

Book 2019 Page 1881 Type 43 001 Pages 5 Date 6/24/2019 Time 3:31:13PM Rec Amt \$.00 IND

INDX **ANNO** SCAN

LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

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

TR	ANSFEROR:						
Na	me_Wayne Van Pelt						
Ad	dress 8530 Western Drive Beggs, OK 74421						
	Number and Street or RR	City, Town or P.O.	State	Zip			
TR	ANSFEREE:						
Na	me_Patrick J. Jungman						
Ad	dress 2980 187th Street, Prole, IA 50229						
	Number and Street or RR	City, Town or P.O.	State	Zip			
	dress of Property Transferred: 0 187th Street, Prole, IA 50229						
	Number and Street or RR	City, Town, or P.O.	State	Zip			
1.	Wells (check one)  ☐ There are no known wells situated or  ☐ There is a well or wells situated or	this property. The type(s), loca	tion(s) and legal st	atus are			
2.	stated below or set forth on an att Solid Waste Disposal (check one)	ached separate sheet, as neces	hex	ng. East of house; to driveway,			
	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.	•	Inderground Storage Tanks (check one)					
	There are no known underground small farm and residential motor from instructions.)  Just septic four	uel tanks, most heating oil tanks	, cisterns and seption	tanks, in			
	There is an underground storage t	ank on this property. The type(s	s), size(s) and any k	nown			

substance(s) contained are listed below or on an attached separate sheet, as necessary.

5.	Priv	vate 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						
	D	necessary.						
о.		vate Sewage Disposal System (check one)						
	님	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.						
	<b>k</b> ≱	There is a building served by private sewage disposal system on this property or a building						
	M	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.						
	П	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]						
	П	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						
Inf	orm	ation required by statements checked above should be provided here or on separate						
		attached hereto:						
_								
_								
_								
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS								
		FORM						
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.						
	the things are the same of the							
Sig	gnati	ure:						

## **ADDENDUM**

The West Half (½) of the Southeast Quarter (¼) of the Southeast Quarter (¼), and the East 5 acres of the Southwest Quarter (¼) of the Southeast Quarter (¼) of Section Seventeen (17), in Township Seventy-six (76) North, Range Twenty-six (26) West of the 5<sup>th</sup> P.M., Madison County, Iowa.



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

Property information							
Current owner Wayne Van Pelt 301-467-7015							
Buyer Realtor Mailing address 1671 Hwy 164 Winterset, ## 50273							
Mailing address 1671 Hwy 164 Winterset, IH 50273							
Site Address/County 2980 187thst, Prole / Madison Legal Description							
No. of bedrooms 3 Last occupied? Current Records available							
Permit/installation date 9-10-02 Separation distances (ok) no?							
Septic system information							
Septic tank(s): size 1250 material Concrete condition 9000  Tank pumped? 425 date 5-14-14 licensed pumper Wiegert  Septic/trash/processing tank: size material condition  Tank pumped? date licensed pumper							
Aerobic treatment unit (ATU) mfgr size  Tank pumped? date licensed pumper  Maintenance contract? expiration date service provider  Condition							
Pump tanks/vaults: type size condition							
Distribution system: distribution box $\frac{\sqrt{C}}{3}$ outlets used $\frac{3}{3}$ condition $\frac{9000}{100}$ Header pipe(s) $\frac{3}{3}$ H <sup>*</sup> '5c h H <sup>0</sup> # of lines $\frac{3}{3}$ Pressure dosed? $\frac{9000}{100}$							
Secondary treatment:  length of absorption fields $\frac{3 \times 100}{2000}$ condition of fields $\frac{9000}{3611}$ type of trench material $\frac{3611}{3611}$ Chambers  determined by County Map  determined by hydraulic test							
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	Working?	disinfection	working?				
Control box	Timers	inspection ports	***************************************				
Other components							
Overall condition of	of the private sewage disposal	system	•				
	is System work						
Explain (attach add	itional pages as needed): To all goes to sept	ank good, D-1 ic, Aydraulic	test good				
Comments:			the state of the s				
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.							
This report indicate the inspection. It is Signature of Certif Name (print): PAddress: 1106 Phone # 515-		sewage disposal system at the continue to function satisface.  Linchia no la	the time of torily.  Date: 5-24-14  Certificate #: 11612				
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 Di 502 E. 9 <sup>th</sup> St. Des Moines, IA 50	-						