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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

IRANSE	EKOK:						
Name	Doug George						
Address	2241 Grand Avenue #12, West Des Moines, IA 50265						
	Number and Street or RR	City, Town or P.O.	State	Zip			
TRANSF	EREE:						
Name	Daniel Swank						
Address	14683 Upland Avenue, Ui	rbandale, IA 50276					
	Number and Street or RR	City, Town or P.O.	State	Zip			
	of Property Transferred: 0th Street, SAINT CHARL	ES, IA 50240					
Nur	mber and Street or RR	City, Town or P.O.	State	Zip			
$\frac{\text{of the No}}{(75) \text{ Nor}}$	orthwest Quarter (1/4) of the	th if necessary) The North Half (½) of Northeast Quarter (¼) of Section Fourtheast Of the 5th P.M., Madison Count	ır (4), Township Sev	enty-five			
2. Solid — in 3. Hazar	ated below or set forth on a Waste Disposal (check o here is no known solid washere is a solid waste disposant tachment #1, attached to dous Wastes (check one here is no known hazardous here is hazardous waste of ttachment #1, attached to the waste of	ted on this property. The type(s), locan attached separate sheet, as necesine) te disposal site on this property. sal site on this property and information this document.) us waste on this property. In this property and information related his document.	on related thereto is	provided			
T Si in	mall farm and residential m structions.)	check one) round storage tanks on this property. otor fuel tanks, most heating oil tanks brage tank on this property. The type	s, cisterns and seption	c tanks, in			

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
۱	formation required by statements cheeked above chould be provided here or on consents
	formation required by statements checked above should be provided here or on separate neets attached hereto:
31	icets attached hereto.
	NORTHWAY COONED OF PROPERTY. CAPTER A NON-
	TUNTIONING Well
_	
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
S	ignature: Telephone No.: (515) 681-1410
_	(Transferor obligation)



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

Property information	
Current owner Ben Mortins	en
	Realtor
Mailing address	Nearth
	A
Site Address/County 3048 220+	h, Saint Charles, IA/ Madi
Legal Description	
	4
No. of bedrooms 2 Last occupied? (urr	CN Records available
11-77-78	
Permit/installation date 11-22-78 Separation	n distances (ok/)no?
Septic system information	
\$70 gal	concrete AR
Septic tank(s): size $\frac{\text{So yel}}{\text{Material}}$ material Tank pumped? \underline{XPS} date $\underline{-Q-1S-18}$	condition O
Tank pumped! XPS date 1918	incensed pumper 57-65/
Septic/trash/processing tank: size	
Tank pumped? date	ncensed pumper
Appahia tonatannat unit (ATII) mfar	o na
Aerobic treatment unit (ATU) mfgr Tank pumped? date	liconcod myrror
Maintenance contract? expiration date	
Condition	Service provider
Condition	
Pump tanks/vaults: type size _	condition
•	
Distribution system: distribution box <u>Yes</u>	outlets used condition _Door
Distribution system: distribution box $\frac{\checkmark e }{}$ Header pipe(s) $\frac{\checkmark e }{}$	# of lines H Pressure dosed? NO
Secondary treatment: length of absorption fields condition of fields 9000 type of trench material rock and pip	Constant
length of absorption fields 10 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	determined by Courty records
condition of fields 9000	determined by
type of trench material rock and pip	<u>C.</u>
Size of sand filter Vent pipes above grade?	determined by
Vent pipes above grade?	discharge pipe located?
Effluent sample taken?	esults
3.6 M. GU	
Media filters: type	
Maintenance contract? expiration date	-
Condition	
NPDES General Permit No. 4: required?	



Time of Transfer Inspection Worksheet

Other components:	Working?	disinfection	working?
Control box	Timers	inspection por	ts
Other components			
Overall condition o	f the private sewage disp	oosal system	
		orking properly	
Explain (attach add	itional pages as needed):	Septic tanh Hydrolie text	good.
		robe apart.	
 Veri Pow Revi Gath 	ision of Time of Transfer fy that controls are set or er is on to all component isit all components to ven her all tools for removal in ify that no sewage is on t	n the appropriate mode. ts. rify lids are secure. from the site.	
Using this workshe	et, write a narrative repo	ort of the inspection results and	attach a site sketch.
the inspection. It d	oes not guarantee that it	ivate sewage disposal system a will continue to function satisf	actorily.
Name (print): Address: 106 Phone # 515	en Bedwell Noth St. Dnit 681-2053	+ 42, Indianola, I	Certificate #: 116/2
		report and sketch to the seller/a ce in the county the inspection	
Iowa DNR Onsite 502 E. 9th St.	Wastewater Program		