BK: 2017 PG: 2467

Recorded: 8/9/2017 at 2:46:03.0 PM

Fee Amount: **Revenue Tax:**

LISA SMITH RECORDER Madison County, Iowa



REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSF	EROR:			
Name F	Planet Home Lending, LLC			
Address	321 Research Parkway, Suite 302	Meriden	СТ	06450
	Number and Street or RR	City, Town or P.O.	State	Zip
TRANSF	EREE:			
Name T	he Secretary of Housing and Urban Development			
Address	Shepard Mall Office Complex 2401 NW 23rd St.	Suite 1D Oklahoma City	OK	73107
	Number and Street or RR	City, Town or P.O.	State	Zip
Address	of Property Transferred:			
722 5th Street North		Winterset	IA	50273
Number and Street or RR		City, Town or P.O.	State	Zip
-	scription of Property: (Attach if necessary)			
All that ce	ertain parcel of land situate in the County of Madison	n, State of Iowa, being known a	and designated	as follows:
Lots One	(1) and Two (2) in Block Two (2) of North Addition t	o the town of Winterset, Madis	on County, low	 a
2. Solid	Waste Disposal (check one) There is no known solid waste disposal site on this profibere is a solid waste disposal site on this property attached to this document. rdous Wastes (check one) There is no known hazardous waste on this property. There is hazardous waste on this property and information this document. rground Storage Tanks (check one) There are no known underground storage tanks on the motor fuel tanks, most heating oil tanks, cisterns and there is an underground storage tank on this property listed below or on an attached separate sheet, as necessarily the service of the service of the service on this property than the service of the service on this property than the service of the s	and information related thereto and information related thereto is providulated property. (Note exclusions sometic tanks, in instructions.) The type(s), size(s) and any kessary.	ed in Attachmen uch as small far nown substance	nt #1, attached to m and residential e(s) contained are
	There is a private burial site on this property. The lo lecedent(s) is stated below or on an attached separate		wn identifying i	mormation of the
July 18th 2	D12 cmz FIL	E WITH RECORDER		DNR Form 542-0

6. Private Sewage Disposal System (check one)
All buildings on this property are servec 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:
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Signature: Kathuph Gulo Telephone No.: 724-512-4822
(Transferor or Agent)