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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Edwin Ott

Address 2592 225th Trl Winterset IA 50273
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Timothy W Meyer

Address 3794 NW 128th St Urbandale IA 50323
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

2592 225th Trl Winterset IA 50273
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

16A S PT LOTS 7&8 - *Full legal attached*

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:

Well is located App NE of House, 100 yard from
House

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

AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: Edwin Ott Telephone No.: (515) 462-4659
(Transferor or Agent)

Legal Description of Property

All that part of Lots Seven (7) and Eight (8) of the Irregular Survey of the Southeast Quarter (1/4) of Section Thirty-four (34), in Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, lying South of the public highway, except a tract described as follows: Commencing at the Southeast corner of the Southeast Quarter (1/4) of said Section Thirty-four (34), running thence West 700 feet, thence North 660 feet, thence Northerly and Easterly following along the center of the established public road to a point on the East line of said Southeast Quarter (1/4), 1017 feet North of the Southeast corner of said Southeast Quarter (1/4), thence South to the point of beginning.

Weeks



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

Property information

Current owner Ed Otto
Buyer _____ Realtor Luna Realty Bob Weeks
Mailing address _____

Site Address/County 2592-225th Tel. Winterset, Mo. 64073
Legal Description _____ Madison Co.

No. of bedrooms 3 Last occupied? is now Records available yes

Permit/installation date 5-9-01 Separation distances ok/no? OK
↳ 1981

Septic system information

Septic tank(s): size 1250 gal. material Concrete condition good
Tank pumped? yes date 6-20-13 licensed pumper Mayer S.T. 75
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfr _____ size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type _____ size _____ condition _____

Distribution system: distribution box Plastic outlets used 5 condition good
Header pipe(s) 5 # of lines 5 Pressure dosed? _____

Secondary treatment:
length of absorption fields 60 ft determined by probing/sms
condition of fields good determined by walking probing
type of trench material chamber

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 sewage system at 2592 225th St Winterset, Mo.

Explain (attach additional pages as needed): is in good working cond - The septic tank was opened & pumped on 6-20-13 & tank has 2 compartments &

Comments: Intake & outflow baffles are in place - also no cracks in tank - The liquid level before pumping was at correct level - The dist. box was opened & all laterals took water on 6-20-13 - also field was clean & dry of waste - all gray water goes to system on 6-20-13

- 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 6-20-13

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 Date: 6-20-2013
 Name (print): _____ Certificate #: 8979
 Address: _____
 Phone #: 515-462-2624

JOHN MAYER
SEPTIC TANK PUMPING
 1509 St. Hwy. 92
 Winterset, IA 50273-8411

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

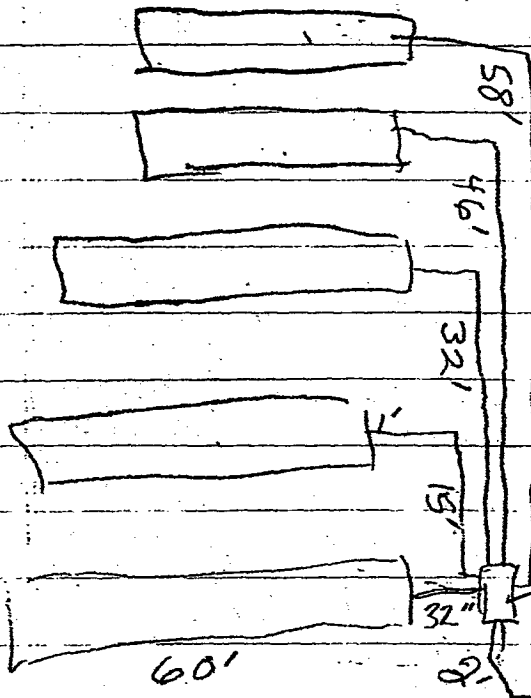
map on back

OIT 5/9/01

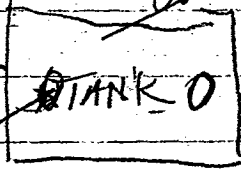
2592 225th Tr 1

Permit # 1981

North



Plastic dest. box
concrete tanks



lid
tank has effluent filter
in this end of tank
under approx. 1 ft of dirt

