



Book 2018 Page 1769

Document 2018 GWH-1769 Type 53 001 Pages 9
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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Aaron T. Pauls*

Address 4407 Woodsonia Ct NW, Cedar Rapids, Iowa 52405
Number and Street or RR City, Town or PO State Zip

TRANSFeree:

Name Parker Allen Hunt*

Address _____
Number and Street or RR City, Town or PO State Zip

Address of Property Transferred:

1845 Honey Creek Road, Manchester, Iowa 52057
Number and Street or RR City, Town or PO State Zip

Legal Description of Property: (Attach if necessary)

That part of the Southeast ¼ of the Northwest ¼ of Section 16, Township 89 North, Range 5, West of the 5th P.M., in Delaware County, Iowa, described as commencing at a point 446.3 feet West of the Southeast corner of said Northwest ¼, and running thence North 200 feet, thence East 130 feet, thence South 200 feet, thence West 130 feet to the point of beginning

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:

10' of S.W. corner of attached garage

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

Signature: _____

Alan R. [Signature]

(Transferor or Agent)

Telephone No.: _____

563-920-6675



TANK A

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

Property information

Current Owner Aaron Pauls

Buyer 1 Realtor _____

Mailing Address 1545 Honey Creek Road Manchester, Iowa 52257

Site Address/County 1845 Honey Creek Road Manchester, Iowa / Delaware County

No. of Bedrooms 2 Last Occupied? Present Disposal? Y/N Softener? Y/N H₂O Supply? Well 126 Ft

Records Available No Permit/Installation Date UK Installer N/A

Septic System Information

Septic Tank(s): Size 750 Material concrete Condition good

Tank Pumped? _____ Date _____ Licensed Pumper 358

Septic/Trash/Processing Tank: Size N/A Material N/A Condition N/A

Tank pumped? N/A Date N/A Licensed Pumper N/A

Aerobic treatment unit (ATU) MFG _____ Size _____

Tank Pumped? _____ Date 10/11 Licensed Pumper _____

Maintenance Contract? _____ Expiration Date 10/11 Service Provider _____

Condition _____

Pump Tanks/Vaults: Type _____ Size 1500 Condition _____

Distribution System: Distribution Box no Outlets Used 0 Condition good

Header Pipe(s) N/A Number of Lines N/A

Pressure Dosed? N/A

Secondary Treatment

Length of Absorption Fields 20' Determined by Prob

Condition of Fields good Determined by Hydrolic load test

Type of Trench Material Rock and Pipe

Size of Sand Filter _____ Determined by _____

Vent Pipes Above Grade? _____ Discharge Pipe Located? _____

Effluent Sample Taken? N/A Results _____

Media Filters: Type _____

Maintenance Contract? _____ Expiration Date 10/11 Service Provider _____

Condition _____

NPDES General Permit No. 4: Required? N/A Permitted? N/A NOI submitted _____



Tank H

Time of Transfer Inspection Worksheet

Other Components

Alarms _____ Working? _____ Disinfection _____ Working? _____

Control Box _____ Timers N/A Inspection Ports _____

Other Components _____

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): System is in good working condition

All in working condition.
Keep Pump even 2-3 years.

Comments: This home has two septic systems. this one maintains downstairs bathroom and drain (only)

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.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: Robb Harter

Date: 5-31-18

Name (print): Robb Harter

Certificate #: 358

Address: 3031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1010

Harter Custom Pumping, Inc & Septic Service
Reb's Harter * Owner/ Operator
3031 160th Street Dyersville, IA 52040 * 563-875-8730 or 563-542-1010

TANK A

Homeowners:

David Pauls
1515 Honey Creek Rd
Manchester, Ia 52057

Age of Property

1978

Occupied
Yes or No

Harter Custom Pumping

3031 160th Street
Dyersville, Iowa 52040

Date of Inspection: _____

Does this evaluation/inspection meet the requirements of state and local agencies?

Yes ☒ No ☐ N/A ☐

Section 1:

Location of the system: East West North South
Was Water run into the system for 30 minutes? Yes No
Does the septic tank have a visible riser? Yes No
Estimated size of tank 1000 Gallons Basis for estimate
What is the separation between well and septic? 126
Does the separation of the well and septic meet local requirements? Yes No N/A

Section 2: Disposal Field

Any evidence of malfunction No Yes (Please check all applicable observed conditions)
Wet Areas Unusual green/lush vegetation
Liquid Discharges to surface Discharge pipe of unknown origin
Localized surface settling Other (Describe below)

Septic Tank:

Septic tank material ☒ Concrete ☐ Fiberglass ☐ Other
Liquid Level in tank ☒ Normal ☐ Below Normal ☐ Above Normal
Access opening in tank ☒ One ☐ Two ☒ Three ☐ None
Number of risers ☒ One ☐ Two ☐ Three ☐ None
Condition of baffles and/or sanitary tees:
Inlet baffle or "T" ☒ Present and functional ☐ Not functional ☐ None present ☐ Not Visible
Outlet baffle or "T" ☒ Present and functional ☐ Not functional ☐ None present ☐ Not Visible
Tank was pumped ☒ Yes ☐ No (if no please explain below)
Is system adequately sized for # of Bedrooms ☒ Yes ☐ No # of Bedrooms: _____
Is system adequately sized for # of Bathrooms ☒ Yes ☐ No # of Bathrooms: _____
System working Properly ☒ Yes ☐ No (if no please explain below)

Additional Comments / Repairs needed:

All in good working condition
Keep pump every 2-3 years

Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.

This report comments on the workability of the system on the day of the inspection only, and is in no way intended to be a warranty.

Workability can be altered by factors such as excessive rainfall, heavy water usage, faulty plumbing, neglect or physical damage to the system. All tanks require pumping maintenance.

Inspected by: Reb's Harter

Date: 5-31-18

Harter Custom Pumping, Inc & Septic Service

Robb Harter * Owner/ Operator
3031 160th Street Dyersville, IA 52040 * 563-875-8730 or 563-842-1010

TANK B

Homeowners:

David Pauls
1845 Honey Creek Rd
Manchester, Iowa 52057

Age of Property

Yes
Occupied
Yes or No

Harter Custom Pumping

3031 160th Street
Dyersville, Iowa 52040

Date of Inspection: _____

Does this evaluation/inspection meet the requirements of state and local agencies?

Yes ☒ No ☐ N/A ☐

Section 1:

Location of the system: East West North South

Was Water run into the system for 30 minutes? Yes No

Does the septic tank have a visible riser? Yes No

Estimated size of tank 750 Gallons Basis for estimate

What is the separation between well and septic? 122 ft

Does the separation of the well and septic meet local requirements? Yes No N/A

Section 2: Disposal Field

Any evidence of malfunction No Yes (Please check all applicable observed conditions)

Wet Areas Unusual green/lush vegetation

Liquid Discharges to surface Discharge pipe of unknown origin

Localized surface settling Other (Describe below)

Septic Tank:

Septic tank material Concrete Fiberglass Other

Liquid Level in tank Normal Below Normal Above Normal

Access opening in tank One Two Three None

Number of risers One Two Three None

Condition of baffles and/or sanitary tees:

Inlet baffle or "T" Present and functional Not functional None present Not Visible

Outlet baffle or "T" Present and functional Not functional None present Not Visible

Tank was pumped Yes No (if no please explain below)

Is system adequately sized for # of Bedrooms Yes No # of Bedrooms: _____

Is system adequately sized for # of Bathrooms Yes No # of Bathrooms: _____

System working Properly Yes No (if no please explain below)

Additional Comments / Repairs needed:

Keep Pump every 2-3 years

Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.

This report comments on the workability of the system on the day of the inspection only, and is in no way intended to be a warranty.

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Inspected by: Robb Harter

Date: 5-31-18



Tank B

Time of Transfer Inspection Worksheet

Other Components

Alarms _____ Working? _____ Disinfection _____ Working? _____

Control Box _____ Timers N/A Inspection Ports _____

Other Components _____

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): System is in good working condition

All in good working condition

Comments: This home has two septic systems. this one maintains everything but downstairs bathroom and drain

Keep pump ever 23 years

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.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: Robb Harter

Date: 5-31-18

Name (print): Robb Harter

Certificate #: 358

Address: 3031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1010



TANK B

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

Property information

Current Owner Aaron Pauls

Buyer _____

Realtor _____

Mailing Address 1845 Honey Creek Rd Manchester, Iowa 52057

Site Address/County 1845 Honey Creek Road Manchester, Iowa / Delaware County

No. of Bedrooms 2 Last Occupied? Present Disposal? Y / N Softener? Y / N H₂O Supply? _____

Records Available No Permit/Installation Date UK Installer _____

Septic System Information

Septic Tank(s): Size 1000 Material concrete Condition good

Tank Pumped? Yes Date 5-31-18 Licensed Pumper 358

Septic/Trash/Processing Tank: Size N/A Material concrete Condition good

Tank pumped? Yes Date Yes Licensed Pumper 358

Aerobic treatment unit (ATU) MFGR _____ Size _____

Tank Pumped? _____ Date _____ Licensed Pumper _____

Maintenance Contract? _____ Expiration Date _____ Service Provider _____

Condition _____

Pump Tanks/Vaults: Type N/A Size _____ Condition _____

Distribution System: Distribution Box yes Outlets Used 2 Condition good

Header Pipe(s) N/A Number of Lines N/A

Pressure Dosed? N/A

Secondary Treatment

Length of Absorption Fields 2x 65 ft Determined by Probe

Condition of Fields good Determined by Hydrolic load test

Type of Trench Material Rock and Pipe

Size of Sand Filter _____

Vent Pipes Above Grade? N/A

Effluent Sample Taken? _____

Determined by _____

Discharge Pipe Located? _____

Results _____

Media Filters: Type _____

Maintenance Contract? _____ Expiration Date _____ Service Provider _____

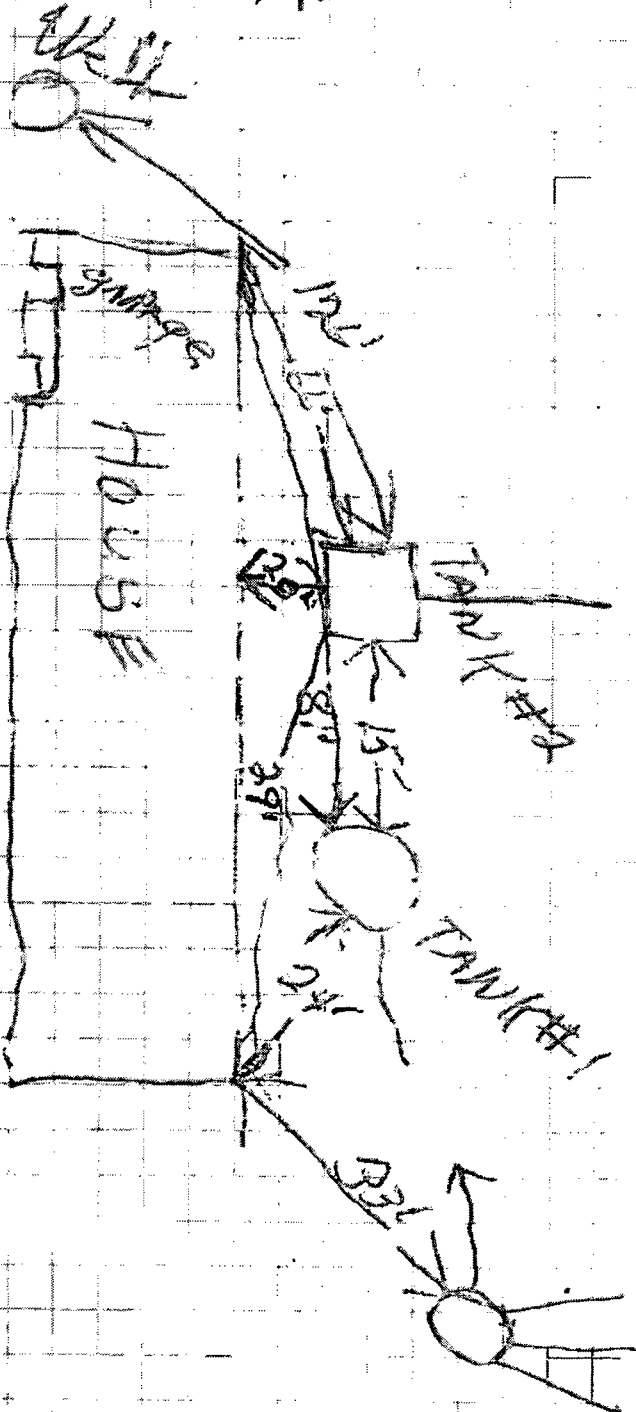
Condition _____

NPDES General Permit No. 4: Required? _____ Permitted? N/A NOI submitted _____

1845

11

Honey Creek Rd,
ARIZONA



Res

Signed

Date