



Document 2014 GW814

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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

CHEK



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

**TRANSFEROR:**

Name Douglas George  
Address 1401 N 6<sup>th</sup> St Unit 21 Indianola IA 50125  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name BEN MORTENSEN  
Address 3048 220<sup>th</sup> St St Charles IA 50240  
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:  
3048 220<sup>th</sup> St St Charles IA 50240  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

See Att.

**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:**

Northwest corner of property

**I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM  
AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.**

Signature: Douglas Perry  
(Transferor or Agent)

Telephone No.: 515-681-1410

The North half ( $\frac{1}{2}$ ) of the Northwest Quarter ( $\frac{1}{4}$ ) of  
the Northwest Quarter ( $\frac{1}{4}$ ) of the Northeast Quarter ( $\frac{1}{4}$ )  
of Section Four (4) Township Seventy-five (75) North,  
Range Twenty-Six (26) West of the 5<sup>th</sup> P.M.,  
Madison County, IA, Including Any county Road



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

Property information

Current owner Douglas L + Rose M George
Buyer Ben Mortensen Realtor
Mailing address 3048 220th St St Charles IA 50240
Site Address/County same madison

No. of bedrooms 3 Last occupied? current Disposal? Y (N) Softener? Y (N) H2O supply? YES Rural
Records available yes Permit/installation date 8-3-78 Installer Buck Young

Septic system information

Septic tank(s): size 800 material cement condition good
Tank pumped? yes date 4-9-14 licensed pumper Weigert 9450
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 concrete outlets used 4 condition good
Header pipe(s) 4 # of lines 4
Pressure dosed? NO

Secondary treatment:

length of absorption fields Diffenc Length determined by
condition of fields No seepage determined by inspection
type of trench material septic rock

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 submitted



**Time of Transfer Inspection Report (page 2)**

Current owner Doug Las + Rose George

**Other components:**

Alarms      Working?      disinfection      working?     

Control box      Timers      inspection ports     

Other components     

**Overall condition of the private sewage disposal system**

Acceptable? Yes Unacceptable?     

Explain (attach additional pages as needed): tank + Distribution box  
in good shape 4 laterals Rock  
No surface sewage

Comments:     

**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. good
- Gather all tools for removal from the site.
- Verify that no sewage is on the ground surface. No Surface

Using this worksheet, write a narrative report of the 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: Mike Harkin Date: 4-9-14  
 Name (print): MIKE HARKIN Certificate #:       
 Address: 3311 140th St Cumming Iowa  
 Phone #: 515 981-9465