



Document 2016 GW2491

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INDX
ANNO
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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

CHEK

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

TRANSFEROR:

Name Michael D. Shoemaker and Sherri L. Shoemaker

Address 17292 20th Avenue, St. Charles, IA 50240

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Troy Peterson and Tiffany Peterson

Address 1366 90th Street, West Des Moines, IA 50266

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2908 187th Street, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lots Two (2) and Three (3), Brumfield Rural Estate Sub-district, a Subdivision of the Southwest Quarter (1/4) of the Southwest Quarter (1/4) of Section Seventeen (17) 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:

1 Well East of the house approximately 20' from the South corner of the pond. The well is used for watering yard, not for consumption.

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

Signature:  Telephone No.: (515) 491-7664
(Transferor or Agent)



Closing attorney

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

Property information

Current owner Michael Sherri Shoemaker
Buyer _____ Realtor Covered Bridge Realty
Mailing address _____ Winterset, Ia 50273

Site Address/County 2908-187th St. Winterset, Ia 50273
Legal Description _____ Madison Co.

No. of bedrooms 3 Last occupied? in house Records available yes
Permit # 892 - Installation date 6-30-1978 Sanitation district # OK

Septic system information

Septic tank(s): size 1500 material concrete condition good
Tank pumped? yes date 8-13-16 licensed pumper Mayah Jester
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 concrete outlets used 10 condition good
Header pipe(s) 5 # of lines 6 Pressure dosed? _____

Secondary treatment:

length of absorption fields 92 ft ea. determined by snout probing
condition of fields good what could see in determined by walking & probing
type of trench material pipe & rock tenant brush lines

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? _____ permitted? _____ NOI provided _____



Time of Transfer Inspection Report

Other components: Alarms Working? disinfection working?

Control box Times inspection ports

Other components

Overall condition of the private sewage disposal system

Report system status The septic system at 2908-187th St

Explain (attach additional pages as needed): 9 Wintersetida - 50273 -
is in good operating cond.

The septic tank was opened & repaired on - 8-13-16
Tank has 2 come & intake & outflow baffles in place.
no cracks in tank & all gray water goes to system.

The drain box was found & opened & all laterals look wet &
concrete boxes in good cond.

Lateral field is pipe & rock - is in heavy timber & hard to find
all laterals but looked good.

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. lateral field is in timber ex
none on
9/6 cond - 8-13-16

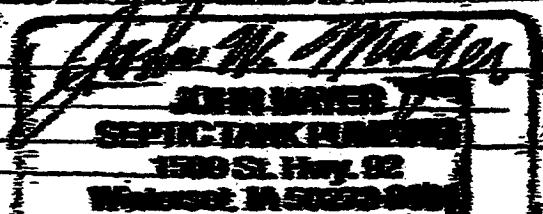
This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified Inspector: John W. Marler

Name (print): John W. Marler

Address: 1500 St. Hwy 92

Phone: 562-462-2624



Date: 8-13-2016

Certificate: 8977

Provide a copy of this report, the narrative report and sketch to the school board, buyer agent, the county environmental health office, county, the contractor who performed the inspection was conducted and to:

Iowa DNR Onsite Wastewater Program

502 E. 9th St.

Des Moines, IA 50319

ROCK ROAD - SUMMER HILL TRL.

NORTH

Lot 1

Rock Road - 187th St

Lot 2

Storage

Lot 3
6 lots 819
550' TOTAL

92' ea. approx.

CELANESE
CLAYTONS
gradent 3' 1/4"

SE PINE

500' grade
CR PINE

SAR

Lot - 2 & 3

MICHAEL MAYES

DIVELING

BRAMFIELD

RURAL ESTATES

2908 187th St.

Permit # 882 June 30, 1978

MADISON COUNTY
BOARD OF HEALTH

COURT HOUSE
WINTERSSET, IOWA 50273
PHONE 462-2636

2908 18th St.
450081766052000

APPLICATION FOR PERMIT TO INSTALL SEPTIC SEWAGE DISPOSAL SYSTEM IN MADISON COUNTY, IOWA

PERMIT NO. 882 DATE: June 30 1978

PERMIT WILL BE ISSUED UPON RECEIVING COPY OF PERCOLATION TEST REPORT FROM ENGINEER.....

APPLICANT: Mike Hayes ADDRESS: 460 66th Place Des Moines, Iowa 50313
(name) (current)

TENANT: same ADDRESS: R.R. #1 Prole, Iowa 50229
(name) (building site)

LOCATION: Brumfield Rural Estates SECTION: 17 TOWNSHIP: CRAWFORD
(legal description) (no.) (name)

PROPOSED: DWELLING EXISTING: _____ MOBILE HOME: _____
(type of building) (type of building) (size)

NO. OF BEDROOMS: 3 NO. OF: STOOLS: 3 LAVATORIES: 3 TUBS: 2 SHOWERS: 2 SINKS: 1

GARBAGE DISPOSAL: YES/~~NO~~ - If yes, additional 500 gallon capacity of septic tank required.

SEPTIC TANK INFORMATION: Double-Compartment required:

SIZE: 1500 gal. CONSTRUCTION: concrete MANUFACTURER: _____
(gallons) (material) (name)

PERCOLATION TEST REQUIRED: TAKEN: 7/13/78 BY: TEDE R. BROWN
(date) (Professional Engineer Licensed in Iowa)

RESULTS: 1. 34 min./in. 2. 34 min./in. 3. 39 min./in. Average: 36 min./in.

ABSORPTION FIELD: NUMBER OF LATERALS REQUIRED: 6 LENGTH OF LATERALS: 92 ft. each.

SEEPAGE PIT: NO. OF FIXTURES SERVED: _____ CAPACITY BELOW INLET: _____ (number of yards.)

PLUMBER/CONTRACTOR: C & I Construction ADDRESS: Winterset, Iowa 50273
(name) (P.O. Box-RFD # town/state zip)

I hereby certify the above information is correct and all construction will be in accordance with the Madison County Board of Health Rules and Regulations. I further acknowledge that the septic sewage system must remain open and uncovered until proper inspection is made with approval to cover.

SEPTIC TANK SHALL NOT BE PUT INTO OPERATION OR USED UNTIL ABSORPTION FIELD HAS BEEN COMPLETED AND INSPECTED.....
(CHECKS PAYABLE TO THE MADISON COUNTY TREASURER)

FEES: SEPTIC TANK AND/OR ABSORPTION FIELD
OF 600 FEET OR LESS\$ 15.00 ✓
EACH ADDITIONAL 100 FEET OF LATERALS
OVER 600 FEET/PER 100FT.....\$ 1.00
SEEPAGE PIT\$ 1.00
OUTDOOR TOILET (Privy).....\$ 5.00
SAND FILTERS.....\$ 15.00 (same as septic tank and/or absorption field)

Michael Hayes
(applicant's signature)

REGULATION V SEWAGE: Section 3. DEVIATIONS

Any deviation from the rules and regulations must be approved in writing by the proper authority.

LOCATION APPROVED BY: Jerry K. Drury on 30th day of June 1978
(Zoning Administrator)

SEPTIC SEWAGE DISPOSAL SYSTEM PERMIT ISSUED: 7/13 1978
(date)

DATE INSPECTED: July 17 1978 INSPECTED BY: Jerry K. Drury