



Book 2018 Page 2385

Document 2018 GWH-2385 Type 53 001 Pages 6
Date 8/22/2018 Time 12:18:00PM
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Benjamin J. Bruggeman and Rachel C. Bruggeman a/k/a Rachel C. Rechkemmer

Address 3108 324th Street, Hopkinton, IA 52237

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Joshua J. Ludovissy and Meghan A. Ludovissy

Address 635 N. Chestnut Street, Monticello, IA 52310

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

3108 324th Street, Hopkinton, IA 52237

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lots Two Hundred Ninety Five (295), Two Hundred Ninety Six (296) and Two Hundred Ninety Seven (297), Sand Springs, Iowa, according to plat recorded in Book I L.D., Page 220

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:

Well Location: APPROXIMATELY 50' SOUTH 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: _____

(Transferor or Agent)

Telephone No.: (563) 543-8293



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

Property information

Current Owner BENJAMIN BRUGGEMAN & RACHEL RECHKEMMER

Buyer _____ Realtor _____

Mailing Address 3108 324th St Hopkinton MA 02237

Site Address/County ID # 24030101200

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

Records Available N/A Permit/Installation Date N/A Installer _____

Septic System Information

Septic Tank(s): Size 800 Material concrete Condition good

Tank Pumped? yes Date 9-1-18 Licensed Pumper 358

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

Tank pumped? yes Date 9-1-18 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 4 Condition good

Header Pipe(s) no Number of Lines 4

Pressure Dosed? yes

Secondary Treatment

Length of Absorption Fields 4x 75ft Determined by Prob

Condition of Fields good Determined by Prob

Type of Trench Material Rock & pipe

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 _____

104
ft



Time of Transfer Inspection Worksheet

Other Components

Alarms _____ Working? _____ Disinfection _____ Working? _____

Control Box _____ Timers _____ Inspection Ports _____

Other Components LIFT Pump is wired inside tank
not a good place for it HARSH ENVIRONMENT

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): THIS TANK HAS 800 GAL OF STORAGE
FOR WAST HIGHLY RECOMMEND PUMPING EVERY 2 YEARS

Comments: TANK HAS FILTER NEED TO BE CHANGED EVERY
YEAR

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: 8-18
Name (print): Robb Harter Certificate #: 358

Address: 3031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1010

CALL if need more info

563-542-1010

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

Homeowners:

Bruce & Susan
3108 224 St
Hopkinton

Age of Property

Occupied
☒ Yes or No

Inspection Co:

Robb Harter

Date of Inspection: 8-1-18

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 800 Gallons Basis for estimate
What is the separation between well and septic? 10H
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:

HAS Filter need to be cleaned every year
Keep Pump every 2 years. 800 GAT tank

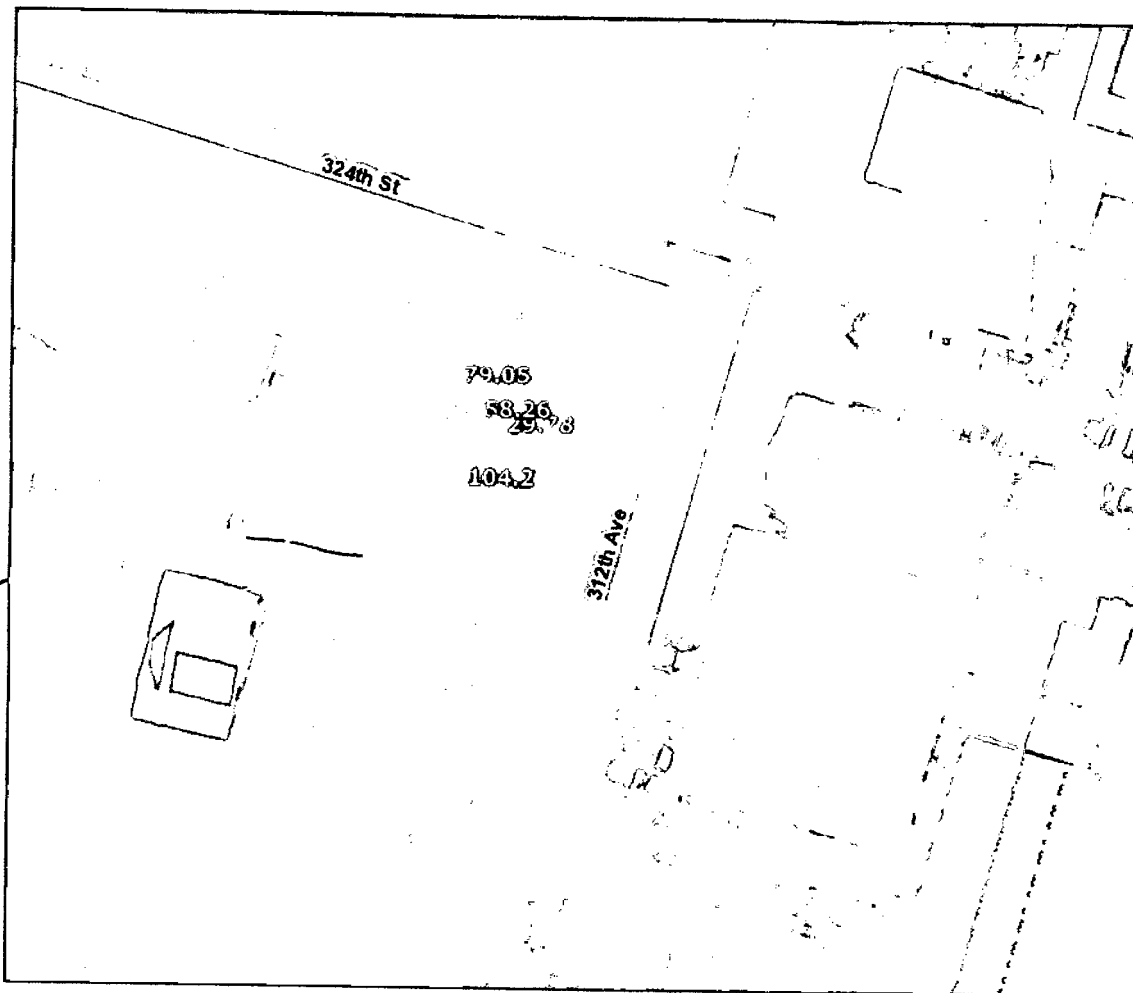
Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.

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.

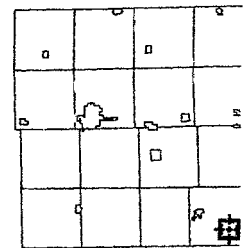
Workability can be altered by factors such as excessive rainfall, heavy water usage, faulty plumbing, neglect or physical damage to the system. All tanks require pumping maintenance.

Inspected by: Robb Harter

Date: 8-1-18



Overview



Legend

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

Parcel ID 430270102800
 Sec/Twp/Rng 27-87-3
 Property Address 3108 324TH ST
 HOPKINTON

Alternate ID n/a
 Class R
 Acreage n/a

Owner Address Bruggeman, Benjamin J &
 Rechkemmer, Rachel C
 3108 324th St
 Hopkinton, IA 52237

District SOUTH FORK MONTICELLO FD#3
 Brief Tax Description SAND SPRING
 LTS 295, 296 & 297
 (Note: Not to be used on legal documents)

HAS 11FT PUMP

Disclaimer: The information in this web site represents current data from a working file which is updated continuously. Information is believed reliable, but its accuracy cannot be guaranteed. No warranty, express or implied, is provided for the data herein, or its use. Special assessments not shown.

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Developed by  Schneider
 GEOSPATIAL

D Box is 18" Deep

4x75 Rock 3 Pipe

Well 104th to Tank