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Document 2017 GWH-3580 Type 53 001 Pages 7
Date 12/28/2017 Time 11:42:25AM
Rec Amt $.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Brian L. Pralle/Denise M. Pralle

Address 254 5th St. North, Winthrop, IA 50682

Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:

Name Jacquelyn J. Hawkins/Jamie J. Keck

Address 513 East Butler St., Manchester, IA 52057

Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
1929 Honey Creek Road, Manchester, IA 52057

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.
   - X 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)**
   - X 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)**
   - X 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)**
   - X 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)

X 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.

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 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:

well is Located on the southeast corner of the property by the driveway

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.: (563) 927-4014

(Transferor or Agent)

Brian L. Pralle

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

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

Property information

Current owner Brain & Pralle
Buyer _____ Realtor None
Mailing address 1929 Honey Creek Rd Manchester
Site Address/County 1929 Honey Creek RD Manchester IA
Legal Description _____

No. of bedrooms 3 Last occupied? Still Records available Yes

Permit/installation date 6-27-06 Separation distances ok/ no? OK

Septic system information

Septic tank(s): size 1250 material Concrete condition Good
Tank pumped? Yes date 7-2016 licensed pumper _____
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 Yes outlets used 3 condition Good
Header pipe(s) — # of lines — Pressure dosed? —

Secondary treatment:
length of absorption fields 300' determined by per permit
condition of fields good determined by water test
type of trench material rock & pipe

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 Worksheet

Other components:
Alarms — Working? — disinfection — working? —

Control box — Timers — inspection ports —

Other components _____

Overall condition of the private sewage disposal system

Report system status Good working Condition

Explain (attach additional pages as needed): has Filter needs too be Cleaned Spring & Fall

Comments: 45 minute water test 5-6/minute OK

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: Bill Davis Date: 12-1
Name (print): Bill Davis Certificate #: 8880
Address: 1497 110th Ave Durlee IA 52035
Phone # 563-924-2225

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

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

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type) **Permit No.** 1434

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM



ADDRESS: 1929 Honey Creek Rd. Section 20 Township Delaware

LOCATION: NW¼ NE¼ sec 20 T-89-N R-5-W

Owner: Brian Pralle Tenant: Plumber: Groth

Lot Size: 1.5 acres Type Commercial: Residential: (No. Bedrooms) 3

Fixtures: Stools 3 Lavatories Bath Tubs 1 Showers 2 Sinks 4 Automatic Laundry 1 Sump Pump

Septic Tank made by Swalx Garbage Grinder 1 Construction Material Concrete Gallons Cap. 1250

42.509179 - 91.457773

Percolation Test: 1. 2. 3. 4. Made by:

Absorption Field: Total length of laterals 300 No. of lateral lines

This system is new Existing X. effluent filter

I certify that the above information is correct and that all proposed work will be completed in accordance with the Delaware County Regulations.

Date Approved 6-27-06

By Dennis Lyons
INSPECTOR

Brian L. Pralle
APPLICANT'S SIGNATURE

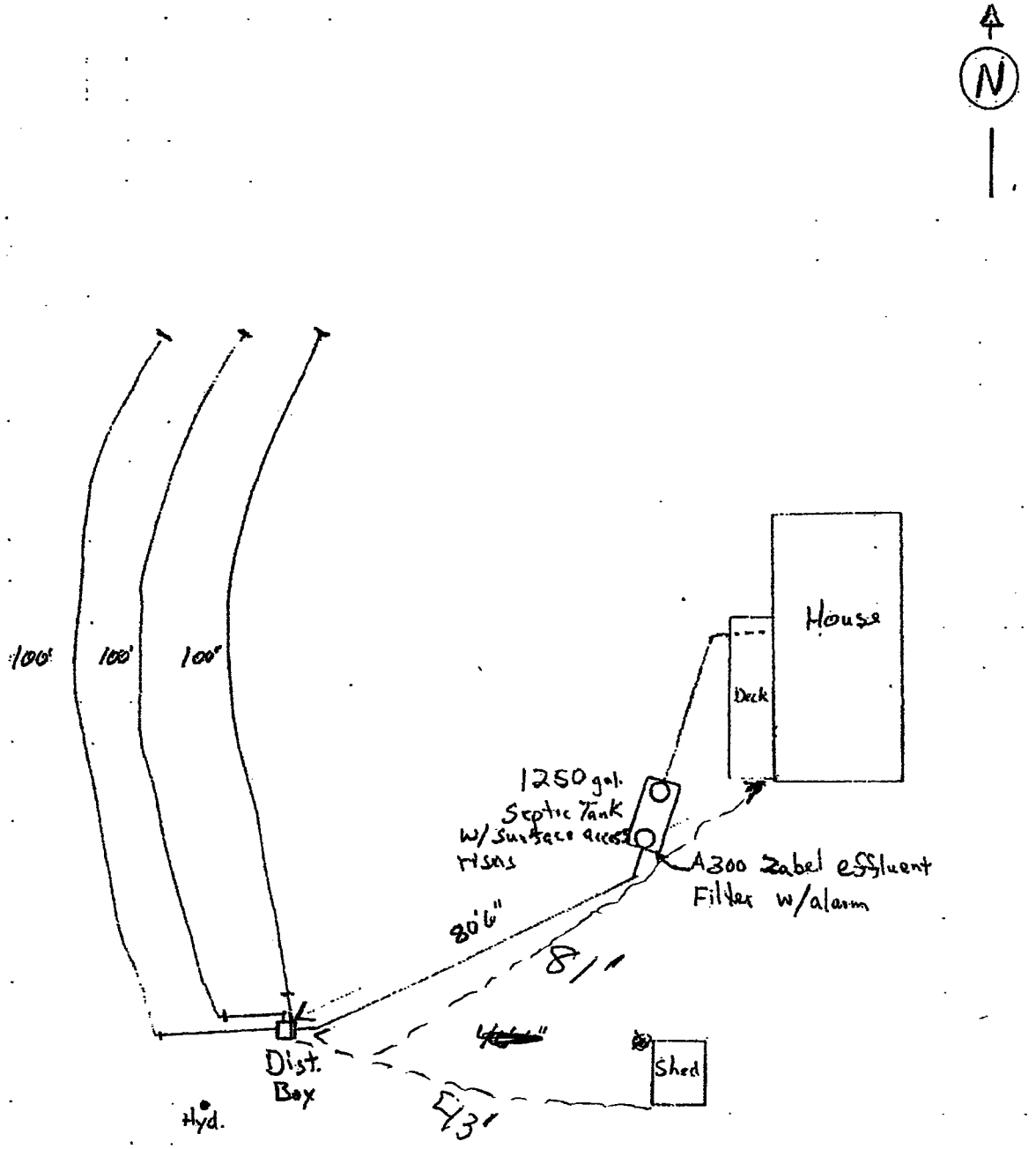
SEAL

Brian Fralie 563-927-1016
1929 Honey Creek Rd.
Manchester, Ia. 52057

GROTH SERVICES

Delaware County- Delaware Township # 20

Installation Date: 07-20-06



Commencing at the Southeast corner of the Northwest Quarter (NW ¼) of the Northeast Quarter (NE ¼) of Section Twenty (20), Township Eighty Nine (89) North, Range Five (5), West of the Fifth Principal Meridian, thence West two hundred thirty five and fifty-five hundredths (235.55) feet, to the center of County Road C as it now exists (established as Lindsay Creek Road), thence South 29°00' West twenty (20.0) feet to the point of beginning, thence North 80°20' West three hundred (300.0) feet, thence South 29°00' West one hundred seventy five (175.0) feet, thence South 80°20' East three hundred two and three-tenths (302.3) feet, thence North 29°00' East one hundred seventy five (175.0) feet to the point of beginning, all being situated in the West half (W ½) of the Northeast quarter (NE ¼) of Section Twenty (20), Township Eighty Nine (89) North, Range five (5), West of the Fifth P.M. in the Delaware County, Iowa.