

Book 2014 Page 1925 Type 43 001 Pages 6 Date 8/05/2014 Time 11:50 AM

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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

TRA	NS	SFEROR:					
Nan	ne	Willie L. Sinnwell					
Add	res	s 255 S 41st St Number and Street or RR	West Des Moines City, Town or P.O.	IA State	50265 Zip		
TRA	NS	SFEREE:					
		Jennifer K. Davis					
				50273	<u></u>		
Add	res	S 2279 TERRALE ALEKS	City. Town or P.O.	State	 Zip		
		Number and officer of Aix	ony, fown of the	Oldico	~-ib		
		s of Property Transferred:					
2279	9 T	errace Avenue	Winterset	<u>IA</u>	50273		
		Number and Street or RR	City, Town or P.O.	State	Zip		
٠	d	There are no known wells situated on There is a well or wells situated on the or set forth on an attached separate slid Waste Disposal (check one)	is property. The type(s), location	(s) and legal statu	s are stated below		
	_	,	al site on this property				
	 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)						
	Ø	There is no known hazardous waste of	on this property.				
	☐ There is hazardous waste on this property and information related thereto is provided in Attachment #1, attached to this document.						
4.	Un	derground Storage Tanks (check on	e)				
l	Ø	There are no known underground st and residential motor fuel tanks, most					
İ		There is an underground storage tand contained are listed below or on an at			nown substance(s)		

5.	5. Private Burial Site (check one)							
	Ø	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.						
	7	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 w sewage disposal system is connected will be demolished without being occupied. The buyer has ea binding acknowledgment with the county board of health to demolish the building within an agree 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						
		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.								
Sig	natu	Transferer or Agent) Telephone No. 515, 490 - 1040						
		(Halisiciol of Agent)						

GROUNDWATER HAZARD STATEMENT

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

a.	So	lid 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 man Natural Resources rules.		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.					
Fu	ther	descriptive information:					
	•	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM					
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.					
Sig	natu	ire: William January Felephone No.: 515,490-7046					
-		(Transferor or Agent)					

Closingatty.



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

Property information	
Current owner William A	Pinnwell Realtor Anna Roslty Kenny Kanzlar
Ruver	Realtor due la Oter Konny Kayo Das
Mailing address	- Maring Reserve Conference
Site Address/County 2219-12	nace oue. Winterset, da. 50273
Legal Description	Madison
No. of bedrooms 3 Last occupied?	la now Records available
Permit/installation date Mour 2009 Se	paration distances ok/no?
Septic system information	
Tank pumped? date Septic/trash/processing tank: size	terial Concretee condition Good 2014 licensed pumper Manger S. 7. 7.5 material condition licensed pumper
Tank pumpee: date	neonsed pumper
Tank pumped? date	size licensed pumper date service provider
Condition	
Pump tanks/vaults: type	size condition
Distribution system: distribution box 4	rest coutlets used 5 condition food # of lines 5 Pressure dosed?
Secondary treatment:	
length of absorption fields approx 80	determined by probing
condition of fields and	determined by probing determined by walking & Probing
condition of fields good type of trench material lock + Pins	2
Size of sand filter	determined by
	discharge pipe located?
Effluent sample taken?	Results
Media filters: type	
Maintenance contract? expiration	date service provider
Condition	
	permitted? NOI provided

6-2009



/ Time of Transfer Inspection Report
Other components:
Alarms Working? disinfection working?
Control box inspection ports
Other components
Overall condition of the private sewage disposal system
Report system status The septic system at 2279- Terrace are
Explain (attach additional pages as needed): Winterset, do 50273- is in good wonding Cond. The septis tank was opened & pump day 2014
Mounty -0.4. of a refusion of the form of the 1819
Comments: tank was at correct water land before Pursongt has 2 Comp.
I faffar war in place (on thow tinflow) The dist loop was opened
all for laterals tooks water on 4-3-14-
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.
Varify that no seemest is an the same days for
verify that no sewage is on the ground surface. Mone
Visit in the second of the sec
Verify that no sewage is on the ground surface. None 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 Wr Moyer Date: 421-3-20/4
Name (print): JOHN MAYER Certificate # 8 9 7 9
Address: SEPTIC TANK PUMPING
Phone # 515-462-2624 1509 St. Hwy. 92
Winterset, IA 50273-8481
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 th St.
Des Moines, IA 50319

Penseeve Minteret, dr. 58273 North