



Document 2013 GW3318

Book 2013 Page 3318 Type 43 001 Pages 6

Date 10/31/2013 Time 11:53 AM

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name James J. Meyer

Address 2910 Cumming Rd Van Meter IA 50261
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Donald Dean Boston, II

Address 2510 Tracy Ave Van Meter IA 50261
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

1147 Prairieview Ave Van Meter IA 50261-8575
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

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: *James J. Reye* 10-29-2013 Telephone No.: (515) 594 7435
(Transferor or Agent)

EXHIBIT "A"

Parcel "A", located in the NE 1/4 of the SE 1/4 of Section 9, Township 77 North, Range 27 West of the 5th P.M., Madison County, Iowa, containing 9.198 acres, as shown in Amended Plat of Survey filed in Book 2013, Page 2339 on August 6, 2013, in the Office of the Recorder of Madison County, Iowa



Realtor

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

Property information

Current owner James Meyer
Buyer _____ Realtor Source Realty
Mailing address _____

Site Address/County 1147 Prairie View Ave. Van Meter, Ia. 50261
Legal Description _____ Audison, Co.

No. of bedrooms 2 Last occupied? unknown Records available yes
Permit/installation date 8-8-97 Separation distances ok/no? OK
1617

Septic system information

Septic tank(s): size 1000 gal. material Concrete condition Good
Tank pumped? yes date 6-7-2013 licensed pumper Maugh S.T. 75
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfg _____ 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 3 condition Good
Header pipe(s) 2 # of lines 3 Pressure dosed? _____

Secondary treatment:
length of absorption fields 3 at 104' determined by soil probing
condition of fields Good determined by walking & probing
type of trench material EQ 24

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 septic system at 1147 Prairie View Ave Winterset, Ia*

Explain (attach additional pages as needed): *in good cond. The septic tank was opened & pumped there was no cracks in tank. Has 2 compartments - inlet outflow*

Comments: *hopper area in place. The septic tank was opened & water was added to the tank. All took water on 6-7-13. Also tank was at correct level before pumping all gray water from system on 6-7-13 also lateral fields were clean & free of sewage - on top of ground on 6-7-13*

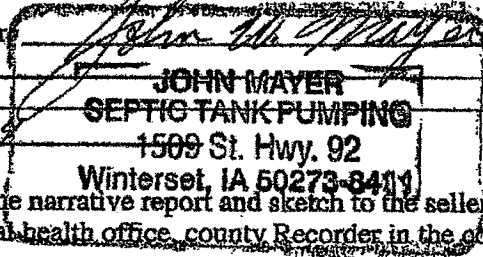
Site status at conclusion of Time of Transfer inspection:

- 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 6-7-13*

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.

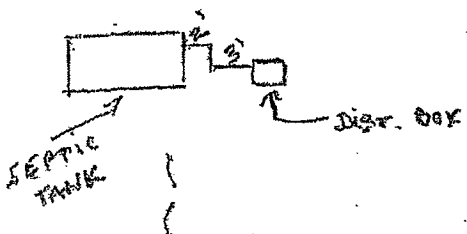
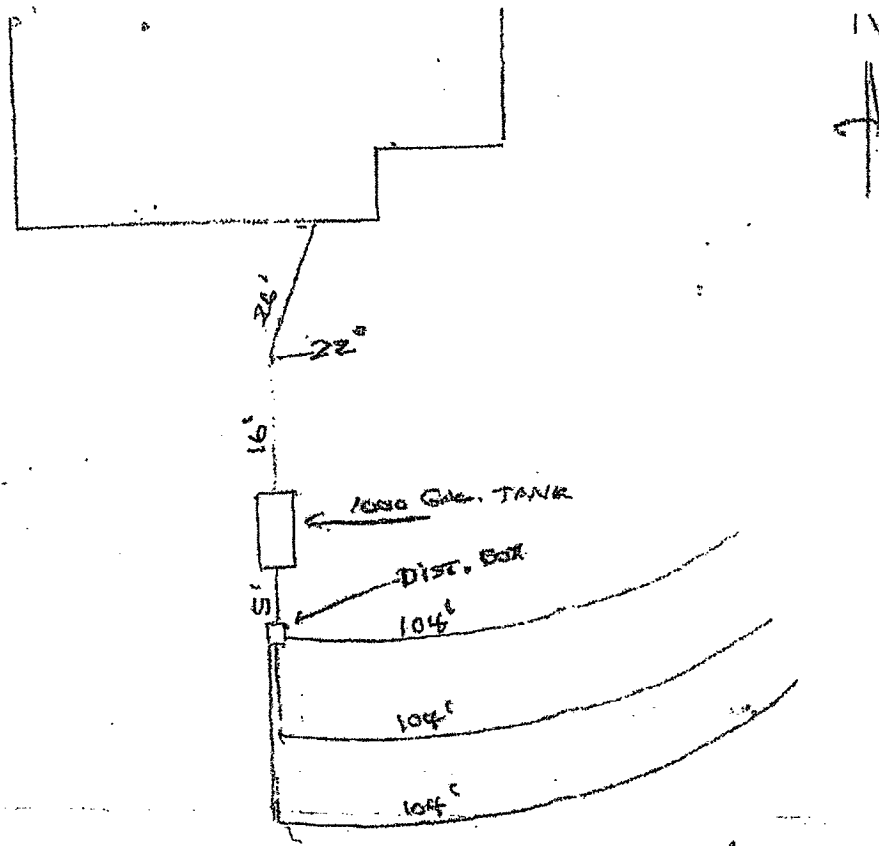
Signature of Certified inspector: *John W. Mayer* Date: *6-7-2013*
 Name (print): _____ Certificate # *8979*
 Address: _____
 Phone # *515-462-2629*



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 →



- 1000 GALLON CONCRETE LISTER SEPTIC TANK DEL. COMPARTMENT
- 1- DISTRIBUTION BOX
- 3- 104ft LATERALS
- EQUALIZER 24 USED

JAMES MEYER, OWNER
 MARK PLEVA, SEWER CONTRACTOR

Permit # 1617
 Inspection 8/8/97
 1147 Prairie View Ave

INSPECTED: 8/8/97
Jerry K. Crendalligan
 Sanitarian