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Book 2016 Page 2773 Type 43 001 Pages 8

Date 9/22/2016 Time 11:54:19AM

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 KYLE M. WALKER

Address 2901 - 147<sup>th</sup> Street Urbandale Iowa 50323  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name MONICA M. BLAKLEY

Address 14298 NW 122<sup>nd</sup> Avenue Granger Iowa 50109  
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:  
2305 - 132<sup>nd</sup> Court Van Meter Iowa 50261  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) \_\_\_\_\_  
LONG LEGAL - see attached

**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 a 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 a 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 acknowledgement 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 acknowledgement is attached to this form.
- There is a building served by private sewage disposal system on this property. The buyer has executed a binding acknowledgement with the county board of health to install a new private sewage disposal system on this property with an agreed-upon time period. A copy of the binding acknowledgement 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 acknowledgement with the county board of health to demolish the building within an agreed-upon time period. A copy of the binding acknowledgement 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:**

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**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) 979-6956

**Legal: Lot 4 in PRAIRIE RIDGE ESTATES, located in the Northwest Quarter of the Northeast Quarter (NW ¼ NE ¼) of Section 20, Township 77 North, Range 27, West of the 5<sup>th</sup> P.M., Madison County, Iowa, together with the undivided percentage interest in the general common elements as set forth in the Declaration of Association for Prairie Ridge Estates Association filed in Book 2002, Page 2126 of the Madison County Recorder's Office**

**Address: 2305 – 132<sup>nd</sup> Court, Van Meter, Iowa 50261**

Forest Septic < service@forestseptic.com >  
To: plforest@wildblue.net

Wed, May 21, 2014 at 5:00 PM

le1916  
Contact Person

Name: Kyle Walker  
Phone: 515-979-6956

9-1-16 emailed Madison Co.  
9-1-16 to Kate  
9-15-16 emailed report

**Seller Agent/Realtor or Seller (if For Sale by Owner)**

Name: Alex Wick  
Email:  
Phone: 515-971-0189

No Pumping Info.

**About the Home**

Address: 2305 132nd Ct  
Van Meter, IA, 50271

County: Madison (1) DNR (2)  
Age System:  
# Bedrooms - 5  
Occupied: Vacant - X  
Water Service: yes Type: rural  
Legal:  
Township:  
Section Number:

**Owner**

First & Last Name(s): Kyle Walker  
Address: 2901 147th St  
Urbandale, IA, 50323

mail

Phone:  
Email: kwalker0416@msn.com (3)

**Buyer Agent/Realtor**

Name:  
Email:  
Phone:

**Buyer**

Name(s):  
Phone:  
Email:  
Address:

Closing Date: 9/8/16

The Cleaning and Inspection takes us 1 1/2 to 2 hours to complete.



# Time of Transfer Inspection Report

## Property Information

Current Owner: Kyle Walker  
 Buyer: \_\_\_\_\_ Realtor: Alex Wick  
 Mailing Address: 2401 147th St. Urbandale, Ia 50323  
 Site Address/County: 2305 132nd ct. Van Meter, Ia 50271/madison county  
 Legal Description As Abstract  
 No. of bedrooms: 5 Last occupied: NA Records available:  Y  N  
 Permit/ installation date: NA Separation distances (ok/no?): OK

## Septic System Information

Septic tank(s): Size: 4500gal Material: Concrete/Poly Condition: OK  
 Tank pumped?  Y  N Date: 9-14-16 Licensed pumper: Forest Septic  
 Septic/Trash/Processing tank: Size: \_\_\_\_\_ Material: \_\_\_\_\_ Condition: \_\_\_\_\_  
 Tank pumped?  Y  N Date: \_\_\_\_\_ Licensed pumper: \_\_\_\_\_  
 Aerobic treatment unit (ATU) mfr \_\_\_\_\_ 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 plastic Outlets used 4 Condition: OK  
 Header pipe(s): OK No. of lines: 4 Pressure dosed? no  
 Secondary Treatment:  
 Length of absorption fields: 4 100' laterals Determined by: drawing/probing  
 Condition of fields: OK Determined by: Hydraulic Test and 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: \_\_\_\_\_

Overall condition of the private sewage disposal system:

Report system status: Functioning Properly

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: Tory Forest Date: 9-14-16

Name (print): Tory Forest Certificate #: 10762

Address: PO Box 219, Indianola, IA 50125

Phone #: 515-360-7847

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<sup>th</sup> St  
Des Moines IA 50319

DNR Time of Transfer Report System Status

Address: 2305 132nd Ct. Date: 9-14-16

Technician Tory Forest

All waste water from house drains to septic system.  Yes  No

Remarks: \_\_\_\_\_

The tank is a  Poly  Concrete 4500 gallon tank. In good condition.  Yes  No

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The distribution box is in good condition.  Yes  No  None

Remarks: \_\_\_\_\_

The laterals are in good condition.  Yes  No  None

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This is not a guarantee!

- This certifies that the septic system was in good working condition at the time of the inspection.
- This certifies the condition of the septic system at the time of the inspection.

