



Document 2015 GW3386

Book 2015 Page 3386 Type 43 001 Pages 6  
Date 11/16/2015 Time 9:18:34AM  
Rec Amt \$.00

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LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

CHEK

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

**TRANSFEROR:**

Name Kimbra D. Ross  
Address 101103 Highway 56, Okemah, OK 74859  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name Ronald Paul Dyer  
Address 5608 South Union Drive, Des Moines, IA 50315  
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:  
2884 State Highway 92, Winterset, IA 50273  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) A parcel of land in the Northeast Quarter (NE 1/4) of the Southeast Quarter (SE 1/4) of Section Thirty (30), Township Seventy-six (76) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, containing 3.00 acres, as shown in the Plat of Survey filed in Farm Plat Book 2, Page 230, on February 22, 1991, 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:**

\_\_\_\_\_

*Well located NW of house approximately 75 to 100 feet*

\_\_\_\_\_

\_\_\_\_\_

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

Signature: Kimima D Rowe Telephone No.: 515-468-8842  
(Transferor or Agent)



atly.

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

Property information

Current owner Kimera Ross
Buyer
Realtor Private Sale
Mailing address

Site Address/County 2884 St. Hwy - 92 Winterset, Ia 50273
Legal Description Madison Co.

No. of bedrooms 2 Last occupied? not for 10 m. Records available Yes
Permit # 161-04 installation date 12-7-04 Separation distances ok/no? OK

Septic system information

Septic tank(s): size 1250 material concrete condition good
Tank pumped? Yes date 10-24-15 licensed pumper Mayel Lintie
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfrg 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 6 condition good
Header pipe(s) 5 # of lines 6 Pressure dosed?

Secondary treatment:

length of absorption fields 100 ft. determined by snort & probing
condition of fields good & dry determined by walking & probing
type of trench material chamber E 9-24

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 2884-11 Hwy 92

Explain (attach additional pages as needed): Winterset, Ia. 50273

was in good operating cond. on - day of inspt, 10-24-15

The septic tank was opened & pumped - on 10-24-15

Comments: tank has (D) comp. & intact outflow baffles again

Place - the tank water level was at correct level - before

pumping & there are no cracks in the concrete tanks

also - all gray water goes to system on 10-24-15

The dest. box was uncovered & opened - on 10-24-15

box is level & in good cond. - no water was run into box &

each lateral & all took water good - on 10-24-15 &

lateral field is recent dry - on 10-24-15

#### Site status at conclusion of Time of Transfer inspection:

- Verify that controls are set on the appropriate mode.
- Power is on to all components.
- Done  Revisit all components to verify lids are secure.
- Gather all tools for removal from the site.
- Done  Verify that no sewage is on the ground surface. None on 10-24-15

Using this worksheet, write a narrative report of the inspection results and attach a site sketch. 15

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

Name (print): \_\_\_\_\_

Address: \_\_\_\_\_

Phone # 515-462-2624

John W. Mayer

**JOHN MAYER**

**SEPTIC TANK PUMPING**

**1509 St. Hwy. 92**

**Winterset, IA 50273-8400**

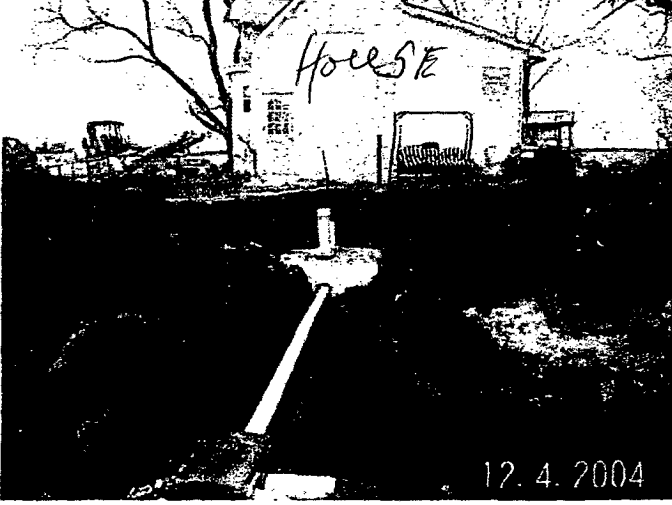
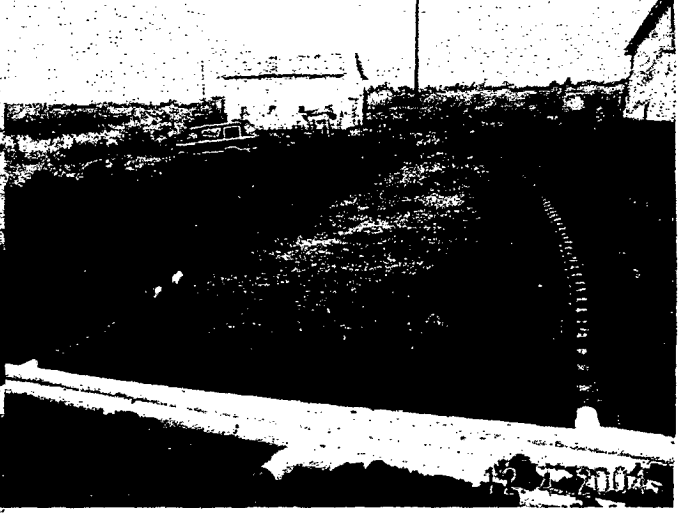
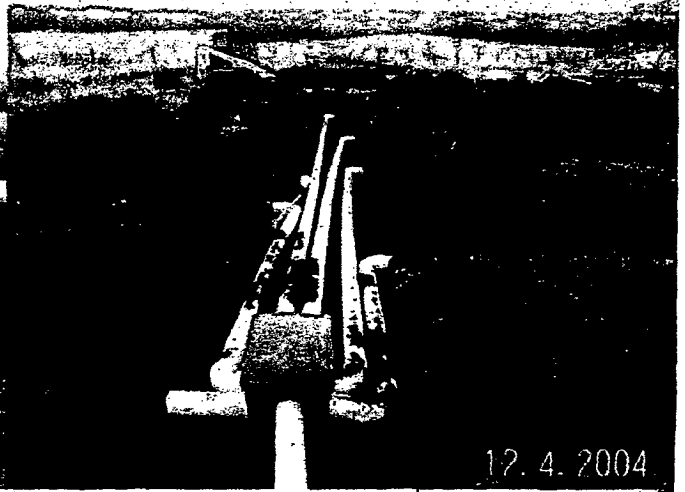
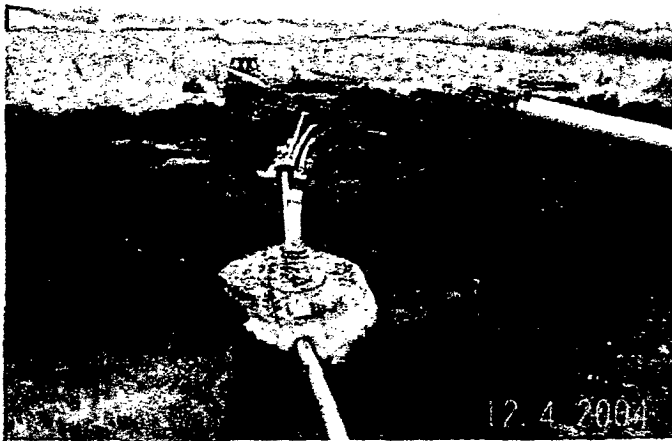
Date: 10-24-2015

Certificate #: 8979

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 # 161-04 England Inspection 12/7/04



South