



Book 2018 Page 3617

Document 2018 GWH-3617 Type 53 001 Pages 7
Date 12/26/2018 Time 11:21:42AM
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Dustin J. Sargent and Erin E. Sargent

Address 2543 230th Ave., Delhi, IA 52223

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Robert Bockenstedt

Address 2662 220th Ave., Delhi, IA 52223

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2453 230th Ave., Delhi, IA 52223

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 is approx 100 ft from the N.E corner 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) 608-9812

Addendum

1. That part of the Southwest Quarter (SW $\frac{1}{4}$) of the Northwest Quarter (NW $\frac{1}{4}$) of Section Twenty (20), Township Eighty Eight (88) North, Range Four (4), West of the Fifth Principal Meridian described as commencing at the Southwest corner of said forty-acre tract and running thence East along the South line of said quarter-quarter a distance of four hundred thirty (430.0) feet, thence North $15^{\circ} 38'$ East along the Westerly line of the highway four hundred fifty five and two-tenths (455.2) feet to the point of beginning, thence continuing North $15^{\circ} 38'$ East along said highway one hundred (100.0) feet, thence North $36^{\circ} 30'$ East along said highway one hundred thirty five (135.0) feet, thence North $53^{\circ} 30'$ West one hundred eighty three and five-tenths (183.5) feet, thence South $36^{\circ} 30'$ West two hundred twenty eight and four-tenths (228.4) feet, thence South $53^{\circ} 30'$ East two hundred nineteen and one-tenth (219.1) feet to the point of beginning



Time of Transfer Inspection Report (DNR Form 542-6191)

Property information

Current owner X Dustin Sargent
Buyer Ron Rochester Realtor NA
Mailing address DE/hi 7a
Site Address/County 2543 230th Ave
Legal Description Sec. 30 T-23-N R-4-W Dahi
No. of bedrooms 3 Last occupied? current Records available yes
Permit/installation date 8-24-14 Separation distances ok/no? OK

Septic system information

Septic tank(s): size 1500 material concrete condition good
Tank pumped? yes date 12-16-18 licensed pumper yes ST347
Septic/tank/processing tank: size X material X condition X
Tank pumped? X date X licensed pumper X

Aerobic treatment unit (ATU) mfg X size X
Tank pumped? X date X licensed pumper X
Maintenance contract? X expiration date X service provider X
Condition X

Pump tanks/vents: type X size X condition X
Distribution system: distribution box yes outlets used 3 condition good
Header pipe(s) X # of lines X Pressure tested? X

Secondary treatment:
length of absorption fields 16x50' Bed determined by Msp
condition of fields Good determined by 45 min Hydraulic
type of trench material Rock & Pipe test

Size of sand filter X determined by X
Vent pipes above grade? X discharge pipe located? X
Effluent sample taken? X Results X

Media filters: type X
Maintenance contract? X expiration date X service provider L
Condition X

NPDES General Permit No. 4: required? permitted? NOI provided



Time of Transfer Inspection Worksheet

Other components:

Alarms ☒ Working? ☒

disinfection ☒ working? ☒

Control box ☒ Timers ☒ inspection ports ☒

Other components The day of inspection this system was
in good working condition.

Overall condition of the private sewage disposal system

Report system status Performed 45 min. hydraulic test. There was
no rise in effluent in D-Box. This system was
Explain (attach additional pages as needed):
in good working condition day of inspection.

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 and attach a site sketch.

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: Scott Harbach

Date: 12-12-18
Certificate #: 8815

Name (print): Scott Harbach

Address: 2043 21st Ave Delhi Ia 52223

Phone #: 563 920 7622

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319

ADDRESS: 2543 23024 Ave Section 20 Township D-141
LOCATION: 1 11 20 T-83-N 2-4-12
Owner: EL G. J. J. J. Tenant: _____ Plumber: Harold
Lot Size: _____ Type Commercial: _____ Residential (No. Bedrooms) 3
Fixtures: Sinks 3 Lavatories _____ Bath Tubs _____ Showers 1 Sinks 3 Automatic Laundry _____ Sump Pump _____
Septic Tank made by Sunstar Garbage Grinder _____ Construction Material concrete Gallons Cap. 1500
Percolation Test: 1 _____ 2 _____ 3 _____ 4 _____ Made by: 42-421009-91-343544
Absorption Field: Total length of laterals 20 ft No. of lateral lines _____
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 Code
Date Approved 3-24-14 Ed U. Hingrich
By Dennis Lee APPLICANT'S SIGNATURE
SEAL

ARE ALL BAFFLES IN CORRECT _____

DOES HOMEOWNER HAVE DRAWING AND UNDERSTAND THE USE OF EFFLUENT FILTER

IF TRENCHES USED DID THEY STOMP DOWN THE SIDES WITH DIRT

IF A SAND FILTER IS INSTALLED IS IT VENTED

ANY CONCERNS BY INSPECTOR _____

APPROVED (X)

REJECTED () WHY ()

INSPECTED BY Dennis Lee

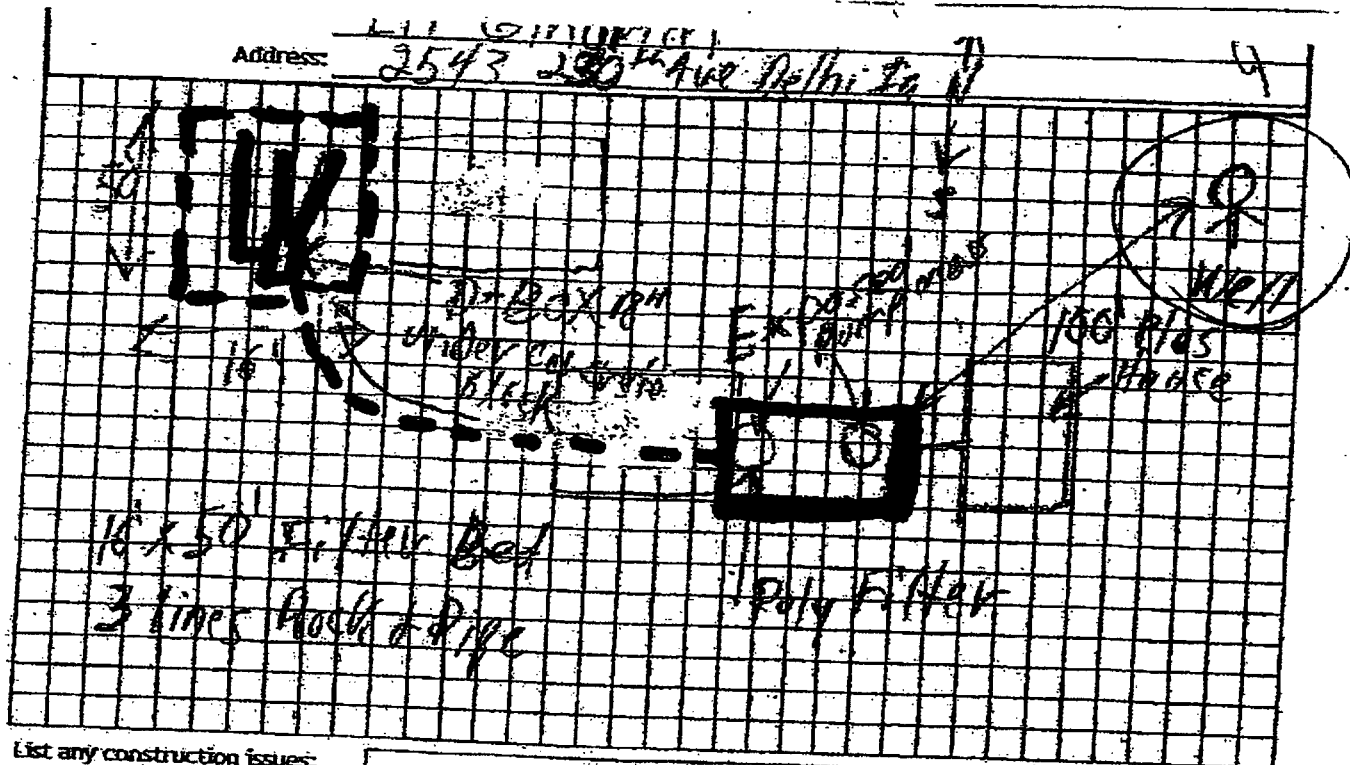
DATE

4-4-14

d-Box - under Box

Permit No. 2233

Address: 2543 230th Ave Delhi, IN 46731



List any construction issues:

Mapping Checklist

Map scale: _____



Indicate north

show slope

% direction

Locate

- ☒ Lot Dimensions/Property Lines
- ☐ Dwellings and Other Improvements
- ☐ Existing or Proposed System(s)
- ☐ Replacement Area
- ☐ Unsuitable Area(s)
- ☐ Public Water Supply Wells
- ☐ Pumping Access
- ☐ Inner Wellhead Zone

Easements

- ☐ Phone
- ☐ Electric
- ☐ Gas

Elevations

- ☐ Benchmark
- ☐ Borings
- ☐ Perc Tests

☐ Horizontal and Vertical Reference Points

Setbacks

- ☐ Building
- ☒ All water wells within 100 feet
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

(Designer)

(Signature)

(License #)

(Date)