



Book 2019 Page 1485

2019 GWH-1485 Type 53 001 Pages 8
Date 6/14/2019 Time 2:20:46PM
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Jason Lynn Haight and Stacey Lynn Haight

Address 1539 190th Street, Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Roger W. Lawrence

Address 1009 Clearview Drive, Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

1539 190th Street, Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Parcel F; Part Of The SE $\frac{1}{4}$ -SW $\frac{1}{4}$ Sec. 13, T89N, R6W Of The Fifth P.M., Delaware County, Iowa, according to plat recorded in Book 2005, Page 969.

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.

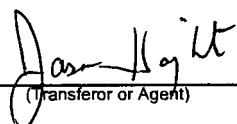
6. Private Sewage Disposal System (check one)

- ☐ 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 in working condition and is located
100 feet Southwest 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:  Telephone No.: (563) 920-2789
(Transferor or Agent)



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

Property information

Current owner Jason Haight
Buyer _____ Realtor None
Mailing address 1539 190th St Manchester
Site Address/County 1539 190th St Manchester
Legal Description Per Permit
No. of bedrooms 3 Last occupied? still Records available yes
Permit/installation date 6-5-14 Separation distances ok/ no? OK

Septic system information

Septic tank(s): size 1500 material concrete condition good
Tank pumped? yes date 5-18-19 licensed pumper st 49
Septic/trash/processing tank: size - material - condition -
Tank pumped? - date - licensed pumper -
Aerobic treatment unit (ATU) mfg - 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) - # of lines - Pressure dosed? -

Secondary treatment:

length of absorption fields 400' determined by per permit
condition of fields good determined by water test
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 provided -



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

Report system status newer in great shape

Explain (attach additional pages as needed): water test 45 minutes
4-5 / minute great

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: Bill Down Date: 5-18-19
Name (print): Bill Down Certificate #: 8880
Address: 1497 110th Ave Osceola Iowa 52038
Phone #: 563-924-2225

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

DELAWARE COUNTY

130 13 00 008 50

BOARD OF SUPERVISORS

PERMIT NO. 2251

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 1539 1904th St SECTION 13 TOWNSHIP DE C. C.

LOCATION QT QT SEC 13 T88 N R 6 W Parcel#

Owner Jason Hays Plumber Self Owner

Lot size 2 acs Type Commercial Residential (No. Bedrooms) 3

Fixtures: Sinks 3 Bath tubs 2 Showers 2 Sinks 4 Automatic laundry 1 Life pump N/A

Septic tank made by Sealed Construction Material concrete Gallon Cap. 1500 Garbage disposal per

Absorption Field: Total length of laterals 300 42 313454 - 91.501537 Size of each bed 120

Trench Material rock and dirt Secondary Treatment Type N/A 42.513606 - 91.501839

This system is new construction X Existing

I certify that the above information is correct and that all proposed work will be completed in accordance with Delaware County Regulations.

Date Approved 6-5-14 Joe White

APPLICANT'S SIGNATURE

BY Jason Hays

INSPECTOR

SEWAGE DISPOSAL FINAL INSPECTION

PERMIT NO: 2251

APPLICANT: Jason Haigh

PLUMBER Oasis

SITE ADDRESS 1539 190th St

SEPTIC TANK SIZE 1500

EFFLUENT FILTER IN PLACE yes

MANUFACTURER Swabber

DEPTH 2'

DISTANCE TO STRUCTURE OR HOME 35'

DISTANCE FROM WELL 7106

DISTRIBUTION BOX: DEPTH 2'

IS IT LEVEL AND SECURE yes

DISTANCE FROM HOUSE OR STRUCTURE 65'

DISTANCE FROM WELL 100'

TRENCH # 1 LENGTH 100' WIDTH 3' DEPTH 28"

TRENCH # 2 LENGTH 100' WIDTH 3' DEPTH 28"

TRENCH # 3 LENGTH 100' WIDTH 3' DEPTH 28"

TRENCH # 4 LENGTH 100' WIDTH 3' DEPTH 28"

ITEMS IF APPLICABLE

IS ANY ELECTRICAL ITEMS DONE TO CODE

ARE ALL BAFFLES IN CORRECT yes

DOES HOMEOWNER HAVE DRAWING AND UNDERSTAND THE USE OF EFFLUENT FILTER yes

IF TRENCHES USED DID THEY STOMP DOWN THE SIDES WITH DIRT

IF A SAND FILTER IS INSTALLED IS IT VENTED

ANY CONCERNS BY INSPECTOR None

APPROVED (X) REJECTED () WHY () INSPECTED BY Dennis Lyons

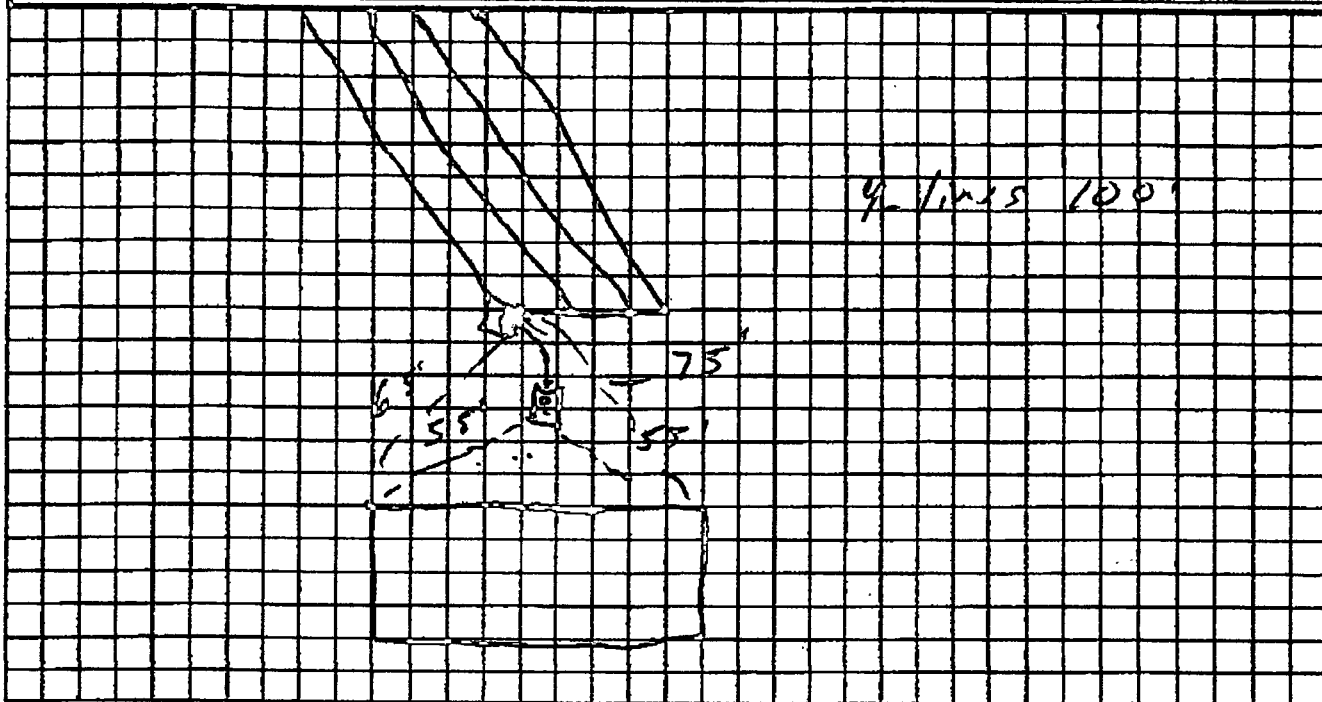
DATE 9-18-14

DELAWARE COUNTY INSPECTION SHEET

Contact Information Project ID: v 05.31.13

Property Owner/Client:

Address:



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)

