

BK: 2014 PG: 491 Type 43 001 Pages 6

Recorded: 3/4/2014 at 11:45:06.0 AM

Fee Amount: \$0.00 Revenue Tax: LISA SMITH RECORDER Madison County, lowa

**ANNO** SCAN CHEK

INDX

## **REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT**

TO BE COMPLETED BY TRANSFEROR

IKANSF							
Name	Joseph Streck						
Address	5612 Pommel Place, West Des Moines, IA 50266						
	Number and Street or RR	City, Town or P.O.	State	Zip			
TRANSF	EREE:						
Name	Nicholas F. Reddin						
Address	9347 Lake Drive, West D	7 Lake Drive, West Des Moines, IA 50266					
	Number and Street or RR	City, Town or P.O.	State	Zip			
	of Property Transferred: Ilnut Lane, Cumming, IA 5	0061					
Nur	mber and Street or RR	City, Town or P.C.	State Zip				
<u>√</u> Tł — Tł st. 2. Soljid	ated below or set forth on a <b>Waste Disposal (check o</b>	ted on this property. The type(s), lo an attached separate sheet, as nece		are			
TI		sal site on this property and informat	tion related thereto is provi	ided			
	dous 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.							
	ground Storage Tanks (d						
sn in:	nall farm and residential m structions.)	round storage tanks on this property otor fuel tanks, most heating oil tank	s, cisterns and septic tank	s, in			
		rage tank on this property. The type isted below or on an attached separ		ח			

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5.		vate Burial Site (check one)
	X	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
c	Desir	necessary.
O.		vate Sewage Disposal System (check one)
	님	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.
	M	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.
	لسا	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
	Ц	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]
	П	This property is exempt from the private sewage disposal inspection requirements pursuant to
	II	the following exemption [Note: for exemption #9 use prior check box]:
	П	The private sewage disposal system has been installed within the past two years pursuant to
	_	permit number
1	F	
		nation required by statements checked above should be provided here or on separate
211	icet:	attacheu hereto.
_		
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS
		FORM
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
		// <i>HH</i> _
Qi.	gnat	Tolonhana No. ( 715 ) 701 22 11
إاف	gnat	ure:

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

Jan 11 14 02:03a

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## Thomas Bros. Septic Service

4201 SE 116<sup>th</sup> St. Runnells, IA 50237

Froudly serving central fowa ever 55 years

01/06/14

Inspection report for property located at 1416 Walnut Ln. in Madison County. Thomas Bros pumped and inspected this system in Sept of 2012. Since this system was serviced with in the last 2 years on the inspection the tank was not pumped. We opened the system, loaded the field using the pump tank, which also allowed me to check the operation of the pump. The field accepted the load test. All water from the home enters the system. This system has an effluent filter which I cleaned as part of the inspection. It is recommended effluent filters be cleaned at least yearly. Should an effluent filter become completely clogged a back up in the lowest level of the home is possible. Effluent filter alarms are available but not a requirement. This system does not have an effluent alarm. At the time of this inspection the system was operating properly.

This report is NOT a guarantee or warranty of the future operations of this system. This report reflects the system condition at the time of the inspection.

Larry Thomas

Certified inspector
NEHA Certified Installer
Certified Grease Handler

Thomas Bros. Septic 515-681-1178 cell!

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

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515 223 8899



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

Property information
Current owner ) OSEPH & Cyrette Streck Buyer Realtor
Parker
Mailing address
Site Address/County 416 Walnut (n. Cumming - Maidieun CU.
No. of bedrooms / Last occupied? Culture Disposal? W/N Softener? W/N HaO supply? N/A
Records available 1/25 Permit/installation date 2665 Installer 11/2
Septic system information  Septic tank(s): size(1) 1000 yr (1) material Concert condition Good  Tank pumped? ys (1) date 9/2017 licensed paraper Thomas Growth
Septic tank(s): size(1) 100 y material Covered condition God Tank pumped? 45 date 9/2012 licensed pumper Thomas Gross
Tank pumped? V. S. date 9/7/1/2 licensed remover To Charat Oros
Septic/trash/processing tank: size   material condition
Tank pumped? date licensed pumper
Aerobic treatment unit (APU) mfgr size Tank pumped? date licensed pumper
Tank pumped? date licensed pumper
Tank pumped? date licensed pumper  Maintenance contact? expiration date sarvice provider
Condition
Pump tanks/vaults: type Earl. Pump. size 500 grl condition (2000)
Distribution system: distribution box Poly outlets used 6 condition 600D  Header pipe(s) # of lines
Header nine(e) # of lines /
Header pipe(s) # of lines Pressure dosed? NO
The state of the s
Secondary treatment:
length of absorption fields 750 59. determined by Lecure's
length of absorption fields 450 R. determined by Acceptable Cords condition of fields Good determined by Acceptable Cords
type of trench material CHA) mBBRS
Size of sand filter determined by
Vent pipes above grace? discharge pipe located?
Effluent sample taken? Results
Media filters: type
Maintenance contract? expiration date service provider
Condition
NPDES General Permit No. 4: required?NOI submitted

10-2008

542-0191

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Time of Transfer Inspection Worksheet

Other components: Alarms 1/25 Working? 1/25	disinfection NO working?			
Control box Timers	inspection ports			
Other components				
Overall condition of the private sewage disposal s	<b>Asten</b>			
working at the time	of the inspection			
Explain (attach additional pages as needed)  215214 (2016) Properly	at the time of this			
Comments:				
Site status at conclusion of Time of Transfer insp	ection:			
Verify that controls are set on the a	ppropriate mode.			
<ul> <li>Power is on to all components.</li> </ul>				
Revisit all components to verify lie				
Gather all tools for removal from t				
<ul> <li>Verify that no sewage is on the gro</li> </ul>	und surface.			
Using this workshoot, write a nametive report of t	he inspection results.			
Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.				
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	Date: 1 2 14 Certificate #: 3309			
Name (print): Larry Honnel	Certificate #: 8809			
Address: 5731 S. 66 Duc. DSM	7.			
Phone # 515 - 68/-//78				

Permit # 033:05 Street Inspection 7/15/05

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