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Book 2015 Page 2241 Type 43 001 Pages 6 Date 8/07/2015 Time 12:58:15PM

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INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

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

| I KANSFEROR: | | | |
|---|---|------------------------|---------------------|
| Name <u>Allan Ruhnke</u> | | | |
| Address 1182 Woodland Ave | Cumming | <u>IA</u> | 50061 |
| Number and Street or RR | City, Town or P.O. | State | Zip |
| TRANSFEREE: | | | |
| Name <u>Juliette Houseman</u> | | | |
| Address 13110 Tanglewood Dr | Urbandale | IA | 50323 |
| Number and Street or RR | City, Town or P.O. | State | Zip |
| Address of Property Transferred: | | | |
| 1182 Woodland Ave | Cumming | IA | 50061 |
| Number and Street or RR | City, Town or P.O. | State | Zip |
| There are no known wells situated There is a well or wells situated or set forth on an attached sepa Solid Waste Disposal (check one) There is no known solid waste of | on this property. The type(s), locati arate sheet, as necessary. | ion(s) and legal statu | us are stated below |
| / ` | sal site on this property and infor | mation related there | eto is provided in |
| 3. Hazardous Wastes (check one) | | | |
| There is no known hazardous w | aste on this property. | | |
| There is hazardous waste on the attached to this document. | his property and information related | thereto is provided | in Attachment #1, |
| 4. Underground Storage Tanks (che | ck one) | | |
| There are no known undergrou and residential motor fuel tanks | ind storage tanks on this property. , most heating oil tanks, cisterns and | | |
| | ge tank on this property. The type(s an attached separate sheet, as nec | | nown substance(s) |

| 5. | Pri | vate 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. | | | | | | |
| į | | 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 | | | | |
| | | ation required by statements checked above should be provided here or on separate sheets ed hereto: | | | | |
| | | | | | | |
| | | | | | | |
| | - | I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS | | | | |
| | FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT. | | | | | |
| Sig | natu | re: Telephone No. (5/5) 205-5504 | | | | |

EXHIBIT "A"

A parcel of land located in the South Half (1/2) of the Southwest Quarter (1/4) of the Southwest Fractional Quarter (1/4) of Section Twelve (12), Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, containing 16.561 acres, as shown in Plat of Survey filed in Farm Plat Book 2, Page 36 on June 17, 1986, in the Office of the Recorder of Madison County, Iowa; EXECPT that part of Parcel "B" that lies therein, as shown in Plat of Survey filed in Farm Plat Book 2, Page 152 on May 12, 1989, in the Office of the Recorder of Madison County, Iowa; AND EXECPT Parcels "F" and "G", located therein, containing 3.09 acres and 9.72 acres, respectively, both parcels as shown in Plat of Survey filed in Book 2014, Page 683 on March 28, 2014, in the Office of the Recorder of Madison County, lowa.





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

| Property information | |
|--|--|
| Current owner allan Ruhnt | 2 |
| | Berker d. O Axi = D - 1 t |
| Buyer | Realtor down Raslig - Beely Ka |
| Mailing address | |
| Site Address/County // Q1-9//mdlan | dave. Cumming, do. 5006/ |
| Legal Description | marin |
| | * |
| No. of bedrooms 3 Last occupied? is Me | Records available 485 |
| Permit# 1734 finstallation date 9-29 | 7-98 Separation distances old no? ok |
| Septic system information | - 4 - 11 - 14 - 1 - 1 - 1 - 1 - 1 - 1 - |
| OCUMO O SAMIL SILLAMINA | • |
| Septic tank(s): size 1000 gal material | Inveret a condition good |
| Tank pumped? 100 date 5-4-15 | licensed pumper Mayol 57. 75 |
| Septic/trash/processing tank: size | material condition |
| Tank pumped? date | licensed pumper |
| | |
| Aerobic treatment unit (ATU) mfgr | / size |
| Tank pumped? date | licensed pumper |
| Maintenance contract?expiration date | service provider |
| Condition | _/// |
| | / / / |
| Pump tanks/vanits: type size/ | condition |
| Distribution system: distribution box Plastic | condition and 3 condition and |
| Header nine(c) . 2. | # of lines 3 Pressure dosed? |
| indust jupo(s) | "OLIMA |
| Secondary treatment: | , |
| length of absorption fields 3 at 75 | determined by map & Probing |
| condition of fields good + dru | determined by walking & Probing |
| type of trench material 310" Changen | |
| | |
| Size of sand filter | determined by |
| Vent pipes above grade? | discharge pipe located? |
| Effluent sample taken? Re | sults |
| | |
| Media filters: type/ | |
| Maintenance contract? expiration date | service provider |
| Condition | |
| | Marine and the second s |
| NPDES General Permit No. 4: required? | permitted? NOI provided |
| JOHN MAYER | |
| 62000 SEPTIC TANK PUMPIN | |
| 1509 St. Hwy. 92 | S 542-0191 |
| Winterset 15 30273 84 | 4.6 E |
| A Comment of the State of the S | |



| Time of Transfer Inspection Report |
|--|
| Other components: Alarms Working? disinfection working? |
| Control box inspection ports |
| Other coproponents |
| Overall condition of the private sewage disposal system |
| Report system the septio system at 1182 Woodlandave |
| Explain (attach additional pages as needed): Culmining da 5 allel- |
| there are no warles in the tank & Saul has Donner + |
| intake of outflow palleds are in slove |
| The tank was at correct level before sumsing (water level) |
| the dist, bot was opened tingrood condentato water was run into |
| and all gray water goes to system or - 5-4-15 |
| 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. |
| and the same of th |
| Using this worksheet, write a nametive 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 satisfacturily. |
| Signature of Cestified inspector: |
| Address: SEPTIC TANK PLANTING |
| Phone # 525 1/42-24-24 1509 St. Hwy. 92 Winterest, IA 50279-000 |
| Provide a copy of this report, the demative report and sketch to the sellent part, buyentegent, the county smith on the inspection was |
| conducted and to; |
| Iowa DNR Conite Wastewater Program 502 B. 9 th St. |
| Des Moines, IA 50319 |

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