



Book 2019 Page 1386

2019 GWH-1386 Type 53 001 Pages 6

Date 6/04/2019 Time 1:25:25PM

Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Abraham Uccello & Tracy A. Fippinger

Address 1233 Panama Dr, Sarasota, FL 34234

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name John B. Hillebrand & Joyce M. Hillebrand

Address 610 5th St SW, Dyersville, IA 52040

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

21690 259th St, Delhi, IA 52223

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lot Eighty Five (85) of Camp-O-Delhi, a Subdivision of the SW 1/4 of the SE 1/4 of Section 24, Township 88 North, Range 5, West of the Fifth P.M., Delaware County, Iowa, according to plat recorded in Book 5 Plats, Page 78 and the right 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 recorder of Delaware County, Iowa, in common with other rightfully using same.

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)

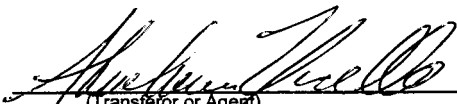
- ☒ There are no known private burial sites on this property.
☐ There is a private burial site on this property. The location(s) of the site(s) and known identifying information of the decedent(s) is stated below or on an attached separate sheet, as necessary.

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: 
(Transferor or Agent)

Telephone No.: (941) 284-3458

5-22-19



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

Property information

Current Owner ABC Uccello
 Buyer _____ Realtor _____
 Mailing Address 1233 PAPA DR. SARASOTA FL 34234-7445
 Site Address/County 21690 259th St DeWitt IA 52223
 No. of Bedrooms 1 Last Occupied? weekend Disposal? Y ☒ Softener? Y ☒ H₂O Supply? well over 500 Ft
 Records Available - Permit/Installation Date _____ Installer _____

Septic System Information

Septic Tank(s): Size 1000 Material concrete Condition good
 Tank Pumped? yes Date 5-22-19 Licensed Pumper 358
 Septic/Trash/Processing Tank: Size 900 Material concrete Condition good
 Tank pumped? yes Date 5-22-19 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) - Number of Lines _____
 Pressure Dosed? -

Secondary Treatment

Length of Absorption Fields 4x 75 ft Determined by Prob
 Condition of Fields good Determined by dig up
 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 _____



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): THIS CABIN SHARES
SEPTIC SYSTEM WITH TWO OTHER CABINS
THAT ARE EAST OF THIS ONE

Comments: ALL IN WORKING CONDITION - RECOMMENDED
PUMP TANK 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

Name (print): Robb Harter

Date: 5-22-19

Address: 3031 160th Street Dyersville, Iowa 52040

Certificate #: 358

Phone # 563-542-1010

Harter Custom Pumping, Inc & Septic Service
Robb Harter * Owner/ Operator
3031 160th Street Dyersville, IA 52040 * 563-675-6730 or 563-542-1010

Homeowners:

ABE UCCELLO
21690 259TH ST
DELTA 52023

Age of Property

1940
Occupied
Yes or No

Inspection Co:

Robb Harter

Date of Inspection: 5-22-19

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? OVER 500 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 ☒ 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:

All in working order

Keep Pump even RAR.

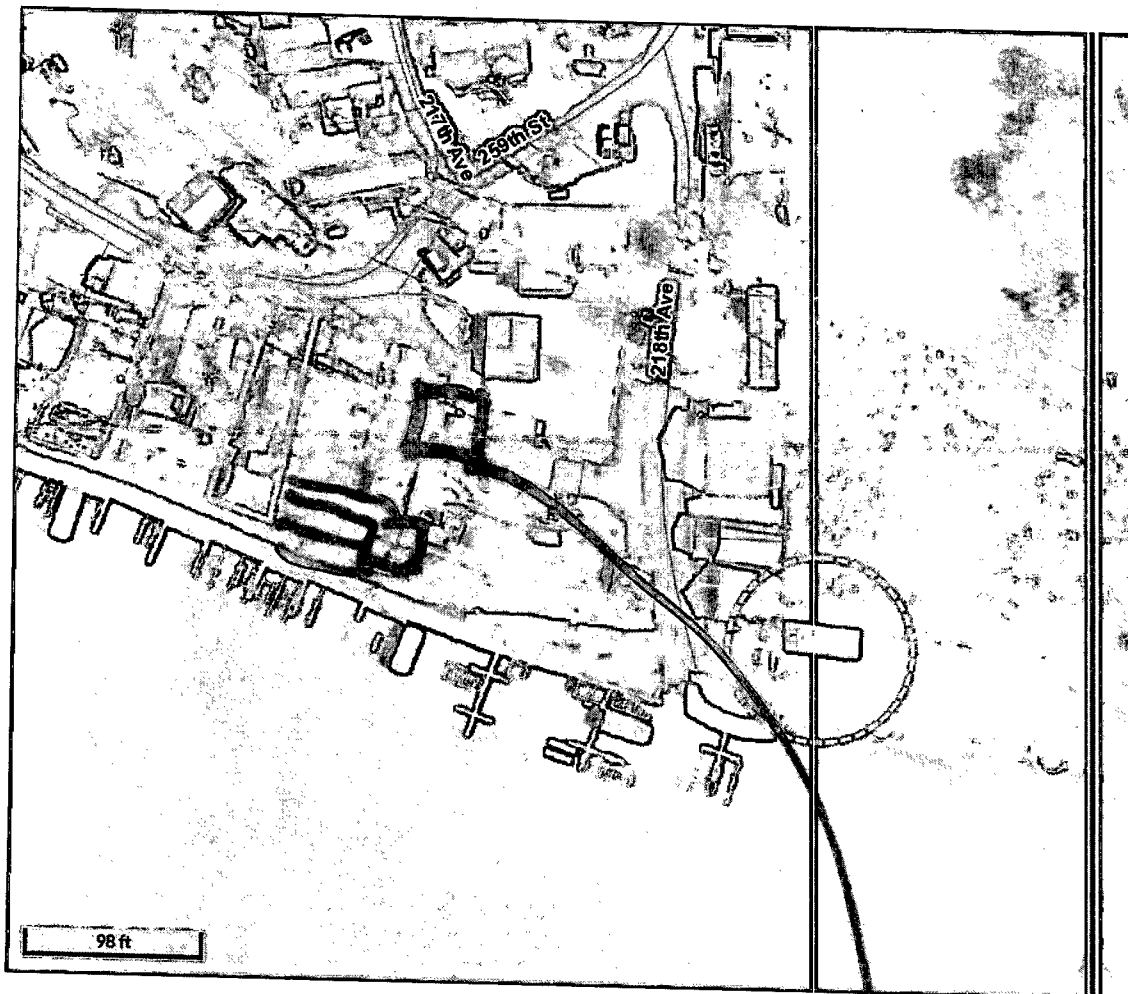
Septic systems are subterranean, it is impossible to determine their overall condition. No prediction can be made as to when or if a system might fail.

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.

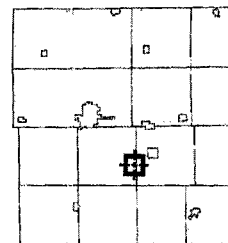
Workability can be altered by factors such as excessive rainfall, heavy water usage, faulty plumbing, neglect or physical damage to the system. All tanks require pumping maintenance.

Inspected by: Robb Harter

Date: 5-22-19



Overview



Legend

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

Parcel ID 250240208500
 Sec/Twp/Rng 24-88-5
 Property Address 21690 259TH ST
 DELHI

Alternate ID n/a
 Class R
 Acreage n/a

Owner Address Uccello, Abraham
 Fippinger, Tracy A.
 1233 Panama Dr
 Sarasota, FL 34234-7445

District MILO MAQ. V. LAKE FD 12
 Brief Tax Description LOT 85
 CAMP O DELHI
 (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 **Schneider**
 GEOSPATIAL

1000 GAL TANK

D Box is 66ft south of tank

D Box is 10" deep

4 1/2 ft out of D Box