

Book 2017 Page 675 Type 43 001 Pages 5 Date 3/01/2017 Time 11:08:46AM

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

TRANSF									
Name									
Address	795 Burlington Avenue, Martensale, IA 50160								
	Number and Street or RR	City, Town or P.O.	State	Zip					
TRANSF	EREE:								
Name Kory A. Heckstein and Rocquel S. Clark									
Address 703 West North Street, Winterset, IA 50273									
	Number and Street or RR	City, Town or P.O.	State	Zip					
	of Property Transferred:								
2662 Qu	ail Ridge, Peru, IA 50222								
Nun	nber and Street or RR	City, Town or P.O.	State	Zip					
Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, containing 3.16 acres, more or less, as shown in Plat of Survey filed in Book 2016, Page 1314 on May 18, 2016, in the Office of the Recorder of Madison County, Iowa.  1. Wells (check one)  X 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.									
	Waste Disposal (check	<b>one)</b> aste disposal site on this property.							
TI in	nere is a solid waste dispo Attachment #1, attached	osal site on this property and informat to this document.	ion related thereto is	provided					
	dous Wastes (check on	5							
TI At	nere is hazardous waste o tachment #1, attached to		ed thereto is provided	in					
<u>X</u> TI		<b>(check one)</b> ground storage tanks on this property notor fuel tanks, most heating oil tank							
in: Th	structions.) nere is an underground st	torage tank on this property. The type	e(s), size(s) and any k	nown					

5.	Private Burial Site (check one)								
	X 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.								
	X 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								
14	toward an exercise of the estatements absolved above about the provided have as an expense.								
	ormation required by statements checked above should be provided here or on separate								
Sn	eets attached hereto:								
_									
_									
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM								
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.								
	AND THAT THE IN CHINATION CIAILD ADOTE IS THOU AND CONTLOT.								
Sic	gnature: Telephone No.: 712-769-2897								
٠.ز	(Transferor or Agent)								





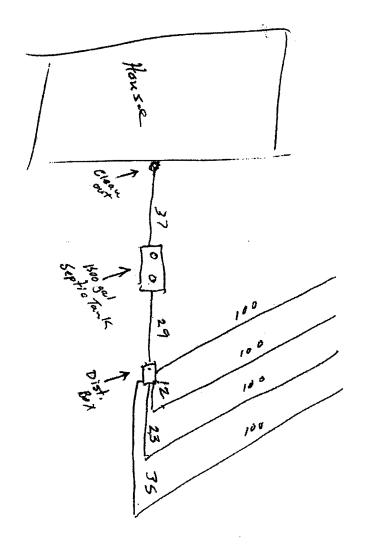
## **Time of Transfer Inspection Report**





## Time of Transfer Inspection Report

Other components:									
Alarms: ☐ Y ☒ N	Working:	$\square$ Y $\square$ N	Disinfection:	$\square$ Y $\boxtimes$ N	Working:	$\square Y \square N$			
Control Box:	T	Timers:		Inspection Ports:					
Other components:									
Overall condition of the private sewage disposal system: (>000)									
Report system status: System Worked properly on day of inspection.									
Explain (attach additional pages as needed): Secondary treatment was de-									
and each the was taking water during hydraulic test.  Comments: System looked good and was working properly									
durine inspection									
Site status at conclusion	n of Time of	Transfer inspection	on:						
<ul> <li>Verify that controls are set on the appropriate mode.</li> <li>Power is on to all components.</li> <li>Revisit all components to verify lids are secure.</li> <li>Gather all tools for removal from the site.</li> <li>Verify that no sewage is on the ground surface.</li> </ul>									
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:	Febed	iell	Dat	te: /~ 2	27-17			
Name (print):	De Bedi	well		Certificate	#: 109	74			
Address: 1600 West Enclid Avenue #2 Indianala IA, 50125									
Phone #: 515-681-5885									
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 Dispos 502 E 9th St Des Moines IA 50319	al Program								



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