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Date 8/29/2017 Time 2:33:21PM

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INDX

ANNO

SCAN

LISA SMITH, COUNTY RECORDER

MADISON COUNTY IOWA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Michael W. Hamilton & Angelica H. Hamilton

Address 2391 148th Street, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Tobias R. Moriset & Krystal F. Moriset

Address P.O. Box 184, Adel, IA 50003

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2391 148th Street, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Parcel "B", located in the Southeast Quarter (1/4) of the Southeast Quarter (1/4) of Section Twenty-Nine (29). Township Seventy-seven (77) North Range Twenty-seven (27) West of the Fifth Principal Meridian, Madison County, Iowa, containing 4.66 acres, as shown in Plat of Survey filed in Book 3, Page 214 on aPRIL 15, 1998 in the Office of the Recorder of Madison County, Iowa

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. 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 _____.

Information required by statements checked above should be provided here or on separate sheets attached hereto:

Well is located on Northwest corner of the property. Currently in use.

I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: Michael W Daniloff Telephone No.: 515-238-4577
(Transferor or Agent)



Closing atty

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

Property information

Current owner Mike Hamilton
Buyer _____ Realtor Private sale
Mailing address _____

Site Address/County 2391-148th St Winterset, IA 50273
Legal Description _____ Madison Co

No. of bedrooms 3 Last occupied? to now Records available yes
Permit # 2059 Installation date 6-13-02 Separation distances ok/no? OK

Septic system information

Septic tank(s): size 1500 material Plastic condition good
Tank pumped? yes date 7-8-16 licensed pumper Mayh septic
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) infer size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type _____ size _____ condition _____

Distribution system: distribution box Plastic outlets used 4 condition good
Header pipe(s) 3 # of lines 4 Pressure dosed? _____

Secondary treatment:
length of absorption fields 4 at 100 ft determined by snort probing
condition of fields good & dry determined by walking probing
type of trench material chamber

Size of sand filter _____ determined by _____
Vent pipes above grade? _____ discharge pipe located? _____
Effluent sample taken? _____ Results _____

Media filters: type _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

NPDES General Permit No. 4: required? _____ permitted? _____ NOI provided? _____

Handwritten signatures and initials:
JM
muk
wll



Time of Transfer Inspection Report

Other components:
 Alarms _____ Working? _____ disinfection _____ working? _____
 Control box _____ Timers _____ inspection ports _____
 Other components _____

Overall condition of the private sewage disposal system

Report system status The septic system at 2391-148th St

Explain (attach additional pages as needed): Winterset, Ia. 50273- is in good operating cond.

Comments: The septic tank opened & pumped - one 7/8" pipe tank has no cracks in it & has 2 comp. & intake & outflow baffles are in place

all gray water goes to system - also tanks water is at correct level before pumping

The Desty Box was opened & all laterals are taking water. Lateral field is clean & dry - also box is in good cond.

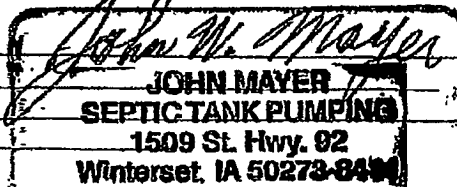
Site status at conclusion of Time of Transfer inspection:

- Verify that controls are set on the appropriate mode.
 - Power is on to all components.
 - Revisit all components to verify lids are secure.
 - Gather all tools for removal from the site.
 - Verify that no sewage is on the ground surface. None on 10/25/16
- Done*

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: _____
 Name (print): _____
 Address: _____
 Phone #: 515-462-2624



Date: 10/25/2016
 Certificate #: 8979

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program
 502 E. 9th St.
 Des Moines, IA 50319

gm *6-2009* *mark* *chh*

Permit # 2059 Mike Hamilton Inspection 6/13/02

2391-148 St. Winton, da. 50213

Top
down
North
wh

North

