



Book 2018 Page 2598

Document 2018 GWH-2598 Type 53 001 Pages 7

Date 9/13/2018 Time 12:08:13PM

Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR  
DELAWARE COUNTY IOWA

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

**TRANSFEROR:**

Name JCDUB, LLC

Address 625 4th Ave SE, Dyersville, IA 52040

Number and Street or RR

City, Town or P.O.

State

Zip

**TRANSFeree:**

Name Randy A. & Kathy J. Feldmann

Address 718 10th Avenue SE, Dyersville, IA 52040

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2031 8th St NW, Dyersville, IA 52040

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) See 1 in Addendum

**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:**

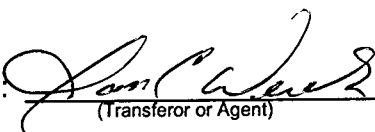
Well located a distance of ten (10) feet southeast of the northeast corner of house.

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**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) 590-8240

## Addendum

1. Parcel 2018-69 Part Of A Parcel Of Ground Located In The Southeast Quarter (SE 1/4) Of The Northeast Quarter (NE 1/4) Of Section Twenty-Five (25), Township Eighty-Nine North (T89N), Range Three West (R3W) Of The Fifth Principal Meridian, Delaware County, Iowa As Described By Deed Recorded In Land Deeds Book 121, Page 3 In The Office Of The Delaware County Recorder, according to plat recorded in Book 2018, Page 2042



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

### Property information

Current Owner James C Wessels

Buyer \_\_\_\_\_ Realtor \_\_\_\_\_

Mailing Address 2031 8th NW

Site Address/County #180250061510

No. of Bedrooms 3 Last Occupied? now Disposal? Y / N Softener? Y / N H<sub>2</sub>O Supply? well

Records Available NA Permit/Installation Date \_\_\_\_\_ Installer \_\_\_\_\_

### Septic System Information

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

Tank Pumped? yes Date 5-10-18 Licensed Pumper 358

Septic/Trash/Processing Tank: Size 800 Material concrete Condition good

Tank pumped? yes Date 5-10-18 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 Header Pipe Box yes Outlets Used 3 Condition good

Header Pipe(s) yes Number of Lines 3

Pressure Dosed? no

### Secondary Treatment

Length of Absorption Fields 3x 70 ft Determined by Dug HP

Condition of Fields good Determined by Dug HP

Type of Trench Material Rock & Pipe

Size of Sand Filter N/A 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 good working condition-

### Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? \_\_\_\_\_

Explain (attach additional pages as needed): \_\_\_\_\_

Comments: Keep Pump ever 3-5 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: 5-10-18  
Name (print): Robb Harter Certificate #: 358  
Address: 3031 160th Street Dyersville, Iowa 52040  
Phone # 563-542-1010

\*\*\*\*\*

**Homeowners:**

JAMES WISEB  
231 8TH NW  
DUNCANVILLE TX

**Age of Property**

Occupied  
Yes or No

**Inspection Co:**

Robb HARTER  
3031 16051 DUNCANVILLE  
**Date of Inspection:** 5-10-18

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 1000 Gallons Basis for estimate  
What is the separation between well and septic? 120 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 X Concrete ☒ Fiberglass ☐ Other ☐  
Liquid Level in tank X Normal ☒ Below Normal ☐ Above Normal ☐  
Access opening in tank One ☐ Two ☐ X Three ☒ None ☐  
Number of risers X One ☒ Two ☐ Three ☐ None ☐  
Condition of baffles and/or sanitary tees:  
Inlet baffle or "T" X Present and functional ☒ Not functional ☐ None present ☐ Not Visible ☐  
Outlet baffle or "T" X Present and functional ☒ Not functional ☐ None present ☐ Not Visible ☐  
Tank was pumped X Yes ☒ No (if no please explain below) ☐  
Is system adequately sized for # of Bedrooms X Yes ☒ No ☐ # of Bedrooms: 0  
Is system adequately sized for # of Bathrooms X Yes ☒ No ☐ # of Bathrooms: 0  
System working Properly X Yes ☒ No (if no please explain below) ☐

**Additional Comments / Repairs needed:**

Keep Pump over 35 years

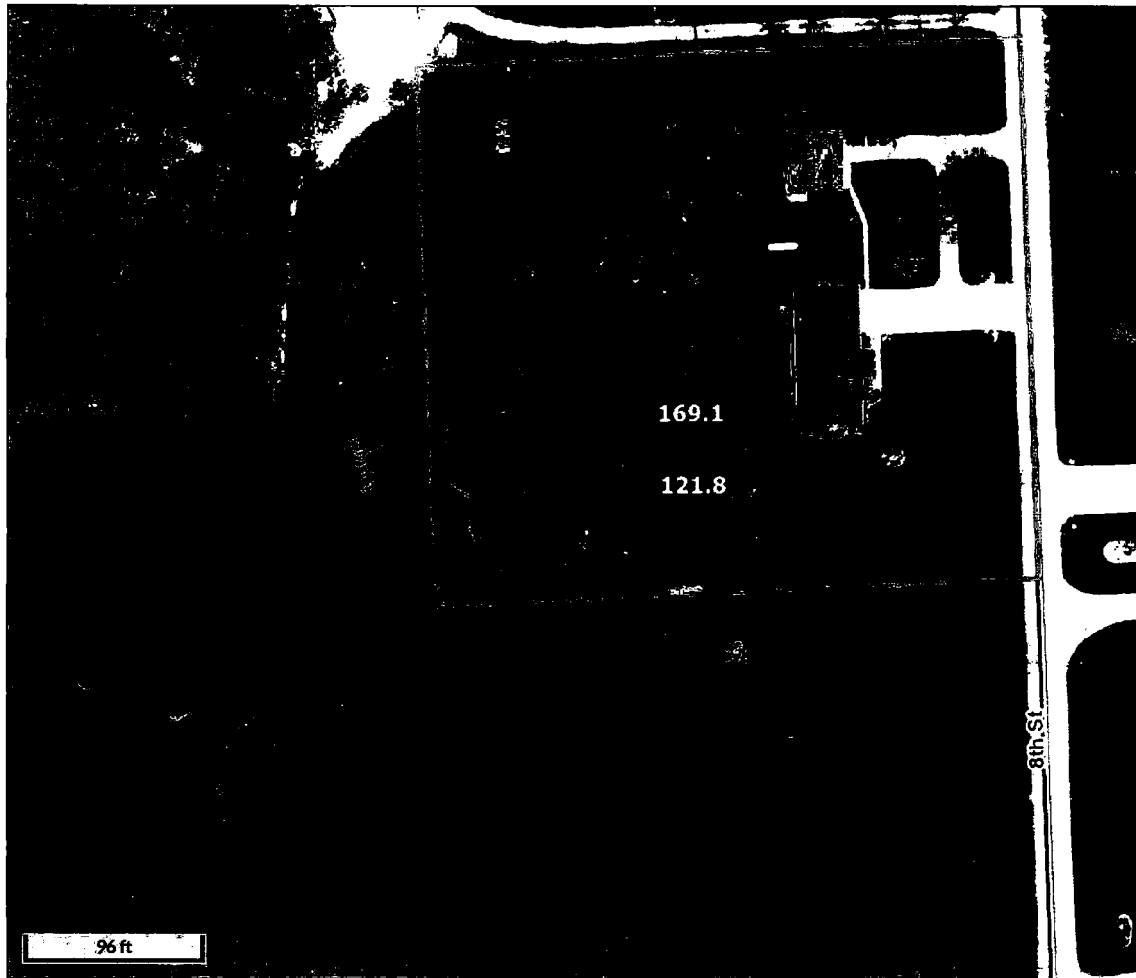
Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.

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.

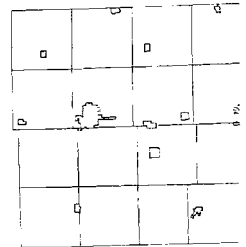
Workability can be altered by factors such as excessive rainfall, heavy water usage, faulty plumbing, neglect or physical damage to the system. All tanks require pumping maintenance.

Inspected by: Paul W.B.

Date: 5-10-18



#### Overview



#### Legend

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

|                  |                |              |     |               |                      |
|------------------|----------------|--------------|-----|---------------|----------------------|
| Parcel ID        | 180250001510   | Alternate ID | n/a | Owner Address | JCDUB LLC            |
| Sec/Twp/Rng      | 25-89-3        | Class        | R   |               | c/o Wesseis, James C |
| Property Address | 2031 8TH ST NW | Acreage      | n/a |               | 2031 8th St NW       |
|                  | DYERSVILLE     |              |     |               | Dyersville, IA 52040 |

District BREMEN WESTERN DUBUQUE  
 Brief Tax Description PT SE NE AS DESC.  
 B. 121 P. 3

(Note: Not to be used on legal documents)

**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  
 The Schneider Corporation

2x 70 Ft  
 1x 60 Ft

1000 gal tank