



Book 2019 Page 1842

2019 GWH-1842 Type 53 001 Pages 6

Date 7/15/2019 Time 10:56:38AM

Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Bruce A. Waugh & Michelle M. Waugh

Address 16293 189th St, Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Jesse Rans & Marie Rans

Address 401 Bernhart St, Masonville, IA 50654

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

16293 189th St, Manchester, IA 52057

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lot Seventeen (17) of North Ridge Subdivision
located in the SE 1/4 of SW 1/4 of Section 18, Twp 89 North, Range 5 West of the 5th P.M., Delaware
County, Iowa, according to plat recorded in Book 7 Plats, Page 65

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 _____.

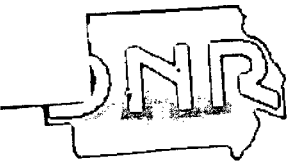
Information required by statements checked above should be provided here or on separate sheets attached hereto:

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

Signature:

Bruce Alwang
(Transferor or Agent)

Telephone No.: (563) 608-4877



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

Property information

Current owner Bruce/Michelle Waugh Realtor None
Buyer _____
Mailing address 16293 18th St Manchester
Site Address/County 16293 18th St Manchester
Legal Description _____
No. of bedrooms 3 Last occupied? still Records available yes
Permit/installation date 7-16-96 Separation distances ok/ no? OK

Septic system information

Septic tank(s): size 1000 material concrete condition good
Tank pumped? yes date 5-2-19 licensed pumper St 49
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfr _____ 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 3 condition New
Header pipe(s) _____ # of lines _____ Pressure dosed? _____

Secondary treatment:
length of absorption fields 225' determined by measured
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 older system D Box 6' Deep

Explain (attach additional pages as needed): 3 leach lines like new
DBox Bad Put New one in

Comments: left off 1 each line / still have
3 good ones

Site status at conclusion of Time of Transfer inspection:

- o Verify that controls are set on the appropriate mode.
- o Power is on to all components.
- o Revisit all components to verify lids are secure.
- o Gather all tools for removal from the site.
- o 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: 5-2-19
Name (print): Bill Down Certificate #: 8880
Address: 1497 110th Ave Dunlap IL
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

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: RR 3 Boley Pleasant Section 18 Township Delaware

LOCATION: Y 1/4 Y 1 T 8 R 2 S W Lot 17

Owner: Don Schulte Tonnet: _____ Plumber: Schulte

Lot Size: 211-133 Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Showered Lavatories Both Tubs Shower 2 Sinks 2 Automatic Laundry 1 Sump Pump _____

Septic Tank made by Sealed Garbage Grinder _____ Construction Material Cinderblock Gallons Capacity 1000

Percolation Test: 1. _____ 2. _____ 3. _____ 4. _____ Mads by: _____

Absorption Field: Total length of laterals _____ 210 No. of lateral lines 3

This system is now ✓ Existing _____

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

Date Approved 4-16-96

By Don Schulte
APPLICANT

Don Schulte
APPLICANT'S SIGNATURE

SEAL

S

18941st

3

home

Deck

1000 gallon
Septic

D Bot

D Bot
6' Deck

E

W

