

Document 2015 GW1378

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INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSF	EROR:				
Name	Twyla Jean Niska				
Address	1444 Pampano Drive, Clive, IA 50325				
	Number and Street or RR	City, Town or P.O.	State	Zip	
TRANSF	EREE:				
Name	Stephen R. Spitz and Susar	n E. Spitz			
Address	1867 Nature Court, Winterset, IA 50273				
	Number and Street or RR	City, Town or P.O.	State	Zip	
	of Property Transferred: ture Court, Winterset, IA 5	0273			
Nur	nber and Street or RR	City, Town or P.O.	State	Zip	
X_TI		uated on this property. ed on this property. The type(s), longle n attached separate sheet, as nec	` '	itus are	
	Waste Disposal (check on	•	,		
<u>X</u> TI	nere is no known solid wast	e disposal site on this property.			
		al site on this property and informa	ation related thereto is p	orovided	
	Attachment #1, attached to	this document.			
	dous Wastes (check one) nere is no known hazardous	wasta on this property			
		this property and information relat	ed thereto is provided i	in	
	tachment #1, attached to th		od increte to provided t		
	ground Storage Tanks (cl				
sn		ound storage tanks on this property tor fuel tanks, most heating oil tan	•		
TI	nere is an underground stor	age tank on this property. The typ sted below or on an attached sepa			

5.	Private Burial Site (check one)
	X 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)
0.	 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
	formation required by statements checked above should be provided here or on separate eets attached hereto:
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Siç	gnature: My Auska Telephone No.: (515) 402-3766

Thomas Bros. Septic Service

4201 SE 116th St. Runnells, IA 50237

Froudly serving central Jowa over 55 years

05/07/15

Inspection report for the property located at 1867 Nature CT in Madison County I have serviced and inspected this system and found a 2000 gallon concrete septic tank in good condition with effluent filter, baffles and center wall intact. The poly box was uncovered, found in good condition, hydraulically loaded and the field accepted the load test. I did notice that a riser on the outlet end of the septic tank was cracked. All water used in the home enters the system. System was operating normally at the time of this inspection

This report is not a guarantee of the future workings of the system. This report reflects what was seen at the time and day of this inspection.

Larry Thomas

Certified Inspector Lic 8809 NEHA Certified Installer Certified Grease Handler Lic# 8809

Thomas Bros. Septic 515-681-1178 cell

The findings in this report are not any guarantee of the future performance of this system. The findings are based on observations of the system at the time and day of the inspection only. Thomas Bros. will not be held liable for any hidden or unforeseen damages to this septic system. The inspection has been performed in accordance with the guidelines set forth by the Iowa DNR and in compliance with IAC567-chapter 69. All septic systems require regular maintenance and eventually require repairs or replacement.



Time of Transfer Inspection Worksheet.

,	• *
Other components: Alarms V Working? do	sinfection NO working?
Control box NO Times NO	inspection posts NO
Other components	S.
Overall condition of the private sewage disposal system.	-
Report system status	
Explain (attach additional pages as needed):	
comments Ottlet Riser is Crucket	>
 Verify that controls are set on the approprise Power is on to all components. Revisit all components to verify lids are set Gather all tools for nemoval from the site. Verify that no sewage is on the ground surf 	CORE.
Using this worksheet, write a name we report of the insper	ction results and attach a site sketch.
This report indicates the condition of the private sewage of the inspection. It does not governoe that it will continue	isposal system at the time of to function satisfactorily.
Signature of Certified inspector	Date 57/7/15
Name (print): LARRY ThurkAS	Centrale# 8809
Address 5721 SE 62 Ave DSM	
Phone \$ 7/5-68/-1/78	
Provide a copy of this seport, the manufacture report and she	ch to the sellentagent, beverlagent, the
county susibalization and a least the office is the count	ty the inspection was conducted and to:
Iown DNR Onsite Wastewater Program 502 E. 9th St. Des Moines, IA,50319	• •



Time of Transfer Inspection Report (DNR Form 542-9191)

Property information
Buyer Tanyla Jean NISKA Restor Sarah Comman
Commence Taylor Jean 1015 Kg
Mailing address Reamon COWMAN
Site Address County (810) Natore (+. Winterset, Madison
Legal Description
No of bedrooms 4 Last occupied? Current Records available VES
A CONTRACT CONTRACT A
Permittinstallation date 9/05 Separation distances of no? 10ft.
W:
Servic system information
Septic tank(s): size 2000 grl. material Concrete condition of Tank pumped? 485 (take 5/7/15 licensed pumper Thomas Bros.
Tank minuted? 425 too 5/7/15 Freezed minute Burs.
Septic/trash/processing tank: size material condition
Tank pumped? deat licensed pumper
Aerobic treatment unit (ATU) migr Tank pumped? date licensed pumper Maintenance contract? expiration date Service provider
Tank pumped? date licensed remover :
Maintenance contract? exviration date: Service provider
Condition
Pump tanks/vaults: type size condition
^
Distribution system: distribution box loin outlets used 4 condition of
Header pipe(s) # of lines Pressure dosed? NO
Secondary treatment:
length of absorption fields 900 ft. 1 determined by Lecon-05
length of absorption fields 400 f2 determined by Lecon-05 condition of fields 0/C determined by Hydraulic Load
type of trench milerial Navrow CHAMBERS
Size of sand filter determined by
Vent pipes above grade? discharge pipe located?
Effluent sample taken? Results
Media filters: type
Maintenance contract? expiration date service provider
Condition

comit # 110-05 Jordan Copper Fox Est Lot 4 1867 Mature Court