BK: 2018 PG: 4005

Recorded: 12/7/2018 at 1:33:44.0 PM

Pages 6

County Recording Fee: \$0.00 lowa E-Filing Fee: \$0.00 Combined Fee: \$0.00

**Revenue Tax:** 

LISA SMITH RECORDER Madison County, Iowa

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

<b>TRANSF</b>								
Name	Donald R. Mason							
Address	483 Katelyn Dr, Holladay, TN 38341							
	Number and Street or RR	City, Town or P.O.	State	Zip				
TRANSF								
Name	Diane M. Nitzel							
Address	2623 Timber Lane, Saint Charles, IA 50240							
	Number and Street or RR	City, Town or P.O.	State	Zip				
Address 2623 Tir	of Property Transferred: nber Lane, Saint Charles, IA	50240						
Nu	mber and Street or RR	City, Town or P.O.	State	Zip				
T T s 2. Solid	tated below or set forth on an Waste Disposal (check on	ed on this property. The type(s), lend attached separate sheet, as nec e)	ocation(s) and legal stages	atus are				
T ir	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. Haza	rdous Wastes (check one)							
T	uttachment #1, attached to th	this property and information rela is document.	ted thereto is provided	l <b>i</b> n				
4. Unde	erground Storage Tanks (cl	neck one)	h. (Nata avalualams a	uob ac				
<sup>*</sup> S	There are no known undergromall farm and residential monstructions.)	ound storage tanks on this propert tor fuel tanks, most heating oil tar	y. (Note exclusions stands, cisterns and seption	c tanks, in				
7	There is an underground stor	age tank on this property. The ty sted below or on an attached sepa	pe(s), size(s) and any larate sheet, as necess	known ary.				

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)					
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.					
	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					
	other temporary physical conditions prevent the certified inspection of the physical conditions					
	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 demoish 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					
	permit number					
1.	nformation required by statements checked above should be provided here or on separate					
11	heets attached hereto:					
S	neets attached hereto.					
_						
-						
_						
_						
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM					
	AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.					
	AND THAT THE INFORMATION STATED ABOVE IS THOU AND SOURCEST.					
_	Signature: Telephone No.: 575-468 (250)					
5	Signature: 1 Clare (1977) 1 elephone No.: 33 763 (23 )					
	The state of the s					

## Addendum

1. The Northwest Quarter (1/4) of the Northwest Quarter (1/4) of Section Twenty-nine (29) in Township Seventy-five (75) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, EXCEPT therefrom a parcel described as commencing 108.6 feet East of the Southwest Corner and on the South line thereof, thence North 3°57' East, 389.9 feet, thence South 89°49' East, 299.9 feet, thence South 7°51' West, 391.7 feet to the South line thereof, thence West 273.3 feet to the point of beginning and containing 2.5565 acres including 0.2917 of an acre of county road right-of-way, AND EXCEPT Parcel "F" located in the Northwest Quarter (1/4) of the Northwest Quarter (1/4) of said Section Twenty-nine (29), containing 18.04 acres of land including 0.47 acres of county road right of way, as shown in Plat of Survey filed in Book 2003, Page 5279 on September 4, 2003, in the Office of the Recorder of Madison County, Iowa



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

Property information
Current owner Don and Peggy Mason  Buyer Realtor Heather Sturn  Mailing address 2623 Timber Lane, St. charles, FA
Site Address/County 2623 Timber Lane, St. Charles, IA / Madiso Legal Description
No. of bedrooms 4 Last occupied? <u>CUrrent</u> Records available
Permit/installation date May, 2001 Separation distances (ok)no?
Septic system information
Septic tank(s): size 2,000 pol material Conrede condition 9000  Tank pumped? 9-5- date 7-8-15 licensed pumper Anytime Septic  Septic/trash/processing tank: size material condition  Tank pumped? date licensed pumper
Aerobic treatment unit (ATU) mfgr size
Pump tanks/vaults: type Concrete size 500 condition 9000
Distribution system: distribution box outlets used condition  Header pipe(s) # of lines Pressure dosed?
Secondary treatment:  length of absorption fields 150 determined by Manager determined by Fas precition determined by Fas precition type of trench material Mound system
Size of sand filter determined by Vent pipes above grade? discharge pipe located?  Effluent sample taken? Results
Media filters: type
NPDES General Permit No. 4: required? permitted? NOI provided
4/2010 Page 1 of 2



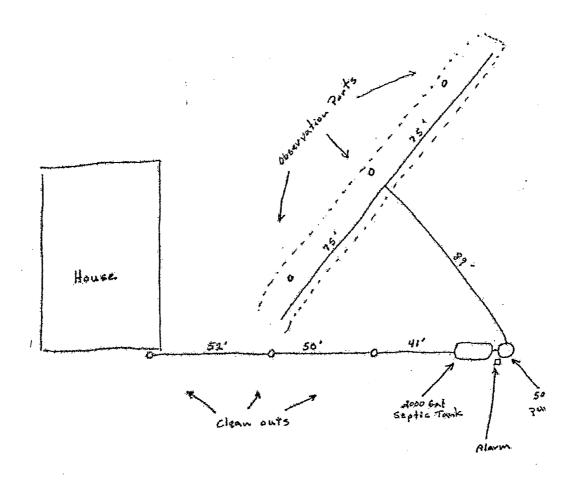
4/2010

## Time of Transfer Inspection Report

Alarms 4-8 Working? 48	disinfection	working?					
Control box Timers	inspection ports	tables of the state of the stat					
Other components <u>Pump</u> and alarm	working o	rood					
Overall condition of the private sewage disposal system							
Report system status Septic System working at inspection							
Explain (attach additional pages as needed):							
Comments: Septic tank good, Mound Good and dry, pump and alarm working good,							
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: BM Bedul Name (print): Ben Bedwell Address: 2924 Quaber 5+reet, St Phone # 515-651-2053	L Charles, IA, 5	nate: 7-7-18 ertificate #: [1612-					
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. 9 <sup>th</sup> St. Des Moines, IA 50319							

Page 2 of 2

542-0191



----