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Book 2014 Page 3127 Type 43 001 Pages 4

Date 12/12/2014 Time 10:29 AM

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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 Dennis Fauver

Address 1856 S. 126th Street, Omaha, NE 68144

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Alan R. Willis

Address 302 NW Watercrest Drive, Ankeny, IA 50021

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2915 Clark Tower Road, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) See Exhibit "A" attached

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:

One well located approximately 125 feet west of the pig shed.

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

Signature: *Dennis Fauer* Telephone No.: (515) 314-1893
Transferor or Agent

EXHIBIT "A"

The Northwest Quarter (NW 1/4) of the Northeast Quarter (NE 1/4) of Section Twelve (12), Township Seventy-four (74) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa; AND, the Northeast Quarter (NE 1/4) of the Northeast Quarter (NE 1/4) of said Section Twelve (12), lying West of the Public Highway, EXCEPT the North 20 feet thereof.

**TIME OF TRANSFER INSPECTION WAIVER
BINDING ACKNOWLEDGEMENT for DEMOLITION**

This agreement is entered into this 17th day of October, 2014 by and between Madison County Board of Health and Alan Willis.

WHEREAS, it is understood the Iowa Administrative Code 567-69 requires an inspection of the private sewage disposal system on all property located in Iowa at the time of transfer.

WHEREAS, the property located at 2915 Clark Tower Road, Winterset, Iowa further described as lying in the NE ¼ of the NE ¼ West of road except .4 acers of highway section 12 of Monroe Township, is subject to the inspection, and the buyer Alan Willis understands there has not been a time of transfer inspection on the private sewage disposal system serving this property.

NOW THEREFORE, it is hereby agreed that the dwelling located on this property shall be demolished without being occupied by the 1st day of April, 2015.


Dated the 17th day of October, 2014

PROPERTY BUYER

MADISON COUNTY
BOARD OF HEALTH OR
AUTHORIZED REPRESENTATIVE

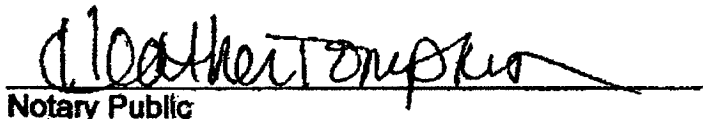


Alan Willis



Elton A. Root, Environmental Health

This instrument was acknowledged before me on October 17, 2014 by:



Notary Public