



Document 2019 GW1936

Book 2019 Page 1936 Type 43 001 Pages 7

Date 6/28/2019 Time 1:50:20PM

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 Kristen Jeannene Welch n/k/a Kristen Jeannene Van Pelt and Wayne R. Van Pelt

Address 8530 WESTERN DR BEGGS OK 74421  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name Samuel M. Funk and Karisa A. Funk

Address 3675 Highway D, Defiance, MO 63341  
Number and Street or RR City, Town or P.O. State Zip

**Address of Property Transferred:**

1671 Highway 169, Winterset, IA 50273  
Number and Street or RR City, Town, or P.O. State Zip

Legal Description of Property: (Attach if necessary) \_\_\_\_\_  
See attached 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. *By the pond. Not in use.*

**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.) *Just a propane tank underground.*

- 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:**

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

Signature: James E. Bergkamp, Jr. Telephone No.: 515 993-1000  
(Transferor or Grantor) (904) 467-7015

## **ADDENDUM**

Parcel "D", located in the Southeast Quarter ( $\frac{1}{4}$ ) of Section One (1), Township Seventy-six (76) North, Range Twenty-eight (28) West and in the Southwest Quarter ( $\frac{1}{4}$ ) of the Southwest Quarter ( $\frac{1}{4}$ ) of Section Six (6), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., all in Madison County, Iowa, containing 63.004 acres, as shown in Amended Plat of Survey filed in Book 3, Page 505 on October 29, 1999 in the Office of the Recorder of Madison County, Iowa, EXCEPT Parcel "E", a part of Parcel "D", containing 23.323 acres, as shown in Plat of Survey filed in Book 2002, Page 5913 on December 4, 2002, in the Office of the Recorder of Madison County, Iowa, AND EXCEPT Parcel "F", a part of Parcel "D", containing 19.174 acres as shown in Plat of Survey filed in Book 2002, Page 5913 on December 4, 2002, in the Office of the Recorder of Madison County, Iowa.



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

Property information

Current owner Kristen Van Pelt

Buyer \_\_\_\_\_ Realtor \_\_\_\_\_

Mailing address 1671 Hwy 169 Winterset IA 50273

Site Address/County 1671 Hwy 169 Winterset IA 50273

Legal Description Same as address

No. of bedrooms 3 Last occupied? 5-9-10 <sup>Still There</sup> Records available yes

Permit/installation date 8/10/04 <sup>090-04</sup> Separation distances  no? \_\_\_\_\_

Septic system information

Septic tank(s): size 1250 material Polyxactic condition Looks ok at this time

Tank pumped? yes date 7-26-19 licensed pumper yes

Septic/trash/processing tank: size \_\_\_\_\_ material \_\_\_\_\_ condition \_\_\_\_\_

Tank pumped? \_\_\_\_\_ date \_\_\_\_\_ licensed pumper \_\_\_\_\_

Aerobic treatment unit (ATU) mfr Eco Pure size 3005

Tank pumped? \_\_\_\_\_ date \_\_\_\_\_ licensed pumper \_\_\_\_\_

Maintenance contract? \_\_\_\_\_ expiration date \_\_\_\_\_ service provider \_\_\_\_\_

Condition \_\_\_\_\_

Pump tanks/vaults: type \_\_\_\_\_ size \_\_\_\_\_ condition \_\_\_\_\_

Distribution system: distribution box \_\_\_\_\_ outlets used \_\_\_\_\_ condition \_\_\_\_\_  
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 \_\_\_\_\_ determined by \_\_\_\_\_  
Vent pipes above grade? \_\_\_\_\_ discharge pipe located? \_\_\_\_\_  
Effluent sample taken? yes Results TSS < 1 BOD 5 < 2

Media filters: type Eco Pure  
Maintenance contract? yes expiration date 1-1-20 service provider Allen Akers  
Condition looks ok at this time

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



### Time of Transfer Inspection Report

Other components:

Alarms None Working? — disinfection None working? —

Control box None Timers None inspection ports yes

Other components 2 Compartment Poly tank + Ryzin Filter

Overall condition of the private sewage disposal system

Report system status 2 clean outs in line to tank

Explain (attach additional pages as needed): \_\_\_\_\_

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.

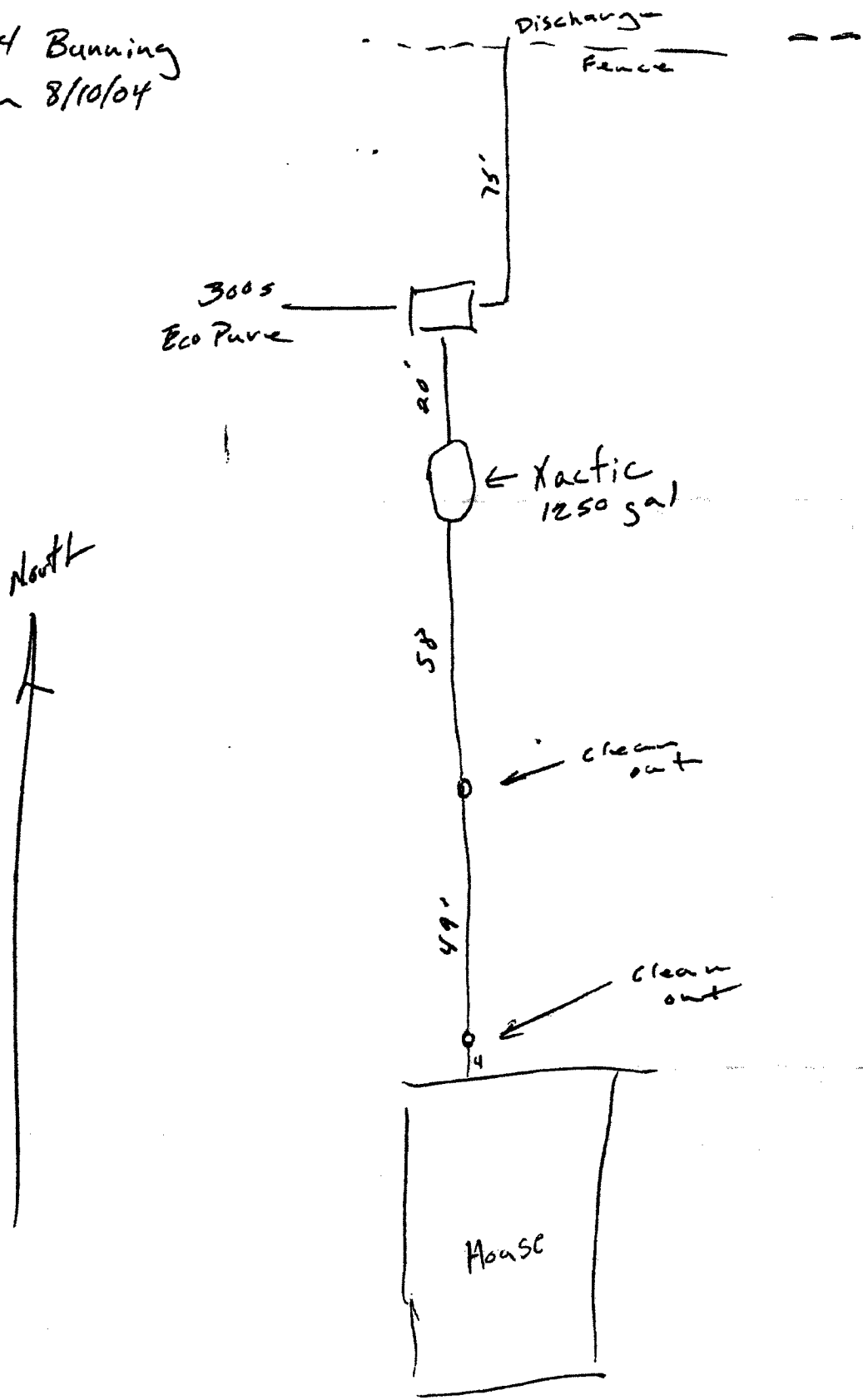
This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified inspector: Allen Akers Date: 4-30-19  
 Name (print): Allen Akers Certificate #: 203  
 Address: 2204 175th St  
 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. 9<sup>th</sup> St.  
Des Moines, IA 50319

Permit # 080-04 Banning  
Inspection 8/10/04





Collection Location discharge	Collector and Phone akers allen 515/462-1015	Client Reference kris <del>for</del> Van Felt	Accession # 801167
1671 HWY 169 WINTERSET,	Collected 2019-04-30 08:00	Received 2019-04-30 11:43	Project
Report To  ALLEN AKERS  2204 175TH CT WINTERSET, IA 50273-	Sample Description waste water		Sample Type Non-Drinking Water
	Sample Source		Sample Note(s) 1

**RESULTS OF ANALYSIS - FINAL REPORT**

TEST	RESULT (mg/L)	QUANT LIMIT	ANALYSIS NOTE(S)
BOD, Carbonaceous 5 Day, SM 5210 B CBOD, 5 Day	<2	2	
Total Suspended Solids, USGS I-3765-85 Total Suspended Solids	<1	1	

**SAMPLE AND ANALYSIS NOTES**

1. 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.

**ANALYSIS INFORMATION**

TEST	ANALYZED	SITE	RELEASED	ANALYSIS PREP
1. BOD, Carbonaceous 5 Day, SM 5210 B	2019-05-01 07:50 AMG	3201	2019-05-07 11:23 JAE	
2. Total Suspended Solids, USGS I-3765-85	2019-05-02 10:25 KAR	3201	2019-05-03 15:53 MLS	

**DESCRIPTION OF UNITS**

mg/L = Milligrams per Liter

**SITE(S) PERFORMING TESTING**

3201 STATE HYGIENIC LABORATORY ANKENY, IOWA LABORATORIES COMPLEX, 2220 S ANKENY BLVD, ANKENY, IA 50023; Phone 515/725-1600; Fax 515/725-1642; Susie Yuan Dai, Ph.D., Associate Director; Wade K. Aldous, Ph.D. (D)ABMM, Associate Director; IOWA ENVIRONMENTAL LAB ID #397

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