

Document 2017 GW2074

Book 2017 Page 2074 Type 43 001 Pages 4 Date 7/06/2017 Time 12:29:34PM

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LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

CHEK

REAL ESTATE TRANSFER – GROUNDWATER HAZARD STATEMENT TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name ______DONALD W. SHIVERICK Address 2314 Timber Ridge Avenue St. Charles 50240 lowa Number and Street or RR City, Town or P.O. State TRANSFEREE: Name KELLY LYNN COLLIER Glendale Address 6823 West Grovers Arizona 85308 Number and Street or RR City, Town or P.O. State Address of Property Transferred: 50240 2413 Timber Ridge Avenue St. Charles lowa Number and Street or RR City, Town or P.O. State Legal Description of Property: (Attach if necessary) W 1/2 NW 1/4 NE 1/4 of Section 8, Township 75 North, Range 26, West, Madison County 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.		vate Burial Site (check one)							
	X								
	Ш	There is a private burial site on this property. The location(s) of the site(s) and known identifying							
	D-:	information of the decedent(s) is stated below or on an attached separate sheet, as necessary.							
•	_	vate Sewage Disposal System (check one)							
		All buildings on this property are served by a public or semi-public sewage disposal system.							
	Ш	This transaction does not involve the transfer of any building which has or is required by law to							
	 /	have a sewage disposal system.							
	Į X J	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.							
	Ш	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.							
	Ш	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							
	- 4	ormation required by statements checked above should be provided here or on separate							
	3116 1	NW corner by driveway -							
		The state of the s							
	HE	REBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS							
		FORM							
	A	ND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.							
		re: Daywood Telephone No: (5(5) 490 - 6(33)							
gr	natu	re: 1 1 humb Telephone No.: (5/5) 490 -0633							



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

	Oon,	•	
Current owner 27/7 Buyer 2 Mailing address Z31	SHIVERICK	Positive Keni	7 <i>u</i>
Buyer /	11 Timbon 6	ST CI	20,10 8
Maning address	4 11M De 1		A company of the comp
Site Address/County_Z			
No. of bedrooms 3	Last occupied? SFIII	Disposal? Y/N Softer	ner? Y/N. HzO supply
Records available 4.6	S Permit/installation d	ste: 10-4-02 Instal	ver Justan Sa
Sentio system informatio	12		
Septic tank(s): size / 5	TOO meterial	Concretecondi	tion good
Tank remed? U.S.	Case 6-13-11	"HORMET THEMPSE"	- WE
Sentic/trash/processing to	mic size	material	condition
Tank pumped?	date	Housed pumper	
Aerobic treatment unit (A	TU) mfgr	size	
Track prozepat?	date	Ricensed pumper	
Maintenance contract?	expiration date	"wat voor part	der -
Condition			
Pump tanks/vaults: type Distribution system: distr Hos Pres			
Secondary treatment: length of absorption fields condition of fields	100 ft 361-Chamber	determined by	neasured Looking
No or general respectant			
Nixe of send filter		determined by	
Nixe of sand filter		— aproparation	æ(f²
Size of sand filter		determined by disabage priperlaced	***
Size of sand filter		sults stilue	
Nixe of send filter		sults stilue	



Time of Transfer Inspection Report (page 2)

Current own	er Don' Shive	erick		
Other comp	onents: Working?	đ	isinfection	working?
Control box	Time	ara	.izgrection_port	3
Other compo	ments			
	ition of the private sowner	`	•	\
Acceptable?	working	und dias	nacceptable?	
Explain (att	och additional pages as need # Latter 4	ded): Tan	KADE	Box Looks
9000	& GOTTERGI	s work	ing	1

Comments:			***************************************	and the same of th
Site status at	conclusion of Time of Tra	usfar inspiration:		
•	Verify that controls are a		ite mode.	
•	Power is on to all compo Revisit all components to		Tire.	
•	Gether all tools for remov	exi from the site.	_	
. •	Verify that no sewage is-	on the ground such	ince. No sec	ivage on ground
Using this wo	ofchest, with a container	eport of the inspec	tion results.	
Submit a cop office, the Di	y of this report, including y VR, and the county Records	your numerative, to t or in the county wi	he city/county env acre the inspection	ironmental health was conducted.
This report in the inspection	dicates the condition of the a. It does not guarantee tha	private sewage d t it will continue t	isposal system at to o function antisfac	he time of torily.
Namo (print):		RKin		Date: 6-13-17 Certificate #:
Address:	1311 140th s	9450	riing	