

Book 2018 Page 42 Type 43 001 Pages 5 Date 1/04/2018 Time 2:44:25PM Rec Amt \$.00

INDX **ANNO SCAN** 

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

## **REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT** TO BE COMPLETED BY TRANSFEROR

TRANSF							
Name	John J. Sour and Angela						
Address	2423 Meadow Valley Court, Winterset, IA 50273						
	Number and Street or RR	City, Town or P.O.	State	Zip			
TRANSF	EREE:						
Name	Jess M. Bender and Katio	e L. Bender					
Address	384 Bluestem Trail, Dak	ota Dunes, ND 57049					
	Number and Street or RR	City, Town or P.O.	State	Zip			
	of Property Transferred: adow Valley Court, Winte	erset, IA 50273					
Nur	mber and Street or RR	City, Town or P.O.	State	Zip			
1. Wells <u>X</u> T	(check one) here are no known wells s	the 5th P.M., Madison County, Iowa. situated on this property. ated on this property. The type(s), loc	ation(s) and legal st	atus are			
st 2. Solid X T	ated below or set forth on <b>Waste Disposal (check</b> o here is no known solid wa	an attached separate sheet, as necesone) ste disposal site on this property. ssal site on this property and information	ssary.				
	dous Wastes (check one						
<u> </u>		ous waste on this property.  on this property and information related this document.	d thereto is provided	in			
	rground Storage Tanks (						
<u>X</u> T	here are no known underg	ground storage tanks on this property. notor fuel tanks, most heating oil tanks					
		orage tank on this property. The type					

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.
	X 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
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	formation required by statements checked above should be provided here or on separate
SI	eets attached hereto:
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	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Si	gnature: Telephone No.: (515) 988-7227
•	(Transferor Agent)



## Time of Transfer Inspection Report

Other components:	<b>A</b>							
Alarms: Y N Working: Y N Disinfection:	JY DYN '	Working:	□Y □N					
Control Box: Timers: Inspection I	Ports:		•					
Other components: Sump pump For Gravuil	Water	90	es					
Overall condition of the private sewage disposal system: AWAY From Same System.								
Report system status: See Attached pages	4		<u> </u>					
Explain (attach additional pages as needed):								
Comments:								
Site status at conclusion of Time of Transfer inspection:								
<ul> <li>Verify that controls are set on the appropriate mode.</li> </ul>								
<ul> <li>Power is on to all components.</li> <li>Revisit all components to verify lids are secure.</li> </ul>								
<ul> <li>Gather all tools for removal from the site.</li> </ul>								
<ul> <li>Verify that no sewage is on the ground surface.</li> </ul>								
Using this worksheet, write a narrative report of the inspection results and								
This report indicates the condition of the private sewage disposal system not guarantee that it will continue to function satisfactorily.	at the time o	f the inspe	ction. It does					
Signature of Certified Inspector:	Date	: /2	-13-17					
Name (print): Brian Rinard	Certificate:							
Address: P.O. Box 204 NERWALK IN 50211	·							
Phone #: 515-202-4895								
Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent or the person								
ordering the inspection, the county sanitarian/environmental health office	and to:							
Iowa DNR								
Private Sewage Disposal Program								
502 E 9 <sup>th</sup> St								
Des Moines LA 50319								

4/2010 cmz/dao

DNR Form 542-0191

## DNR Time of Transfer Report System Status

Meadow	•		
Address: 2423 VA/ley	CT	Date: 12-13-17	
Comments:	Technic	cian <u>BRIAN</u>	
ALL WASTEW	11704 True	Hadea Appare	•
TO DRAIN INTO S	COAT CIET		-
		em DARTMENT SONTE	-
TO 1500 GAlley	Poly (2) Com	PARTMONT SOFTLE	-
THUR WITH XUSERS	and effull	ent piter	-
	Condition		-
		s IN GOOD Shape	<del>-</del> -
	crewed dow	<i>*</i>	_
		edge of Box	<del></del>
had some damag		TION BUX 15	<b>-</b> .
STILL WATER TIG	<del></del>	orking ok	<b></b>
Bottom 3 LAT	reals were	damp Because	=
they were taking	more water		-
SO' I AdJUSTED	AND Levele	d All LATERALS	Flow
THIS 15	NOT A G.VQI	artee	
THIS CETTIFIES	That the s	sprie System WA	tr .
IN Working land,	tron AT TI	he OF INSPECTI	ion
	-	/	

DIAGRAM OF SYSTEM

See County Records

Permit # 097-09
Inspection 1/15/10
2423 Meadow Valley Ct.

