

Book 2016 Page 876 Type 43 001 Pages 7 Date 4/11/2016 Time 11:32:42AM Rec Amt \$.00

INDX ANNO SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

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

TRAN	SFEROR:						
Name	Emmet L. Brody						
Addre	ss 3359 135th Ct Number and Street or RR	Cumming City, Town ar P.O.	IA State	50061 Zip			
TDAN	errer.						
• •	SFEREE:						
Name	Robert M. Hosford						
Addre	ss 3509 Boulder Dr	West Des Moines	IA	50265			
/ toul C	Number and Street or RR	City, Town or P.O.	State	Zip			
Addre	ss of Property Transferred:						
	135th Ct	Cummina	IA	50061			
	Number and Street or RR	City, Town or P.O.	State	Zip			
Ìowa.	ownship Seventy-seven (77) North		·				
	Wells (check one)						
X	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. Sc	olid Waste Disposal (check one)						
A	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. Ha	azardous Wastes (check one)						
×	There is no known hazardous waste	e on this property.					
	There is hazardous waste on this attached to this document.	property and information related th	ereto is provided	in Attachment #1,			

4.	Un	derground Storage Tanks (check one)					
	X	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 .	Pri	vate 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.	Pri	vate 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 whice sewage disposal system is connected will be demolished without being occupied. The buyer has exect a binding acknowledgment with the county board of health to demolish the building within an agreed 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:							
LUEDEDV DEGLADE THAT HAVE DEVENUED THE MOTBUGGEOG FOR THE							
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.							
Sig	natu	Telephone No.: (SC) 981-5678					



Time of Transfer Inspection Report

Property Information						
Current Owner: Emuet Brody						
Buyer: Richard Hosford Realtor: Lowell Bayler						
Mailing Address: First Realty						
Mailing Address: First Realty Site Address/County: 3359 135th ct. Cunning Ia. 50061 Legal Description As Abstract						
Legal Description As Abstract						
No. of bedrooms: 4 Last occupied: Occupied Records available: YNN						
Permit/ installation date: 9-4-03 Separation distances (ok/no?):						
Septic System Information						
Septic tank(s): Size: 2000 Material: Concrete/Poly Condition:						
Septic tank(s): Size: 2000 Material: Concrete/Poly Condition: good Tank pumped? N Date: 3-16-16 Licensed pumper: To rest Systic Env						
Septic/Trash/Processing tank: Size: Material: Condition:						
Tank pumped?						
Aerobic treatment unit (ATU) mfgr 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 4e5 Outlets used 5 Condition: 3000						
Header pipe(s): No. of lines: Pressure dosed?						
Secondary Treatment:						
Length of absorption fields: 5 100 aterals Determined by: frobing / drawing						
Condition of fields: probal wet Gee attatches termined by: Hydraulic Test and Probing						
Type of trench material: 36" chamber						
Size of sand filter: Determined by:						
Vent pipes above grade? YN Discharge pipe located? YN						
Effluent sample taken Results:						
Media Filters: Type:						
Maintenance contract?						
Condition:						
NPDES General Permit No. 4: Required? YN Permitted? YN NOI provided:						
4/2010 cmz/dao DNR Form 542-0191						



Time of Transfer Inspection Report

Property Information						
Current Owner: Emmet Brody						
Buyer: Richard Hosterd Realtor: Lowell Baller						
Mailing Address: First Realty						
Mailing Address: Site Address/County: 3359 135thct. Cumaring Ia. 50061 Legal Description As Abstract						
Legal Description As Abstract						
No. of bedrooms: 4 Last occupied: Occupied Records available: YNN						
Permit/ installation date: 9-4-03 Separation distances (ok/no?):						
Septic System Information						
Septic System Information Septic tank(s): Size: 2000 Material: Concrete/Poly Condition: good Tank pumped? TYN Date: 3-16-16 Licensed pumper: Forest Santin Fax.						
Tank pumped? N Date: 3-16-16 Licensed pumper: Forest Sastic Env.						
Septic/Trash/Processing tank: Size: Material: Condition:						
Tank pumped? YN Date: Licensed pumper:						
Aerobic treatment unit (ATU) mfgr 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 4e5 Outlets used 5 Condition: 3000						
Header pipe(s): No. of lines: Pressure dosed?						
Secondary Treatment:						
Length of absorption fields: 5 100' aterals Determined by: frobing / drawing						
Condition of fields: probad wet Gee attatched termined by: Hydraulic Test and Probing						
Type of trench material: 36" chamber						
Size of sand filter: Determined by:						
Vent pipes above grade? YN Discharge pipe located? YN						
Effluent sample taken Results:						
Media Filters: Type:						
Maintenance contract?						
Condition:						
NPDES General Permit No. 4: Required?						



Time of Transfer Inspection Report

Other components:							
Alarms: YN Working: YN Disinfection: YN Working: YN							
Control Box: Inspection Ports:							
Other components:							
Overall condition of the private sewage disposal system:							
Report system status: laterals probed wet (see attatched)							
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: Tony Forest Date: 3-16-16 Name (print): Tory Forest Certificate #: 10-76-2							
Name (print): Tory Forest Certificate #: 10762							
Address: PO Box 219, Indianola, IA 50125							
Phone #: 515-208-3863							
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 9 th St							
Des Moines IA 50319							

DNR Time of Transfer Report System Status

Address: 3359 135	the ct.	D	ate: 3-16-16
Address: 3359 135 Cuming Ia	a. 50061	Technician <u>To</u>	ry Forest
All waste water from house dra	ains to septic system	. Tres No	
Remarks:			
The tank is a Poly Concrete Remarks:	e 2000 gallon ta	nk. In good condition.	Ves □ No
The distribution box is in good	condition. Xes	No None	
Remarks:			
of the inspection was wet at the 4 9 5 laterals side of each la	terals probe ne The be surface, 6 were also teral, (see Box during d wet. A	gining of the drawing, wet on the drawing. Noti	down hill E: we adjusted
☐ This certifies that the septic system	This is not a gu		inspection
This certifies the condition of the	e septic system at the time	ne of the inspection.	шоросион.

DIAGRAM OF SYSTEM

