



Document 2015 GW2808

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Fee Amount:

Revenue Tax:

LISA SMITH RECORDER

Madison County, Iowa

INDX

ANNO

SCAN

CHEK

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

TRANSFEROR:

Name Clayton L. Turner

Address 1543 Quarry Trl Winterset IA 50273-8215
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Richard Rogers

Address 1253 19th St West Des Moines IA 50265
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

1543 Quarry Trl Winterset IA 50273-8215
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

Lot One (1) of Kraai's Bethhoron Subdivision located in the Southwest Quarter (1/4) of Section Eleven (11), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., 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. *South of pond 50' - don't know type + sellers do not use it, see attached*

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.

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

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)

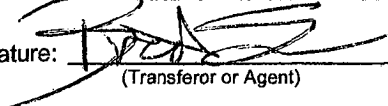
- All buildings on this property are served by a public or semi-public sewage disposal system.
- This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
- There is a building served by private sewage disposal system on this property 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:

Confirming - not using

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.: (515) 453-6834

Subject
Home
1543
Quarry Trl.

Pond

8
well

Privately
owned
home

Quarry trl.

Contact Person

Name: Clayton Turner
Phone: (515) 418 - 0617

58723
Clayton Turner 8-11-15 emailed Madison Co.
8-20-15 emailed report

Seller Agent/Realtor or Seller (if For Sale by Owner)

Name: Brent Sharon
Email: brentsharon@iowarealty.com (1)
Phone: (515) 208 - 2200

No pumping info.

About the Home

Address: 1543 Quarry Trail Winterset, IA, 50273

County: Madison (2) DNR (3)

Age System: 7

of Bedrooms: 4

Occupied: yes

Water: yes Type: rural

Legal: LOT 1 KRAAI'S BETHHORON SUB-DIVISION

Township: Union

Section #: Section: 11 Township: 76 Range: 27

Owner

Kathy

First & Last Name(s): Clayton Turner
Address: 1543 Quarry Trail Winterset, IA, 50273

Phone: (515) 418 - 0617
Email: claytonturner56@gmail.com (4)

8-17
man
2-3-30
Tory Did
man

Buyer Agent/Realtor

Name: Dixie Cox-Grieme (5)
Email: dixie@iowarealty.com
Phone: (515) 453 - 5181

Buyer

Name(s): Richard and Ashley Rogers
Phone (515) 802-8503
Email: name@email.com
Address: 1253 19th St West Des Moines, IA, 50265
Closing Date: 09-24-15 *

The Cleaning and Inspection takes us 1 1/2 to 2 hours to complete.
Someone must be present to gain access in the home for us to check the plumbing and run water which is required by the DNR.

The DNR requires the septic tank to be pumped as part of the inspection unless the tank has been pumped within the last 3 years by a State Licensed Hauler. (Must show documentation.)

NOTE: PAYMENT IS DUE AT TIME OF SERVICE





Time of Transfer Inspection Report

Property Information

Current Owner: Clayton Turner
 Buyer: Richard Rogers Realtor: Dixie Cox-Grieme
 Mailing Address: 1543 Quarry Trl. Winterset, Ia 50273
 Site Address/County: same madison county
 Legal Description As Abstract _____
 No. of bedrooms: 4 Last occupied: occupied Records available: Y N
 Permit/ installation date: _____ Separation distances (ok/no?): OK

Septic System Information

Septic tank(s): Size: 2000 Material: Concrete Poly Condition: OK
 Tank pumped? Y N Date: 8-17-15 Licensed pumper: Forest Septic
~~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: Concrete/Poly Size: _____ Condition: _____~~
 Distribution system: Distribution box yes Outlets used 5 Condition: OK
 Header pipe(s): OK No. of lines: 5 Pressure dosed? no
 Secondary Treatment:
 Length of absorption fields: 90 Ft. Determined by: drawing
 Condition of fields: dry and clean Determined by: Hydraulic Test and 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: Functioning properly
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: Tory Forest Date: 8-17-15

Name (print): Tory Forest Certificate #: 10762

Address: PO Box 219, Indianola, IA 50125

Phone #: 515-360-7847

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

CLAYTON TURNER

2000 GAL VANDER POOL TANK
(5) LATERAL 3' x 90'

MAD CO. HEALTH ZONE

462-2636

