



Document 2019 GW1538

Book 2019 Page 1538 Type 43 001 Pages 7

Date 5/28/2019 Time 1:44:10PM

Rec Amt \$.00

INDX
ANNO
SCAN

LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

CHEK

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

TRANSFEROR:

Name Dallas R. Schechinger

Address 5649 Vista Drive, West Des Moines, IA 50266

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Jeffrey John Longman

Address 1526 Quarry Trail, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

1526 Quarry Trail, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) See 1 in Addendum

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:

None. _____

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

Signature:  Telephone No.: (319) 325-1445
(Transferor or Agent)

Addendum

1. The East Half ($\frac{1}{2}$) of the Northeast Quarter ($\frac{1}{4}$) of the Northwest Quarter ($\frac{1}{4}$) of Section Fourteen (14), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, more particularly described as follows: Beginning at the North Quarter corner of said Section Fourteen (14); thence South $0^{\circ}19'37''$ West along the East line of the Northeast Quarter ($\frac{1}{4}$) of the Northwest Quarter ($\frac{1}{4}$) of said Section Fourteen (14), 1321.50 feet to the Southeast corner of the Northeast Quarter ($\frac{1}{4}$) of the Northwest Quarter ($\frac{1}{4}$) of said Section Fourteen (14); thence South $89^{\circ}37'31''$ West along an existing fenceline which is the South line of the Northeast Quarter ($\frac{1}{4}$) of the Northwest Quarter ($\frac{1}{4}$) of said Section Fourteen (14), 658.43 feet; thence North $0^{\circ}25'28''$ East, 1322.05 feet to a point on the North line of the Northeast Quarter ($\frac{1}{4}$) of the Northwest Quarter ($\frac{1}{4}$) of said Section Fourteen (14); thence North $89^{\circ}40'15''$ East along the North line of the Northeast Quarter ($\frac{1}{4}$) of the Northwest Quarter ($\frac{1}{4}$) of said Section Fourteen (14), 656.18 feet to the Point of Beginning



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

Property information

Current owner PALLAS & MARY Jo Schechinger
Buyer JEFF LONGMAN / Amy Dohlgang Realtor By OWNER
Mailing address 1526 QUARRY TRL Winterset IA 50273
Site Address/County SAME AS ABOVE / MADISON Co
Legal Description AS ABSTRACT
No. of bedrooms 3 Last occupied? present Records available yes
Permit/installation date 031-16 2000 Separation distances ok/ no? OK

Septic system information

Septic tank(s): size 1000 gal material poly condition See NOTES
Tank pumped? NO date See Notes licensed pumper Countryside Septic
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 3 condition OK
Header pipe(s) # of lines Pressure dosed?

Secondary treatment:
length of absorption fields 3 100' determined by County Records
condition of fields OK - DRY determined by PROBING & Hydraulic TEST
type of trench material Chamber

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 Report

Other components:

Alarms NO Working? _____ disinfection NO working? _____

Control box _____ Timers _____ inspection ports _____

Other components NONE

Overall condition of the private sewage disposal system

Report system status See Attached pages

Explain (attach additional pages as needed): _____

Comments: EVERYTHING IS THE SAME AS LAST TIME OF TRANSFER. SEPTIC TANK WAS PUMPED THEN ON 6-7-16

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: [Signature] Date: 4-1-19
 Name (print): BRIAN KINARD Certificate #: 8805
 Address: P.O. Box 204 NORWALK IA 52211
 Phone #: 262-4895

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. 9th St.
 Des Moines, IA 50319

Time of Transfer Report System Status

Address: 1526 QUARRY TRL

Date: 4-1-19

Comments: Winterset, IA 50273

Technician: Brian Rinard

All Wastewater from House Appears to
Drain into Septic System. 1,000 gallon poly Septic
Tank with small Rise over Inlet Side AND
As Last Inspection the Outlet Lid is Cracked
But Has no Effect on the Performance
of the Septic System

Plastic Distribution in working condition
AND (3) 100' Chamber Laterals took water
Evenly AND probed dry at time of the Inspection

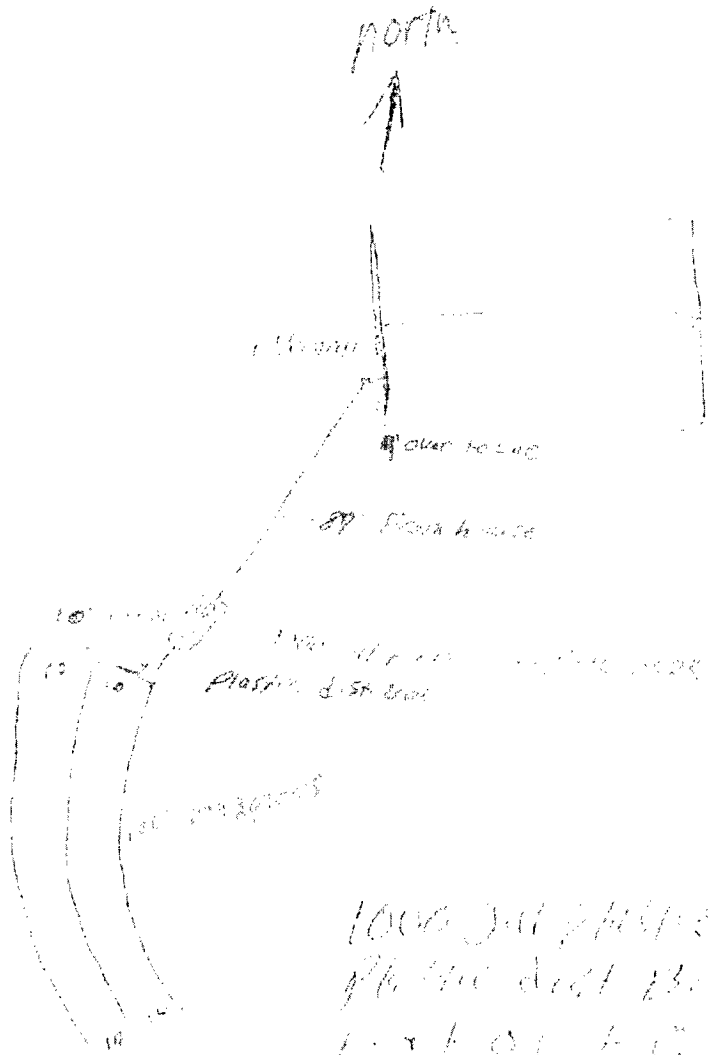
THIS IS NOT A GUARANTEE

THIS CERTIFIES THAT THE SEPTIC SYSTEM WAS IN
WORKING CONDITION AT TIME OF THE INSPECTION.

DIAGRAM OF SYSTEM

See
County
Records

1526 QUARRY TRAIL



1000 gal plastic septic tank
 Plastic dist tank and 3000
 gal of E.G. and 1000 gal

Inspection of the tank found only
 28" from end wall of tank. To decide ~~only~~
 (spec in E.G.)