

Recorded: 7/23/2019 at 9:20:00.0 AM
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: 1925

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

TRANSFEROR:

Name William G. Holscher, Roseann Cory, Diann Hanson, Carla Sue Aykroyd, Barbara B. Hagerty
Address 916 Oak Park Blvd., Cedar Falls, IA 50613
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Thomas Ries And Lindsay Ries
Address 21948 258th Street, Delhi, IA 52223
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
21948 258th 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:

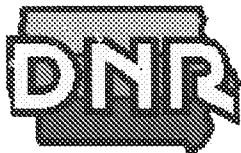
The Well is located 50' North of the House. _____

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

Signature: Roseann N. Cony Telephone No.: (319) 277-6823
(Transferor or Agent)

Addendum

1. Lot Ten (10) of Hartwick Lake Club North, Second Subdivision, a Subdivision of Part of the Southeast Quarter (SE $\frac{1}{4}$) of the Southeast Quarter (SE $\frac{1}{4}$) and of the Northeast Quarter (NE $\frac{1}{4}$) of the Southeast Quarter (SE $\frac{1}{4}$), except the North Ten (10) acres thereof, all in Section Twenty Four (24), Township Eighty Eight (88) North, Range Five (5) West of the Fifth P.M., Delaware County, Iowa, according to the plat recorded in Book 5, Plats, Page 81



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

Property information

Current Owner William G. HANSON

Buyer _____ Realtor _____

Mailing Address 21948 258th St Delhi

Site Address/County # 250240800900

No. of Bedrooms 3 Last Occupied? None ^{week end} Disposal? Y Softener? Y N H₂O Supply? well 8/ft to TANK

Records Available — Permit/Installation Date — Installer —

Septic System Information

Septic Tank(s): Size 1000 Material Concret Condition good

Tank Pumped? yes Date 5-17-19 Licensed Pumper 358

Septic/Trash/Processing Tank: Size _____ Material Concret Condition good

Tank pumped? yes Date 5-17-19 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) no Number of Lines _____

Pressure Dosed? no

Secondary Treatment

Length of Absorption Fields 4x 75ft Determined by Prob

Condition of Fields good Determined by Prob 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): All in good working condition

Comments: Keep Pump every 3-4 years

Site status at conclusion of Time of Transfer inspection: Feel free to contact me if need more info

Verify that controls are set on the appropriate mode. Robb 563-542-1010

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: 5-17-17

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 563-142-1010

Homeowners:

WILLIAM HADSON
21948 258th ST
DEAL

Age of Property

1990
Occupied
Yes or No

Inspection Co:

Robb HARTER

Date of Inspection: 5-17-19

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

What is the separation between well and septic? 81 Ft to tank

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 observable 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:

TANK HAS A FILTER NEED TO BE CLEANED EACH YEAR

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:

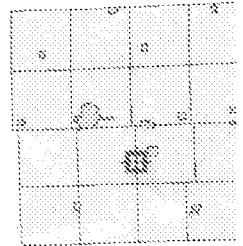
Robb HARTER

Date:

5-17-19



Overview



Legend

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

Parcel ID	250240300700	Alternate ID	n/a	Owner Address	Holscher, William Get al
Sec/Twp/Rng	24-88-5	Class	R		%Hanson, Diann
Property Address	21948 258TH ST	Acreage	n/a		1946 Rainbow Dr
	DELHI				Waterloo, IA 50701

District MILO MAQ. V. LAKE FD 12
Brief Tax Description LOT 10 EX AS DESC.
 B. 126 P. 233
 HARTWICK LAKE CLUB
 NORTH 2ND SUBDIV
 PT. E 1/2 SE 1/4
 (Note: Not to be used on legal documents)

TANK IS 22 FT SW OF HOME
 AND 35 FT SE OF HOME
 D BOX IS ^{48 FT} 98 FT SOUTH OF TANK

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.

Date created: 5/21/2019
 Last Data Uploaded: 5/21/2019 12:43:54 AM

Developed by **Schneider**
 GEOSPATIAL

D BOX IS 18" DEEP
 WITH 4 LINES GOING EAST
 WITH ROCK PIPE. 75 FT EACH
 DO NOT DRIVE ON SEWAGE SYSTEM.