



Document 2015 GW417

Book 2015 Page 417 Type 43 001 Pages 8
Date 2/13/2015 Time 1:50 PM
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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Patricia J. S. Lancaster

Address 1353 Vintage Ct. Cumming IA 50061-8542
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Scott Prickett

Address 15906 Tanglewood Dr Urbandale IA 50323
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

1353 Vintage Ct. Cumming IA 50061-8542
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

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:

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.: 763) 257-6814

EXHIBIT "A"

Lot Eight (8) of St. Johns Woods Subdivision, a subdivision in the North Half (1/2) of the Southwest Quarter (1/4) of Section Twenty-two (22), Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa.

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:

**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.: _____

763) 257-6814



Time of Transfer Inspection Report

Property Information

Current Owner: Jeff Lancaster
Buyer: _____ Realtor: Brandon Winn
Mailing Address: _____
Site Address/County: 1353 Vintage Court Cumming Ga 30061
Legal Description: As Abstract
No. of bedrooms: 4 Last occupied: occupied Records available: yes
Permit/ installation date: 5-27-03 Separation distances (ok/no?): ok

Septic System Information

Septic tank(s): Size: 1500 Material: Poly Condition: good
Tank pumped? ☒ Y ☐ N Date: 9-25-12 Licensed pumper: 237
~~Septic/Trash Processing tank: Size: _____ Material: _____ Condition: _____
Tank pumped? ☐ Y ☐ N Date: _____ Licensed pumper: _____
Aerobic treatment unit (ATU) mfg: _____ Size: _____
Tank pumped? ☐ Y ☐ N Date: _____ Licensed pumper: _____
Maintenance contract? ☐ Y ☐ N Expiration date: _____ Service provider: _____
Condition: _____~~
Pump tanks/vaults: Type: poly Size: 500 Condition: good
Distribution system: Distribution box yes Outlets used 6 Condition: good
Header pipe(s): _____ No. of lines: _____ Pressure dosed? _____

Secondary Treatment:

Length of absorption fields: 6 100' laterals Determined by: drawing
Condition of fields: good / dry Determined by: hydraulic test & probing
Type of trench material: chamber
~~Size of sand filter: _____ Determined by: _____
Vent pipes above grade? ☐ Y ☐ N Discharge pipe located? ☐ Y ☐ N
Effluent sample taken _____ Results: _____
Media Filters: Type: _____
Maintenance contract? ☐ Y ☐ N Expiration date: _____ Service provider: _____
Condition: _____~~
NPDES General Permit No. 4: Required? ☐ Y ☐ N Permitted? ☐ Y ☐ N NOI provided: _____



Time of Transfer Inspection Report

Other components: _____

Alarms: ☒ Y ☐ N Working: ☒ Y ☐ N Disinfection: ☒ Y ☐ N Working: ☒ Y ☐ N

Control Box: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system: _____

Report system status: see attached

Explain (attach additional pages as needed): _____

Comments: _____

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: Tyler Forest Date: 12-11-14

Name (print): Tyler Forest Certificate #: 10041

Address: P. O. Box 219, Indianola, IA 50125

Phone #: 515-745-5299

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent or the person ordering the inspection, the county sanitarian/environmental health office and to:

Iowa DNR
Private Sewage Disposal Program
502 E 9th St
Des Moines IA 50319

DNR Time of Transfer Report System Status

Address: 1353 Vintage Ct. Date: 12-11-14
Cumming Ia. 50061

Comments: Technician Tyler Forest

All waste water from house drains to
septic system.

The tank is a 1500 poly tank in
good condition.

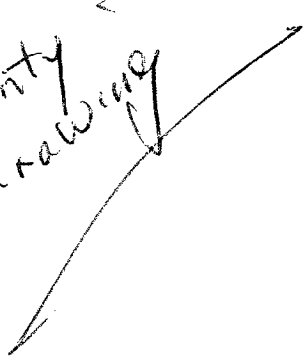
The Distribution Box & all laterals
were in good working condition.

This is not a guarantee!

This certifies that the septic
system was in good working condition
at the time of the inspection.

DIAGRAM OF SYSTEM

See
county
drawing



1353 Vintage Court

