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Book 2015 Page 3733 Type 43 001 Pages 5 Date 12/18/2015 Time 11:19:24AM

Rec Amt \$ 00

INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

		COMPLETED BY TRANSFEROR				
TRANS						
Name	Charles L. Abel and Jennife	er L. Abel				
Address	1655 - 98th Street, Unit # 203, West Des Moines, IA 50266					
	Number and Street or RR	City, Town or P.O.	State	Zip		
TRANSI	FEREE:					
Name	Andrew S. Chapman and A	manda Jo Chapman				
Address	8017 Greenbelt Drive, Urba	andale, IA 50322				
	Number and Street or RR	City, Town or P.O.	State	Zip		
Address	of Property Transferred:					
	210th Street, Winterset, IA 50	0273				
N	umber and Street or RR	City, Town or P.O.	State	Zip		
Logol Da	pagintian of Dranarty (Attach	n if necessary) Parcel "A" located in the So	uth Half (\$ 1/2) of the	Southwest		
Ouarter (9	SW 1/4) of Section Twenty-six (26)	Township Seventy-six (76) North, Range Twen	ty-nine (29) West of the	ne 5th P M		
		es as shown in Plat of Survey filed in Book 3, P				
	of the Recorder of Madison County,		age 541 on sandary 20	, 2000, 111		
the office	of the Recorder of Madison County,	, iowa.				
1 Walle	s (check one)					
	There are no known wells situ	ested on this property				
		ed on this property. The type(s), locati	on(e) and legal ets	atus ara		
		n attached separate sheet, as necessa		ilus aic		
	Waste Disposal (check one		" y.			
	here is no known solid waste disposal site on this property. here is a solid waste disposal site on this property and information related thereto is provided					
	n Attachment #1, attached to		rolated therete to	provided		
	rdous Wastes (check one)	and document.				
	There is no known hazardous	waste on this property				
		this property and information related the	hereto is provided	in		
	Attachment #1, attached to this					
	erground Storage Tanks (ch					
		und storage tanks on this property. (N	Note exclusions su	ch as		
		tor fuel tanks, most heating oil tanks, o				
	nstructions.)			,,		
	•	age tank on this property. The type(s)	, size(s) and any k	nown		

substance(s) contained are listed below or on an attached separate sheet, as necessary.

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.
	 X 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
sh	formation required by statements checked above should be provided here or on separate eets attached hereto:
Th	ree (3) wells on property - one is east by the creek; one is in the NW corner of the property; and one
is :	north 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.
Sig	gnature: Cransferor of Agent) Telephone No.: (515) 681-3805

Seller



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

Property information	
Current owner Church abol	
Buyer	Realtor Covered Bridge Realty
Mailing address	
Site Address/County 1425-210 H	It. Wintersel, do. 502/3
Legal Description	Madison &
No. of bedrooms 4 Last occupied? Lis Me	Records available 3701
Permit# 0//-08 Installation date 5-/5-	08 Separation distances old no? Of
Permit	
العالم <u>المتعلقية المتحديدة المتحديد المتحديدة المتحدثة المتحدثة المتحديدة المتحديدة المتحديدة المتحديدة المتحد</u> - • • • • • • • • • • • • • • • • • • •	د او در هاه دست الدو و ا ستانسيق عدادار داو ا رقيب اوالياليان ب ي ويور الهم الم ا در در در المستعملية داد بد
Septic system information	
Terror O. O. motorial	Concrete condition Good
Septic tank(s): size 2000 gaf material Tank pumped? 401 date 11-19-15	licensed number mayor leptis
Tank pumped!	
Septic/trash/processing tank. size	
Tank pumped? date	
A CATTO mfor	/ size
Aerobic treatment unit (ATU) mfgr	licensed pumper
Tank pumped? date Maintenance contract? expiration date	service provider
Maintenance contract? Cxpminton data	
Condition /	
Pump tanks/vaults: type size	condition
Pump tanks/vaulis. type	
Distribution system: distribution box Plantia Header pipe(s) 4	outlets used 5 condition good
Header pipe(s)	# of lines _5 Pressure dosed?
Assessed F. R. V. A.	
Secondary treatment:	Los Dans
length of absorption fields	determined by mant prober
condition of fields good tary	determined by walking + Probing
type of trench material chamber	
s - 1	the state of the state of
Size of sand filter	determined by
Vent nines above grade?	discharge pipe located?
Effluent sample taken?	Results
*	
Media filters:/ type	service provider
Maintenance contract? expiration date _	Service provides
Condition	the state of the s
1	permitted? NOI provided
NPDES General Permit No. 4: required?	betuinens 1101 brostone



· / 1	Time of Transfer Inspection Report
Offier components	
Alarme Working?	disinfectionworking?
Course box	Timessinspection ports
Other components	
Out willowan	
Overall condition of the private:	gewood disposal system
Oll	septic system at 1425-210 dft
Explain (attach additional pages	Winterset, la, 50273-
in in- and whom to	ind-Point
Comment Yanh has (3) 1	take was open for pupped or 11-10-15
allo Tank was no tra	allow in the atterment less of Holon Marine
all may yette got	untosystem
the dest bot was	uncovered + opered + all laterals took
water field wa	a aleastary
Power is on to all	is are set on the appropriate mode.
Using the worksheet, waste a line	BRAVE REPORT OF THE INSPECTION RESULTS AND SHEET & SHE SKERTS
This report indicates the condition	on of the private sewage disposal system at the time of
the segressia. It does not gotton	natice that it, will continue to function satisfactority.
Signature of Carolier inspector.	1 /11/10 11/01/01 Dec 11-10-15
Name (grint):	SOIM WAYER 7 Certificate # 9979
Address: Place # 515 4 62 2 6 2 4	SEPTIC TANK PLANTING
· · · · · · · · · · · · · · · · · · ·	1509 St. Hury. 92 Winterset. IA 50273-0004
Provide a copy of this report, fire	Committee according to September 1
SOUTH A STANDARD OF AN ADDRESS OF THE PERSON	Marine Marine Country the Inspection was
conducted and to;	The state of the s
Towa DNR Ontite Wash, water Pr 502 R. 9th St.	iogam
Des Moines, IA 50319	
62009	

542-0191 :

Permit # 011-08 Abel Juspection 5/15/08 1425 210th Street

