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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

IRANSF	EROR:					
Name	Niol E. Thomas and Carolyn	E. Huglin				
Address	1717 - 105th Street, Earlham	, Iowa 50072				
	Number and Street or RR	City, Town or P.O.	State	Zip		
TRANSF	EREE:					
Name Grant A. Rutz and Shelby R. Rutz						
Address	1133 Ivy Avenue, Earlham, I	owa 50072				
	Number and Street or RR	City, Town or P.O.	State	Zip		
	of Property Transferred: 05th Street, Earlham, Iowa 500)72				
Nur	mber and Street or RR	City, Town or P.O.	State Zi	р		
TI		on this property. The type(s),		are		
2. Solid X TI	Waste Disposal (check one) here is no known solid waste o	disposal site on this property. site on this property and inform	•	rided		
<u>X</u> TI	dous Wastes (check one) here is no known hazardous w here is hazardous waste on th ttachment #1, attached to this	is property and information rela	ated thereto is provided in			
<u>X</u> TI sr in: TI	mall farm and residential moto structions.) here is an underground storag	ck one) nd storage tanks on this proper r fuel tanks, most heating oil ta te tank on this property. The ty ed below or on an attached sep	nks, cisterns and septic tanl vpe(s), size(s) and any know	ks, in		

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) 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. 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 the 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 ex
sh	formation required by statements checked above should be provided here or on separate eets attached hereto:
	ne well is located on the northeast corner of the house
<u>O</u> 1	ne cistern is located on the east side of the house.
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Siç	gnature: Mod E. Monday Telephone No.: (515) 306-1762 Niol E. Thomas
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TIME OF TRANSFER INSPECTION WAIVER BINDING ACKNOWLEDGEMENT for FUTURE INSTALLATION

This agreement is entered into this <u>3rd</u> day of <u>September</u> 20 <u>15</u> by and between Madison County Board of Health and <u>Shelby Rutz</u> .
WHEREAS, it is understood the Iowa Administrative Code 567-69 requires an inspection of the private sewage disposal system on all property located in Iowa at the time of transfer.
WHEREAS, the property located at <u>1717 105th St</u> , <u>Earlham</u> , lowa is subject to the inspection, and the buyer <u>Shelby Rutz</u> understands there is not a private sewage disposal system serving this property.
NOW THEREFORE, it is hereby agreed that the time of transfer inspection will not be required and agrees that the necessary private sewage disposal system to serve the property shall be installed and completed no later than <u>1st</u> day of <u>October</u> , 2015.
Dated the <u>3rd</u> day of <u>September</u> 2015.
PROPERTY BUYER MADISON COUNTY BOARD OF HEALTH OR AUTHORIZED REPRESENTATIVE
This instrument was acknowledged before me on Spt 3 , 2015 by Conchol / Sholby 24z
SINDY L BROWN Commission Number 785563 My Commission Expires August 14, 2017 SINDY L BROWN Notary Public Notary Public