Recorded: 5/23/2018 at 2:13:03.0 PM
Fee Amount: $0.00
Revenue Tax:
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2018 PG: 1412

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Michael A. Gearhart and Shaina R. Gearhart

Address 1945 Ginkgo Ave, West Chester, IA 52359

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

TRANSFEREE:

Name Benjamin R. Lahr

Address 2608 325th St, Hopkinton, IA 52237

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

Address of Property Transferred:
3220 255th Ave, Hopkinton, IA 52237

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

Legal Description of Property: (Attach if necessary) Parcel "B" a parcel of land located in the Northwest Quarter of the Northeast Quarter of Section 27, Township 87 North, Range 4 West of the 5th Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 2008, Page 1257.

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 40 feet North of the North side of the house.

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) 926-1482
(Transferor or Agent)

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

Property information

Current owner Michael Gearhart (563-920-1482)
Buyer _____ Realtor None
Mailing address 1945 Ginkgo Ave West Chester IA 52359

Site Address/County 3220 255th Ave Hopkinton IA
Legal Description _____

No. of bedrooms 3 Last occupied? Aug 2017 Records available yes

Permit/installation date 11-9-12 Separation distances ok/ no? OK

Septic system information

Septic tank(s): size 1000/500 material concrete condition good
Tank pumped? yes date 4-28-18 licensed pumper SF49
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 permit
condition of fields good determined by water test
type of trench material pipe & rock

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 older 2 stage 1000 gallon tank

Explain (attach additional pages as needed): 500 was added 11-9-12 new leach line

Comments: working good 30 minute water test

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 Downs Date: 4-21-18
Name (print): Bill Downs Certificate #: 8880
Address: 1497 110th Dunlap IA 51538
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

41.32227
-91.29985

320-27-00 010.00

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type) **Permit No.** 2124

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 3220 255th Ave Section 27 Township Union

LOCATION: NW Sec 27 T-87-N R. 4 W

Owner: Mike Gearhart Tenant: _____ Plumber: Harbach

Lot Size: 5 acres Type Commercial: _____ Residential: (No. Bedrooms) 3

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

Septic Tank made by New Smith Garbage Grinder _____ Construction Material concrete Gallons Cap. 500 1000

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

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

This system is new X Existing _____.

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 11-9-12

By Dennis Lyons
INSPECTOR

_____
APPLICANT'S SIGNATURE

SEAL

SEWAGE DISPOSAL SYSTEM

INFORMATION

PERMIT NO: 2124

PLUMBER: Harbach

FINAL INSPECTION

APPLICANT: _____

LOCATION _____

ADDRESS: 3220 - 255th Ave

PERCOLATION TESTS: #1 _____ #2 _____ #3 _____ #4 _____

SEPTIC TANK SIZE: 1000 Gal COMPARTMENTS: 3

MANUFACTURER: Cascade Single DEPTH: 2

DISTANCE FROM HOUSE: _____ WELL: _____

DISTRIBUTION BOX: DEPTH: _____ LEVEL: _____

DISTANCE FROM HOUSE: _____ WELL: _____

TRENCH #1 LENGTH: _____ WIDTH: _____ DEPTH: _____

TRENCH#2 LENGTH: _____ WIDTH: _____ DEPTH: _____

TRENCH#3 LENGTH: _____ WIDTH: _____ DEPTH: _____

TRENCH#4LENGTH: _____ WIDTH: _____ DEPTH: _____

11-12-12

APPROVED (X) REJECT ( ) INSPECTED BY: Dennis Gau

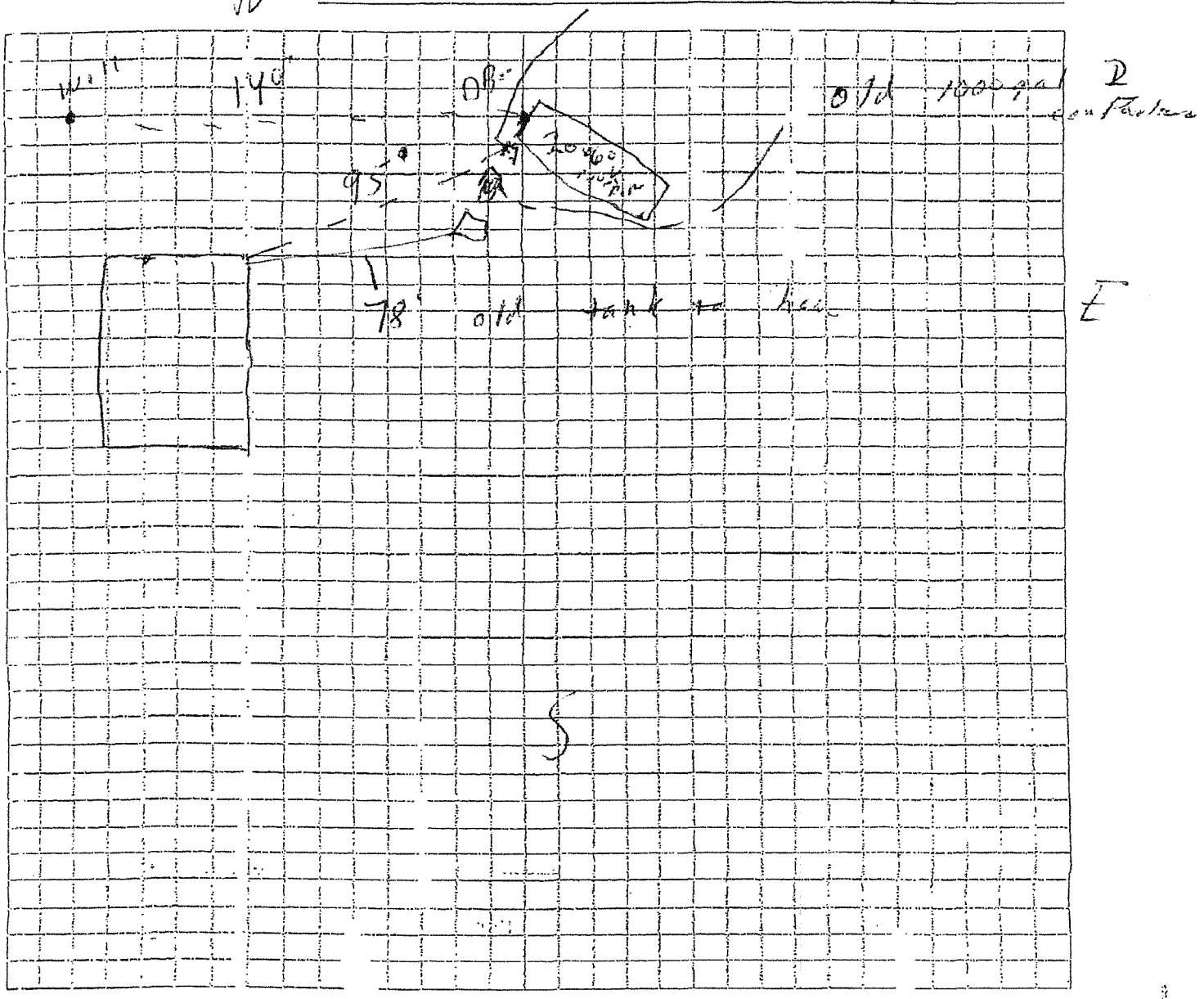
Site Evaluation Map

page 2 of 2

Designer _____

List any construction issues: _____

New 500 gal. w/ Ft
Effl.



Mapping Checklist

Map scale: _____ ___ indicate north ___ show slope _____ % direction ___

Locate

___ lot dimensions/property lines
___ dwellings and other improvements
___ existing and/or proposed system(s)
___ replacement area
___ unsuitable area(s)
___ public water supply wells
___ pumping access
___ inner wellhead zone

___ easements
- ___ phone
- ___ electric
- ___ gas

___ elevations
- ___ borings
- ___ benchmark
- ___ perc tests
- ___ horiz&vert reference pts

___ setbacks
- ___ building
- ___ all water wells within 100ft
- ___ pressure pipe
- ___ water suction pipe
- ___ streams, lakes, rivers
- ___ floodway and fringe



