BK: 2018 PG: 2414

Recorded: 7/25/2018 at 3:52:10.0 PM

Fee Amount: \$0.00 Revenue Tax:

LISA SMITH RECORDER Madison County, Iowa

## **REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT**

TO BE COMPLETED BY TRANSFEROR

TRANS					
Name	/				
Address	709 W. North Street, Winterset, IA 50273				
	Number and Street or RR	City, Town or P.O.	State	Zip	
TRANSI	EREE:				
Name	Emily K. Walton and E				
Address	710 SE Melrose Drive,	Waukee, IA 50263			
	Number and Street or RR	City, Town or P.O.	State	Zip	
	of Property Transferred:				
Lot 28 (	Covered Bridge Estates, V	Winterset, IA 50273			
Nu	imber and Street or RR	City, Town or P.O.	State	Zip	
2. Solid	tated below or set forth or Waste Disposal (check here is no known solid wa here is a solid waste disp	uated on this property. The type(s), locat in an attached separate sheet, as necessa one) aste disposal site on this property. posal site on this property and information	ary.		
3. Haza  X T	here is hazardous waste ttachment #1, attached to rground Storage Tanks	ne) ous waste on this property. on this property and information related to this document. (check one)	•		
s ir T	mall farm and residential istructions.) 'here is an underground s	ground storage tanks on this property. (I motor fuel tanks, most heating oil tanks, o storage tank on this property. The type(s) e listed below or on an attached separate	cisterns and septic ), size(s) and any k	tanks, in nown	

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.
	X 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
	formation required by statements checked above should be provided here or on separate
sł	neets attached hereto:
	HERRY BEAL ARE THAT HAVE REVENUES THE MARKING TO THE TOTAL
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
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Si	gnature: Telephone No.: (515) 468-5635
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