



Document 2015 GW2569

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name David B. Vasey and Karen Vasey
Address 3311 Heritage Avenue, Lorimor, IA 50149
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Duane Dobbs
Address 2893 Hwy 169, Winterset, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
2893 Highway 169, Winterset, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) Parcel "B" located in the Southeast Quarter (SE 1/4) of the Southwest Quarter (SW 1/4) of Section Two (2), Township Seventy-four (74) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, containing 3.00 acres, as shown in Amended Plat of Survey filed in Book 2009, Page 882 on March 26, 2009, in the Office of the Recorder of Madison County, Iowa.

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: David B Vasey
(Transferor or Agent)

Telephone No.: (515) 402-1924



Time of Transfer Inspection Worksheet

Other components:

Alarms NA Working? _____ disinfection _____ working? _____

Control box _____ Timers _____ inspection ports _____

Other components _____

Overall condition of the private sewage disposal system

Acceptable? Yes Unacceptable? _____

Explain (attach additional pages as needed): Tank and D-Box were replaced in March 09. Field was dry and tested out. No water surfacing on field.

Comments: _____

Site status at conclusion of Time of Transfer inspection:

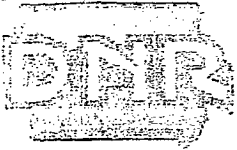
- Verify that controls are set on the appropriate mode.
- Power is on to all components.
- Revisit all components to verify lids are secure.
- Gather all tools for removal from the site.
- Verify that no sewage is on the ground surface.

Using this worksheet, write a narrative report of the inspection results.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: [Signature] Date: 8-20-15
 Name (print): Cora Bedwell Certificate #: 7863
 Address: 2924 Quaker St. Charles LA 70040
 Phone #: 601 596 2968



#034-15

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

Property information

Current owner David Vasey 2-Monroe
Buyer _____ Realtor _____
Mailing address _____

Site Address/County 2893 U.S. Hwy 169 Winterset Ia 50273

No. of bedrooms 3 Last occupied? _____ Disposal? Y N Softener? Y N H₂O supply? Rural

Records available Yes Permit/installation date 3-20-09 Installer Huff

Septic system information

Septic tank(s): size 1250 material Concrete condition good
Tank pumped? Yes date 8-18-15 licensed pumper Yes 57-236
Septic/trash/processing tank: size NA material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfg NA size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type NA size _____ condition _____

Distribution system: distribution box Plastic outlets used 3 condition good
Header pipe(s) 4" # of lines 3
Pressure dosed? NO

Secondary treatment:
length of absorption fields 3 @ 50' determined by MAP + Probe
condition of fields good determined by Probe
type of trench material Rock + Pipe

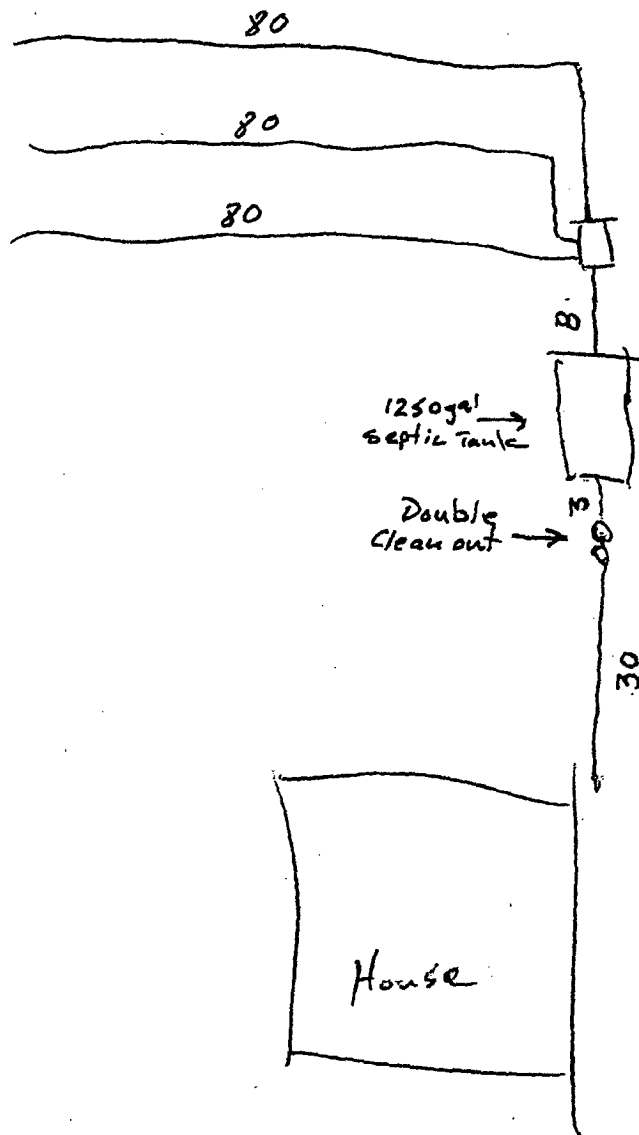
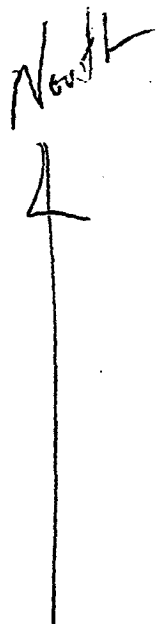
Size of sand filter NA determined by _____
Vent pipes above grade? _____ discharge pipe located? _____
Effluent sample taken? _____ Results _____

Media filters: type NA
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

NPDES General Permit No. 4: required? _____ permitted? _____ NOI submitted _____

Permit # 004-09 3/20/09
Replacement Tank + Dist Box

2893 US Hwy 169



Madison County
Office of Zoning and
Environmental Health

**Authorization to Construct a
Private On-site Wastewater
Treatment System (POWTS)**

112 N. John Wayne Drive
P.O. Box 152
Winterset, IA 50273-0152
Telephone: (515) 462-2636

Permit Number: 004-09

Date Issued: March 20, 2009

Issued to: Vincent & Katherine Wildin
Address: ~~2791 US Highway 160~~
Winterset, Iowa 50273

2893 US Hwy 169
666140268030000

Legal Description: SE SW EX 1.9A HIGHWAY Section 2 T74 R28 Monroe Twp

POWTS Components Specifications: 1250 gal septic tank only

General Conditions:

1. System must be constructed in conformance with attached system layout, profiles, and cross-sections.
2. Structures must be constructed in conformance with 567 IAC Chapter 69 and the Madison County Environmental Health Regulations.
3. Permit shall be null and void if system is not constructed within one year of permit issuance. The Environmental Health Officer must approve any request for extension of permit.
4. The Environmental Health Officer must approve any design modifications to the permitted system prior to construction.
5. Once constructed, all system components must be uncovered for inspection and the system must be approved before it can be put into operation. Notice for inspection must be received with 24 hours in advance (8 a.m. through 4:30 p.m., Monday - Friday). If weather necessitates the need to cover the system components, then the system owner or contractor must notify and follow the procedures given by the Environmental Health Officer.

Special Conditions: Maximum trench depth



Environmental Health Officer
Madison County
Office of Zoning and Environmental Health

**Application to Construct
Private Sewage Disposal System (PSDS)**

Office Use Only					Temp E911:		
Tracking No.	Date Received	Fee Paid	Check #	Date Issued	Section/Township		
004-09	3-20-09	\$100	2148	3-20-09			

Application will not be accepted until site and soil analysis/percolation information have been received and fee has been paid. For systems requiring an NPDES General Permit #4 (surface discharge), its application must be submitted to this office along with appropriate forms for recording before a permit will be issued.

Please Print All Information.

1. Owner Information (Applicant)				2. Installation Contractor Information			
First Name		Last Name		First Name		Last Name	
Vincent Wildin				Larry Huff			
Address				Address			
2791 US Highway 169				1996 - 295 th Lane			
City		State		City		State	
Winterset, Iowa				Winterset, Iowa			
Phone Number (area code)		Cell Phone		Phone Number (area code)		Cell Phone	
462-3671				462-3569		468-0091	
3. System Requirement Information				4. Site and Soil Evaluator (Percolation Test/Soils Analysis)			
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED				PERCOLATION/SOILS ANALYSIS MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT			
		Minimum Tank Size Required		Date test taken _____		Test taken by _____	
1-3 Bedroom		1250		Passed: _____		Failed: _____	
4 Bedroom		1500		Percolation Rate: _____		Soils Loading Rate: _____	
5 Bedroom		1750					
6 Bedroom		2000					
5. Type of Submittal				6. Address Information			
<input type="checkbox"/> New House <input type="checkbox"/> Existing House <input checked="" type="checkbox"/> Repair, Tank <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement Previous Permit #: 1193				911 Address or nearest road: 2893 US Highway 169 Legal Description: SE SW EX 1.9A HIGHWAY Section 2 T74 R28 Monroe Twp			
7. Type of Building (Completed by Owner)							
Building Square ft.:		Number of Bedrooms: 3		Number of Bathrooms:		Non-Residential uses:	
Other buildings served by this system:				Any other circumstances which may affect water usage:			
None				Water softeners must be routed to a brine pit independent of septic system.			
Your contractor or system designer should complete the remaining portion of this application.							
8. Tanks							
Septic Tank		Type: Concrete		Size: 1250		Manufacturer: Lister	
Pump Tank		Type:		Size:		Manufacturer:	
Additional Tank		Type:		Size:		Manufacturer:	
9. Secondary Treatment Area							
Laterals		Type:		Length of each:		Total number:	
Sand Filter		Square ft.:		Length:		Width:	
Peat System		Model:		Manufacturer			
Other		Description:					
I hereby attest the truth and accuracy of all facts and information presented on this application. Request for inspection of the system must be made 24 hours in advance. Water at the site to test the distribution box must be available. Discharging systems must be covered by a maintenance agreement, which shall be recorded in the Madison County Records Office. Discharging systems also require periodic testing as set forth in IAC Chapter 69 and Madison County Environmental Health Regulations.						It is unlawful to start construction, reconstruction, or repair of any PSDS prior to issuance of a PSDS permit by the Environmental Health Officer.	
Applicant Signature:				Date:			
Vin Wildin				3-20-09			

RLI1002 PID 660140268010000 00 Tax Dist 660 000 Class A INQUIRY
2008 061 Map# 000001402300004 GIS#

Property 006460500 DED Wildin, Vincent C & Katherine K
Ownership 2791 US Hwy 169
Winterset IA 50273-

000000000
Location 2893 Street US HWY 169 City WINTERSET
Recorded DED 2008 3184 10/28/2008 3184 2008/09/26

Documents

Misc Exempt Code No Ag Cr Vin
Sec-Twp-Rng 002 074 028 Cty-Adn-Blk 00002 Title

Legal Desc SE SW EX 1.9AC HWY

Applications Typ 1 H Ovr Amt Typ 2 AGL Ovr Amt 10,182
Typ 3 M03 Ovr Amt Typ 4 Ovr Amt

			Acres	Typ	Value	Rollback	Acres
100%Gs	77,720	Gr	38.10	LND	11,300	10,606	36.50
100%Nt	77,720	Ex	1.60	DWL	59,400	27,080	
TaxGrS	44,275	PE	.00	BLD	7,020	6,589	
Milt	1,852	Dr	.00	EXM			1.60
TaxNet	42,423	Net	36.50				

F3=Exit F10=Owners F12=Prev F13=Rec Doc F14=Image F15=Legal F16=Notes
F17=IE F18=TaxHist F19=Applc F20=Value F21=Print F22=View Image F23=Indexing

Permit No 004-09 Name: Wildin 911 Sign Locate

Date of Inspection: 3/20/09 Inspected by: Elton Root

Contractor: Huff & Son

Dwelling under construction or moved in Yes No

Setbacks

Meets required setbacks.

- Rural Water Yes No
- Private wells/Groundwater heat pump bore holes/suction water lines/lakes
 - Outside required 50-foot setback for tank Yes No
 - Outside required 100-foot setback for laterals Yes No
- Streams/ponds (25-25 ft)-ditches (10-10 ft) Yes No
- Indications of water lines under pressure Yes No

Comments:

Building Sewer

- Clean outs – one right outside of house Yes No
- location of cleanout inside house and set requirement
- Pipe is sch 40 and has a 4-inch diameter. Yes No
- Grade – has adequate fall. Yes No

Comments:

Tank

- Tank. Manufacture Lister Concrete Plastic
- Capacity 1250 -gallon
- Two compartments, both meet the specs for capacity. Yes No
- Baffle Yes No
- Inlet/Outlet tees are ok. Yes No
- Effluent filter in the outlet. Yes No Manuf. Zabel
- Tank depth. 12 inches
- Risers Yes No
- Lids above grade screwed on Yes No Will be

Comments:

Distribution Box

- Brand Tuf-Tite Other
- Bedded in cement. Yes No Will be
- Has required inlet baffle. Yes No Will be
- Outlet levels –are level. Yes No Unknown

Comments:

Laterals

- Distribution lines: -inch PVC pipe –
- Distribution lines screwed to laterals. Yes No Will be
- Lateral used. Reduction? Yes No
- Lateral depth. Perc depth inches
- Laterals were level. Yes No
- Adequate amount of undisturbed soil between laterals. Yes No
- Distance feet between laterals.

Comments: Tank & Distribution Box Replacement only

Permit # 004-09 Wildin Tank & Dist. Box Inspection 3/20/09

2893 US Hwy 169

