



Document 2016 GW2067

Book 2016 Page 2067 Type 43 001 Pages 7  
Date 7/18/2016 Time 2:57:14PM  
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 Zachary Bruett  
Address 3251 Valleyview Trail, PROLE, IA 50229  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name Justin L. Sheriff  
Address 3251 Valleyview Trail, PROLE, IA 50229  
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:  
3251 Valleyview Trail, PROLE, IA 50229  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) Lot One (1) of Venolia Rural Estates, a subdivision of part of the Northeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Twenty-three (23) and a part of the Southeast Quarter (1/4) of the Southwest Quarter (1/4) of Section Fourteen (14), all in Township Seventy-six (76) North, Range Twenty-six (26) West of the 5th P.M., 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:**

\_\_\_\_\_

*Southeast corner of the property*

\_\_\_\_\_

\_\_\_\_\_

**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.: 515-490-1877

**GROUNDWATER HAZARD STATEMENT**

**ATTACHMENT #1**

**NOTICE OF WASTE DISPOSAL SITE**

**a. Solid Waste Disposal (check one)**

- There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.
- There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

**b.. Hazardous Wastes (check one)**

- There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.
- There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

---

---

---

---

---

---

---

---

---

---

**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.: 515-490-1877



### 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 there is 6 people living there

Explain (attach additional pages as needed): \_\_\_\_\_

Comments: incovers tank & box looks good all laterals were working at the time of inspection  
6" dia 4in pipes & that no water in them

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: 5-23-16  
 Name (print): Allen Akers Certificate #: \_\_\_\_\_  
 Address: 2204 175th Ct  
 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



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

Property information

Current owner Zack Orvett
Buyer
Mailing address 3251 Valley View Trl.
Realtor Penny Carroll Keller Williams

Site Address/County 3251 Valleyview trail Pkdc IA 50229 Madison Co.
Legal Description Grant Sec 23 -1 T-76-W R-76-W

No. of bedrooms 2 Last occupied? 5-25-16
Records available No

Permit/installation date None Separation distances (ok) no?

Septic system information

Septic tank(s): size 800 gal material Cement condition good
Tank pumped? yes date 5-24-16 licensed pumper yes
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 3 condition good
Header pipe(s) Sch 35 # of lines 3 Pressure dosed? No

Secondary treatment:
length of absorption fields 100 ft x 3 lines determined by probing
condition of fields Look good determined by dug up
type of trench material 4" Pipe & Rock

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? No permitted? NOI provided

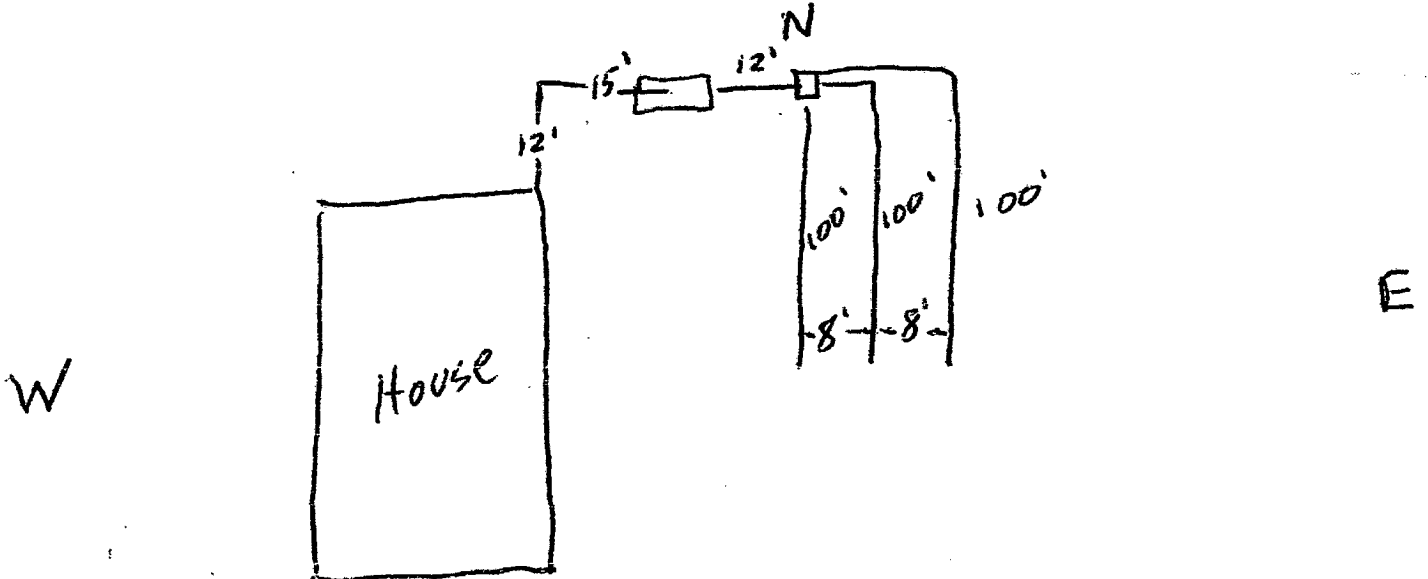
DNR Time of Transfer Report System Status

Address: 3251 Vallyview trail Date: 6-5-09

Comments: Prole Fa. 50229 Technician Brian Runard

We exposed the tank & D-Box.  
The tank & D-Box were in very  
good condition and all laterals were  
working at the time of the inspection.

DIAGRAM OF SYSTEM





### Time of Transfer Inspection Worksheet

Other components:

Alarms \_\_\_\_\_ Working? \_\_\_\_\_ disinfection \_\_\_\_\_ working? \_\_\_\_\_

Control box \_\_\_\_\_ Timers \_\_\_\_\_ inspection ports \_\_\_\_\_

Other components \_\_\_\_\_  
\_\_\_\_\_

Overall condition of the private sewage disposal system

Report system status see attached page

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: *B. Rinard* Date: 6-5-09  
 Name (print): Brian Rinard Certificate #: \_\_\_\_\_  
 Address: PO Box 197 Ank, IA 50021  
 Phone #: 515-202-4895

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office 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