided here or on separate
	ts attached hereto:
000	
	•
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
• ·	
Signa	ture: Dam Hackil Telephone No.: (641) 396-2865
	(Transferor or Agent)
	N I

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)



## Time of Transfer Inspection Report

- topeaty intompation
Current Owner: Tim & Dawn Hactiff
Buyer: William Stephens Realtor:
Mailing Address:
Site Address/County: 2587 Heatt Apple Trail Winterset In 5027
Legal Description As Abstract
No. of bedrooms: Z Last occupied: Occupied Records available: No.
Permit/ installation date: Separation distances (ok/20?):
Septic System Information
Septic tank(s): Size: 750 gal, Material: Conc. Condition: 900
Septic tank(s): Size: 750 gal, Material: Conc. Condition: gast.  Tank pumped? VV N Date: 4-20-/2 Licensed pumper: Fonct Septic Tank Law.
Septic Trash/Processing tank: Size: Material: Condition:
Tank pumped?
Aerobic treatment unit (ATU) mfgr Size
Tank pumped?  Y N Date: Licensed pumper.
Maintenance contract?
Condition:
Rump tanks/vaults: Type: Size: Condition:
Distribution system: Distribution box 485 Outlets used 2 Condition: Unable to level
Header pipe(s): No. of lines: Pressure dosed?
Secondary Treatment:
Length of absorption fields: 2 90 after al 4 Determined by: probing
Condition of fields:   wet   dry Determined by: grobing
Type of trench material: 1 3 inch pvc 1 four inch pvc
Size of sand filter: Determined by:
Vent pipes above grade? YN Discharge pipe located? YN N
Effluent sample taken Results:
Media Filters: Type:
Maintenance contract?
Condition
NPDES General Permit No. 4: Required?
4/2010 cmz/dso DNR Form 542-0191



## 2587 Liatt Apple Tk. Time of Transfer Inspection Report Wintusct 50273

Other components:			
Alarms: Alarms: Working: Alarms	Disinfection	. Clar las and	
Control Box: Timers:			orking: TYN
Other components:	inspe	ction Ports:	
Overall condition of the private sewage disposal s	vetem:		
Report system status: 500 atta	0		
Explain (attach additional pages as needed):			
Comments:		1.000	
Site status at conclusion of Time of Transfer inspe	etion:		
<ul> <li>Verify that controls are set on the appropriate r</li> <li>Power is on to all components.</li> <li>Revisit all components to verify lids are secure</li> <li>Gather all tools for removal from the site.</li> <li>Verify that no sewage is on the ground surface.</li> </ul>	San		
Using this worksheet, write a narrative report of the		e was all makes also a little with a	eT
This report indicates the condition of the private se not guarantee that it will continue to function satist	Water dienneal area	em at the time of the	inspection. It does
Signature of Certified Inspector:	Merston	Date;	4-20-12
Name (print): Chris Mershor		Certificate #:	8982
Address: fo Box 219	Ind.	Fa. 50/13	
Phone #: 515-061-2113			
Provide a copy of this report, the narrative report an ordering the inspection, the county sanitarian/environments	id sketch to the sel inmental health of	ler/agent, buyer/agen fice and to:	or the person
owa DNR	·		
rivate Sewage Disposal Program 02 E 9th St			
02 E 9 51 Des Moines IA 50319			
	÷		

## **DNR Time of Transfer Report System Status**

7087 45 44 And Til
Address: 2587 Hight Apple Trail Date: 4-20-12 Winterset Apple Trail 50273 Comments: Technician Chris Mershen  HI Waste Water from house drains to  septic system.
Comments: Technician Chris Mershon
All waster than house drains to
sartie system.
*
The tank is a 150 gal, single compartment
The tank is a 150 gal, single confortment concrete Lister tank in good condition.
The Distribution Box is a concrete bex.
lingula to love laterals leaving box are to
condition at boxx One lateral 15 4 inch pxc,
the other lateral 15 3 inch over The 3 inch
lateral is probing met and has some surtaking
at the end of the lateral. The 4men lateral
was not getting any water and probed dry.  There is a third pipe that comes into the D-B-x. We believe it is an abandoned grey
There is a third pipe that comes into
1)-B-x, We believe to is an abandon of the took
water line. It evers back along side of the fonts
This is not a guarantee!
This certifies the condition of the system.  Septic system at the time of the injection.
Septic system at the time of the inspection.
10l of
2 Harris
42010 cm/den DNR Form 542-0191
<b>1-11.07</b> ✓

2587 Hiatt Apple TR. Winterset 50273 N HOUSE