

Book 2017 Page 3791 Type 43 001 Pages 7 Date 12/01/2017 Time 12:24:20PM

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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

TRANSFER	ROR:						
Name	MELODY A. MUMFORD						
Address	2294 - 152 nd Street	Winterset	lowa	50273			
	Number and Street or RR	City, Town or P.O.	State	Zip			
TRANSFER	REE:						
Name	BRUCE L. DAWSON						
Address	81064 Niagra	Reasnor	lowa	50232			
	Number and Street or RR	City, Town or P.O.	State	Zip			
Address of	Property Transferred:						
	2294 - 152 nd Street	Winterset	lowa	50273			
	Number and Street or RR	City, Town or P.O.	State	Zip			
X The stat	ere are no known wells situated on ere is a well or wells situated on this ed below or set forth on an attache /aste Disposal (check one)	s property. The type(s), loca		tatus are			
∑ The ☐ The	ere is no known solid waste disposa ere is a solid waste disposal site on achment # 1, attached to this docur	this property and information	n related thereto is	s provided in			
3. Hazard	ous Wastes (check one)						
	There is no known hazardous waste on this property.						
	ere is hazardous waste on this prop	-	thereto is provided	ni t			
	achment # 1, attached to this docur						
` ' -	round Storage Tanks (check on	•	Alata avaluaiana a	المحمد مم طميي			
farn	ere are no known underground stor n and residential motor fuel tanks, ructions.)						
	ere is an underground storage tank	on this property. The type(s), size(s) and any	known			
sub	stance(s) contained are listed belo	ow or on an attached separate	e sheet, as necess	sary.			

5.		vate Burial Site (check one)
		There are no known private burial sites on this property.
	Ш	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.		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
	٠.	have a sewage disposal system.
	X	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.
		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.
	\Box	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
	ш	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]
	\Box	
	ш	This property is exempt from the private sewage disposal inspection requirements pursuant to the
		following exemption [Note: for Exemption #9, use prior check box]:
	ш	The private sewage disposal system has been installed within the past two years pursuant to
		permit number
	Infe	ormation required by statements checked above should be provided here or on separate
		pate attached hereto:
	U	(well)
ı	HE	REBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS
		FORM
	Α	ND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
C:	n c4.	1 / Melody Mundy Tolorbare No. 1545 040 0055
Sig	natu	Telephone No.: (515) 249-6055
		\mathcal{O}



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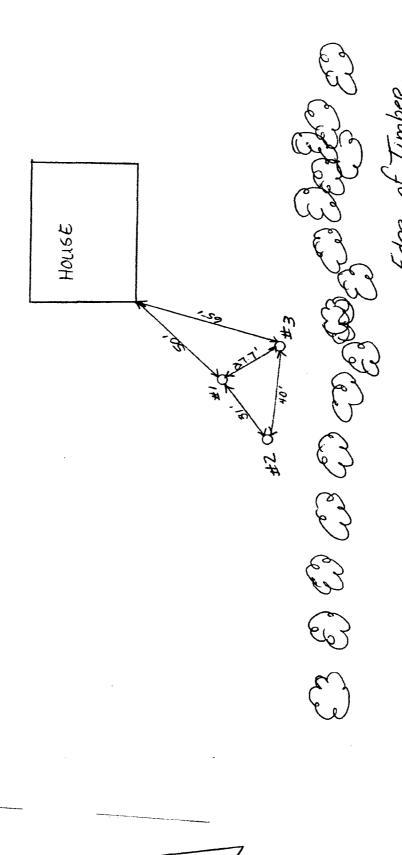
Recid 6-15-16

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

Property information				
Current owner Melody Mumford				
Buyer Realtor clown Realty - Kan-Ka				
Mailing address				
Mailing address				
Size Address County 2294-152 ndff Winterset, ds. 50273 Legal Description				
No. of bedgeoms 3 Last occupied? Ly now Records available 400				
Part 1172 - January 6-10-1987 Separtin Grances of the 0 h				
Septic system information				
Septic tank(s): size 1000 gas material Connete condition good				
Tank pumped? yes date 10-8-20/6 licensed pumper Mayor featin				
Septic/trash/processing tank: size material condition				
Tank pumped? date licensed/pumper				
Acrobic treatment unit (ATU) mfgr/ size				
Tank pumped? date licensed pumper				
Maintenance contract? expiration date service provider				
Condition				
Pump tanks/vaults: type size condition				
Distribution system: distribution box Placks outlets used 5 condition Lood Header pipe(s) 5 # of lines 5 Pressure dosed?				
Consendant to stone to				
Secondary treatment: length of absorption fields 5 at - 8 fl-ff. determined by many Problems				
length of absorption fields 501-86-ff determined by many Problems determined by many problems				
type of trench material work & pipe				
typo of dealer managing 200 Care of great Con-				
Size of sand filter / determined by				
Vent pipes above grade? discharge pipe located?				
Effluent sample taken? Results				
ranucin sample taken!				
Media filters/ type				
Maintenance contract? expiration date service provider				
Condition Care Service provider				
NPDES General Permit No. 4: required? permitted? NOI provided				



Time of Transfer Inspection Report					
Other components: Alarms Working? disinfection working?					
Control box inspection ports					
Other components					
Overall condition of the private sewage disposal system					
Report system status The septic system at 1294-15221					
Explain (attach additional pages as needed): Alintens of, la. 50273.					
Comments: The gester tanks was opened of Purposed on le-8-16-tank hor Domint entobre toutflow boffles are in Plant all array water fall to seaton					
The dest- for was opened & all laterals took water					
The laterale in mound yard-was cleant dry lent has also the I-laterale in heavy timber was relaint by but has					
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.					
Using this worksheet, write a narrative report of the inspection results and attach a site sketch.					
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:					
Address: SEPTIC TANK PUMPING Phone # 515-462-2624 1509 St. Hwy. 92 Winterset, IA 50273-8486					
Provide a copy of this report, the darrative report and sketch to the seller/agent, buyer/agent, the					
county sanitarian/environmental health office, security Recorder in the econity the inspection was					
conducted and to;					
Iowa DNR Onsite Wastewater Program 502 E. 9 th St.					
Des Moines, IA 50319					



Print # 1172

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Legal:

A tract of land located in the East Half (½) of the Southeast Quarter (¼) of Section Thirty-one (31), Township Seventy-seven (77) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, more particularly described as follows, to-wit: Commencing at the Northeast corner of the Southeast Quarter (¼) of said Section Thirty-one (31), running thence South 0°11' East along the East line of said Section Thirty-one (31) 1852.0 feet, thence South 89°59' West 1202.6 feet, thence North 0°11' West 1852.4 feet to the North line of said Southeast Quarter (¼), thence East 1202.6 feet to the point of beginning, containing 51.135 acres.

Address: 2294 – 152nd Street, Winterset, Iowa 50273