



Document 2014 GW104

Book 2014 Page 104 Type 43 001 Pages 6
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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Hal Yeager

Address 2607 Quail Ridge Trl Winterset IA 50273-8156
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Michael J Zech

Address 201 NW 13th St Leon IA 50144
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

2607 Quail Ridge Trl Winterset IA 50273
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

3A W MID PT SW NW, *Sec. 25-76-27, 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:

well located on South side of house.

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.: _____

515) 462-2613

[Handwritten Signature]

Lama McKinley-yeager



Realty

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

Property information

Current owner Halt Tamra Yeager
Buyer _____ Realtor David Realty
Mailing address _____

Site Address/County 2607 - O-mail Ridge rd. Winters, Ca. 95773
Legal Description _____ Madison Co.

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

Permit/installation date ^{at # 1300} lot 7-21-91 Separation distances ok/ no? OK
_{2nd # 038-07 2nd-6-8-07}

Septic system information

Septic tank(s): size 1000 gal material Concrete condition good
Tank pumped? yes date 11-30-2013 licensed pumper Major S. P. 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 100 ft. determined by map & probing
condition of fields good determined by walking & probing
type of trench material 36" 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 septic system at 2607 - Emerald Ridge Trl.

Explain (attach additional pages as needed): Winterset, Ia. 50273 - is in good working cond. The septic tank was opened & pumped on 11-30-13 & there are no cracks in tank +

Comments: all - baffles are in place - also tank has 2 compartments also dest. box was opened & all laterals took water on 11-30-13 also no sewage on ground level - on 11-30-13 - also tank was at correct level before pumping

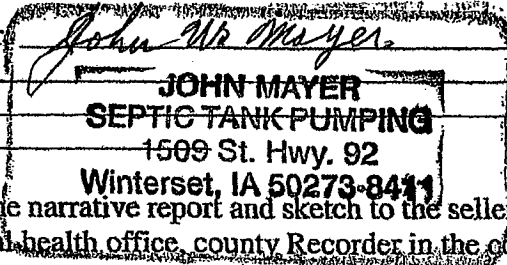
Site status at conclusion of Time of Transfer inspection:

- 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 11-30-2013

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 _____
Name (print): _____
Address: _____
Phone # 515-462-2624

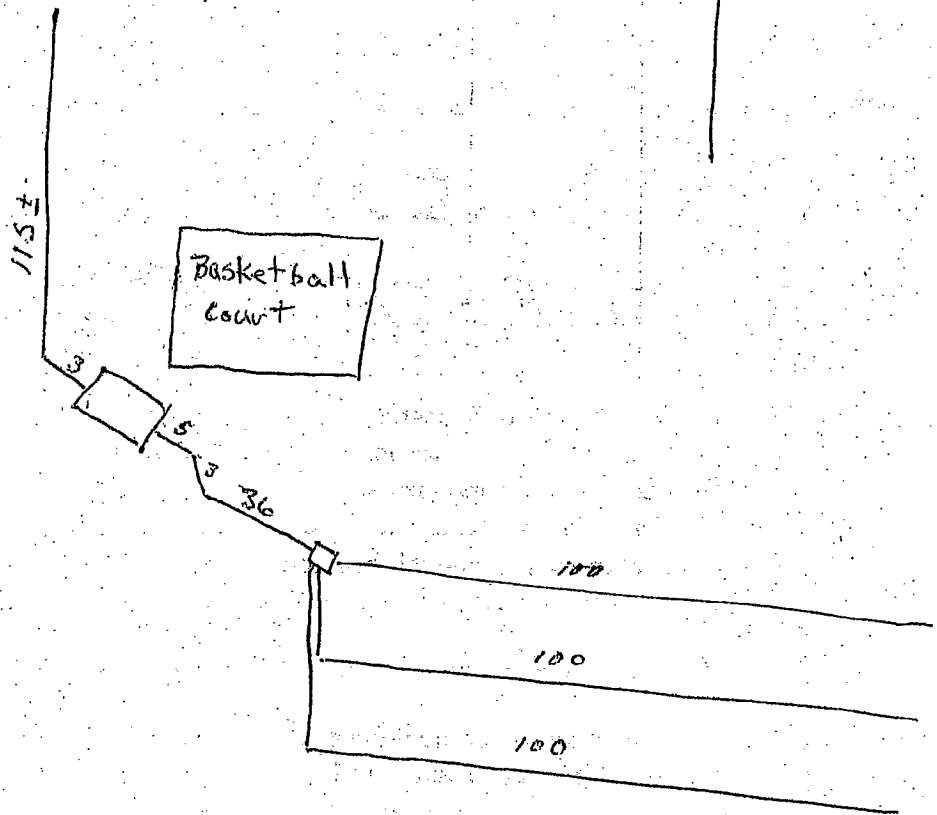
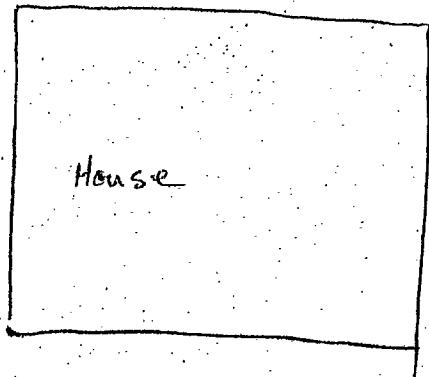


Date: 11-30-2013
Certificate #: 8979

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

Maps on Back ->



Permit # 038-07
Revision of # 1300

Madison County
Office of Zoning and
Environmental Health

**Authorization to Construct a
Private On-site Wastewater
Treatment System (POWTS)**

112 N. John Wayne Drive
P.O. Box 152
Winterset, IA 50273-0152
Telephone: (515) 462-2636

Permit Number: 038-07

Date Issued: 6/8/07

**Issued to: Paul & Betty Schaefer
Address: 2607 Quail Ridge Trl.
Winterset, IA 50273**

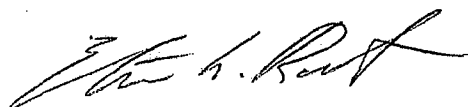
Legal Description: 3A W MID PT SW NW Section 25-76-27 Union Twp.

POWTS Components Specifications: Replacing old laterals with 300 ft of 36 in Chamber

General Conditions:

1. System must be constructed in conformance with attached system layout, profiles, and cross-sections.
2. Structures must be constructed in conformance with 567 IAC Chapter 69 and the Madison County Environmental Health Regulations.
3. Permit shall be null and void if system is not constructed within one year of permit issuance. The Environmental Health Officer must approve any request for extension of permit.
4. The Environmental Health Officer must approve any design modifications to the permitted system prior to construction.
5. Once constructed, all system components must be uncovered for inspection and the system must be approved before it can be put into operation. Notice for inspection must be received with 24 hours in advance (8 a.m. through 4:30 p.m., Monday - Friday). If weather necessitates the need to cover the system components, then the system owner or contractor must notify and follow the procedures given by the Environmental Health Officer.

Special Conditions: Modification to original permit 1300 dated 7/21/91.



**Environmental Health Officer
Madison County
Office of Zoning and Environmental Health**

Passed Inspection Conducted 6/28/07
