

Book 2012 Page 2556 Type 43 001 Pages 5 Date 8/31/2012 Time 11:47 AM

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INDX **ANNO SCAN**

LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

CHEK

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

Name Charles R. Hamilton Address 12174 NW 111 th Ave., Granger, IA 50109 Number and Street or RR City, Town or P.O. State Zip TRANSFEREE:						
Number and Street or RR City, Town or P.O. State Zip						
TRANSFEREE:						
TRANSFEREE: Name Neil DeWit						
Address 2510 160 th , Van Meter, IA 50261 Number and Street or RR City, Town or P.O. State Zip						
Address of Property Transferred:						
1654 McBride Ridge, Winterset, IA 502473 Number and Street or RR City, Town, or P.O. State Zip						
Legal Description of Property: (Attach if necessary)						
Lot Five (5) of Country Estates West located in the Southeast Quarter (1/4) and the Southwest Quarter (1/4) of Section Three (3), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5 th P.M., Madison County, Iowa. 1. Wells (check one) There are no known wells situated on this property. There is a well or wells situated on this property. The type(s), location(s) and legal status 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 disposal site on this property. There is a solid waste disposal site on this property and information related thereto is provided in Attachment #1, attached to this document. 3. Hazardous Wastes (check one) There is no known hazardous waste on this property. There is hazardous waste on this property and information related thereto is provided in Attachment #1, attached to this document. 4. Underground Storage Tanks (check one) There are no known underground storage tanks on this property. (Note exclusions such as small farm and residential motor fuel tanks, most heating oil tanks, cisterns and septic tanks, in instructions.)						

	There is an underground storage tank on this property. The type(s), size(s) and any known substance(s) contained are listed below or on an attached separate sheet, as necessary.
5.	Private Burial Site (check one)
	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	Private Sewage Disposal System (check one)
v.	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
Inf	formation required by statements checked above should be provided here or on separate
	eets attached hereto:
1 6	HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND
	IAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
	, , , , , , , , , , , , , , , , , , ,
	$a_1 + a_2 + \cdots + a_n + \cdots $
Sig	gnature: Charle R. Vanto Telephone No.: (515) 771 - 4028



Final Report on System Corrections

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

Property information
Current Owner Charles Hamilton Buyer Realtor Heather Starr
Mailing Address 12179 W NW Granger, IA 50109
Mailing Address 19119 W W Granger, LA Solo9
Site Address/County 1654 McBride Ridge Court
No. of Bedrooms Last Occupied? 1 year Disposal? Y/N Softener? Y/N H ₂ O Supply? YUN
Records Available 18 Permit/Installation Date 04/12 Installer Bedwell Builders
Septic System Information
Septic Tank(s): Size 1500 Material Plassic Condition 9000
Tank Pumped? Ves Date Licensed Fumper
Septic Tank(s): Size Soo Material Plastic Condition Good Tank Pumped? VC Date Licensed Fumper Septic/Trash/Processing Tank: Size Material Condition
Tank pumped? Date Licensed Pumper
Aerobic treatment unit (ATU) MFGR NA Size Tank Pumped? Date Licensed Pumper Maintenance Contract? Expiration Date Service Provider Condition
Pump Ttanks/Vaults: Type Size Condition
Distribution System: Distribution Box Plassic Outlets Used 4 Condition New Permit # Header Pipe(s) 4 DK Number of Lines 4 (54)
Secondary Treatment
Length of Absorption Fields 100 Determined by Probleg + map (1st reform Condition of Fields 9000 Determined by 44kr test on 7-16-12
Condition of Fields 9000 Determined by 4/440 test on 7-16-12
Type of Trench Material Chamber
Size of Sand Filter
Vent Pipes Above Grade? Discharge Pipe Located?
Effluent Sample Taken? Results
Media Filters: Type 1/1
Media Filters: Type Expiration Date Service Provider
Condition
Contract
NPDES General Permit No. 4: Required? Permitted? NOI submitted

10-2008

542-0191

1-641-396-2462



Jul 23 12 02:02p

Time of Transfer Inspection Worksheet

Other Components					
Alarms // Working?	Disinfection	Working?			
Control Box Timers	Inspection	Ports			
Other Components	· · · · · · · · · · · · · · · · · · ·				
Overall condition of the private sewage disposal system					
Acceptable? <u>Ves</u> Unacceptable?					
Explain (attach additional pages as needed): #1 Replaced Distribution Box (Parmit # 194/14) 1-17-12 Madison County #2Replaced Speed Jewler #3 Added 2-3 Black Dicton East Enclose Latterels # 4 Ann 1500 plus gallons of under thrush httereds On 7-16-12 with no sign of unitor Surfacing. #5 Replaced Druken lies on Septic tank. Comments: System recieved needed repairs and sacred to pass water test with no problems.					
Site status at conclusion of Time of Transfer inspection:					
Verify that controls are set on the appropriate representation to all components. Revisit all components to verify lids are secure Gather all tools for removal from the site. Verify that no sewage is on the ground surface.) .				
Using this worksheet, write a narrative report of the inspection results.					
Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.					
This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.					
Signature of Certified Inspector: Ala Boo Name (print): ()Cn Bedwall Address: 2924 Quaker 3x Chark	levell	Date: 7-23-/2 Certficate #: 7263			
Phone # 641-396-2462					

Madison County

Private On-Site Wastewater **Treatment System Construction Permit**

This permit shall be posted adjacent to the driveway or construction ingress/egress, and be viewable from the county (or private) road.

Permit Number:

041 - 12

Date Issued: July 17, 2012

Owner: Charles R Hamilton

Location: LOT 5 COUNTRY ESTATES WEST

Section 3 T76 R27 Union Two

This Construction Permit has been issued in accordance with the Madison County Environmental Health Regulations, authorizes the construction of a private on-site wastewater treatment system, and shall be null and void within one year from date issued.

All components of the system must be uncovered for inspection and the system must be approved before it can be put into operation. Notice for inspection must be received within 24 hours in advance (Monday - Friday). For inspection, contact the Madison County Office of Zoning and Environmental Health at (515) 462-2636.

This permit is not transferable.