



Document 2016 GW1140

Book 2016 Page 1140 Type 43 001 Pages 6
Date 5/03/2016 Time 11:51:19AM
Rec Amt \$.00

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Raymond Wasteney and Nadine Wasteney

Address 1081 Highway 169, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Jacob James Reiser

Address 11645 NW Oak Tree Drive, Grimes, IA 50111

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

1083 Highway 169, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Parcel "B" located in the South Half (S 1/2) of the Southeast Quarter (SE 1/4) of Section One (1), Township Seventy-seven (77) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, containing 15.001 acres as shown in Plat of Survey filed in Farm Plat Book 3, Page 85, filed on August 12, 1997, 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:

One well located approximately 85 feet East of the southeast corner of the McCleary building

**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.: (641) 431-2767



Time of Transfer Inspection Report

Property Information

Current Owner: RAYMOND WASTENAY
 Buyer: JACOB REISER Realtor: TONI TINDLE - Covered Bridge Realty
 Mailing Address: 1081 US Hwy 169, Desoto IA 50069
 Site Address/County: 1083 US Hwy 169 - Madison Co
 Legal Description AS ABSTRACT
 No. of bedrooms: 3 Last occupied: present Records available: YES
 Permit/installation date: 2058/ 11-29-01 Separation distances (ok/no?): ok

Septic System Information

Septic tank(s): Size: 3000 Material: Concrete Condition: ok
 Tank pumped? ☒ Y ☐ N Date: 10-6-14 Licensed pump: FOREST Septic
 Septic/Trash/Processing tank: Size: _____ Material: _____ Condition: _____
 Tank pumped? ☐ Y ☐ N Date: _____ Licensed pump: _____
 Aerobic treatment unit (ATU) mfg _____ Size _____
 Tank pumped? ☐ Y ☐ N Date: _____ Licensed pump: _____
 Maintenance contract? ☒ Y ☐ N Expiration date: _____ Service provider: _____
 Condition: _____
 Pump tanks/vaults: Type: _____ Size: _____ Condition: _____
 Distribution system: Distribution box YES Outlets used 4 Condition: ok
 Header pipe(s): _____ No. of lines: _____ Pressure dosed? _____

Secondary Treatment:

Length of absorption fields: (4) - 75' Determined by: County Recorder
 Condition of fields: OK - DRY Determined by: Hydraulic Test + 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: sump pump.

Overall condition of the private sewage disposal system:

Report system status: See Notes

Explain (attach additional pages as needed): _____

Comments: House HAS NO Basement.

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: Brian Rinard Date: 4-14-16

Name (print): Brian Rinard Certificate #: 8805

Address: P. O. Box 204 NORWALK IA 50211

Phone #: 515-202-4895

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

DNR Time of Transfer Report System Status

Address: 1083 U.S Hwy 169 Date: THURS 4-14-16

Desoto, TX 50069

Comments:

Technician

BRIAN

ALL WASTEWATER FROM HOUSE APPROX TO 90
INTO SEPTIC SYSTEM.

2,000 gallon (2) COMPARTMENT CONCRETE SEPTIC TANK WITH
RISERS AND EFFLUENT FILTER WAS IN WORKING CONDITION.

PLASTIC DISTRIBUTION BOX WITH BAFLE AND SPEED LEVELERS
USED ON (4) Laterals WAS LEVEL AND IN WORKING CONDITION.

(4) CHAMBER 75' Laterals ALL TOOK WATER FOR 20-30
MINUTES AT TIME OF THE INSPECTION AND PROBE DRY
Complete septic system is located in pasture AREA.

THIS IS NOT A GUARANTEE.

THIS CERTIFIES THAT THE SEPTIC SYSTEM
WAS IN WORKING CONDITION AT THE
TIME OF THE INSPECTION.

DIAGRAM OF SYSTEM

See

County

Records

1083 Hwy 169

Permit # 2058 Dale Hartsook
Inspection 11/29/01



Proposed Trailer Location

70'

2,000 gal Septic tank

330'

Distribution Box

41'

29'

16'

75'

75'

75'

75'

