



Document 2018 GW4258

Book 2018 Page 4258 Type 43 001 Pages 6

Date 12/28/2018 Time 2:16:11PM

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 Perry Lambright and Dorothy Lambright
Address 28066 135th Avenue, Cincinnati, IA 52549
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Ben Beachy and Katie Beachy
Address 2074 310th Street, Lorimor, IA 50149
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

2074 310th Street, Lorimor, IA 50149
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) Parcel "A" located in the Northeast Quarter (1/4) of the Northeast Quarter (1/4) of Section Twenty-three (23), Township Seventy-four (74) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, containing 10.000 acres, as shown in Plat of Survey filed in Book 2004, Page 5219 on November 4, 2004, in the Office of the Recorder of Madison County, Iowa.

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 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 _____.

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: *Perry Lambright* Telephone No.: (641) 898-2853
(Transferor or Agent)



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

Property information

Current owner Penny Lambright
 Buyer Ben Beechey Realtor None
 Mailing address 2074 - 310th St Winterset IA 50273

Site Address/County 2074 - 310th St
 Legal Description Same as address

No. of bedrooms 4 Last occupied? See these Records available yes
#065-16
 Permit/installation date 10/21/16 Separation distances (ok) no? _____

Septic system information

Septic tank(s): size 1500 gal ^{2 compartment} material Cement condition Looks ok at this time
 Tank pumped? yes date 11-7-18 licensed pumper yes
 Septic/trash/processing tank: size - material - condition -
 Tank pumped? - date - licensed pumper -

Aerobic treatment unit (ATU) mfr no size -
 Tank pumped? - date - licensed pumper -
 Maintenance contract? - expiration date - service provider -
 Condition -

Pump tanks/vaults: type no size - condition -

Distribution system: distribution box plastic outlets used _____ condition good
 Header pipe(s) _____ # of lines _____ Pressure dosed? _____

Secondary treatment:

length of absorption fields _____ determined by _____
 condition of fields _____ determined by _____
 type of trench material _____

Size of sand filter 18 X 5.5 determined by Map + Probe
 Vent pipes above grade? yes discharge pipe located? yes
 Effluent sample taken? yes Results EBOD-5-2 TSS-1

Media filters: type _____
 Maintenance contract? - expiration date _____ service provider _____
 Condition _____

NPDES General Permit No. 4: required? No permitted? _____ NOI provided _____



Time of Transfer Inspection Report

Other components:

Alarms no Working? - disinfection no working? -

Control box no Timers no inspection ports Risers to top of ground

Other components basefits on sand filter

Overall condition of the private sewage disposal system

Report system status Everything looks ok at this time & date

Explain (attach additional pages as needed): The filter on the discharge side of tank will not come clear out

Comments: _____

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.

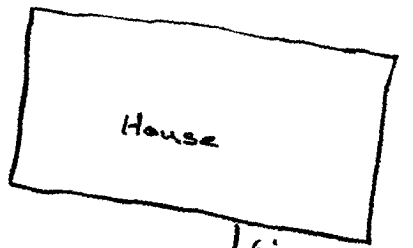
Using this worksheet, write a narrative report of the inspection results and attach a site sketch.

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: Allen Akers Date: 11-5-18
 Name (print): Allen Akers Certificate #: 203
 Address: 2203 175th St Winterset IA 50273
 Phone #: 515-462-1015

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319



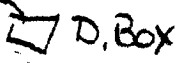
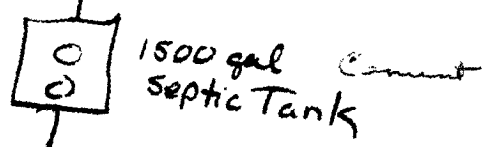
6'
Cleanout
11'

Permit # 065-16
Inspection 10/21/16
310th Street

66'

24'

13'



55'

18'

5'

35'

Dis. Pipe





State Hygienic Laboratory

The University of Iowa

ALLEN AKERS
2204 175TH CT
WINTERSET, IA 50273-

Accession Number	736006
Date Sample Finalized	2018-11-13 09:33
Date Received	2018-11-06 10:44
Sample Source	Non-Drinking Water
Project	
Date Collected	2018-11-06 09:00
Collection Site	discharge
Collection Address	2074 310TH ST
Sample Description	waste water
Client Reference	ben beachey
Collector	akers allen
Phone	515/462-1015

Note: Upon arrival, sample met container and preservation requirements for the analysis requested. Please review carefully your sample results for additional analyte comments or method exceptions.

Results of Analyses

BOD, Carbonaceous 5 Day, SM 5210 B

Units	mg/L	Analyzed In	Ankeny
Date Analyzed	2018-11-07 08:00	Date Verified	2018-11-12 13:51
Analyst	AMJ	Verifier	DLS

Analyte	Result	Quant Limit
CBOD, 5 Day	<2	2

Total Suspended Solids, USGS I-3-65-85

Units	mg/L	Analyzed In	Ankeny
Date Analyzed	2018-11-08 08:36	Date Verified	2018-11-13 09:33
Analyst	KAR	Verifier	AMJ

Analyte	Result	Quant Limit
Total Suspended Solids	<1	1

Description of Units used within this report

mg/L = Milligrams per Liter

The result(s) of this report relate only to the items analyzed. This report shall not be reproduced except in full without the written approval of the laboratory.

Iowa Environmental Laboratory IDs are: Ankeny #397, Iowa City/Coralville #027, Lakeside #393.

If you have any questions, please call Client Services at 800/421-IOWA (4692) or 319/335-4500. Thank you.