

Book 2014 Page 645 Type 43 001 Pages 3 Date 3/21/2014 Time 12:04 PM Rec Amt \$.00

INDX V ANNO SCAN !

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK



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

TRANSFEROR:			
Name TMH, Inc.			
Address 2155 South 4th Street	West Des Moines	IA	50265
Number and Street or RR	City, Town or P.O.	State	Zip
TRANSFEREE:			•
Name Peter Murillo	 		
Address 1578 North River mail	Winterset	ZA	50273
Number and Street or RR	City, Town or P.O.	State	Zip
Address of Property Transferred:	a 1	,	
1578 North River Trail Wi	nterset	LOWA	50273
Number and Street or RR Legal Description of Property: (Attach if necessary)	City, Town or P.O.	State	Zip
SE 1/4 of NE 1/4 of SW 1/4 of Section 32-77-27, Madison Co.	unty Iowa		
SE 174 GIVE 174 GIOVI 174 GIOGGIGHI GE 177 EI JUNGGOGHI GE			
 Wells (check one) There are no known wells situated on this property. There is a well or wells situated on this property. The on an attached separate sheet, as necessary. Solid Waste Disposal (check one) There is no known solid waste disposal site on this property attached to this document. Hazardous Wastes (check one) There is no known hazardous waste on this property. There is hazardous waste on this property and inform this document. Underground Storage Tanks (check one) There are no known underground storage tanks on this motor fuel tanks, most heating oil tanks, cisterns and sometime is an underground storage tank on this property listed below or on an attached separate sheet, as necessed. Private Burial Site (check one) There are no known private burial sites on this property. The location of the property is a private burial site on this property. The location of the property is stated below or on an attached separate 	perty. and information related the lation related thereto is property. (Note exclusion reptic tanks, in instructions.) The type(s), size(s) and an issary. y. ation(s) of the site(s) and k	ereto is provided in vided in Attachment s such as small farm y known substance(Attachment #1, t #1, attached to and residential s) contained are

FILE WITH RECORDER July 18th 2012 cmz DNR Form 542-0960

6.	Private Sewage Disposal System (check one)
Jh.	All buildings on this property are servec 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
I m	formation required by statements checked above should be provided here or on separate sheets attached hereto:
111	for mation required by statements thethed 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.
	Discon / Hallo and
Sig	gnature: Olam K Luckman Telephone No.: 515-287-4882
	(Transferor or Agent)

TIME OF TRANSFER INSPECTION AGREEMENT BINDING AKNOWLEDGEMENT for FUTURE INSPECTION

- Mark and the
This agreement is entered into this 4 m day of MANA 2014 by and
between Madison County Board of Health and DIANE Hickman.
representing TmH, Inc.
It is agreed that due to temporary physical conditions which prevent the proper
inspection of the on-site wastewater treatment system at the time of transfer of the
property located at 1578 North River Trail, Winterset TA that
the required inspection and any necessary modifications as shall arise during the
inspection shall be completed no later thanday of
June , 2014
Dated the 4th day of MAICH 2014.
PROPERTY BUYER
This instrument was acknowledged before me on $\frac{3/4/14}{14}$, $\frac{20/14}{14}$ by
Bustin & Hickman
U Notary Public
PROPERTY SELLER KIRSTIN K HICKMAN
Olan K Luckman We Commission No. 749038 My Commission Expires
This instrument was acknowledged before me on $3-4$, 2014 by
Kuste H. Hickory
MADISON COUNTY BOARD OF HEALTH OR KIRSTIN K HICKMAN Notarial Seal - IOWA Commission No. 749038

AUTHORIZED REPRESENTATIVE