



Book 2018 Page 2188

Document 2018 GWH-2188 Type 53 001 Pages 9

Date 8/02/2018 Time 3:42:24PM

Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Luke J. Ogden and Tracey M. Ogden

Address 17120 185th Street, Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Benjamin W. Kent and Delores A. Kent

Address 17120 185th Street, Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

17120 185th Street, Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lot Four (4) of Fawn Trail being a subdivision of Parcel "C" in Section 17 and Parcel "G" in Section 18; all in Township 89 North, Range 5 West of the Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 2005, Page 1694.

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: _____

Tracey M. Ogden
(Transferor or Agent)

Telephone No.: (563) 920-7291

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)



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

Property information

Current Owner Luke & Tracey Ogden

Buyer Ben & Dee Kent

Realtor self

Mailing Address 17120 185th st Manchester Iowa

Site Address/County 17120 185th st Manchester Iowa

No. of Bedrooms 3 Last Occupied? present Disposal? Y ☒ N ☐ Softener? Y N ☐ H₂O Supply? well

Records Available yes Permit/Installation Date 7-31-2008 permit 1604 Installer Dan Schulte

Septic System Information

Septic Tank(s): Size 1250 Material concrete Condition good

Tank Pumped? yes Date 12-10-2017 Licensed Pumper st-49

Septic/Trash/Processing Tank: Size no Material na Condition na

Tank pumped? na Date na Licensed Pumper na

Aerobic treatment unit (ATU) MFGR no Size na

Tank Pumped? na Date na Licensed Pumper na

Maintenance Contract? na Expiration Date na Service Provider na

Condition na

Pump Tanks/Vaults: Type no Size na Condition na

Distribution System: Distribution Box yes Outlets Used 4 Condition good

Header Pipe(s) no Number of Lines 4

Pressure Dosed? no

Secondary Treatment

Length of Absorption Fields 300-320 feet Determined by map and probe

Condition of Fields good Determined by hydraulic load test

Type of Trench Material infiltrator [wide chamber]

Size of Sand Filter na Determined by na

Vent Pipes Above Grade? na Discharge Pipe Located? na

Effluent Sample Taken? na Results na

Media Filters: Type na

Maintenance Contract? na Expiration Date na Service Provider na

Condition na

NPDES General Permit No. 4: Required? na Permitted? na NOI submitted na



Time of Transfer Inspection Worksheet

Other Components

Alarms no Working? na Disinfection no Working? na

Control Box no Timers no Inspection Ports no

Other Components none

Overall condition of the private sewage disposal system

Acceptable? yes Unacceptable? _____

Explain (attach additional pages as needed): hydraulic load test was preformed and water was ran for 62 min. at 6 gpm for a total 372 gallons of water. leach feild accepted water well.

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: Bill Downs Date: 5-18-2018

Name (print): Bill Downs Certificate #: 8880

Address: 1497 110th ave Dundee iowa

Phone # 563-924-2225

140-17-04-04.00

**DELAWARE COUNTY
BOARD OF SUPERVISORS**

(Print or Type)

Permit No. 1604

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: Lot 4 - 17120 - 185th St Section 17 Township Delaware

LOCATION: SW 1/4 sec 17 T-89-N R-5-W

Owner: Buo Ann Tenant: _____ Plumber: Self

Lot Size: 250 x 250 Type Commercial: _____ Residential: (No. Bedrooms) 3

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

Septic Tank made by Sumas Garbage Grinder _____ Construction Material _____ Gallons Cap. 1250

Percolation Test: 1. _____ 2. _____ 3. _____ 4. _____ Made by: 42.518961-91-468906

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

This system is new X Existing _____

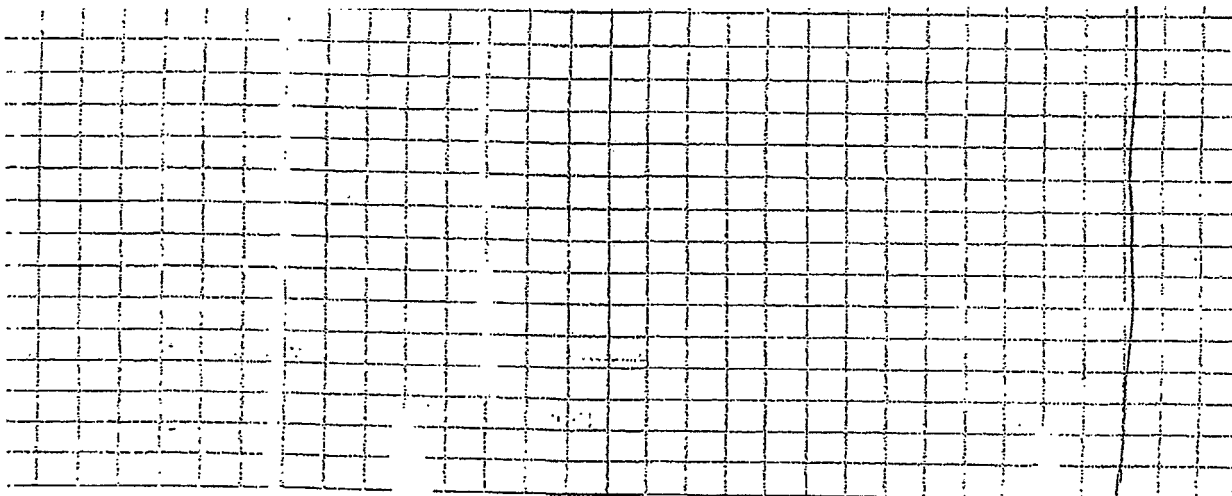
I certify that the above information is correct and that all proposed work will be completed in accordance with the Delaware County Regulations.

Date Approved 7-31

By Wernis Lyons
INSPECTOR

X [Signature]
APPLICANT'S SIGNATURE

SEAL



wide chambers

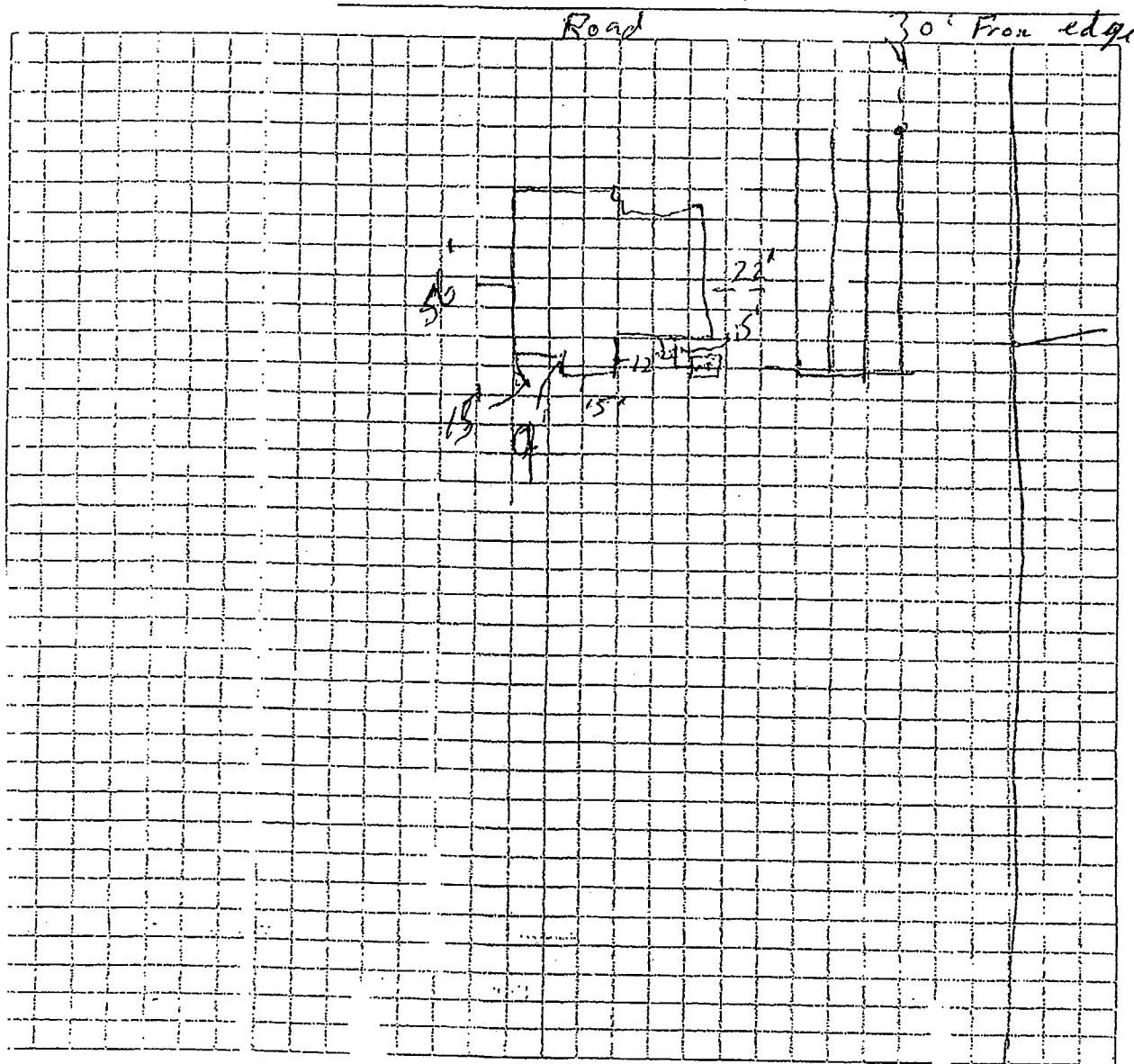
Mapping Checklist

- | | | | |
|----------------------------------|--------------------------|------------------------------|-------------------|
| Map scale: _____ | _____ indicate north | _____ show slope | _____ % direction |
| Locate | | | |
| lot dimensions/property lines | easements | setbacks | |
| dwellings and other improvements | phone | building | |
| existing and/or proposed systems | electric | all water wells within 100ft | |
| replacement area | gas | pressure pipe | |
| unsuitable area(s) | elevations | water suction pipe | |
| public water supply wells | borings | streams, lakes, rivers | |
| pumping access | benchmark | floodway and fringe | |
| inner wellhead zone | perc tests | | |
| | horiz&vert reference pts | | |

page 2 of 2

Designer

Boo - Anz.



D: +c

4-lies
80'
wide
channel

Map scale:

_ocate

indicate north

show slope

```
% direction
```

- ___ 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

setbacks

phone
electric
gas

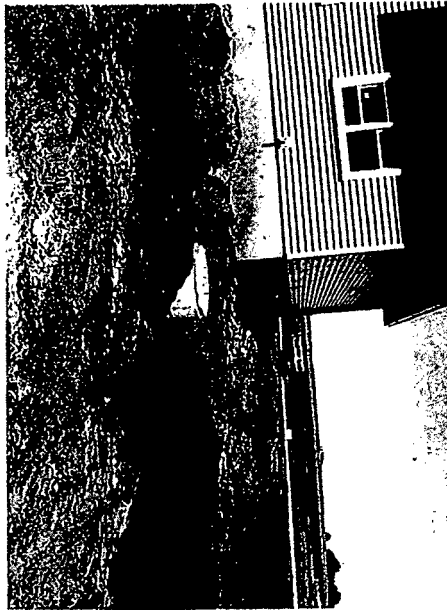
elevations

borings
benchmark

perc tests

horiz&vert reference pts

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

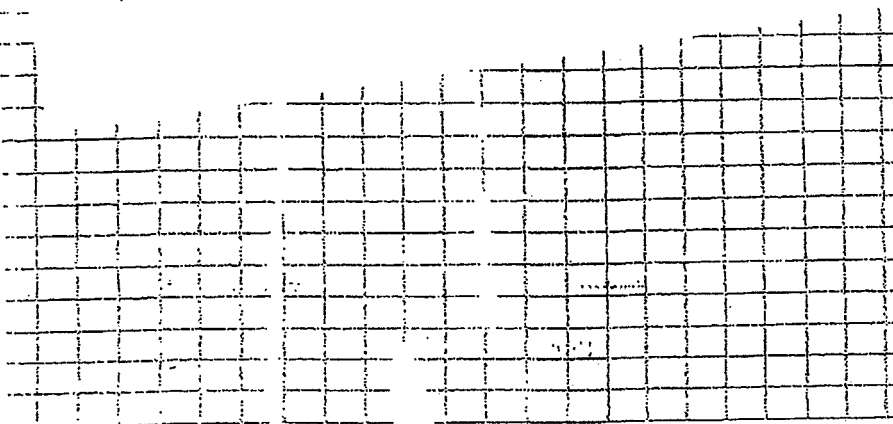


Fixtures: Shower
 Septic Tank made by Sun 1/95 Garbage can
 Percolation Test: 1. 1 2. 2 3. 3 4. 4 No. of
 Absorption Field: Total length of laterals 300
 This system is new X Existing

I certify that the above information is correct and that all proposed work
 Delaware County Regulations.

Date Approved 7-31
 By Wendy Lyons
 INSPECTOR

SEAL



Mapping Checklist

Map scale: indicate north show s
 locate
 lot dimensions/property lines
 dwellings and other improvements
 existing and/or proposed systems (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 pt:

SEWAGE DISPOSAL SYSTEM

INFORMATION

PERMIT NO: 1604

PLUMBER: Sch. He

FINAL INSPECTION

APPLICANT: _____

LOCATION: _____

ADDRESS: _____

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

SEPTIC TANK SIZE: 1250 COMPARTMENTS: 2

MANUFACTURER: Santa Suales DEPTH: 18"

DISTANCE FROM HOUSE: 8' WELL: 400'

DISTRIBUTION BOX: DEPTH: _____ LEVEL: _____

DISTANCE FROM HOUSE: 22' WELL: 400'

TRENCH #1 LENGTH: 80' WIDTH: 3' DEPTH: 2'

TRENCH #2 LENGTH: 80' WIDTH: 3' DEPTH: 2'

TRENCH #3 LENGTH: 80' WIDTH: 3' DEPTH: 2'

TRENCH #4 LENGTH: 80' WIDTH: 3' DEPTH: 2'

8-30-08

/ APPROVED (X)

REJECT ()

INSPECTED BY: Dennis Ryon

OWNER: Luke & Tracey Ogden

DATE: 5/18/18

SITE ADDRESS: 17120 185th St. Manchester

TOWN/COUNTY: Manchester / Delaware

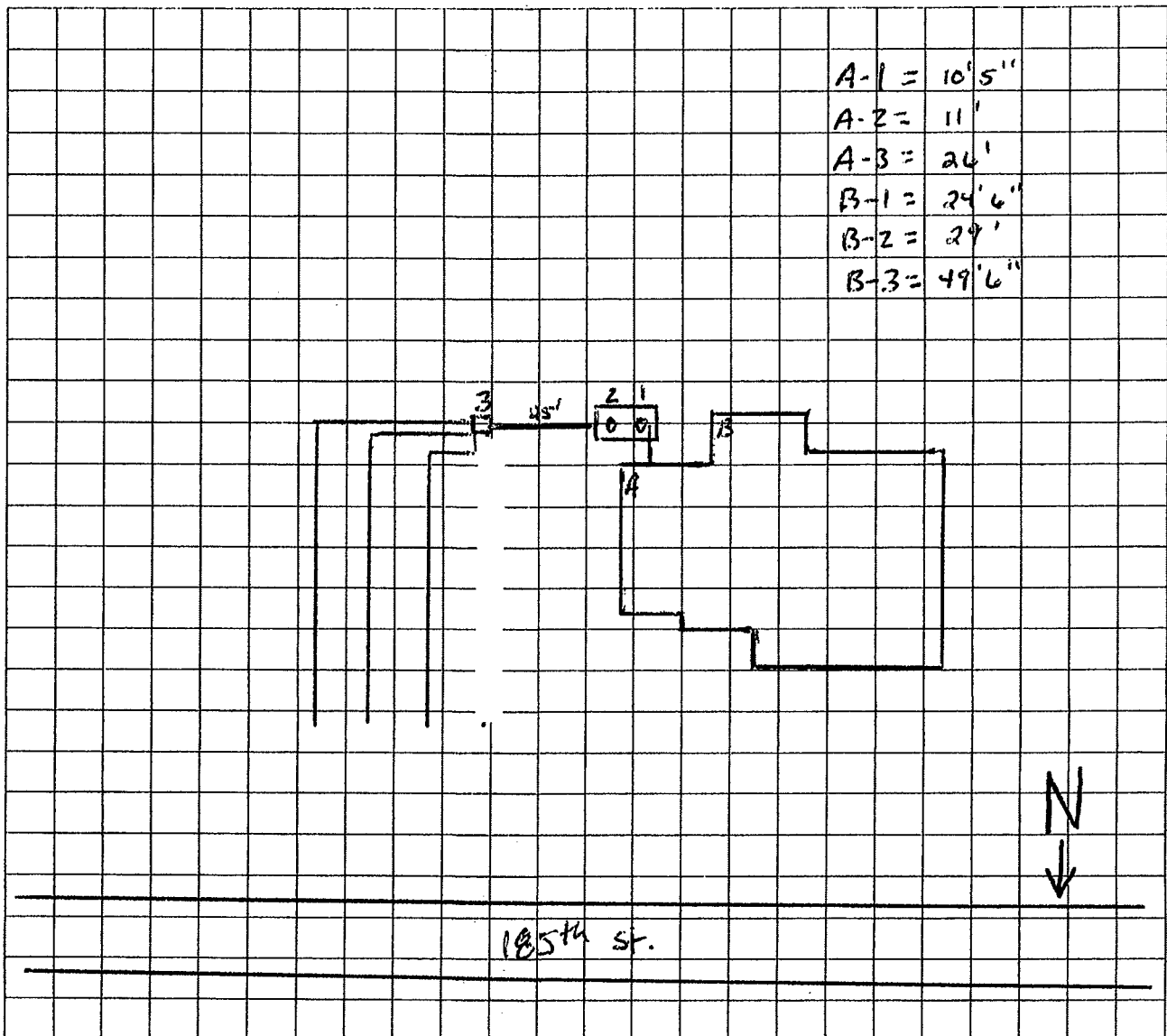
GPS: Long: _____ Lat: _____

TANK SIZE: 1250

Plastic OR Concrete

D-BOX: 0 or 9 OUTLETS USED: 4

SECONDARY TREATMENT: 300' x 20' wide infiltrator



NOTES: