

Book 2018 Page 2872 Type 43 001 Pages 5 Date 9/05/2018 Time 12:48:12PM

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	EROR:			
Name	John A. Tymeson and Jodi	S. Tymeson		
Address	1242 Javelin Pl, Ogden, IA	50212		
	Number and Street or RR	City, Town or P.O.	State	Zip
TRANSF	EREE:			
Name	Jill Vande Noord and Todd	Vande Noord		
Address	325 6th Street, Minburn, IA	A 50167		
	Number and Street or RR	City, Town or P.O.	State	Zip
	of Property Transferred: ghway 169, Winterset, IA 50	273		
Nur	nber and Street or RR	City, Town or P.O.	State	Zip
1. WellsT		ated on this property.		tus are
2. Solid X T	Waste Disposal (check on here is no known solid waste	e disposal site on this property. al site on this property and informa	•	orovided
3. Hazar <u>X</u> TI	dous Wastes (check one) here is no known hazardous	waste on this property. this property and information relat	ed thereto is provided i	in
4. Under <u>X</u> TI sr in:	rground Storage Tanks (chere are no known undergromall farm and residential motestructions.) There is an underground storage.		ks, cisterns and septic e(s), size(s) and any k	tanks, in

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 .
Inf	ormation required by statements checked above should be provided here or on separate
eh	pets attached hereto:
\ <u>\</u>	lell is capped and located near telephone box.
-	
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Sig	nature: S. Lymeson Telephone No.: (515) 249-8627
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542-0191

Time of Transfer Inspection Report

me30n				
Realtor:				
Winterset IA 50273				
Current Records available: 1/25				
ration distances (ok/no?):				
Septic tank(s): Size: 1000 ga/ Material: Concrete Condition: OK				
Licensed pumper: 54-237				
aterial: Condition:				
Licensed pumper:				
Size				
Licensed pumper:				
Service provider:				
Condition:				
Outlets used 5. Condition: New				
lines: Pressure dosed? 100				
Secondary Treatment:				
Length of absorption fields: 50 100 =500 Determined by: Med Probe				
Determined by: hydrey lic test				
Determined by:				
Discharge pipe located?				
Results:				
Maria Carlos Car				
Maintenance contract? YN Expiration date: Service provider:				
Condition:				
Permitted? YN NOI provided:				



542-0191

Time of Transfer Inspection Report

Other components:
Alarms: YN Working: YN Disinfection: YN Working: YN N
Control Box: Timers: Inspection Ports:
Other components:
Overall condition of the private sewage disposal system: Good
Report system status: System was working properly on day of inspection.
Explain (attach additional pages as needed): Secondary treatment handled hydraulic
test and was working when inspected.
Comments: This system is older but was working properly on the day
ofinspection.
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: Date: 5-2-18
Name (print): Joe Bedwell Certificate #: 10974
Address: 1310 East Clinton Avenue Indianola, IA 50125
Phone #: 515-681-5885
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 9th St
Des Moines IA 50319

