

Document 2013 GW790

Book 2013 Page 790 Type 43 001 Pages 7 Date 3/18/2013 Time 3:59 PM Rec Amt \$.00

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LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

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

TRANSFEROR: Tammie L. Kenoyer Name Address 1524 S. 4th Avenue, Winterset, IA 50273 Number and Street or RR City, Town or P.O. State Zip TRANSFEREE: Michael E. Peiffer and Janelle M. Peiffer Name Address 2668 Norwood Avenue, Peru, IA 50222 Number and Street or RR City, Town or P.O. State Zip Address of Property Transferred: 2668 Norwood Avenue, Peru, IA 50222 Number and Street or RR City, Town or P.O. State Legal Description of Property: (Attach if necessary) See 1 in Addendum 1. Wells (check one) X 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) X 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) X 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) X 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)				
	X 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 shee				
	necessary.			
R	Private Sewage Disposal System (check one)			
٠.	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			
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	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			
_				
	ormation required by statements checked above should be provided here or on separate			
sh	eets attached hereto:			
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM			
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.			
	1			
.	7 : 1 Variation No. (515) 577 5502			
SIC	nature: / ame Z Kevyy Telephone No.: (515) 577-5583			
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Addendum

1. The Northwest Quarter (NW 1/4) of the Southeast Quarter (SE 1/4) of Section Twenty-nine (29), Township Seventy-five (75) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, EXCEPT the Northwest Quarter (NW 1/4) of the Northwest Quarter (NW 1/4) of the Southeast Quarter (SE 1/4) of said Section Twenty-nine (29), AND EXCEPT Parcel "D" located in the Northwest Quarter (NW 1/4) of the Southeast Quarter (SE 1/4) of said Section Twenty-nine (29), containing 10.37 acres, as shown in Plat of Survey fled in Book 2013, Page 597 on February 26, 2013, in the Office of the Recorder of Madison County, Iowa.



Time of Transfer Inspection Report

Property Information				
Current Owner: TAMMIE KENDYEM				
Buyer: Micheal PeiFFer Realtor: By UWNER Mailing Address: 2668 Nopwood Ave peru IA 50227				
Mailing Address: 2668 Nopwood Ave peru IA 50227				
Site Address/County: SAME AS ABOUTE - MAdison Co				
Legal Description AS ABSTRACT				
No. of bedrooms: 3 Last occupied: present Records available: Les				
Permit installation date: 042-06 Separation distances (ok/no?): 0t				
Septic System Information				
Septic tank(s): Size: 1250 gAl Material: (Overe te Condition: 6/C				
Septic tank(s): Size: 1250 9A Material: 10 Were the Condition: 61C Tank pumped? N Date: 2-25-13 Licensed pumper: Forest Leptic				
Septic/Trash/Processing tank: Size: Material: Condition:				
Tank pumped?				
Aerobic treatment unit (ATU) mfgr Size				
Tank pumped?				
Maintenance contract? Y N Expiration date: Service provider:				
Condition:				
Pump tanks/vaults: Type: Size: Condition:				
Distribution system: Distribution box $465 - fLASToutlets$ used 5 Condition: ot				
Header pipe(s): No. of lines: Pressure dosed?				
Secondary Treatment:				
Length of absorption fields: Determined by: Lounty Records				
Condition of fields: BK - PRY Determined by: Proping				
Type of trench material: Charn 8 M				
Size of sand filter: Determined by:				
Vent pipes above grade?				
Effluent sample taken Results:				
Media Filters: Type:				
Maintenance contract? YN Expiration date: Service provider:				
Condition:				
NPDES General Permit No. 4: Required? Y N Permitted? Y N NOI provided: 4/2010 cmz/dao DNR Form 542-0191				



Time of Transfer Inspection Report

Other components:					
Alarms: YN Working: YN Disinfection: YN Working: YN N					
Control Box: Timers: Inspection Ports:					
Other components: Sump pring 0 FTECTUR pump pita					
Overall condition of the private sewage disposal system:					
Report system status: See NoTes					
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: Date: 2-23-73					
Name (print): Bright RINAPID Certificate #: 8805					
Address: f. O. Box 219 FUCKANOBLA FA SUIS					
Phone #: 202-48-55					
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: 1668 Nochwood Ave	Date:2	2-25-13
Comments: All Wassewafer From House INTO Sepisic System	Technician Brian	Fo
1250 gillon Concrete & Compa with Risers & Exposent	thent Spance	TANK
plasme Pistruarted Bux with speed Lovelers used For All took water At time	H BATTLE AND 5 Chomber Lo UF the INSpect	teral, AND
THIS IS NOT A 9: THIS CERTIFIES the Spent WAS IN GOOD US. AT time of the	laranter OTIC SYSTEM LEING CONCRETO TO SPECTION	\(\lambda \)

DIAGRAM OF SYSTEM

See County Records

, Cliffer of 1250 gal Tank / septic Tank North-