

Book 2014 Page 1544 Type 43 001 Pages 5 Date 6/30/2014 Time 2:08 PM

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INDX **ANNO** SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

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

TRAN	NSFEROR:						
Name	Sharon R. Santoro						
Addre	ess 1617 Juniper Ct  Number and Street or RR	Earlham City, Town or P.O.	IA State	50072-8649 Zip			
TRAN	NSFEREE:						
Name	e Seth A. Kilson						
Addre	ess 1233 Prairie Dr, #279  Number and Street or RR	West Des Moines City, Town or P.O.	IA State	50265 Zip			
Addre	ess of Property Transferred:						
1617 Juniper Court		Earlham	IA	50072			
	Number and Street or RR	City, Town or P.O.	State	Zip			
	wnship Seventy-six (76) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa.  Wells (check one)						
	There are no known wells situated on this property.						
Ε	☐ 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. S	Solid Waste Disposal (check one)						
<u>C</u>	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. H	Hazardous Wastes (check one)						
E	There is no known hazardous waste	on this property.					
	There is hazardous waste on this p attached to this document.	roperty and information related th	ereto is provided	in Attachment #1,			

4.	Un	Inderground Storage Tanks (check one)		
	<u>u</u>	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.		vate Burial Site (check one)		
	Ħ	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.	Pri	vate 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.		
	4	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 perminumber		
		ation required by statements checked above should be provided here or on separate sheets ed hereto:		
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS		
		FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.		
~·		re:		
Sig	natu	Telephone No.: (770) 179 0373		
		· · · · · · · · · · · · · · · · · · ·		

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

Closing atty.



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

Property information
Current owner Realtor down Realty - Kowin Ho  Mailing address
Current owner Anton Santo
Buyer Realtor down Realty - Rown Ho
Mailing address
Site Address/County 1617- Juniper In Eartham, ds. 5007; Legal Description
Legal Description
Legal Description
No. of bedrooms 3 Last occupied? weekends Records available yes
Permit/installation date 10-5-11 Separation distances ok/ no?
Septic system information
New 21/2 yn age 500 material Concrete condition good  Tank pumped? No date licensed pumper  Septic/trash/processing tank: size material condition
Tank pumped? Man date licensed pumper
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper
Aerobic treatment unit (ATU) mfgr size  Tank pumped? date licensed pumper
Tank pumped? date licensed pumper
Maintenance contract? expiration date service provider
Condition
Pump tanks/vaults: type size condition
DO H
Distribution system: distribution box [Lastro outlets used 10 condition food
Distribution system: distribution box <u>Plastic</u> outlets used <u>lo</u> condition <u>food</u> To -sond flth Header pipe(s) # of lines <u>lo</u> Pressure dosed?
Secondary treatment:
length of absorption fields determined by
condition of fields determined by
type of trench material
Vent pipes above grade? Hes discharge pipe located? Hes Effluent sample taken? Results no discharge.
Vent pipes above grade? discharge pipe located?
Effluent sample taken? no Results no discharge
Media filters: type
Media filters: type service provider service provider
Condition expiration date service provider
COMMICKE
NPDES General Permit No. 4: required? Permitted? NOI provided



Time of Transfer Inspection Report				
Other components:				
Alarms Working? disinfection working?				
Control box inspection ports				
Condo box inspection ports				
Other components				
Overall condition of the private sewage disposal system				
Report system status The Septic System at 1617-funiper In. fanh was at correct level when opened Explain (attach additional pages as needed): Carlyon, da. 50072-is in good working Cond. The septia tanh was opened in sport				
Comments: has (2) comp, + intable + outflow baffles are in place. The sand flts was probed + box checked + no sewage was on as und level on: 10-13-14				
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 now on 6-13-14				
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 Mohn Date: 6-13-2014  Name (print): SEPTIC TANK PLANPING Certificate #:8979				
Address: 1509 St. Hwy. 92				
Phone # 575-462-2624 Winterset IA 50273-8411				
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:				
Town DND Oncid Wilderson Du				
Iowa DNR Onsite Wastewater Program 502 E. 9 <sup>th</sup> St.				

Des Moines, IA 50319

House Perwit # 055-11 Inspection 10/5/11 1617 Juliper # 1.21.