

Recorded: 8/1/2018 at 8:14:50.0 AM
Fee Amount: \$0.00
Revenue Tax:
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2018 PG: 2155

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

TRANSFEROR:

Name Matthew A. and Angela M. Mensen

Address 27580 219th Street, Earlville, IA 52041

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Chad M. and Cara L. Paris

Address P.O. Box 102, Strawberry Point, IA 52076

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

27580 219th Street, Earlville, IA 52041

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lots Two (2) and Three (3), Block Two (2) of the
Subdivision of Lot Two (2) of Timbergate Subdivision in Section Thirty Six (36), Township Eighty
Nine (89) North, Range Four (4), West of the Fifth Principal Meridian in Delaware County, Iowa,
according to plat recorded in Book 4 Plats, Pages 65-67

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:

See attached sheet for well information

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

Signature: _____

(Transferor or Agent)

Telephone No.: (563) 920-4243



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

Property information

Current Owner MATTHEW MENSEN

Buyer _____ Realtor _____

Mailing Address 27580 219th St EAA/Ville

Site Address/County #160360203300

No. of Bedrooms 5 Last Occupied? Yes Disposal? Y/N Softener? (Y)/N H₂O Supply? well

Records Available _____ Permit/Installation Date 2010 Installer _____

Septic System Information

Septic Tank(s): Size 1500 Material Concrete Condition good

Tank Pumped? Yes Date 6-2-18 Licensed Pumper 358

Septic/Trash/Processing Tank: Size _____ Material _____ Condition good

Tank pumped? Yes Date 6-2-18 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 _____ Size _____ Condition _____

Distribution System: Distribution Box Yes Outlets Used 3 Condition good

Header Pipe(s) no Number of Lines 3

Pressure Dosed? no

Secondary Treatment

Length of Absorption Fields 100 Ft Determined by Prob

Condition of Fields good Determined by _____

Type of Trench Material Rock? CHAMPION

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 submitted _____



Time of Transfer Inspection Worksheet

Other Components

Alarms _____ Working? _____ Disinfection _____ Working? _____

Control Box _____ Timers _____ Inspection Ports _____

Other Components All in working condition

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): Keep Pump even 3-4 years

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.

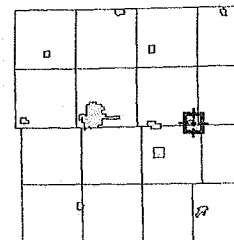
Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

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: [Signature] Date: 7-20-18
Name (print): Robb Harter Certificate #: 358
Address: 3031 160th Street Dyersville, Iowa 52040
Phone #: 563-542-1010



Overview



Legend

- ☐ Corporate Limits
- ☐ Political Township
- Parcels
 - ☐ BLL
 - ☐ Parcel
- ☐ Roads

Parcel ID 160360203300
 Sec/Twp/Rng 36-89-4
 Property Address 27580 219TH ST
 EARLVILLE

Alternate ID n/a
 Class R
 Acreage n/a

Owner Address Mensen, Matthew A & Angela M
 27580 219th St
 Earlville, IA 52041-8547

District ONEIDA TWP. MAQ. VALLEY FD #9
 Brief Tax Description TIMBERGATE SUB LOT 2
 BLK 2 OF LOT 2

(Note: Not to be used on legal documents)

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3x100 Ft Rocker Hampe

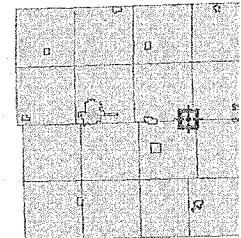
Well is 123 Ft to tank
 D Box is 8" deep

° PRIVATE WELL LOCATION

BeaconTM Delaware County, IA



Overview



Legend

- Corporate Limits
- Political Township
- Parcels
 - BLL
 - Parcel
- Roads

Parcel ID	160360203300	Alternate ID	n/a	Owner Address	Mensen, Matthew A & Angela M
Sec/Twp/Rng	36-89-4	Class	R		27580 219th St
Property Address	27580 219TH ST	Acreage	n/a		Earlville, IA 52041-8547
	EARLVILLE				
District	ONEIDA TWP. MAQ. VALLEY FD #9				
Brief Tax Description	TIMBERGATE SUB LOT 2				
	BLK 2 OF LOT 2				
	(Note: Not to be used on legal documents)				

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