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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

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

**TRANSFEROR:**

Name Brock A. & Kimberly M. Wolff

Address 5455 Orchid Ln. N., Plymouth, MN 55446

Number and Street or RR

City, Town or P.O.

State

Zip

**TRANSFeree:**

Name William H. Moody Revocable Trust

Address 2529 Cumming Rd., Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

**Address of Property Transferred:**

2511 195th Trl, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

**Legal Description of Property: (Attach if necessary)**

Parcel "A" located in the South Half (1/2) of the Southeast Quarter (1/4) of Section sixteen (16), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, Containing 5.00 acres, as shown in Plat of Survey filed in Book 2, Page 642 on January 22, 1996, in the Office of the Recorder of 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:**

\*\*\*Groundwater Hazard Additional Information\*\*\*

*Well located on South part of property between barn and house.*

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

Signature: Brook Wolff Telephone No.: (612) 816-4903  
(Transferor or Agent)

**GROUNDWATER HAZARD STATEMENT**

**ATTACHMENT #1**

**NOTICE OF WASTE DISPOSAL SITE**

**a. Solid Waste Disposal (check one)**

There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.

There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

**b.. Hazardous Wastes (check one)**

There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.

There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

\*\*\*Groundwater hazard solid waste disposal ad info\*\*\*

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

Signature: Sh. Pij Telephone No.: (612) 816-4903  
(Transferor or Agent)



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

Property information

Current owner Brock and Kimberly Wolff
Buyer \_\_\_\_\_ Realtor Shawn Niqq 515-419-2760
Mailing address 2511 195th Trail Winterset Ia 52723

Site Address/County 2511 195th Trail Winterset Ia Madison county
Legal Description Section 16-76-27 Union Twp

No. of bedrooms 4 Last occupied? March 2014 Records available yes

Permit/installation date 11-17-06 Separation distances OK no?
124-06

Septic system information

Septic tank(s): size 1,500 gal. material concrete condition excellent
Tank pumped? yes date 4-26-14 licensed pumper yes S.T. 307
Septic/trash/processing tank: size \_\_\_\_\_ material \_\_\_\_\_ condition \_\_\_\_\_
Tank pumped? \_\_\_\_\_ date \_\_\_\_\_ licensed pumper \_\_\_\_\_

Aerobic treatment unit (ATU) mfr \_\_\_\_\_ size \_\_\_\_\_
Tank pumped? \_\_\_\_\_ date \_\_\_\_\_ licensed pumper \_\_\_\_\_
Maintenance contract? \_\_\_\_\_ expiration date \_\_\_\_\_ service provider \_\_\_\_\_
Condition \_\_\_\_\_

Pump tanks/vaults: type \_\_\_\_\_ size \_\_\_\_\_ condition \_\_\_\_\_

Distribution system: distribution box yes outlets used no condition excellent
Header pipe(s) 1 # of lines 5 Pressure dosed? no

Secondary treatment:
length of absorption fields 5 x 100' = 500' determined by \_\_\_\_\_
condition of fields excellent determined by \_\_\_\_\_
type of trench material EQ 24's

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 no Working? \_\_\_\_\_ disinfection no working? \_\_\_\_\_

Control box no Timers no inspection ports \_\_\_\_\_

Other components none

Overall condition of the private sewage disposal system

Report system status Appears to be in good working order

Explain (attach additional pages as needed): \_\_\_\_\_

Comments: Pump septic tank every 3 to 5 years. Clean effluent filter at least once maybe twice a year.

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.

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: Vance Smith Date: 10-27-14  
 Name (print): Vance Smith Certificate #: 8992  
 Address: 502 West Main Street St. Charles Ia 50240  
 Phone # 641-396-2440

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. 9<sup>th</sup> St.  
 Des Moines, IA 50319

**ANYTIME SEPTIC SERVICES II  
VANCE SMITH  
ST. CHARLES, IA 50240  
641-396-2440**

### **REAL ESTATE SEPTIC INSPECTION**

On June 26th, 2014, Anytime Septic Services II did Time of Transfer Real Estate Inspection on septic tank distribution box, and lateral field at 2511 195<sup>th</sup> Trail, Winterset, Ia 50273. Brock and Kimberly Wolff residence. The septic tank is a 1,500 gallon two compartment concrete Lister septic tank that is 6 inches below ground surface with a 6 inch by 22 inch in diameter plastic Poly Lok risers with 22 inch screwed down plastic Poly Lok lids at ground surface, above the Tee baffles on both inlet and outlet ends of septic tank. On the outlet side of septic tank there is a 4 inch squared Poly Lok effluent filter inserted into a 4 inch squared shaped baffle that is Very Important to clean at least once or maybe twice a year. , by simply lifting filter straight up from squared shaped baffle and hosing clean with a garden hose than reinserting into place. The distribution box is a plastic Tuff tite box with a 4 inch diameter tee baffle inside box. Distribution box is a 12 inches below ground level with a supporting concrete surrounding. Distribution box has 5 lines leaving box through 5 speed levelers equally distributing effluence's into 5 EQ 24 inch plastic biodefuser chambers that are 100 feet each totaling 500 feet of laterals 20 inches below ground level. The absorption field shows no evidence of any ponding or surfacing of effluence at ground surface. On the North, West corner of house is a clean out port from house to septic tank. Appears schedule 40 pipe was used through out complete septic system and is functioning properly at this time.

**ANYTIME SEPTIC SERVICES II IS NOT RESPOSIBLE  
FOR ANY FAILED SEPTIC SYSTEMS.**