



Document 2018 GW3423

Book 2018 Page 3423 Type 43 001 Pages 8

Date 10/23/2018 Time 12:48:46PM

Rec Amt \$.00

INDX
ANNO
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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 JACQUELINE & LEYSTON GODWIN

Address 3618 South 74th West Court Tulsa Oklahoma 74107
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name CODY I. CLINE

Address 2121 Warren Avenue St. Charles Iowa 50240
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
2121 Warren Avenue St. Charles Iowa 50240
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) _____
See 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 a 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.
- DSA* There is a building served by a 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 acknowledgement 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 acknowledgement is attached to this form.
- There is a building served by private sewage disposal system on this property. The buyer has executed a binding acknowledgement with the county board of health to install a new private sewage disposal system on this property with an agreed-upon time period. A copy of the binding acknowledgement 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 acknowledgement with the county board of health to demolish the building within an agreed-upon time period. A copy of the binding acknowledgement 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:

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

Signature: *Joseph D. Sodi* Telephone No.: (515) 770-5834
(Transferor or Agent)

Legal: Parcel "A" located in the Southeast Quarter of the Northeast Quarter (SE ¼ NE ¼) of Section 36, Township 76 North, Range 26, West of the 5th P.M., Madison County, Iowa, containing 5.000 acres, as shown in Plat of Survey filed in Book 2, Page 433 on December 29, 1993, in the Office of the Recorder of Madison County, Iowa

Address: 2121 Warren Avenue, St. Charles, Iowa 50240



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

Property information

Current owner Les and Jacqueline Goodwin 515-771-5824
Buyer Realtor Matt Grobe 515-988-3726
Mailing address 2121 Warren Ave. St. Charles Ia 50240

Site Address/County 2121 Warren Ave. St. Charles Ia Madison Co.
Legal Description 34-74-26

No. of bedrooms 3 Last occupied? is Records available yes

Permit/installation date Separation distances ok/ no?

Septic system information

Septic tank(s): size 1000 gal material concrete condition fairly good
Tank pumped? yes date 9-28-18 licensed pumper yes ST 307
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfg 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 fairly good
Header pipe(s) 1 # of lines 4 Pressure dosed? no

Secondary treatment:
length of absorption fields 4 x 84 336 ft determined by
condition of fields good determined by
type of trench material perforated pipe & rock

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 none

Overall condition of the private sewage disposal system

Acceptable? yes Unacceptable? _____

Explain (attach additional pages as needed): _____

Comments: have septic tank pumped 3 to 5 years

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: [Signature] Date: 10.2.18
 Name (print): Vance Smith Certificate #: 9892
 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

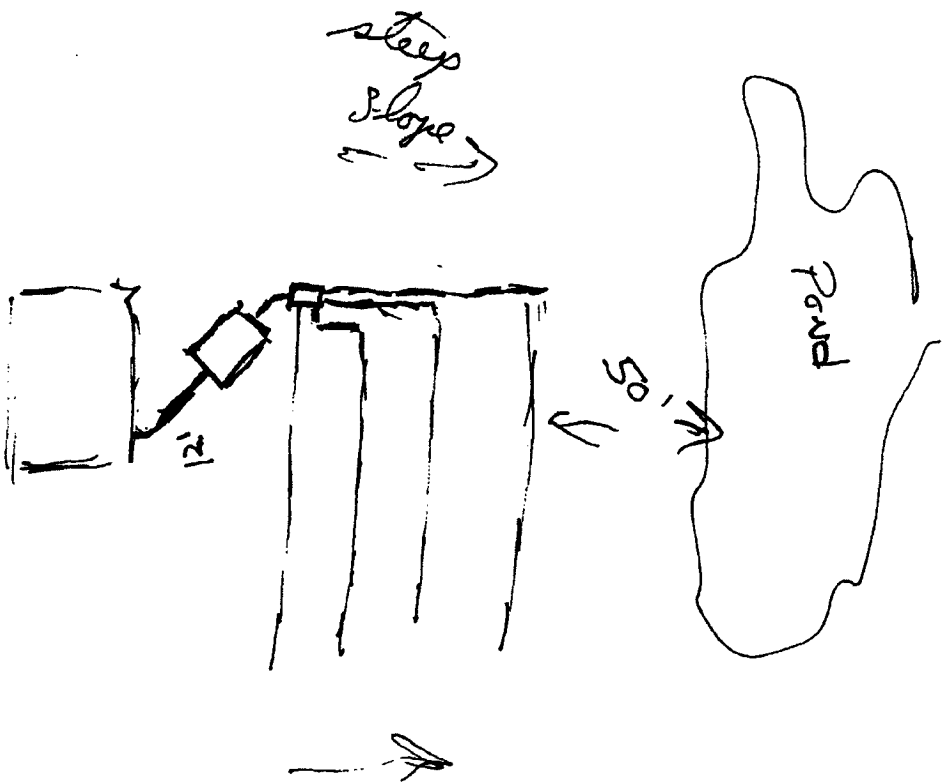
On September 28th, 2018. Anytime Septic Services II did Time of Transfer Real Estate Inspection on septic tank, distribution box and lateral field at 2121 Warren Ave. St Charles, Iowa 50240. Les and Jacqueline Goodwin residence.

Septic tank is a 1,000 gallon two compartment old styled concrete Lister tank with slide off ends which I pumped and cleaned with water and is 18 inches below ground surface. Neither inlet or outlet ends of tank have ever had baffles attached to inter walls. Septic tank is fairly good condition.

Distribution box is a concrete Lister box which I pumped and cleaned with water and is 12 inches below ground surface. Inside of box is a 4 inch schedule 35 piece of pipe filled with concrete for a baffle with deterioration on inside walls put not leaking. There are 4, 4 inch schedule 35 piped lines leaving box through open pipe distributing effluence's equally to lateral field. Distribution box is in fairly good condition.

Lateral field is on a slope hillside and consist of 4 runs not of 5 runs of schedule 35 perforated pipe and septic rock at 84 feet each totaling 336 feet of laterals that varies 18 to 24 inches below ground surface with no evidence of any ponding or surfacing above absorption field and no popping sound from probing all 4 laterals.

NOT RESPONSIBLE FOR ANY FAILED SEPTIC SYSTEMS.



top lateral to drain first
& second -
bottom down

PERCOLATION TEST RESULTS

APPLICANT Jay Knight (by Olson Cabinet & Supply)
(Name)

ADDRESS 1617 50th St. West Des Moines, Iowa 50265
(Current) (Street/RFD) (City/State) (Zip Code)

TELEPHONE NO: _____ 225-0594
(Home) (Business)

BUILDING SITE: Parcel in the NE $\frac{1}{4}$ of the NE $\frac{1}{4}$ Sec. 36-76-26
(Legal Description) (Township/Section)

NUMBER OF BEDROOMS: 3

PERCOLATION TEST	HOLE NUMBER	MINUTES PER INCH
DATE TAKEN: <u>May 24, 1979</u>	1	<u>27</u>
BY: <u>Dean Ross</u>	2	<u>30</u>
	3	<u>10</u>
	4	<u> </u>
	AVERAGE:	<u>23</u>

TOTAL NUMBER LATERAL FEET OF ABSORPTION FIELD: 420

NUMBER OF LATERALS REQUIRED: 5

AVERAGE LENGTH OF LATERALS: 84 feet each (Not to exceed 100 feet)

COMMENTS:

SEAL:

I hereby certify that this plan, specification or report was prepared by me or under my direct personal supervision and that I am a duly registered Professional Engineer under the laws of the State of Iowa.

Signed J.M. Hochstetler Date 5/25/79
J.M. Hochstetler P.E., Iowa Reg. No. 5808