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Date 1/07/2019 Time 12:44:32PM

Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name TIMOTHY M. BENN

Address 25798 225th AVE, DELHI, IA 52223

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name KATHERINE R. MONTZ AND BRIAN K, MONTZ

Address 7300 SUN LAND DRIVE SOUTH #903 , SOUTH PASADENA, IA 33707

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

21731 259TH STREET, 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:

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

Signature: Tim Bern Telephone No.: (563) 599-6134
(Transferor or Agent)

Addendum

1. LOT 16 IN THE SUBDIVISION OF CAMP-O-DELHI, CAMP-O-DELHI, INC., DELAWARE COUNTY, IOWA. SUBJECT TO RESTRICTIVE COVENANTS OF RECORD TOGETHER WITH THE RIGHTS OF USE OF ROADWAY DESCRIBED IN DEED OF A.R. WHEELLESS AND JOSIE M. WHEELLESS, HUSBAND AND WIFE, TO HAROLD H. BROWN, DATED AUGUST 6, 1938 AND FILED AUGUST 9, 1938, IN BOOK 66 OF DEED RECORDS IN THE OFFICE OF THE RECORDER OF DELAWARE COUNTY, IOWA, IN COMMON WITH OTHERS RIGHTFULLY USING THE SAME.



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

Property information

Current Owner T.M. Benn
Buyer _____ Realtor Sir. Meyer
Mailing Address 21731 257th St Delia
Site Address/County PI # 250240201600

No. of Bedrooms 2 Last Occupied? 2 months Disposal? Y/N Softener? Y/N H₂O Supply? Well over 300 ft
way

Records Available Yes Permit/Installation Date 10-16 Installer Don

Septic System Information

Septic Tank(s): Size 750 Material Concrete Condition good
Tank Pumped? Yes Date 12-17-18 Licensed Pumper 358
Septic/Trash/Processing Tank: Size 600 Material Concrete Condition good
Tank pumped? Yes Date 12-17-18 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 NO Outlets Used _____ Condition _____
Header Pipe(s) Yes Number of Lines 1
Pressure Dosed? NO

Secondary Treatment

Length of Absorption Fields 14x8 Rock Pit Determined by PNob
Condition of Fields Good Determined by Hye + CSR
Type of Trench Material Rock

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 _____



Time of Transfer Inspection Worksheet

Other Components

Alarms _____ Working? _____ Disinfection _____ Working? _____

Control Box _____ Timers _____ Inspection Ports _____

Other Components _____

Overall condition of the private sewage disposal system

Acceptable? X Unacceptable? _____

Explain (attach additional pages as needed): All in working condition

Comments: Keep Pump even 2-3 YEARS ONLY 750^{SV} TANK

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: 12-18-18

Name (print): Robb Harter Certificate #: 358

Address: 3031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1010

HARTER Custom Pumping, Inc & Septic Service

Robb Harter * Owner/ Operator

3031 160th Street Dyersville, IA 52040 * 563-875-8730 or 563-542-1010

Homeowners:

Tim Bann

Age of Property

10-2016

Occupied

Yes or No

Inspection Co:

Robb Harter

3031 160th Dyersville St

Date of Inspection: 12-17-18

Does this evaluation/inspection meet the requirements of state and local agencies?

Yes X 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 150 Gallons Basis for estimate

What is the separation between well and septic? over 300ft

Does the separation of the well and septic meet local requirements? Yes No ___ N/A ___

Section 2: Driveway 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 X Two Three None

Number of risers One X 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:

Is system adequately sized for # of Bathrooms X Yes No # of Bathrooms:

System working Properly X Yes No (if no please explain below)

Additional Comments / Repairs needed:

Reel Pump was 2-3 years

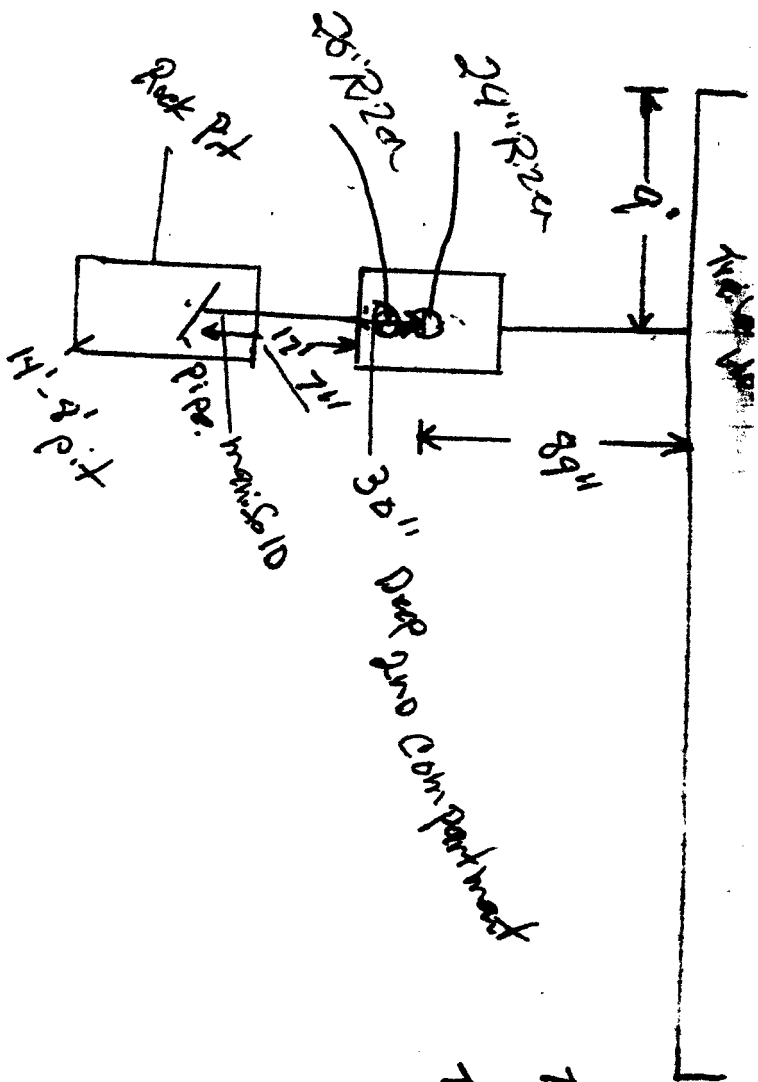
Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.

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 routine maintenance.

Inspected by: Robb Harter

Date: 12-17-18



750 gal 2 compartment tank
 Top of tank 3' inground

21713-25944
 ac/h
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Well over 360 Ft

River