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Book 2017 Page 2357 Type 43 001 Pages 4 Date 8/01/2017 Time 10:41:47AM

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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSF	EROR:						
Name	Mike Gustafson and Joan	na K. Gustafson					
Address	2328 St. Charles Road, Winterset, IA 50273						
	Number and Street or RR	City, Town or P.O.	State	Zip			
TRANSF	EREE:						
Name	Lewis S. Jordan and Cano	lace M. Jordan					
Address	715 S. 2nd Street, Winter						
	Number and Street or RR	City, Town or P.O.	State	Zip			
	of Property Transferred: Charles Road, Winterset, I	A 50273					
Nur	mber and Street or RR	City, Town or P.O.	State	Zip			
		77), West of the 5th P.M., Madison	County, 10wa.				
	(check one)	A A. al. a Abda mana anta.					
	here are no known wells si	tuated on this property. Ited on this property. The type(s), I	(acation(s) and logal atc	atus ara			
		an attached separate sheet, as ned	` '	ilus ai c			
	Waste Disposal (check o	•	oodiy.				
	• • •	ste disposal site on this property.					
		sal site on this property and informa	ation related thereto is	provided			
	Attachment #1, attached t						
	dous Wastes (check one						
X There is no known hazardous waste on this property.							
		n this property and information rela	tea thereto is provided	in			
	ttachment #1, attached to t rground Storage Tanks (d						
	•	round storage tanks on this propert	v (Note exclusions su	ch as			
		otor fuel tanks, most heating oil tar	• •				
	structions.)		,	,			
	_	prage tank on this property. The type					
SL	ubstance(s) contained are	listed below or on an attached sepa	arate sheet, as necessa	arv.			

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. 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				
	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 TRUE AND CORRECT.				
Qi.	Telephone No : (515) 468-1506				



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

Current Owner
Buyer Lower Touch Country Realtor Weberts 515-236-0843 Mailing Address 2328 9. Charles Road
Site Address/County 2328 St. Charles Road
No. of Bedrooms 3 Last Occupied? SHII Disposal? N Softener? Y N H ₂ O Supply? N Softener? Y N H ₂ O Supply? N Softener?
Records Available 465 Permit/Installation Date 2003 Installer 4/A
Septic System Information Septic Tank(s): Size 2000 cal. Material concrete Condition fair. Tank Pumped? Character Condition fair. Septic/Trash/Processing Tank: Size Ma Material Min Condition 144 Tank pumped? No Date Ma Licensed Pumper Mb
Aerobic treatment unit (ATU) MFGR N/A Size N/A Tank Pumped? Date Licensed Pumper Maintenance Contract? Expiration Date Service Provider
Maintenance Contract? Expiration Date Service Provider
Condition
Pump Ttanks/Vaults: Type Ma Size Condition
Distribution System: Distribution Box olastic Outlets Used five Condition good Header Pipe(s) that Number of Lines five
Header Pipe(s) Number of Lines five
Pressure Dosed? <u>yes</u>
Secondary Treatment
Length of Absorption Fields 5x100'= 500' Determined by locking - probable
Condition of Fields uporkly Determined by preserve day, probable
Secondary Treatment Length of Absorption Fields 5 x 100 = 500 Determined by lock introduction of Fields where the Determined by lock introduction of Trench Material 36 Chambers
Size of Sand Filter Nove Determined by Joseph County Ma
Size of Sand Filter None Determined by Joseph County May Vent Pipes Above Grade? No Discharge Pipe Located? No
Effluent Sample Taken? No Results MA
Madia Filton: Tuna Manta
Maintenance Contract? Evnirative Peta Service Dravides
Media Filters: Type
Condition
NPDES General Permit No. 4: Required? No Permitted? No NOI submitted

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Time of Transfer Insp	ection Worksheet			
Other Components				
Alarms None	Working?	Disinfection	Working?	
Control Box	Timers_	Inspection	Ports	
Other Components				page
Overall condition of the	e private sewage disp	osal system		:
Acceptable?		Unacceptable?		•
Explain (attach addition	nal pages as needed):			
Comments: There	us a effshirt t	filter on water sake	off live.	,
Site status at conclusion	of Time of Transfer	inspection:		•
Verify that controls are Power is on to all comp Revisit all components	onents. to verify lids are secu			
Gather all tools for remo		ce.		:
Using this worksheet, w	rite a narrative report	t of the inspection results.		e projet
		narrative, to the city/count where the inspection was		office, the
This report indicates the does not guarantee that it		rate sewage disposal syste	m at the time of the insp	ection. It
Signature of Certified Ins Name (print): Rand	spector: Rivu	In.	Date:	59
Address: 00, Box Phone # 175-207.	148 150miks 7 -0596	<u> </u>		
Address: <u>W. Box</u> Phone # <u>\$75-202</u>	Н	whe	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	shed (
	11/10		lastic out box	N
10-2008	36 6	Sept Sept	ictent zoogal. 5421	0191
	100.	10'	- June District	
44	100 1	10'	1 2	328 St. Chartes Road
Company of the Compan				

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