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Fee Amount: \$0.00
Revenue Tax:
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2018 PG: 2170

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

TRANSFEROR:

Name JULIA J. VINER AND MICHAEL D. VINER

Address 160 14TH AVE, HIAWATHA, IA 52233

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name DANIEL L. CLAY AND KELLY M. CLAY

Address 4562 CANTERBURY COURT, IOWA CITY, IA 52245

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

24404 204TH AVE, MANCHESTER, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lot Seven (7) of Logan's First Subdivision of part of the North One-half (N 1/2) of Section Twenty-Three (23), Township Eighty-Eight (88) North, Range Five (5) West of the Fifth Principal Meridian, according to the plat recorded in Book 4 Plats, Page 46 and plat of Survey (Retracement) recorded in Book 2005, Page 2374; and the lake frontage running to the middle of the Maquoketa River adjoining said Lot Seven (7).

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:

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

Signature: _____

Julia J. Viner
(Print name or sign)

Telephone No.: (319) 389-1074

DELAWARE COUNTY SANITATION

Application # _____

EnvTrack # _____

Permit # 2709

Owner: Michael Viner Dan Clay Completion Report for Private Sewage Disposal System

Site Address: 24401 204th Ave

Parcel #: 25 02302 00700

Township: M:10

Mailing Address: _____ Lot # _____

Legal S-T-R: 23-88-5

Contractor: Oasis

Bedroom #: _____

Water Supply: Shaded well

Primary Treatment: Latitude: 42.422147

Longitude: -91.395212

Septic Tank Volume (g): 1500 Manuf: Oreco

Riser Ht Lid 1 (in): 36" Riser Ht Lid 2 (in): 36" Filter Brand: _____

Pieces: 2 # Cmp: 2

Note: Effluent filter requires frequent cleaning. Diameter (in): _____ Distance to well (ft): _____

Dose Tank Volume(g): _____ Pump or Siphon Dose: _____

Gallons/dose: _____ Riser Ht (in): _____ Alarm: _____

D-Box: Latitude: _____

Longitude: _____

Subsurface Absorption Type: _____

Depth: _____

Inches rock under pipe: _____

Chamber Manuf: _____

Lineal Ft: _____

Trenches: _____

Trench Depth (in): _____

Trench width (in): _____

Distance to well (ft): _____

Surface Absorption Type: _____

Overall length (ft): _____

Overall width (ft): _____

Rock bed length (ft): _____

Rock bed width (ft): _____

Length of laterals (ft): _____

Laterals: _____

Header pipe diameter (in): _____

Rock type: _____

Distance to well (ft): _____

Depth to bottom of trench (in): _____

Packed Bed Media Filter: _____

Sand filter length(ft): _____

Sand filter width (ft): _____

Sand filter sq ft: _____

Liner: _____

Distance to well (ft): _____

Distributor lines: _____

Collector lines: _____

Distributor line type: _____

Separating layer: _____

Discharge GPS (lat x long): _____

*Peat Filter: Serial #: _____

Closed or Open bottom: _____

Lineal Ft absorption: _____

Laterals: _____

crushed rock, river rock or chamber

Trench width (ft): _____

Rock under pipe (in): _____

Distance to well (ft): _____

Inches soil cover over trench: _____

Discharge GPS (lat x long): _____

*Recirculating Textile Filter: Brand Name: _____

Discharge GPS (lat x long): _____

Distance to well (ft): _____

Note: A maintenance agreement with a manufacturer-approved contractor must be maintained for the life of the septic system.

Comments: Effluent filter requires frequent cleaning.

Holding tank For Now if becomes
more full time will put in packed Media Filter

as any portion of the field covered before the inspection: no System installation approved: yes

date of Final Inspection: 6-26-18 Environmental Health Specialist: _____

This APPROVAL in no way makes the County responsible for the continued operation of this sanitation system