



Document 2013 GW1975

Book 2013 Page 1975 Type 43 001 Pages 7

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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

CHEK

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

**TRANSFEROR:**

Name Alan M. Brose and Kellie J. Brose

Address 431 North Main Street, Osceola, IA 50213

Number and Street or RR

City, Town or P.O.

State

Zip

**TRANSFeree:**

Name David Delong and Mindy Delong

Address 200 S. 15th Avenue W, Newton, IA 50208

Number and Street or RR

City, Town or P.O.

State

Zip

**Address of Property Transferred:**

3209 Clanton Creek Road, Peru, IA 50222

Number and Street or RR

City, Town or P.O.

State

Zip

**Legal Description of Property: (Attach if necessary)**

**Parcel A located in the Southwest Quarter of the Northeast Quarter (SW<sup>1</sup>/<sub>4</sub>NE<sup>1</sup>/<sub>4</sub>) of Section Twenty-eight (28), Township Seventy-four (74) North, Range Twenty-seven (27) West of the 5<sup>th</sup> P.M., Madison County, Iowa, containing 5.00 acres, as shown in Plat of Survey filed in Book 2003, Page 7114 on December 1, 2003 in the Office of the Recorder of 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 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.: \_\_\_\_\_

6/27/13

**Kephart Construction  
310 West Clanton Street  
St.Charles, IA 50240**

**April 22, 2013**

I was contacted by Kelly Brose for a time of transfer inspection at a residence, she owns 3209 Clanton Creek Road, Peru, IA. I obtained some information on this property from Madison County Sanitarian on Apr. 19, 2013. It was not inspected at the time of installation, but they did have a map, from the contractor who installed them system.

I noticed this was a 2000 gal. Vanderpool tank with a 40 x 18 open discharge sand filter that was vented properly. As far as I know the residence has never been occupied. I observed the tank was concrete. Influent side has a baffle and shows no sign of being above normal levels. The effluent side also has a baffle with an effluent filter that was clean. No sign of any solids in tank at all. I had the tank pumped by a licensed pumper on 4-22-2013.

I collected a discharge sample on 4-10-2013 and sent it to the State Hygienic Lab. Received Lab report on 4-22-2013. The BOD was 20. A copy of this report is attached. At the time I collected the sample there was nothing around the discharge area, except clean water & vegetation. Effluent out of discharge pipe was clear & no odor.

As of this time of inspection, in my opinion this is a good working system for this size of home.

Kephart Construction

*Kephart Construction*

Clint Kephart

*Clint Kephart*

**Certified Inspector  
IOWWA Certified Installer  
515-210-5677**

The findings in this report are not any guarantee of the future performance of this system. The findings are based on the observations of the system at the time & day of the inspection only. Kephart Construction will not be liable for any hidden or unforeseen damages to this system. The inspection has been performed in accordance with the guidelines set forth by the Iowa DNR & in compliance with IAC567-Chapter 69. All septic systems require regular maintenance & eventually require repairs.



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

Property information

Current owner Alan & Kelly Brose  
 Buyer \_\_\_\_\_ Realtor Remax, Indianapolis, IA  
 Mailing address 431 North main, Osceola, IA  
 Site Address/County 3209 Clanton Creek Rd., Peru, IA Madison Co.  
 Legal Description \_\_\_\_\_  
 No. of bedrooms 4 Last occupied? never Records available Some  
 Permit/installation date 2006(?) Separation distances ok/no? OK

Septic system information

Septic tank(s): size 2000 material concrete condition good  
 Tank pumped? yes date 4-22-13 licensed pumper ST307  
 Septic/trash/processing tank: size \_\_\_\_\_ material \_\_\_\_\_ condition \_\_\_\_\_  
 Tank pumped? \_\_\_\_\_ date \_\_\_\_\_ licensed pumper \_\_\_\_\_

Aerobic treatment unit (ATU) mfr none size \_\_\_\_\_  
 Tank pumped? \_\_\_\_\_ date \_\_\_\_\_ licensed pumper \_\_\_\_\_  
 Maintenance contract? \_\_\_\_\_ expiration date \_\_\_\_\_ service provider \_\_\_\_\_  
 Condition \_\_\_\_\_

Pump tanks/vaults: type \_\_\_\_\_ size \_\_\_\_\_ condition \_\_\_\_\_

Distribution system: distribution box yes outlets used 3 condition good  
 Header pipe(s) 6 # of lines \_\_\_\_\_ Pressure dosed? \_\_\_\_\_

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

Size of sand filter 18' x 40' determined by inspection  
 Vent pipes above grade? yes discharge pipe located? yes  
 Effluent sample taken? yes Results 20

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 See attached sheet.

Explain (attach additional pages as needed): See attached sheet.

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.

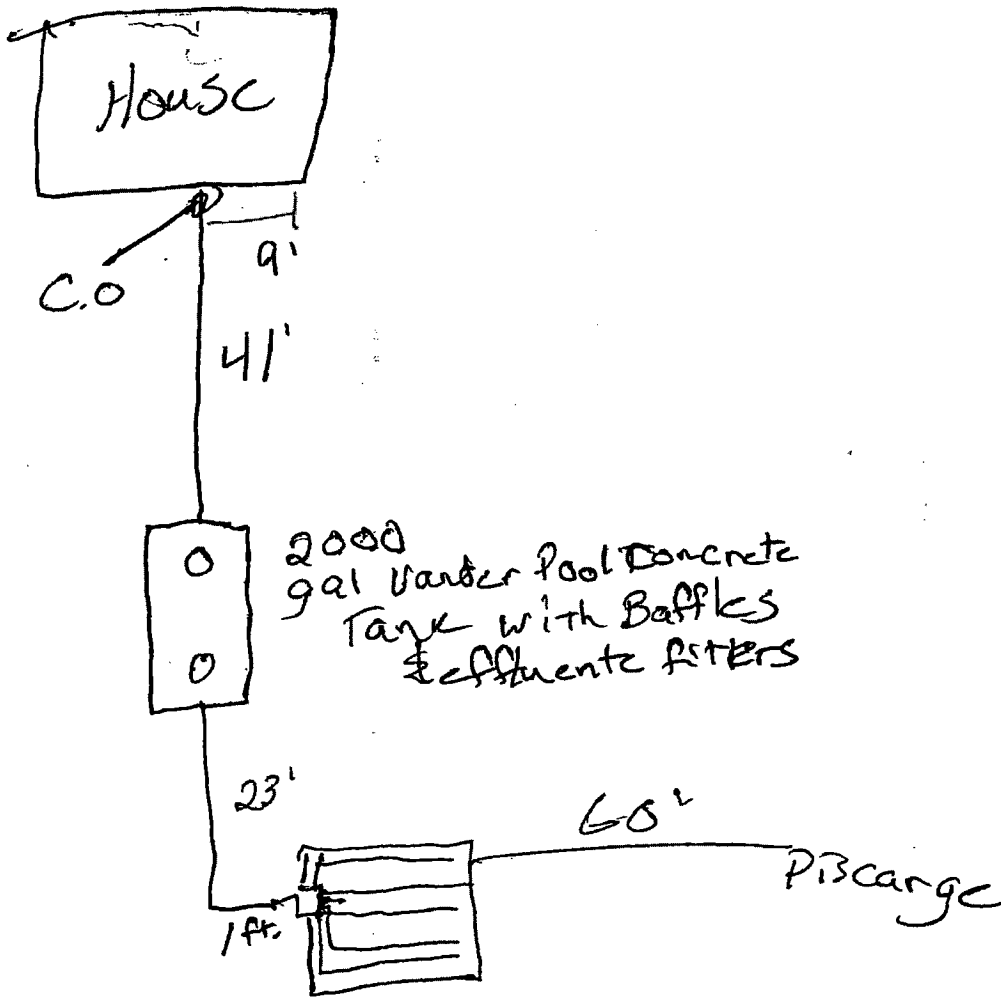
Using this worksheet, write a narrative report of the inspection results and attach a site sketch.

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: Clint Kephart Date: 4/22/2013  
 Name (print): Clint Kephart Certificate #: 8977  
 Address: 202 S. Walnut, St Charles, IA 50240  
 Phone #: 515 210-5677

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. 9<sup>th</sup> St.  
Des Moines, IA 50319



6 lines on top  
3 lines on Bottom



# State Hygienic Laboratory

*The University of Iowa*

CLINT KEPHART  
202 S WALNUT  
ST CHARLES, IA 50240

<i>Accession Number</i>	90948
<i>Date Sample Finalized</i>	2013-04-18 15:26
<i>Date Received</i>	2013-04-11 12:25
<i>Sample Source</i>	Non-Drinking Water
<i>Project</i>	
<i>Date Collected</i>	2013-04-10 02:06
<i>Collection Site</i>	open discharge sand filter
<i>Collection Town</i>	PERU
<i>Sample Description</i>	waste water clanton creek rd.
<i>Client Reference</i>	
<i>Collector</i>	kephart clint
<i>Phone</i>	515/210-5677

Note: Sample exceeded required temperature upon receipt.

### Results of Analyses

**BOD, 5 Day, SM 5210 B 18th**

Units	mg/L
Date Analyzed	2013-04-12 08:00
Analyst	PB, MGB

Analyzed In	Ankeny
Date Verified	2013-04-18 15:26
Verifier	LAF

Analyte	Result	Quant Limit
BOD, 5 Day	20	2

### Description of Units used within this report

mg/L = Milligrams per Liter

The result(s) of this report relate only to the items analyzed. This report shall not be reproduced except in full without the written approval of the laboratory.

Iowa Environmental Laboratory IDs are: Ankeny #397, Iowa City/Coralville #027, Lakeside #393.

If you have any questions, please call Client Services at 800/421-IOWA (4692) or 319/335-4500. Thank you.