



Document 2016 GW2832

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Rick E. Fenimore and Calanne Fenimore
Address 2934 S.W. Polk City Drive, Ankeny, IA 50023
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Mitchell L. Johnson and Anna E. Johnson
Address 609 Gordon Avenue, Norwalk, IA 50211
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

3229 305th Lane, Truro, IA 50257
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) A parcel of land located in the South Half (1/2) of the Northwest Quarter (1/4) of Section Fourteen (14), Township Seventy-four (74) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, containing 5.357 acres, as shown in Plat of Survey filed in Farm Plat Book 1, Page 268 on November 6, 1979, 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 (1) active well is located approximately six (6) to eight (8) feet southeast of the corner of the dwelling
house under the deck.

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) 494-5546



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

Property information

Current owner Rick Fenimore 515-494-5546
 Buyer _____ Realtor Tony Kendall 515-975-8501
 Mailing address 3229 305th Lane Truro Ia 50257

Site Address/County 3229 305th Lane Truro Ia / Madison County
 Legal Description SE 1/4 NW 1/4 Sec. 14 T74N R26W

No. of bedrooms 3 ~~Last~~ occupied? is Records available yes

Permit/installation date 11-10-03 Separation distances ok/ no? _____
 → 103-03

Septic system information

Septic tank(s): size 1,500 gal. material Poly Vinyl condition Fair
 Tank pumped? yes date 12-1-15 licensed pumper yes S.T. 307
 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 yes outlets used no condition excellent
 Header pipe(s) 1 # of lines 4 Pressure dosed? no

Secondary treatment:
 length of absorption fields 4 x 100' 400 ft. determined by [Signature]
 condition of fields Good determined by [Signature]
 type of trench material EQ 24 chambers

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 Worksheet

Other Components

Alarms no Working? _____ Disinfection no Working? _____

Control Box no Timers no Inspection Ports no

Other Components none

Overall condition of the private sewage disposal system

Acceptable? yes Unacceptable? _____

Explain (attach additional pages as needed): _____

Comments: Pump and clean septic tank every 3 to 5 years

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.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: Vance Smith Date: 8-22-16
 Name (print): Vance Smith Certificate #: 8992
 Address: 502 West Main Street St. Charles Ia 50240
 Phone # 641-396-2440

**ANYTIME SEPTIC SERVICES II
VANCE SMITH
ST. CHARLES, IA 50240
641-396-2440**

REAL ESTATE SEPTIC INSPECTION

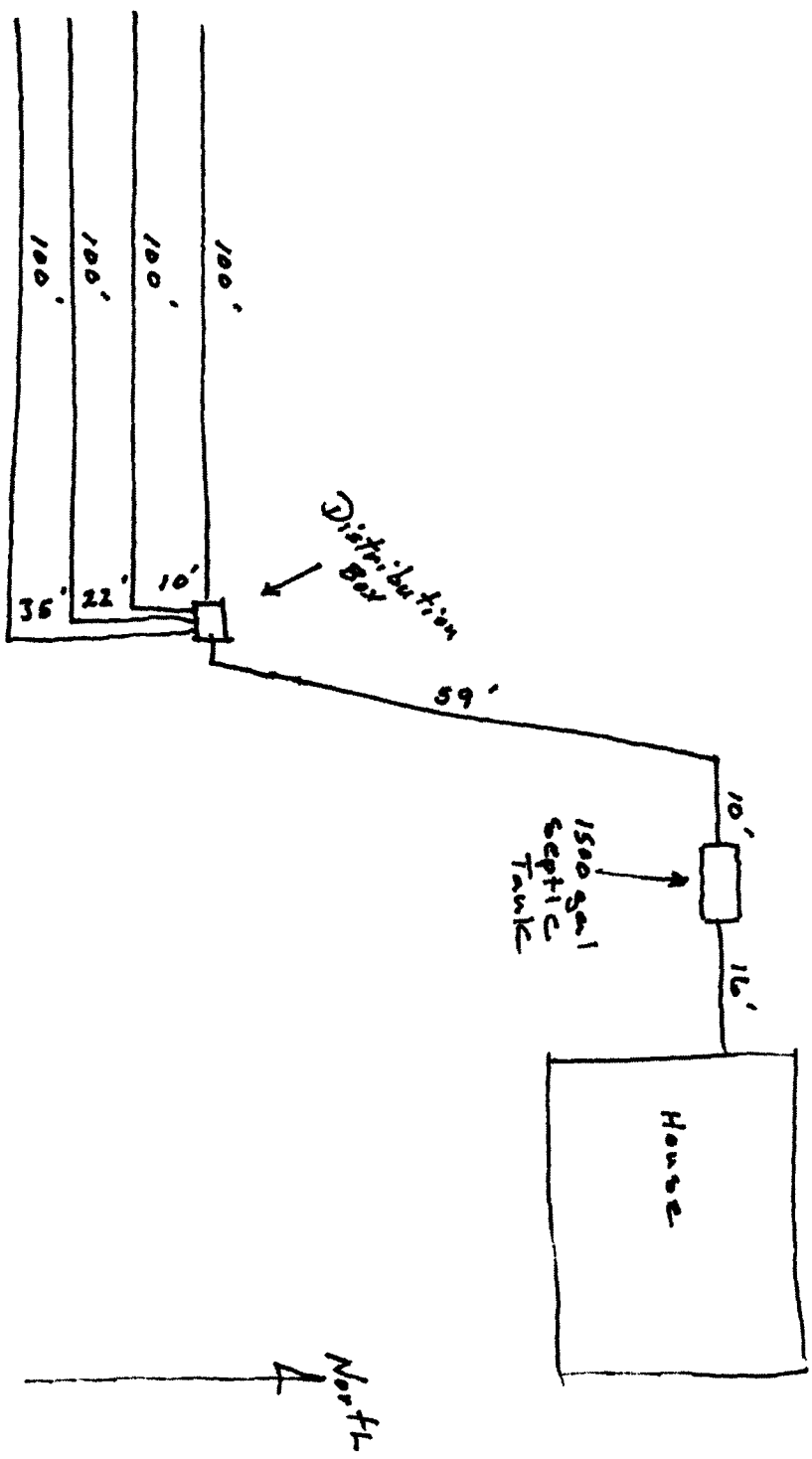
On August 22, 2016, Anytime Septic Service II did Time of Transfer Real Estate Inspection on Septic tank, Distribution box, and Lateral Field at 3229 305th Lane. Truro, Iowa 50257. Rick Fenimore residence. Septic tank is a 1,500 gallon two compartment Poly Vinyl Norwesco tank that I pumped and cleaned with clean water less than 3 years ago on December 1, 2015. On both inlet and outlet ends of septic tank are 22 inch plastic screwed down lids above 4 inch schedule 40 piped Tee baffles with drops. The top of the Poly Vinyl septic tank is pushed downwards, maybe, 4 to 6 inches or so that has pushed top of separation wall some 4 inches or so towards outlet end of tank and deforming the plastic screwed down access lids which is not causing any issues and appears to be working properly. Septic tank vary 8 to 10 inches below ground level.

Distribution box is a plastic Tuff Tite box that I pumped and cleaned with clean water on August 22, 2016, with added dirt above for more protection making box 24 inches below ground surface with concrete surrounding for support and is in excellent condition. Inside Distribution box is a 4 inch schedule 40 piped tee baffle and 4, 4 inch schedule 40 piped lines leaving box through 4 speed levelers equally distributing effluence's into lateral field.

Lateral field consist of 4 runs of E.Q. 24 inch plastic infiltrated chambers at 24 inches below ground surface each run is 100 feet in length totaling 400 feet of laterals with no evidence of any ponding, surfacing of septic or popping sound from probing all 4 laterals above absorption field.

NOT RESPONSIBLE FOR ANY FAILED SEPTIC SYSTEMS.

Permit # 130-03 Fenimore Inspection 11/10/03



Madison County
Office of Zoning and
Environmental Health

**Authorization to Construct a
Private On-site Wastewater
Treatment System (POWTS)**

112 N. John Wayne Drive
P.O. Box 152
Winterset, IA 50273-0152
Telephone: (515) 462-2636

Permit Number: 130-03

Date Issued: 10/17/03

Issued to: **Rick Fenimore**
Address: ~~3229 305th Lane~~
Truro, IA 50257

3229 305th Ln
PID # 770161448020000

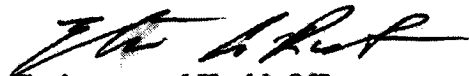
Legal Description: 3.65A SW COR SE NW SEC 14-74-26 Ohio Twp

POWTS Components Specifications: 1250gal. Septic Tank & 4 ea. 100ft. EQ24 Laterals

General Conditions:

1. System must be constructed in conformance with attached system layout, profiles, and cross-sections.
2. Structures must be constructed in conformance with 567 IAC Chapter 69 and the Madison County Environmental Health Regulations.
3. Permit shall be null and void if system is not constructed within one year of permit issuance. The Environmental Health Officer must approve any request for extension of permit.
4. The Environmental Health Officer must approve any design modifications to the permitted system prior to construction.
5. Once constructed, all system components must be uncovered for inspection and the system must be approved before it can be put into operation. Notice for inspection must be received with 24 hours in advance (8 a.m. through 4:30 p.m., Monday - Friday). If weather necessitates the need to cover the system components, then the system owner or contractor must notify and follow the procedures given by the Environmental Health Officer.

Special Conditions:


Environmental Health Officer
Madison County
Office of Zoning and Environmental Health

Application to Construct
Private On-Site Wastewater Treatment
System (POWTS)

| Office Use Only | | | | Temp EPH: | | | |
|-----------------|---------------|-----------------|-------------|----------------|---------------|------------------|-----------------------|
| Tracking No. | Date Received | Fee Paid | Date Issued | Date Inspected | Date Approved | Section/Township | NPDES Authorization # |
| 130-03 | 10/17/03 | W150 CK 5931 | 10/17/03 | | | 14 Ohio | |

Application will not be accepted until site and soil analysis, percolation information, and two diagrams of the system layout, profiles and cross-sections have been received; and fee has been paid. For systems requiring an NPDES General Permit #4 (surface discharge), its application must be submitted to this office and appropriate forms recorded before a permit will be issued.

Please Print All Information.

| | | | | | |
|---|--------------------|---|--|---|-------------------------------|
| 1. Owner Information (Applicant) First Name: <u>Kick</u> Last Name: <u>Fenimore</u> Address: <u>3229 305th Lane</u> City: <u>Truro IA</u> State: <u>50257</u> Phone Number (area code): <u>(641) 765-4554</u> | | | 2. Contractor Information First Name: <u>Steve</u> Last Name: <u>Crow</u> Address: _____ City: _____ State: _____ Zip: _____ Phone Number (area code): <u>(641) 765 4880</u> Fax or E-mail: _____ Cell Phone: <u>(515) 238 7040</u> | | |
| 3. System Requirement Information IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED Minimum Tank Size Required 1-3 Bedroom <u>1000</u> 4 Bedroom <u>1250</u> 5 Bedroom <u>1500</u> 6 Bedroom <u>1750</u> | | | 4. Site and Soil Evaluator (Percolation Test) PERCOLATION TEST MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT Date test taken <u>9/30/03</u> Test taken by <u>Jim Vance</u> Test Results: Hole 1 <u>30</u> min/in Hole 2 <u>20</u> min/in Hole 3 <u>24</u> min/in Hole 4 <u>26.7</u> min/in Average <u>25.2</u> min/in Depth of Test Holes <u>36"</u> Number of Laterals Required _____ Length of Laterals Required _____ ft. ea | | |
| 5. Type of Submittal <input checked="" type="checkbox"/> New <input type="checkbox"/> Revision <input type="checkbox"/> Repair, Tank <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement Previous Permit #: _____ | | 6. Address Information Location, Number & Street of project (if unknown, indicate nearest road): <u>305th Lane</u> Legal Description: <u>3.65A SW COR SE NW Sec 14-74-26</u> <u>Ohio Twp</u> | | | |
| 7. Type of Building (Completed by Owner) <input type="checkbox"/> Residential Number of Bedrooms: <u>3</u> <input type="checkbox"/> Commercial/Other Non-Residential Use: _____ <input type="checkbox"/> Garbage Disposal <input type="checkbox"/> High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: <u>0</u> | | | Your contractor or system designer should complete the remaining portion of this application. | | |
| 8. Primary and/or Mechanical Treatment Type: <u>Plastic</u> Model: <u>AK</u> Size (gal): <u>1250</u> Type: _____ Model: _____ Size (gal): <u>1500</u> | | 9. Pump/Siphon <input type="checkbox"/> Not Applicable Type: _____ Model: _____ Dosing Frequency: _____ | | | |
| 10. Secondary Treatment Area Type: _____ | | | <input type="checkbox"/> Not Applicable | | |
| Type of Laterals | Number of Laterals | Length of Lateral | Other | Other | Maximum Trench Depth (inches) |
| <u>EQ 24</u> | <u>4</u> | <u>100</u> | | | <u>36"</u> |
| I hereby attest the truth and accuracy of all facts and information presented on this application. Request for inspection of the system must be made 24 hours in advance. Water at the site to test the distribution box must be available. Mechanical systems require use of a free-access sand filter and must be covered by a maintenance agreement, which must be recorded in the Madison County Records Office. Discharge from mechanical systems and sand filters require periodic testing as set forth in IAC Chapter 69 and the results submitted to BOH. | | | | It is unlawful to start construction, reconstruction, or repair of any POWTS prior to issuance of a POWTS permit by the Environmental Health Officer. | |
| Applicant Signature: <u>[Signature]</u> | | | | Date: <u>10-12-03</u> | |

Date taken: 9-30-03

By: Jim Vance

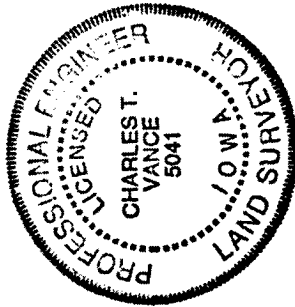
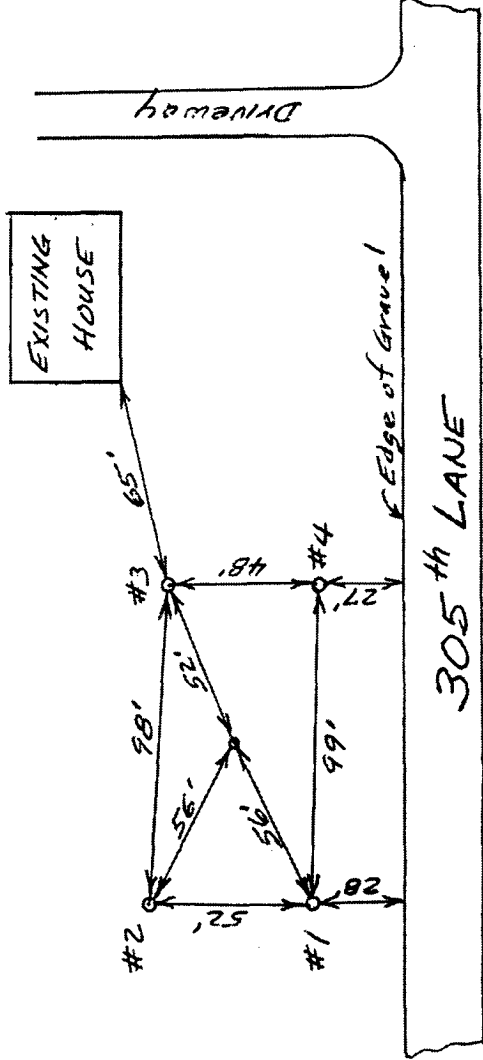
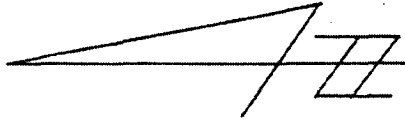
Owner: Rick Fenimore Site Address: 3229-305th Lane Phone No. 641-765-4554

Lot Size: 5.96 ac Legal Description: Part of the SE 1/4 of the NW 1/4 of Sec. 14-T74N-R26W

Structure: New Existing X # Bedrooms: 3 Installer: _____
Owner's Current Mailing Address: 3229-305th Lane, Truro, Iowa 50257

Time for 1 inch of water: 1. 30.0 min 2. 20.0 min 3. 24.0 min 4. 26.7 min
Depth of holes tested: 1. 36" 2. 36" 3. 36" 4. 36"
Results of 6 foot hole: NO ROCK NO WATER

Min. recommended lateral footage per IAC Ch. 69: 400 feet Drawing of perc site below.
Number of laterals required: 4 each Average length of laterals: 100 feet



I hereby certify that this engineering document was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the laws of the State of Iowa.

Signed: Charles T. Vance Date: 1 Oct. 2003 Reg. No. 5041 Exp. Date: 31 Dec. 2003

RLI1002
.2003.061

PID //0161448020000
Map# 000001614100005

00 Tax DIST //0 00 Class A
GIS#

INQUIRY

Property Ownership 001975520 DED Fenimore, Rick
3229 305Th Lane
Truro IA 50257-

Location 000000000
3229 Street 305TH LN City TRURO
Recorded REC 142 631

Documents Misc Exempt Code No Ag Cr VIN#
Sec-Twp-Rng 014 074 026 Cty-Adn-Blk 00014 Title

Legal Desc 3.65A SW COR SE NW
Applications Typ 1 H... Ovr Amt Typ 2 AGL Ovr Amt 2,800
Typ 3 ... Ovr Amt Typ 4 ... Ovr Amt

| | Acres | Typ Desc | Value | Rollback | Acres |
|------------------|-------|-------------|--------|----------|-------|
| 100% Rollback Gr | 3.65 | LND Land | 2,000 | 2,000 | 3.25 |
| Grs 89,100 | .40 | DWL Ag Dwlg | 59,800 | 30,730 | |
| Mil | .00 | BLD Bldgs | 27,300 | 27,300 | |
| Net 89,100 | .00 | EXM Exempt | | | .40 |
| | Net | | | | 3.25 |

F3=Exit F10=Ownership F12=Prev F13=Rec Doc F14=Image F15=Legal
F18=Tax History F19=Aplic F20=Value F21=Print F22=View Image F23=Indexing

Permit No 130-03 Name: Fenimore 911 Sign Locate

Date of Inspection: 11/10/03 Inspected by: Elton Root

Contractor: Steve Crow

Dwelling under construction or moved in Yes No

Setbacks

Meets required setbacks.

- Rural Water Yes No
- Private wells/Groundwater heat pump bore holes/suction water lines/lakes
 - Outside required 50-foot setback for tank Yes No
 - Outside required 100-foot setback for laterals Yes No
- Streams/ponds (25-25 ft)-ditches (10-10 ft) Yes No
- Indications of water lines under pressure Yes No

Comments:

Building Sewer

- Clean outs – one right outside of house Yes No
- location of cleanout inside house and set requirement
- Pipe is sch 40 and has a 4-inch diameter. Yes No
- Grade – has adequate fall. Yes No

Comments: Clean out at inside wall exit.

Tank

- Tank. Manufacture AK Concrete Plastic
- Capacity 1500 -gallon
- Two compartments, both meet the specs for capacity. Yes No
- Baffle Yes No
- Inlet/Outlet tees are ok. Yes No
- Effluent filter in the outlet. Yes No Manuf. Tuff-Tite
- Tank depth. 12 inches
- Risers Yes No
- Lids above grade screwed on Yes No Will be

Comments:

Distribution Box

- Brand Tuf-Tite Other
- Bedded in cement. Yes No Will be
- Has required inlet baffle. Yes No Will be
- Outlet levels –are level. Yes No Unknown

Comments:

Laterals

- Distribution lines: 4-inch PVC pipe – SCH 40
- Distribution lines screwed to laterals. Yes No Will be
- Lateral used. EQ24 Reduction? Yes No
- Lateral depth 24 inches Perc depth 36 inches
- Laterals were level. Yes No
- Adequate amount of undisturbed soil between laterals. Yes No
- Distance 9 feet between laterals.

Comments:

Permit # 130-03 Fenimore Inspection 11/10/03

