



Document 2013 GW526

Book 2013 Page 526 Type 43 001 Pages 9

Date 2/19/2013 Time 3:42 PM

Rec Amt \$.00

INDX
ANNO
SCAN

LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

CHEK

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

TRANSFEROR:

Name Jeffrey S. Strail

Address 2764 State Hwy 92, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Brian R. Leech

Address 2764 State Hwy 92, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2764 State Hwy 92, Winterset, IA 50273

Number and Street or RR

City, Town, or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) _____

See Addendum

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: _____

(Transferor or Agent)

Telephone No.: (515) 491-0626

Addendum

Parcel "H" located in the Southwest Quarter (1/4) of the Northeast Quarter (1/4) of Section Twenty-five (25), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, containing 4.067 acres, as shown in Plat of Survey filed in Book 2006, Page 62 on January 4, 2006, in the Office of the Recorder of Madison County, Iowa.

Forest Septic Environmental Services, LLC
P.O. Box 219
Indianola, IA 50125
961-2113 964-1443 287-5029

February 18, 2013

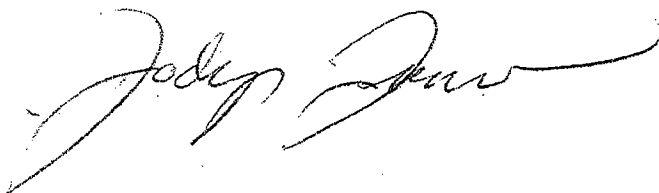
Septic Addendum: 2764 Highway 92
Winterset, IA 50273

This is to certify that there is now sufficient soil cover over the area of the mound that was surfacing at the time of the inspection on 12/19/12.

This is not a guarantee! This certifies that the septic system is no longer surfacing and was in good working condition on 2/15/13.

If you have any questions please feel free to contact us.

Thank you.

A handwritten signature in cursive script, appearing to read "Jody Forest".

Jody Forest
License #ST-95
Forest Septic Environmental Services, LLC
515-961-2331

PAULA FORREST <plforest@wildblue.net>

M New form arrived

1 message

ForestSeptic.com <admin@forestseptic.com>
To: service@forestseptic.com

① mkentfield@banklegacy.com

Contact Person

First & Last Name: Mike Kentfield Legacy Bank - 12901
Phone: 515-205-2949 University Clive Fa. 50325

About the Seller Agent/Realtor or Seller (if For Sale by Owner)

First & Last Name:
Company Name:
Street Address:
City: State: Zip:
Email:
Phone: Cell:

Pod

About the Home

Address of Inspection: 2764 HW 02
City: State: IA Zip: Winterset Ia. 50273
County: madison
Age of Septic System:
Number of Bed Rooms: 4
Occupied: Vacant
Water Service: Type: Rural

②

Legal Description: Township Name:
Section Number:

Mailing Address:

Owner's First & Last Name(s): Jeffery & Nancy ~~Strait~~ Strait
Owner's Mailing Address:
City: State: IA Zip:
Home Phone: Cell:

About the Buyer Agent/Realtor

Buyer Agent's First & Last Name: Brian Leach
Office Street Address:
City: State: IA Zip:
Email:
Office Phone: Cell:

DNK - ③

About the Buyer

Buyer's First & Last Name(s):
Cell: Home Phone:
Closing Date:
Comments:



Time of Transfer Inspection Report

Property Information

Current Owner: Jeffery & Nancy Strait
 Buyer: Brian Leach Realtor: _____
 Mailing Address: _____
 Site Address/County: 2764 HW 92 Winterset Ia. 50273
 Legal Description: As Abstract Madison Co.
 No. of bedrooms: 4 Last occupied: occupied Records available: yes
 Permit/ installation date: 11-29-07 Separation distances (ok/no?): _____

Septic System Information

Septic tank(s): Size: 2000 gal. Material: conc Condition: good
 Tank pumped? Y N Date: 12-19 Licensed pumper: Forest Septic Tank
~~Septic/Trash/Processing tank: Size: _____ Material: _____ Condition: _____
 Tank pumped? Y N Date: _____ Licensed pumper: _____
 Aerobic treatment unit (ATU) mfr _____ Size _____
 Tank pumped? Y N Date: _____ Licensed pumper: _____
 Maintenance contract? Y N Expiration date: _____ Service provider: _____
 Condition: _____~~
 Pump tanks/vaults: Type: conc Size: 500 Condition: good
 Distribution system: Distribution box _____ Outlets used _____ Condition: _____
 Header pipe(s): _____ No. of lines: _____ Pressure dosed? _____
 Secondary Treatment:
 Length of absorption fields: _____ Determined by: _____
 Condition of fields: _____ Determined by: _____
 Type of trench material: Pvc / Rock
 Size of sand filter: Double mound system Determined by: drawing
 Vent pipes above grade? Y N Discharge pipe located? Y N
 Effluent sample taken _____ Results: _____
 Media Filters: Type: _____
 Maintenance contract? Y N Expiration date: _____ Service provider: _____
 Condition: _____
 NPDES General Permit No. 4: Required? Y N Permitted? Y N NOI provided: _____



Time of Transfer Inspection Report

Other components: _____

Alarms: Y N Working: Y N Disinfection: Y N Working: Y N

Control Box: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:

Report system status: see at tatchel

Explain (attach additional pages as needed): _____

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.

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: Chris Mershon Date: 12-19-12

Name (print): Chris Mershon Certificate #: 8982

Address: P.O. Box 219 Ind. Ia 50125

Phone #: 515-961-2113

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent or the person ordering the inspection, the county sanitarian/environmental health office and to:

Iowa DNR
Private Sewage Disposal Program
502 E 9th St
Des Moines IA 50319

DNR Time of Transfer Report System Status

Address: 2064 HW 92 Date: 12-19-12
Winterset Ia. 50273

Comments: Technician Chris Merston

All waste water from house drains
to septic system

The tank is a concrete 2000 gal.
tank in good condition.

The pump pit is a 500 gal. concrete
pump pit in good condition.

- When cycling the pump the pump was
in good working condition.

Note: The alarm on the pump pit was
not working at the time of the inspection.

Note: When probing the mounds there
was a 3 foot wet area surfacing towards
~~the~~ the end of one of the mounds. See
drawing.

This is not a guarantee!
This certifies the condition of the
septic system at the time of the inspection.

Note: The covers to 3 out of the four
turf boxes were broken from a mower which
is cosmetic and does not affect the function
of the system.

Permit # 011-07 Strait Inspection AT GRASE MOUND 11/29/07
 2764 State Hwy 92

