



Document 2015 GW2822

Book 2015 Page 2822 Type 43 001 Pages 5  
Date 9/25/2015 Time 11:14:22AM  
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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

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

**TRANSFEROR:**

Name Michael R. Burk and Tiffany Burk  
Address 704 - 7th Street, Menlo, IA 50164  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name Mildred J. Agan  
Address 2512 Peru Road, Peru, IA 50222  
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:  
3010 Rustic Avenue, Peru, IA 50222  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) The West 320 feet of the North 429 feet of the  
Northeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Thirteen (13), in Township  
Seventy-four (74) 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.

**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:**

One well 30 feet west and 50 feet south of the house and a cistern 20 feet east of the house.

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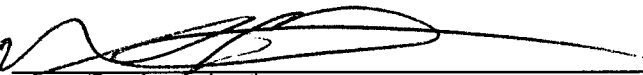


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**I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.**

Signature:  Telephone No.: (515) 314-2859  
(Transferor or Agent)



*Closing atty.*

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

Property information

Current owner Michael R. Burk  
 Buyer \_\_\_\_\_ Realtor Banks Harmonist Merchants  
 Mailing address \_\_\_\_\_ Winterset, Ia. 50273  
 Site Address/County 3010 - Rustic ave. Peru, Ia. 50222  
 Legal Description \_\_\_\_\_ Madison Co.  
 No. of bedrooms 3 Last occupied? Not now Records available yes  
 Permit# 032-11 installation date 6-30-11 Separation distances ok/no? OK

Septic system information

Septic tank(s): size 1500 material concrete condition good  
 Tank pumped? yes date 9-19-15 licensed pumper Mayer septic  
 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/vaults: type \_\_\_\_\_ size \_\_\_\_\_ condition \_\_\_\_\_  
 Distribution system: distribution box Plastic outlets used 3 condition good  
 Header pipe(s) 3 # of lines 3 Pressure dosed? \_\_\_\_\_

Secondary treatment:

length of absorption fields 3 at 100 ft. determined by most probing  
 condition of fields good determined by walking + probing  
 type of trench material 36" chamber

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 \_\_\_\_\_

NPDES General Permit No. 4: required? \_\_\_\_\_ permitted? \_\_\_\_\_ NOI provided \_\_\_\_\_



### Time of Transfer Inspection Report

Other components:

Alarms \_\_\_\_\_ Working? \_\_\_\_\_ disinfection \_\_\_\_\_ working? \_\_\_\_\_

Control box \_\_\_\_\_ Timers \_\_\_\_\_ inspection ports \_\_\_\_\_

Other components \_\_\_\_\_

Overall condition of the private sewage disposal system

Report system status The septic system at 3010 Rustic Ave

Explain (attach additional pages as needed): Peru, Ia. 50272

System good operating Cond.

Comments: The septic tank was opened & pumped on 9-19-15 water was at correct level - before pumping also - the tank has 2 compartments intake & outflow baffles are in place also there are no cracks in the septic tank - The septic tank was filled w/ water after pumping on 9-19-15 The septic box was opened on 9-19-15 The box is in good cond & all lateral took water on 9-19-15 also lateral field was wet w/ rain water - but no sewage on ground level on 9-19-15

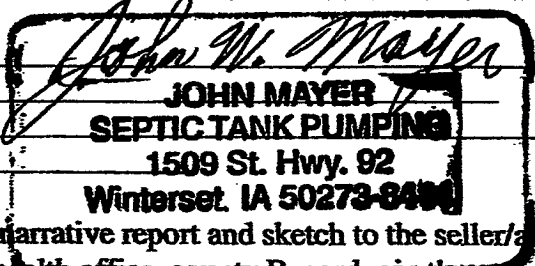
also all gray water goes to system on 9-19-15

- 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.
  - ✓ Gather all tools for removal from the site.
  - Verify that no sewage is on the ground surface. None on 9-19-15

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: John W. Mayer Date: 9-19-2015  
 Name (print): \_\_\_\_\_ Certificate #: 8979  
 Address: \_\_\_\_\_  
 Phone #: 515-462-2624



Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Permit No 032-11

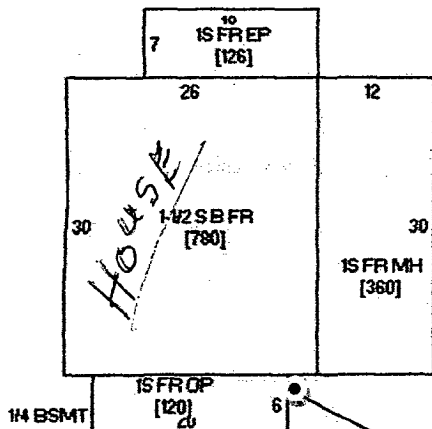
Name: Michael Burk

Date of Inspection: 6-30-11

Inspected by: Jean Thompson

Contractor: Mark Mease 468-1671 or 468-0373

Rustic Ave



*NORTH* →

*Concrete tank  
1500 gal.*

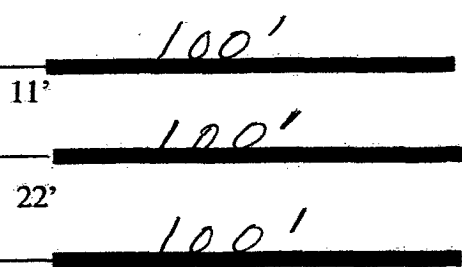
*Plastic Box*



Curtain drain 230'

Peru Road

22.5'



*36" Chamber*

11'

22'

14'