



Document 2018 GW1985

Book 2018 Page 1985 Type 43 001 Pages 8

Date 6/22/2018 Time 11:09:27AM

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

CHEK

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

TRANSFEROR:

Name Elaine Rosencrants

Address PO Box 71661, Clive, IA 50325

Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name MR2D, LLC

Address 1966 175th Lane, Winterset, IA 50273

Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

1599 US Hwy 169, Winterset, Iowa 50273

Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

The Southeast Quarter (1/4) of Section Thirty-six (36), Township Seventy-seven (77) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa (including Parcel "A", located therein, containing 10.63 acres, more or less, as shown in Plat of Survey filed in Book 2018, Page 1410 on May 7, 2018 in the Office of the Recorder of Madison County, Iowa), EXCEPT the West 22 feet of said Southeast Quarter (1/4); AND the North Fractional Half (1/2) of the Northeast Quarter (1/4) of Section One (1), Township Seventy-six (76) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa EXCEPT the West 22 feet thereof (except the South 25 feet of said 22 foot strip)

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)

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DNR form 542-0960 (July 18, 2012)

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]:

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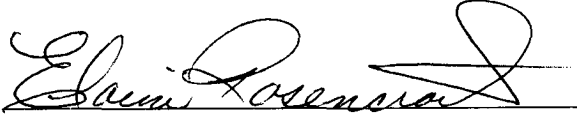
DNR form 542-0960 (July 18, 2012)

_____.
___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:


(Transferor or Agent)

Telephone No.: (515) 321-8207



Time of Transfer Inspection Report

Other components:

Alarms ✓ Working? — disinfection — working? —

Control box — Timers — inspection ports 1 on tank outlet

Other components has Rizers on tank clear out by house

Overall condition of the private sewage disposal system

Report system status Everything looks ok at this time

Explain (attach additional pages as needed): _____

Comments: _____

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 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: Allen Akers Date: 4-26-2018
 Name (print): Allen Akers Certificate #: 202
 Address: 2204 175th St Winterset IA 50273
 Phone #: 515-462-1015

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

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

Property information

Current owner David Clark - ESTATE
Buyer David Clark Realtor Remax Realtors George Archer
Mailing address _____ 515-208-5068

Site Address/County 1599 Hwy 169 Winterset IA 50273
Legal Description 5 1/2 S E S E

No. of bedrooms 3 Last occupied? 6-2017 Records available yes
053-06
Permit/installation date 5/12/06 Separation distances ok no? _____

Septic system information

Septic tank(s): size 1500 gal material Cement condition Looks Good
Tank pumped? yes date 4-26-18 licensed pumper yes
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfr None size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type None size _____ condition _____

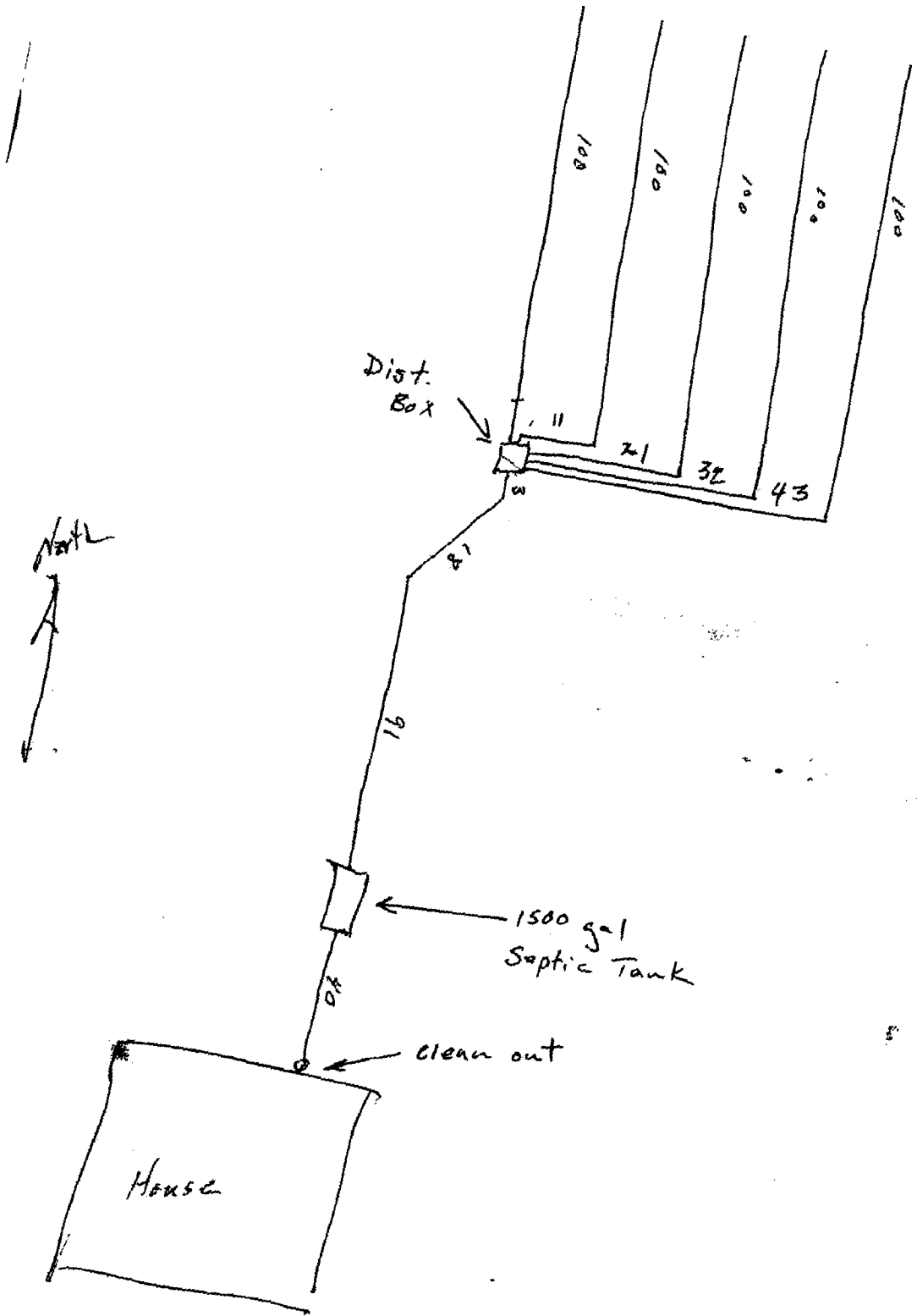
Distribution system: distribution box plastic ^{Cement} outlets used _____ condition _____
Header pipe(s) _____ # of lines _____ Pressure dosed? _____

Secondary treatment:
length of absorption fields 5 @ 100ft determined by Dug up End
condition of fields Look ok determined by Dug up End and Middle
type of trench material Chambered 12"

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? no permitted? _____ NOI provided _____



permit # 053.06 5/12/06

S 1/2 SESE

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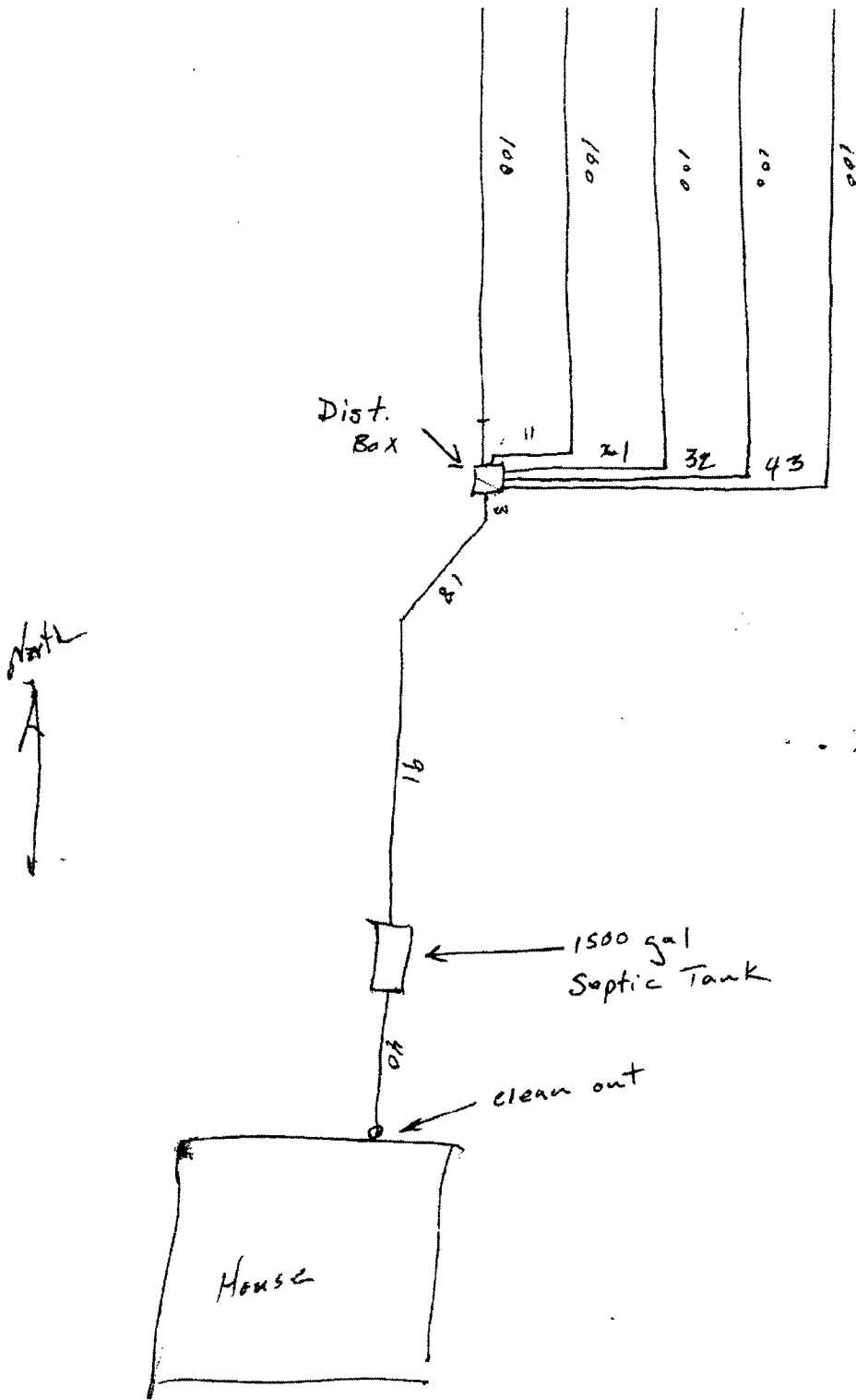
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Vent pipes above grade? _____ discharge pipe located? _____
Effluent sample taken? _____ Results _____

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Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

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



Permit # 053.06 5/12/06
 5 1/2 SESE