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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

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

**TRANSFEROR:**

Name Craig C. Speer and Charlotte A. Speer  
Address 2403 Cumming Road, Winterset, IA 50273  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name Scott D. Hessenius and Dianne S. Hessenius  
Address 1676 Mueller Court, Winterset, IA 50273  
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:  
2403 Cumming Road, Winterset, IA 50273  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) See Exhibit "A" attached hereto and incorporated herein.

**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 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. Private 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 \_\_\_\_\_.

**Information required by statements checked above should be provided here or on separate sheets attached hereto:**

There is a well located East of the house.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.**

Signature: *Charalotte Speer* Telephone No.: (515) 707-0362

(Transferor or Agent)

## EXHIBIT "A"

A tract of land located in the Southwest Quarter ( $\frac{1}{4}$ ) of the Northwest Quarter ( $\frac{1}{4}$ ) of Section (16), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, described as follows, to-wit: Commencing at the Southwest corner of the Northwest Quarter ( $\frac{1}{4}$ ) of said Section Sixteen (16), thence East along the South line of the Northwest Quarter ( $\frac{1}{4}$ ) of said Section Sixteen (16) 923.4 feet, thence North  $0^{\circ}0'$  East 330.1 feet, thence West to the West line of said Northwest Quarter ( $\frac{1}{4}$ ), thence South 330.1 feet to the point of beginning.



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

Property information

Current owner CRAIG SPEER
Buyer SCOTT + DIANNE HESSENIUS Realtor LARRY WATTS
Mailing address 1676 MUELLER CT.

Site Address/County 2403 CUMMING RD. WINTERSET IA 50273

No. of bedrooms 4 Last occupied? CURRENT Disposal? (Y) N Softener? (Y) N H2O supply? WELL

Records available Permit/installation date Installer

Septic system information

Septic tank(s): size ? 1250 material Concrete condition good
Tank pumped? Yes date 9-12 licensed pumper Weigent John 237 #
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfr size
Tank pumped? date licensed pumper
Maintenance contract? expiration date service provider
Condition

Pump tanks/vaults: type size condition

Distribution system: distribution box Concrete outlets used 4 condition good
Header pipe(s) Yes # of lines 4
Pressure dosed? No

Secondary treatment:
length of absorption fields determined by
condition of fields determined by
type of trench material

Size of sand filter determined by
Vent pipes above grade? discharge pipe located?
Effluent sample taken? Results

Media filters: type
Maintenance contract? expiration date service provider
Condition

NPDES General Permit No. 4: required? permitted? NOI submitted



Time of Transfer Inspection Report (page 2)

Current owner CRAIG Speer

Other components:

Alarms ~ Working? ✓ disinfection ✓ working? ✓

Control box ~ Timers ~ inspection ports ~

Other components ~

Overall condition of the private sewage disposal system

Acceptable? yes Unacceptable?         

Explain (attach additional pages as needed): TANK was Riser & Concrete  
tees, Dist box is concrete in good condition  
Laterals are in good working condition

Comments:         

Site status at conclusion of Time of Transfer inspection:

- ✓ • Verify that controls are set on the appropriate mode.
- ✓ • Power is on 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.

yes No sewage on ground

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: Harkin Construction Date: 9-12  
 Name (print): MIKE HARKIN Certificate #: 9450  
 Address: 3311 140th St Cumming  
 Phone # 515 360-0399  
515 981-9465

SAM LATHERUM N ↑

