



Document 2012 GW3736

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Fee Amount:

Revenue Tax:

LISA SMITH RECORDER

Madison County, Iowa

INDX

ANNO

SCAN

CHEK

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

TRANSFEROR:

Name Stanley F Rogers

Address 2494 Wildrose Ct Saint Charles IA 50240
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Jacob Gookin

Address 316 Troy St Murray IA 50174
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

2494 Wildrose Ct Saint Charles IA 50240
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)
LOT 5 IN SEC 14 & 23 7.37A CUNNINGHAM ESTATES

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:

I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM

AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: Stanley F. Rogers
(Transferor or Agent)

Telephone No.: (515) 490-9452

GROUNDWATER HAZARD STATEMENT

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

a. Solid Waste Disposal (check one)

- There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.
- There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

b. Hazardous Wastes (check one)

- There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.
- There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

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

Signature: Stanley F. Kogus
(Transferor or Agent)

Telephone No.: (515) 490-9452



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

Property information

Current owner Stanley Rogers
Buyer
Mailing address
Realtor Downa Realty

Site Address/County 2494 Wild Rose Ct. off Charles Rd. 50240
Legal Description Madison Co.

No. of bedrooms 4 Last occupied? is now Records available Yes

Permit/installation date 10-3-80 Separation distances ok/ no? OK
1029

Septic system information

Septic tank(s): size 1000 gal material Concrete condition Good
Tank pumped? Yes date 8-30-12 licensed pumper Muffin S.T. 75
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfg 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) 3 # of lines 4 Pressure dosed?

Secondary treatment:
length of absorption fields 4 at 90' long determined by map & probing
condition of fields Good determined by walking & probing
type of trench material 4" x 4" gravel

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 provided



Time of Transfer Inspection Report

Other components:

Alarms _____ Working? _____ disinfection _____ working? _____

Control box _____ Timers _____ inspection ports _____

Other components _____

Overall condition of the private sewage disposal system

Report system status The septic system at 2494 Wildrose Pt.

Explain (attach additional pages as needed): St. Charles is in good cond. The septic tank was opened & pumped on 8-30-12. The tank has

Comments: two compartments & into the outflow baffles are in place. also no cracks in tank - water was at correct level before pumping the det. box was unsecured but was in good cond. & all laterals took water & all gray water goes to septic tanks on 9-15-12

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 None on 9-15-12

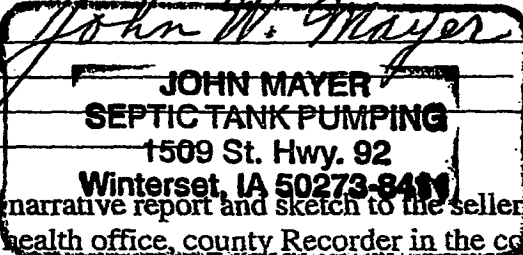
Done Done

Using this worksheet, write a narrative report of the inspection results and attach a site sketch.

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: John W. Mayer
Name (print): _____
Address: _____
Phone # 515-462-2624

Date: 9-15-12
Certificate # 8979

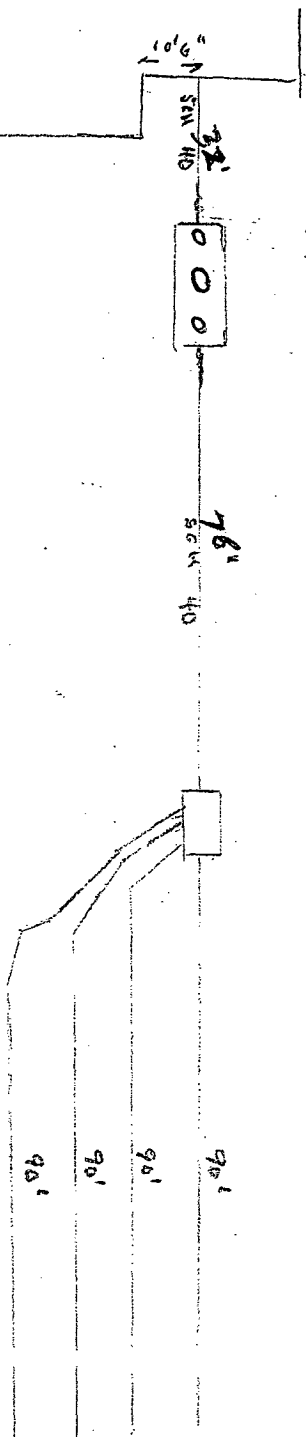
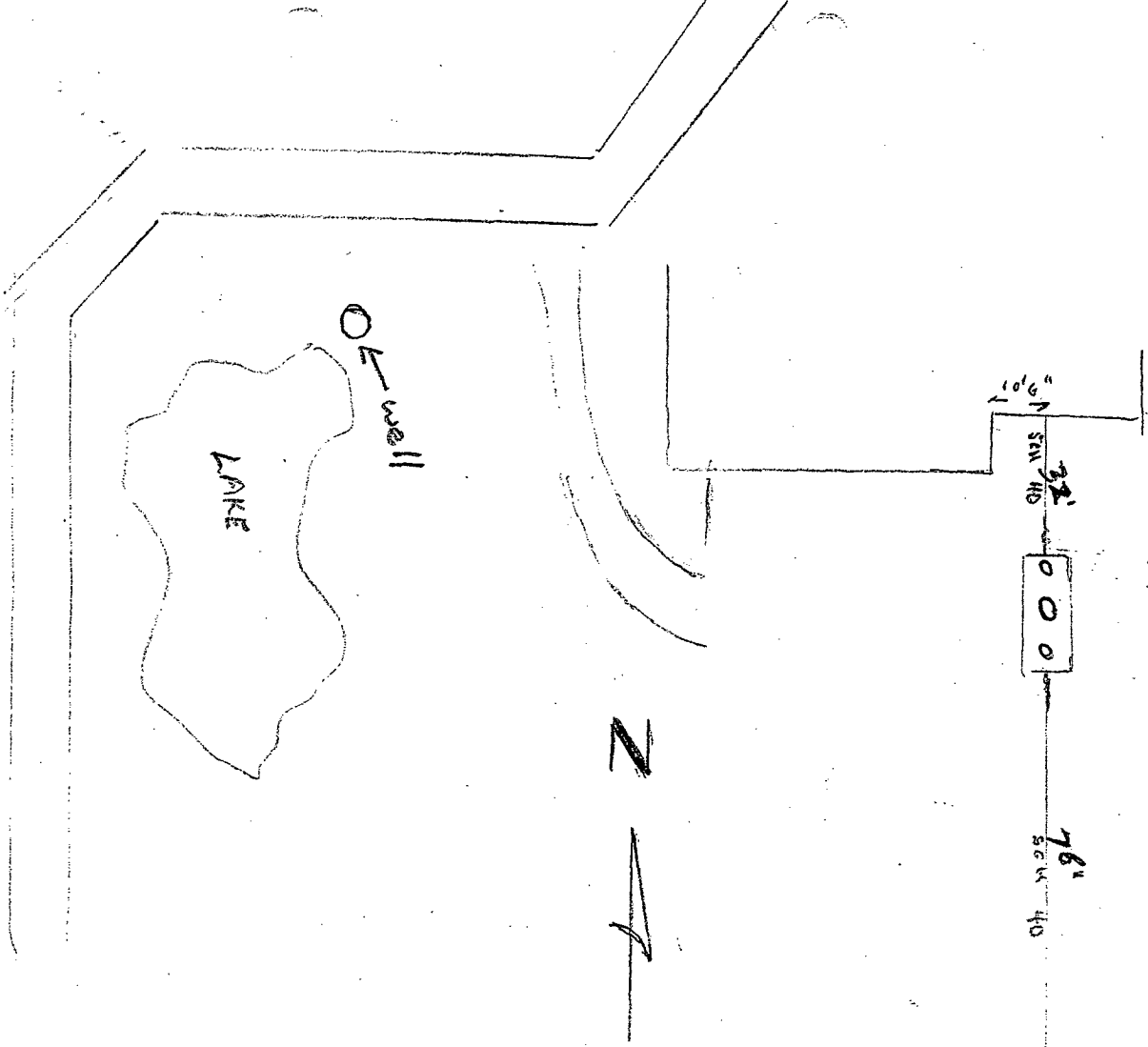


Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319

Map on Back ->

Permit 1029
10-3-80



INSPECTED: 11-24-80
INSTALLED BY: DAN CUMMINGS
PAPER'S

Shirley K. Leavell
Sanitarian