

Recorded: 6/20/2019 at 2:56:48.0 PM
County Recording Fee: \$0.00
Iowa E-Filing Fee: \$0.00
Combined Fee: \$0.00
Revenue Tax:
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2019 PG: 1570

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

TRANSFEROR:

Name Charlotte E. Leslein

Address 10660 Old St. Augustine Rd., Apt. 407, Jacksonville, FL 32257

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Timothy A Mescher and Lisa M. Mescher

Address 129 W. Butler St., Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

17128 190th St., Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lot Three (3) of One (1) and Lot Four (4) of One (1) of the Subdivision of Lot One (1) of Frankenfeld's Replat of part of Block Three (3) of Sunset Beach Subdivision, Delaware County, Iowa, according to plat recorded in Book 5 Plats, Page 123.

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. *10 FT from S.E. Corner of House*

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)

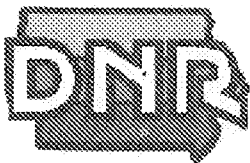
- ☐ All buildings on this property are served by a public or semi-public sewage disposal system.
☐ This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
☒ There is a building served by private sewage disposal system on this property 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: Charlotte E. Leslein
(Transferor or Agent)

Telephone No.: 563-929-1726



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

Property information

Current owner Charlotte Leslein
Buyer Tim Mescher Realtor Home Front Realty (Brian Francis)
Mailing address 205 East Marion St Manchester, Iowa 520591

Site Address/County 17128 190th St Manchester, Ia
Legal Description _____

No. of bedrooms 3 Last occupied? still Records available no

Permit/installation date _____ Separation distances ok/no? OK

Septic system information

Septic tank(s): size 1000 material concrete condition good
Tank pumped? yes date 9-27-18 licensed pumper _____
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 concrete size 500 gallons condition good

Distribution system: distribution box yes outlets used 3 condition good
Header pipe(s) _____ # of lines _____ Pressure dosed? _____

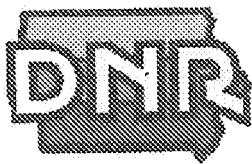
Secondary treatment:

length of absorption fields 12' by 40' bed determined by camera
condition of fields good determined by hydraulic load test
type of trench material _____

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 yes Working? yes disinfection — working? —

Control box — Timers — inspection ports —

Other components has pump tank & pump working
Good

Overall condition of the private sewage disposal system

Report system status Did water test 5-6 gallons/minute

Explain (attach additional pages as needed): no problems

Comments: pump tank has 2" line on outside
of riser about 1 foot deep

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.

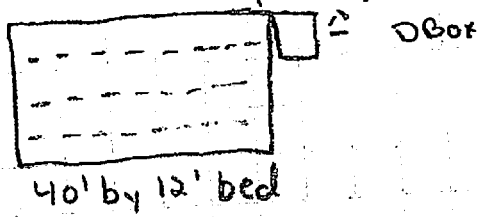
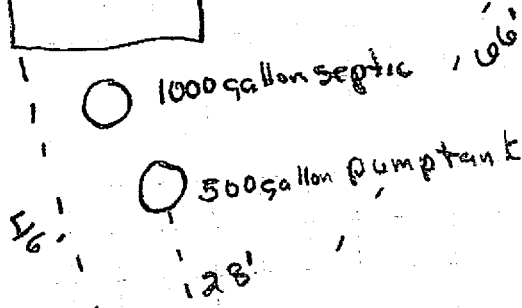
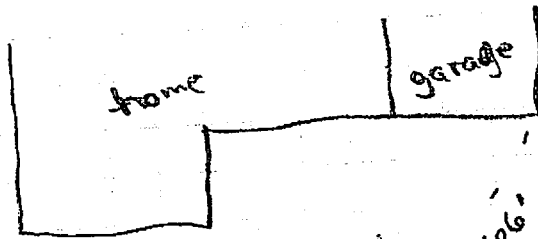
This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified inspector: Bill Doss Date: 6-6-19
Name (print): Bill Doss Certificate #: 8880
Address: 1407 1st St NW Dunder Town
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

East



North

190th St

190th St

West