



Document 2014 GW2247

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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

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

**TRANSFEROR:**

Name Mark S. McDonald

Address 16110 Dellwood Drive, Urbandale, IA 50323

Number and Street or RR

City, Town or P.O.

State

Zip

**TRANSFeree:**

Name Robert M. Lichtenwalter and Tawyna A. Lichtenwalter

Address 8655 Bridgewood Blvd. #5208, West Des Moines, IA 50266

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

1526 Hogback Bridge Road, Earlham, IA 50072

Number and Street or RR

City, Town, or P.O.

State

Zip

Legal Description of Property: (Attach if necessary)

Parcel "A", located in the West Half (1/2) of the Southwest Quarter (1/4) of the Northwest Quarter (1/4) of Section Thirty-five (35), in Township Seventy-seven (77) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, containing 19.90 acres

**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. *Septic System*

**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 \_\_\_\_\_.

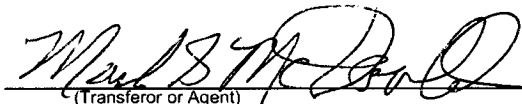
**Information required by statements checked above should be provided here or on separate sheets attached hereto:**

West side of pond below the dam

\_\_\_\_\_

\_\_\_\_\_

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

Signature:   
(Transferor or Agent)

Telephone No.: ( 515 ) 975-9660



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

Property information

Current owner MARK Mc DONALD
Buyer ROBERT LICHTENWALTER Realtor REMAX - SHERRI WIEBEL
Mailing address 16110 DELLWOOD DRIVE URBAN DALE, IA. 50323
Site Address/County 1526 HOBBACK BRIDGE ROAD, EARLHAM, IA. 50072
No. of bedrooms 3 Last occupied? Oct. 14 Disposal? (Y) N Softener (Y) N H2O supply? RURAL WATER
Records available YES Permit/installation date JUNE 2012 Installer WEST CENTRAL SERVICE

Septic system information

Septic tank(s): size 1500 GAL. material CONCRETE condition VERY GOOD
NA/Tank pumped? NO date (WITHIN 2 YEARS) licensed pumper / NA
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 outlets used condition
Header pipe(s) # of lines
Pressure dosed?

Secondary treatment:
length of absorption fields determined by
condition of fields determined by
type of trench material

Size of sand filter determined by
Vent pipes above grade? discharge pipe located?
Effluent sample taken? Results

Media filters: type DEAT MOSS / ECO FLO - PREMIER TECH
Maintenance contract? YES expiration date 12-31-2014 service provider WEST CENTRAL SERVICE
Condition VERY GOOD

NPDES General Permit No. 4: required? NO permitted? NOI submitted



### Time of Transfer Inspection Worksheet

Other components:

Alarms NA Working? \_\_\_\_\_ disinfection NA working? \_\_\_\_\_

Control box NA Timers NA inspection ports NA

Other components CHECKED TIPPING TRAY OPERATION - GOOD

Overall condition of the private sewage disposal system

Acceptable? YES Unacceptable? \_\_\_\_\_

Explain (attach additional pages as needed): ALL INDICATIONS ARE SYSTEM LOOKS GOOD & WILL FUNCTION PROPERLY WHEN PUT BACK ON LINE - COULD NOT SAMPLE FOR LAB AS SYSTEM HAS NOT BEEN IN USE SINCE OCT 2013.

Comments: SYSTEM IS ONLY 2 YEARS OLD AND TESTED WITHIN PARAMETERS IN THE 2013 SEASON

Site status at conclusion of Time of Transfer inspection:

- NA • Verify that controls are set on the appropriate mode.
- NA • Power is on to all components.
- Yes - • Revisit all components to verify lids are secure.
- Yes - • Gather all tools for removal from the site.
- Yes - • Verify that no sewage is on the ground 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: Jon Cornish Date: Sept. 2-2014  
 Name (print): JON CORNISH / WEST CENTRAL SERVICE Certificate #: 2007  
 Address: 1020 130th DEXTER, IA. 50070  
 Phone #: 515-249-9483

# NO DISCHARGE FORM

I hereby certify that I attempted to obtain an effluent sample from the onsite wastewater discharge point at:

NAME: MARK Mc DONALD

ADDRESS: 1526 HOGBACK BRIDGE RD.

EARLHAM, IA. 50072

I attempted to obtain a sample of the above onsite wastewater system, but found no evidence of an effluent discharging. I inspected the system for any signs of surface discharge, erosion, soil staining, etc. There did not appear to be any evidence of flow in the last six months. I will continue to monitor the system in accordance with Iowa Administrative Code 567-Chapter 69, Iowa Administrative Code 567-Chapter 64, General Permit #4 Rules and the County specified sampling dates.

DATE OF INSPECTION: 9-2-14

SAMPLER NAME: TOM CORNISH

MAINTENANCE CONTRACTOR (Company Name, if used):

WEST CENTRAL SERVICE

WEST CENTRAL SERVICE  
1020 130TH ST  
DEXTER IA 50070