

Document 2014 GW3124

BK: 2014 PG: 3124 Type 43 001 Pages 5

Recorded: 12/12/2014 at 9:01:01.0 AM

Fee Amount: **Revenue Tax:**

LISA SMITH RECORDER Madison County, Iowa

INDX **ANNO SCAN** CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFE	ROR:			
Name	RICHARD E. SHIRBROUN			
Address _	309 West South Street Number and Street or RR	Winterset City, Town or P.O.	lowa State	50273 Zip
	Number and Street of KK	City, rown at P.O.	Siale	zap
TRANSFE				
Name	STEVEN M. NICCOLI			
Address _	P.O. Box 411	Dobbins	California	95935
	Number and Street or RR	City, Town or P.O.	State	Zip
Address o	f Property Transferred:			
Addiess	1694 McBride Ridge Court	Winterset	lowa	50273
	Number and Street or RR	City, Town or P.O.	State	Zip
Lagal Dec	evintion of Dranachy (Attach if naccessary	۸		
	cription of Property: (Attach if necessary ountry Estates West, Madison County	3-76-27		
9 π	(check one) nere are no known wells situated on this nere is a well or wells situated on this pro	perty. The type(s), locat		us are
	ated below or set forth on an attached se	eparate sheet, as necess	ary.	
	Waste Disposal (check one)	a an this man subs		
	nere is no known solid waste disposal sit	,	, malatad thamata ia n	rouidod in
	nere is a solid waste disposal site on this tachment # 1, attached to this document	• • •	i related triefeto is p	IONIGER III
	dous Wastes (check one)			
	nere is no known hazardous waste on th	is property.		
	nere is hazardous waste on this property	• • •	hereto is provided ir	1
	tachment # 1, attached to this document		•	
	ground Storage Tanks (check one)			
	nere are no known underground storage	tanks on this property. (I	Note exclusions suc	h as small
fa	rm and residential motor fuel tanks, mos	t heating oil tanks, cisterr	ns and septic tanks,	in
	structions.)		-	
	nere is an underground storage tank on t		• • •	
SU	bstance(s) contained are listed below or	on an attached separate	sheet, as necessar	у.

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
6.	information of the decedent(s) is stated below or on an attached separate sheet, as necessary. Private Sewage Disposal System (check one)
U.	☐ 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 a 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 a 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 acknowledgement 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
	acknowledgement is attached to this form. There is a building served by private sewage disposal system on this property. The buyer has executed a binding acknowledgement with the county board of health to install a new private sewage disposal system on this property with an agreed-upon time period. A copy of the binding acknowledgement 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 acknowledgement with the county board of health to demolish the building within an agreed-upon time period. A copy of the binding acknowledgement 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:
ı	HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Sig	nature: Mashard Shirln Telephone No.: (515) 468-1834

FILE WITH RECORDER





600 East 17h Steet South Newton, 1A50208 641-792-8451 Bone 641-792-7989 Fax

ANALYTICAL REPORT

December 022014 Page 1 of 1

Work Orer:

1K41461

Report To Mel Mock

River to River Onsite Septic Solutions

PO Box 460

Waukee, IA 50263

Work Order Information

Date Received: 11/25/2014 11:00AM

Collector: Justin

Collector Phone: (515) 987-3913

PO Number:

Project: Private Septic Systems

Project Number: Private Septic Systems

1K41461-07

Shribourn

Matrix: Water

Collected: 11/24/14 12:00

Analyte	Result	MRL	Method	Analyst	Analyzed	Qualifier
BOD (5 day)	<8 mg/L	8	SM 5210 B	LAE	11/25/14 15:45	
Solids, total suspended	<2 mg/L	2	USGS 1-3765-85	TJS	12/01/14 8:16	

End of Report

Keystone Laboratories, Inc. Dara Carlock

Bara Carlock

Project Manager I

The results in his report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety. Samples were preserved in accordance with 40 CFR for pH adjustment inless otherwise noted. MRL= Mehod Reporting Limit.1K41461-07



Time of Transfer Inspection Report

Property:	<u>Inform</u>	ation
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Current Owner: Wava Shirbroun	
Buyer: Steven & Janine Niccoli	Realtor: Jason Starr
Mailing Address: 1694 Mcbride Ridge, Winterset IA	
Site Address/County: 1694 Mcbride Ridge., Winterset	IA / Madison Co
Legal Description LT 2 COUNTRY ESTATESWEST	4.99A
No. of bedrooms: 3 Last occupied:	eurrent Records available:
Permit/ installation date: 031-03 / 6/17/03 Sepa	ration distances (ok/no?):
Septic System Information	
Septic tank(s): Size: 1500 Material:	Concrete Condition: Good
Tank pumped? X Y N Date: 11/24/14	Licensed pumper: River to River
Septic/Trash/Processing tank: Size: M	faterial: Condition:
Tank pumped?	Licensed pumper:
Aerobic treatment unit (ATU) mfgr	Size
	Licensed pumper:
Maintenance contract?	Service provider:
Condition:	
Pump tanks/vaults: Type: Size:	Condition:
Distribution system: Distribution box	Outlets used Condition:
Header pipe(s): No. of	lines: Pressure dosed?
Secondary Treatment:	
Length of absorption fields:	Determined by:
Condition of fields:	Determined by:
Type of trench material:	reference and the second seco
Size of sand filter:	Determined by:
Vent pipes above grade?	Discharge pipe located?
Effluent sample taken 11/24/14	Results: BOD<8 TSS <2
Media Filters: Type: ST-650	
Maintenance contract?	9/30/2015 Service provider: River to River
Condition: Peat has settled about 12 to 14"" but is still in	n good condition
NPDES General Permit No. 4; Required? YN N	Permitted? Y N NOI provided: No



Time of Transfer Inspection Report

Other components.
Alarms: YN Working: YN Disinfection: YN Working: YN
Control Box: Timers: Inspection Ports:
Other components:
Overall condition of the private sewage disposal system:
Report system status: Shell has a crack that can be fixed in warmer weather.
Explain (attach additional pages as needed): Sample taken from discharge 11/24/14 - waiting on results. 12/2/14 Results received and have passed at this time.
Comments: Peat is about halfway used up if new h/o uses the same could last for another 3 to 5 years.
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: Date: 12/3/14
Name (print): Robert D. McKinney Certificate #: 8875
Address: PO Box 460 Waukee IA 50263
Phone #: 515-987-3913
Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office in the county the inspection was conducted, the county recorder and to:
Iowa DNR Onsite Wastewater Program 502 E 9 th St
Des Moines IA 50319