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Date 5/18/2016 Time 1:54:01PM

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**

**TRANSFEROR:**

Name Edin F. Pearson, a single person

Eden

Address 12862 HAZELWOOD DR, Clive, IA 50325

Number and Street or RR

City, Town or P.O.

State

Zip

**TRANSFeree:**

Name Michael Mayhew and Shannon Mayhew, husband and wife

Address 785 N WEST STREET Truro, IA 50257

Number and Street or RR

City, Town or P.O.

State

Zip

**Address of Property Transferred:**

2331 290TH ST, Peru, IA 50222

Number and Street or RR

City, Town, or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) \_\_\_\_\_

See Exhibit A

**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.

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

**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 #015-16

Information required by statements checked above should be provided here or on separate sheets attached hereto:

The functioning well is located east of  
the house in the yard. It has a large concrete pad  
on top.

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

Signature: *Edwin L. Pearson*  
(Transferor or Agent)

Telephone No.: (515) 468-0621

**EXHIBIT A**

The Southeast Quarter (1/4) of the Southwest Quarter (1/4) of Section Five (5), Township Seventy-four (74) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, EXCEPT Parcel "H", located therein, containing 35.14 acres, as shown in Plat of Survey filed in Book 2014, Page 2122 on August 25, 2014, in the Office of the Recorder of Madison County, Iowa. AND

Parcel "C" located in the Southwest Quarter (1/4) of the Southwest Quarter (1/4) of Section Five (5), Township Seventy-four (74) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, containing 25.009 acres, as shown in Plat of Survey filed in Book 2010, Page 1899 on August 16, 2010, in the Office of the Recorder of Madison County, Iowa.



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

Property information

Current owner EDEN Pearson
Buyer The Mayhew Realtor Caldwell Bankers Alex McConeghey
Mailing address 601 E Lo Des Moines IA 50309
Site Address/County 2331-290th st Peru 50227 IA 50223
Legal Description

No. of bedrooms 5 Last occupied? Records available yes

Permit/installation date 4-25-16 #015-16 Separation distances ok no?

Septic system information New System put in 4-25-16 18-70 Sand filter

Back old Tank

Septic tank(s): size 2000 gal material Cement condition New
Tank pumped? yes date 4-23-16 licensed pumper yes
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfg size
Tank pumped? date licensed pumper
Maintenance contract? expiration date service provider
Condition

Pump tanks/vaults: type size condition

Distribution system: distribution box Sand filter 18x70 outlets used New condition
Header pipe(s) # of lines Pressure dosed?

Secondary treatment:
length of absorption fields 18x70 Sand filter new determined by
condition of fields determined by
type of trench material

Size of sand filter 18-70 determined by New
Vent pipes above grade? yes discharge pipe located? yes
Effluent sample taken? no 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 Rings on tank Filter in tank

Overall condition of the private sewage disposal system

Report system status New

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: Allen Akers Date: 4-26-14

Name (print): Allen Akers Certificate #: 203

Address: 2204 175<sup>th</sup> St Winterset IA 50273

Phone # 515-462-1015

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;

Iowa DNR Onsite Wastewater Program  
502 E. 9<sup>th</sup> St.  
Des Moines, IA 50319