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Revenue Tax:

LISA SMITH RECORDER Madison County, Iowa

I NDX ANNO **SCAN** CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name The Secretary of Housing and Urb	an Development		
Address 1670 Broadway, 21st Floor	Denver	CO	80202-4801
Number and Street or RR	City, Town or P.O.	State	Zip
TRANSFEREE: Name Cody D. Howard			
Address 1304 Armory Ave	Chariton	IA ·	50049
Number and Street or RR	City, Town or P.O.	State	Zip
Address of Property Transferred: 335 McKinley St N	Truro	IA	50257
Number and Street or RR	City, Town, or P.O.	State	Zip
 Wells (check one) ☐ There are no known wells situated of stated below or set forth on an attack one) Colid Waste Disposal (check one) ☐ There is no known solid waste disposal situated to this of the check one) ☐ Attachment #1, attached to this of the check one) ☐ There is no known hazardous wasted 	on this property. The type(s), local tached separate sheet, as neces sposal site on this property. te on this property and information locument.	sary.	
There is hazardous waste on this Attachment #1, attached to this d	property and information related locument.	thereto is provide	d in
4. Underground Storage Tanks (chec	storage tanks on this property.	(Note exclusions s , cisterns and sept	such as tic tanks, in
instructions.) There is an underground storage substance(s) contained are listed			

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DNR form 542-0960 (July 18, 2012)

<i>E</i> F	Drivete Buriel Site (check and)
_	Private Burial Site (check one)
_	There are no known private burial sites on this property.
L	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
^ r	necessary.
6. F	Private Sewage Disposal System (check one)
Ĺ	All buildings on this property are served by a public or semi-public sewage disposal system.
L	This transaction does not involve the transfer of any building which has or is required by law to
_	have a sewage disposal system.
	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.
	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.
L	
	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.
L	
	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]
✓	
_	the following exemption [Note: for exemption #9 use prior check box]: lowa Code 455B.172(11)(a)(1).
	permit number
Infor	mation required by statements checked above should be provided here or on separate
	ts attached hereto:
0.1100	
	· · · · · · · · · · · · · · · · · · ·
	LUCDEDV DEGLADE THAT LUAVE DEVIEWED THE INOTHIOTIONS FOR THIS
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
	Diam Mann Maril
Signa	ture: Telephone No.: (309) 736.3117
	DAWKI N. CAREONI
	C. in the last all and a contract of the contr

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