

Document 2017 GW1710

Book 2017 Page 1710 Type 43 001 Pages 8 Date 6/02/2017 Time 10:37:40AM Rec Amt \$.00

INDX **ANNO SCAN** 

CHEK

LISA SMITH, COUNTY RECORDER

MADISON COUNTY 10WA

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

TRANSFEROR:

Name_	Jon D. Gelner and Jamie Gelner						
Address	3306 WALNUT AVE. Truro, IA 50257						
	Number and Street or RR	City, Town or P.O.	State	Zφ			
TRANS	FEREE:						
Name_	Stuart Wohlford-Wessels						
Address	2909 46TH Des Moines, IA 50310	City, Town or P.O.	State	Zip			
Address	of Property Transferred:						
3306 W	ALNUT AVE. Truro, IA 50257	City, Town, or P.D.	State				
	Training and an entitle	- <b>%</b>	<del></del>	- <del>-</del>			
Legal De	escription of Property: (Attach if ned	cessary)					
	BLED WELL NEXT TO NORTH R	DAD W STEEL SHOW					
			-				
☐ T	s (check one) There are no known wells situated of there is a well or wells situated on the stated below or set forth on an attact Waste Disposal (check one) There is no known solid waste disposal finere is a solid waste disposal site of Attachment #1, attached to this document wastes (check one)	his property. The type(s), locate thed separate sheet, as necess as a site on this property. On this property and information ument.	eary.				
<u>□</u> τ	☑ 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.						
ĎACT s ii	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.)						
	here is an underground storage tar substance(s) contained are listed be						
	FILE WITH RECORDER	DNR form 542-	0960 (July 18, 2012	2)			

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					
Inf	ormation required by statements checked above should be provided here or on separate					
	eets attached hereto:					
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS						
	FORM  AND THAT THE INFORMATION STATED ABOVE IS TOHE AND CORRECT					
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.					
Sic	nature: Telephone No.: (5/5) 689-(3/3					
	(Transferor or Agent)					

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

### Exhibit 1

Parcel "A" located in the Northeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Thirty-six (36), Township Seventy-four (74) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa containing 10.00 acres, as shown in Plat of Survey filed in Book 2005, Page 3084 on July 5, 2005, in the Office of the Recorder of Madison County, Iowa

WildBlue Webmail

63458 Jon Gulner Time Of Transfer 4-19-17 emailed madison Co. 4-19-17 to Kate 5-9-17 emailed report

From: Your Website <info@forestseptic.com>

Mon, Apr 17, 2017 09:49 AM

**Subject:** Time Of Transfer

To: plforest@wildblue.net

Reply To: info@forestseptic.com

No Previous Rumping Info.

Summary of web form submission:

**Email Address** 

betsv.reineck@cbdsm.com

**Case Number** 

6372626

**Order Form** 

Contact Person //> / First & Last Name: Jamie Gelner / Phone Number: (515)689-5002

About the Seller Agent or Realtor //> / First & Last Name: Betsy Haas- Reineck /Email betsy.reineck@cbdsm.com / Phone (numbers only): (515)229-2780

About the Home //> / Address of Inspection: 3306 Walnut Avenue /City: Truro State: IA Zip: 50257 / County: Madison // Age of Septic System: 5 / Number of Bed Rooms: 3 / Occupied: yes /Water Service: yes Type: rural / Legal Description: Parcel A in the NE 1/4 NW1/4 S 36, T74N R26W /Township Name: 74 / Section Number: /

Mailing Address //> Owner's First & Last Name(s): Jon and Jamie Gelner /Owner's Mailing Address: 3306 Walnut Avenue / City: Truro State: IAZip: 50257 / Phone: (515)689-5002 / Email Jamiegelner@gmail.com

About the Buyer Agent or Realtor //> / Full Name: Jim Hibbs /Email: jim.hibbs@cbdsm.com /\Office Phone (515)218-5757 /

**About the Buyer** //> / Name(s): Stuart Wohlford Wessels / Phone 515 218 5757 / Email: Jim.Hibbs@cbdsm.com / Address: 1401 50th /City: west Des Moines State: IA Zip: 50265 / Closing Date: 05-26-17 /Any Comments or Questions?

DNR 5 hate 6

Closes 5-26-17



# Time of Transfer Inspection Report

Property Information
Current Owner: Jon 4 Jamie Gelner
Buyer: Stuart Wohl Ford Wessels Realtor: Betsy Haas-Reinech
Mailing Address:
Site Address County: 3306 Walnut Ave. True Ja. 50257
Legal Description As Abstract
No. of bedrooms: 3 Last occupied: 42.5 Records available: VIN
Permit installation date: 10-28-05 Separation distances (ok/no?):
Septic System Information
Septic tank(s): Size: 1500 Material: Concrete/Poly Condition: 3000
Septic tank(s): Size: 1500 Material: Concrete/Poly Condition: 3000  Tank pumped? N Date: 5-6-17 Licensed pumper: Forest Septic Foul.
Septic Trash Processing tank: Size: Material: Condition:
Tank pumped? YN Date: Licensed pumper:
Aerobic treatment unit (ATU) mfgr Size
Tank pumped?  Y N Date: Licensed pumper:
Maintenance contract?
Condition:
Pump tanks/vaults: Type: Concrete/Poly Size: Condition:
Distribution system: Distribution box 425 Outlets used 5 Condition: Sport
Distribution system: Distribution box 45 Outlets used Condition: Sport  Header pipe(s): No. of lines: Pressure dosed?
Secondary Treatment:
Length of absorption fields: 5 80 aterals Determined by: drawing
Condition of fields: Qool / dry Determined by: Hydraulic Test and Probing
Type of trench material: 2411 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?
Condition:
NPDES General Permit No. 4: Required?
+ 2014 remz dao DNR Form 542-0191



## **Time of Transfer Inspection Report**

Other components:							
Alarms: YN Working: YN Disinfection: YN Working: YN							
Control Box: Inspection Ports:							
Other components:							
Overall condition of the private sewage disposal system:							
Report system status: 2002 (ond, tion							
Explain (attach additional pages as needed):							
Comments:							
Site status at conclusion of Time of Transfer inspection:							
<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: Town Date: 5-5-17							
Name (print): Tory Forest Certificate #: 10762							
Address: PO Box 369, Norwalk, IA 50211							
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:							
lowa DNR							
Private Sewage Disposal Program 502 E 9 <sup>th</sup> St							
Des Moines IA 50319							

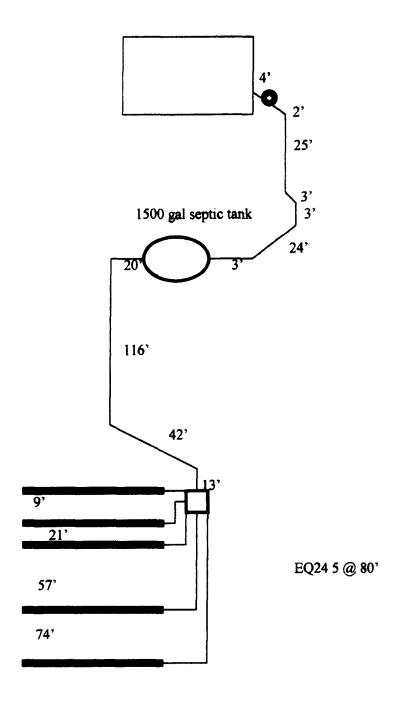
### **DNR Time of Transfer Report System Status**

Address: 3306	5 Waln	ut Ave.	Date: 5-5-17
Truse	In.	50257	Technician <u>Tory Forest</u>
All waste water from	house drain	s to septic system	. Ves No
Remarks:	W		
The tank is a Poly Remarks:	Concrete	/5 <sup>-</sup> 00 gallon ta	ank. In good condition. Pres No
The distribution box i	s in good co	ndition. Tes 🗌	No None
The laterals are in go	od condition	ı. Tres No No	None
Remarks:			
		This is not a gu	
This certifies that the		•	condition at the time of the inspection.

4.2010 cmz dao

Perm:it No 153-05
Date of Inspection: 10-28-05
Contractor: Mark Mease

Name: Jon & Jamie Gelner Inspected by: Jean Thompson



3306 Walnut Avenue Truro 50257