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Book 2018 Page 1152 Type 43 001 Pages 8

Date 4/13/2018 Time 11:14:26AM

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**

TRANSFEROR:

Name Ricky Espeland
Address 2464 Bent Tree Road #2616, Palm Harbor, Florida 34683
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Roger E. Aldrich
Address 2042 Rustic Lane, WINTERSET, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
2042 Rustic Lane, WINTERSET, IA 50273
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) *Attached*

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 approximate 800 feet west
of house 20 feet in from Driveway
North

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

Signature: Rich Speland Telephone No.: 505 577 6982
(Transferor or Agent)

Parcel "C", located in the Southeast Quarter (1/4), the Northeast Quarter (1/4) of the Southwest Quarter (1/4), and the Southeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Twenty-five (25), Township Seventy-six (76) North Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, as shown in Plat of Survey filed in Book 3, Page 352 on December 1, 1998 in the Office of the Recorder of Madison County, Iowa, AND Parcel "D", located in the Southeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Twenty-five (25), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, as shown in Plat of Survey filed in Book 3, Page 553 on March 24, 2000 in the Office of the Recorder of Madison County, Iowa.



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

Property information

Current owner Rick Espeland 515-577-6982

Buyer _____ Realtor Rick Espeland

Mailing address 2042 Rustic Lane Winterset Ia 50273

Site Address/County 2042 Rustic Lane, Winterset / Madison County

Legal Description _____

No. of bedrooms 2 Last occupied? 15 Records available yes

Permit/installation date 6-7-00 Separation distances ok/ no? _____

1891

Septic system information

Septic tank(s): size 1,500 gal. material Poly Vinyl condition Good

Tank pumped? yes date 2-28-18 licensed pumper yes ST 307

Septic/trash/processing tank: size _____ material _____ condition _____

Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfr _____ size _____

Tank pumped? _____ date _____ licensed pumper _____

Maintenance contract? _____ expiration date _____ service provider _____

Condition _____

Pump tanks/vaults: type _____ size _____ condition _____

Distribution system: distribution box yes outlets used no condition Good

Header pipe(s) 1 # of lines 3 Pressure dosed? no

Secondary treatment:

length of absorption fields 3 x 100' 300ft. determined by _____

condition of fields Good determined by _____

type of trench material 10 inch Gravelless

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 _____



Time of Transfer Inspection Worksheet

Other Components

Alarms no Working? _____ Disinfection no Working? _____

Control Box no Timers no Inspection Ports no

Other Components Effluent Filter

Overall condition of the private sewage disposal system

Acceptable? yes Unacceptable? _____

Explain (attach additional pages as needed): _____

Comments: Recommended to have Septic tank Pumped and Cleaned 3 to 5 years Clean effluent filter once a year

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.

Using this worksheet, write a narrative report of the inspection results.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: *Dorice Smith* Date: 2-28-18
 Name (print): Dorice Smith Certificate #: 8992
 Address: 502 West Main Street St. Charles Ia 50240
 Phone #: 641-396-2440

**ANYTIME SEPTIC SERVICES II
VANCE SMITH
ST. CHARLES, IA 50240
641-396-2440**

REAL ESTATE SEPTIC INSPECTION

On February 28, 2018, Anytime Septic Services II did Time of Transfer Real Estate Inspection on septic tank, distribution box and lateral field at 2042 Rustic Lane, Winterset, Iowa 50273. Rick Espeland residence.

Septic tank is a 1,500 gallon two compartment Poly Vinyl Norwesco tank which I pumped and cleaned with water and is located in decorative garden area. Tank is 24 inches below ground surface with plastic risers and 23 ¼ inch screwed down plastic lids at ground level above 4 inch schedule 40 piped tee baffles on both inlet and outlet ends of tank. On outlet end of tank is a 4 inch round effluent filter inserted into tee baffle that needs to be cleaned at least once a year, Very Important to do. By lifting filter straight upward from baffle and hosing off and reinserting into baffle which I did. Outlet lid is 2 inches below wood chips.

Distribution box is a plastic Tuff Tite box and is 9 inches below ground surface with concrete surrounding for support and is also located in decorative garden area. Inside of box is a 4 inch sawed in half schedule 40 piped tee baffle and 3, 4 inch schedule 40 piped lines leaving box through 3 speed levelers equally distributing effluence's to lateral field.

Lateral field is on a very slight sloped hillside and consist of 3 runs of 10 inch gravel-less infiltrated tile at 100 feet each totaling 300 feet of laterals that varies 12 to 15 inches below ground surface with no evidence of any ponding or surfacing above absorption field and no popping sound from probing all 3 laterals.

NOT RESPONSIBLE FOR ANY FAILED SEPTIC SYSTEMS.



MADISON COUNTY
BOARD OF HEALTH
COURT HOUSE
WINTERSSET, IOWA 50273

PERMITS
1-31-82 2077

SEPTIC SEWAGE DISPOSAL TREATMENT SYSTEM
PERMIT APPLICATION

PERMIT NO. 1891

4006725000/10270

CK# 2798

FEE PAID: 3.24-00
PERMIT ISSUED: 3.24-00

Applicant Jan Beebe License No. H. 462-1062 W. 633-1879 C. 238-6438

Address 1585 State Hwy 92 Winterset, Ia. 50273

Telephone No. _____

Address 2049 Rustic Dr.

Proposed Structure Dwelling Legal Description Parcel D SE NW
Existing Structure _____ Sect. by 25 Township Union

Number of Bedrooms 2 Stairs 2 Lavatories 2 Showers 1 Tubs 2 Sinks 1

disposal

PERCOLATION TEST MUST BE TAKEN AND APPROVED PRIOR TO ISSUANCE OF THE SEWAGE DISPOSAL TREATMENT SYSTEMS PERMIT.....

Percolation Test Taken 3-14-2000 by D Woods

Results Test hole #1 30.0 min in #2 20.0 min in #3 15.0 min/in #4 17.1 min/in

Average 20.5 min in No of Laterals Required 3 Length of Laterals 100 ft. ea

DOUBLE COMPARTMENT SEPTIC TANKS REQUIRED / STATE APPROVED
2 Bedrooms 800 gal. 3 Bedrooms 1000 gal. 4 Bedrooms 1250 gal. 5 Bedrooms 1500 gal

FEES: Check payable to Madison County Treasurer - Return with application.....
SEPTIC TANKS ABSORPTION FIELDS - (ALTERNATIVE SYSTEMS) - MOUNDS - DOUBLE SAND FILTERS - APPROVED MECHANICAL SYSTEMS..... \$ 100.00

TYPE OF SYSTEM INSTALLED 1500 gal tank 10" gravelless 3 @ 100'

Contractor C & S Construction Telephone No 462-4782

Date 1962 State Iowa Hwy 92 Winterset, IA.

I, the undersigned, certify that the above information is true to the best of my knowledge and I agree that the system will be installed in accordance with the rules and regulations of Madison County Board of Health and Chapter 101. A.C. I further acknowledge that the system must remain open so that proper inspection and approval can be made by the local Health Sanitarian and that the system cannot be put into operation until approved.

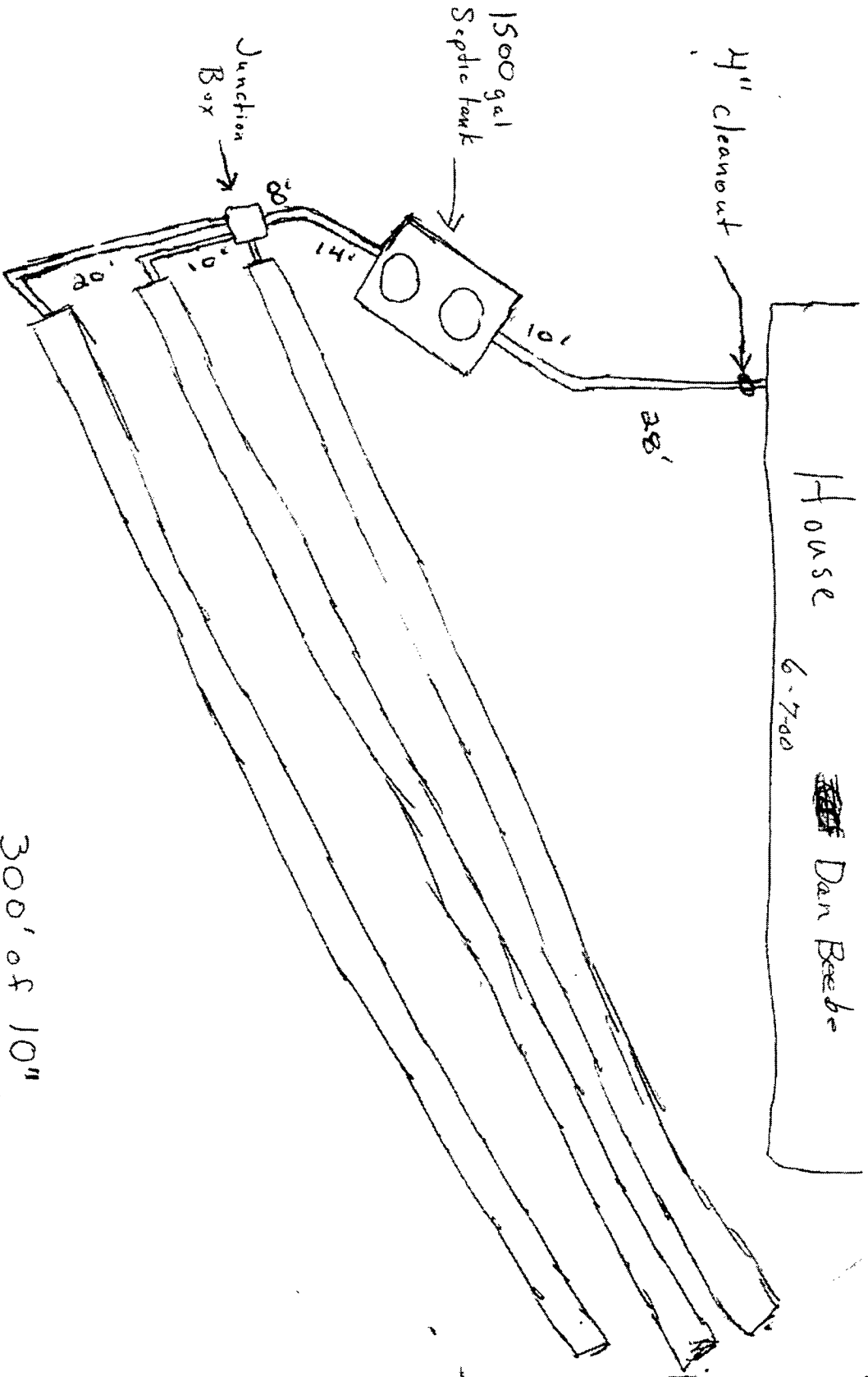
Date 3-24-2000 Applicant Jan Beebe

NOTE: Request for inspection of the system must be made 24 hours in advance, if possible. Water at the site to test the distribution box must be available.

Mechanical systems require use of a free-access sand filter and must be covered by maintenance agreement. Maintenance agreement must be recorded in the Madison County Recorder's office.

Discharge from mechanical systems or double sand filters must be sampled and tested in the early spring, midsummer and early fall. Results to be submitted to the local Board of Health office.

DATE OF INSPECTION: 2-1-2000 INSPECTION BY: Jan Beebe



Dan Beebe
6-7-00

~~Dan Beebe~~
Dan Beebe