

Document 2018 GW3987

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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

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

TRANSF					
Name Address	Jordan D. Lytton 305 W Market, St. Charles, IA 50240				
, taa. 555	Number and Street or RR	City, Town or P.O.	State	Zip	
TRANSF	EREE:				
Name	Brian C. Waller				
Address	2040 S 41st Court, West	Des Moines, IA 50265			
	Number and Street or RR	City, Town or P.O.	State	Zip	
	of Property Transferred: olet Lane, St. Charles, IA 5	0240			
Nu	mber and Street or RR	City, Town or P.O.	State	Zip	
<u>X</u> T — T st 2. Solid <u>X</u> T	ated below or set forth on Waste Disposal (check of here is no known solid was	ated on this property. The type(s), loca an attached separate sheet, as neces one) ste disposal site on this property.	sary.		
	here is a solid waste dispo Attachment #1, attached	sal site on this property and information this document.	on related thereto is p	provided	
<u>X</u> T	dous Wastes (check one here is no known hazardor here is hazardous waste o ttachment #1, attached to	us waste on this property. In this property and information related	I thereto is provided i	in	
	rground Storage Tanks (				
sı in	mall farm and residential matructions.)	round storage tanks on this property. notor fuel tanks, most heating oil tanks	, cisterns and septic	tanks, in	
		orage tank on this property. The type( listed below or on an attached separa			

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)
٠.	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.
	X 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
In	formation required by statements checked above should be provided here or on separate
	eets attached hereto:
_	
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Si	gnature: Telephone No.: (641) 330-0217
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## TIME OF TRANSFER INSPECTION WAIVER BINDING ACKNOWLEDGEMENT for DEMOLITION, Abandonment.

This agreement is entered into this <u>3rd</u> day of December, 2018 by and between Madison County Board of Health and property buyer Brian C. Waller.  Brian C. Waller 515 418-3553
WHEREAS, it is understood that a dwelling with a Private sewage disposal system is located at 2502 Violet Lane St. Charles IA 50240 and that the property buyer, Brian C. Waller intends to demolish the dwelling and abandon the Private sewage disposal system after purchase.
NOW THEREFORE, it is hereby agreed that the dwelling on this property will be demolished with all debris disposed of in accordance with applicable laws and regulations. In addition, the septic tank located on this property shall be properly abandoned in accordance with lower Administrative Code Chapter 69 requirements. Both items will be completed by the 28th day of February 2019.
Dated the <u>3rd</u> day of December, 2018.
PROPERTY BUYERS  MADISON COUNTY BOARD OF HEALTH OR AUTHORIZED REPRESENTATIVE  Lina Buck
Tina Burk
This instrument was acknowledged before me on the 3rd day of December, 2018 by
Melly Kastonian Public J
SHELLEY D. KASTER Commission Number 792518 My Commission Expires