Book 2020 Page 968

Document 2020 GWH-968 Type 53 001 Pages 7
Date 4/09/2020 Time 12:55:25PM
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Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:
Name Robin K. Bauer
Address 1123 N. Third Lane, Guttenberg, IA 52052
Number and Street or RR | City, Town or P.O. | State | Zip

TRANSFEREE:
Name Chad M. Bergfeld and Sadie M. Bergfeld
Address 1089 17th Street SE, Dyersville, IA 52040
Number and Street or RR | City, Town or P.O. | State | Zip

Address of Property Transferred:
20139 Stone Briar Lane, Dyersville, IA 52040
Number and Street or RR | City, Town or P.O. | State | Zip

Legal Description of Property: (Attach if necessary) Parcel 2014-36 Comprised of Parcel B & Part of Parcel F In Section Twenty-Five (25), Township Eighty-Nine North (T89N), Range Three West (R3W) Of The Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 2014, Page 1831,

1. **Wells (check one)**
   - X 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)**
   - X 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)**
   - X 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)**
   - X 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)**
   - X 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.
   - X 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 on neighbors property, however the pump & pressure tank are located on this property

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

Signature: [signature] (Transferor or Agent) Telephone No.: (563) 543-4420

GROUNDWATER HAZARD STATEMENT

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

a. Solid Waste Disposal (check one)

___ There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.

___ There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

b.. Hazardous Wastes (check one)

___ There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.

___ There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

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

Signature: (X) _____ Telephone No.: (563) 543-4420
(Transferor or Agent)

FILE WITH RECORDER **DNR form 542-0960 – Attachment #1 (July 18, 2012)**

Harter Custom Pumping, Inc & Septic Service

Robb Harter * Owner/ Operator
3031 160th Street Dyersville, IA 52040 * 563-875-8730 or 563-542-1010

****

Homeowners: Robin Bauer
20139 Stone Briar
Dyersville

Age of Property 1992
Occupied
(Yes) or No

Inspection Co: Robb Harter
3031 160st Dyersville
Date of Inspection: 12-27-19

Does this evaluation/inspection meet the requirements of state and local agencies? Yes X 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 1250 Gallons *Basis for estimate*
What is the separation between well and septic? 193 FT
Does the separation of the well and septic meet local requirements? (Yes) No N/A

Section2: 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 X Concrete Fiberglass Other
Liquid Level in tank X Normal Below Normal Above Normal
Access opening in tank One Two X Three None
Number of risers X One Two Three None
Condition of baffles and or sanitary tees:
Inlet baffle or "T" X Present and functional Not functional None present Not Visible
Outlet baffle or "T" X Present and functional Not functional None present Not Visible
Tank was pumped X Yes No (if no please explain below
Is system adequately sized for # of Bedrooms X Yes No # of Bedrooms:
Is system adequately sized for # of Bathrooms X Yes No # of Bathrooms:
System working Properly X Yes No (if no please explain below)

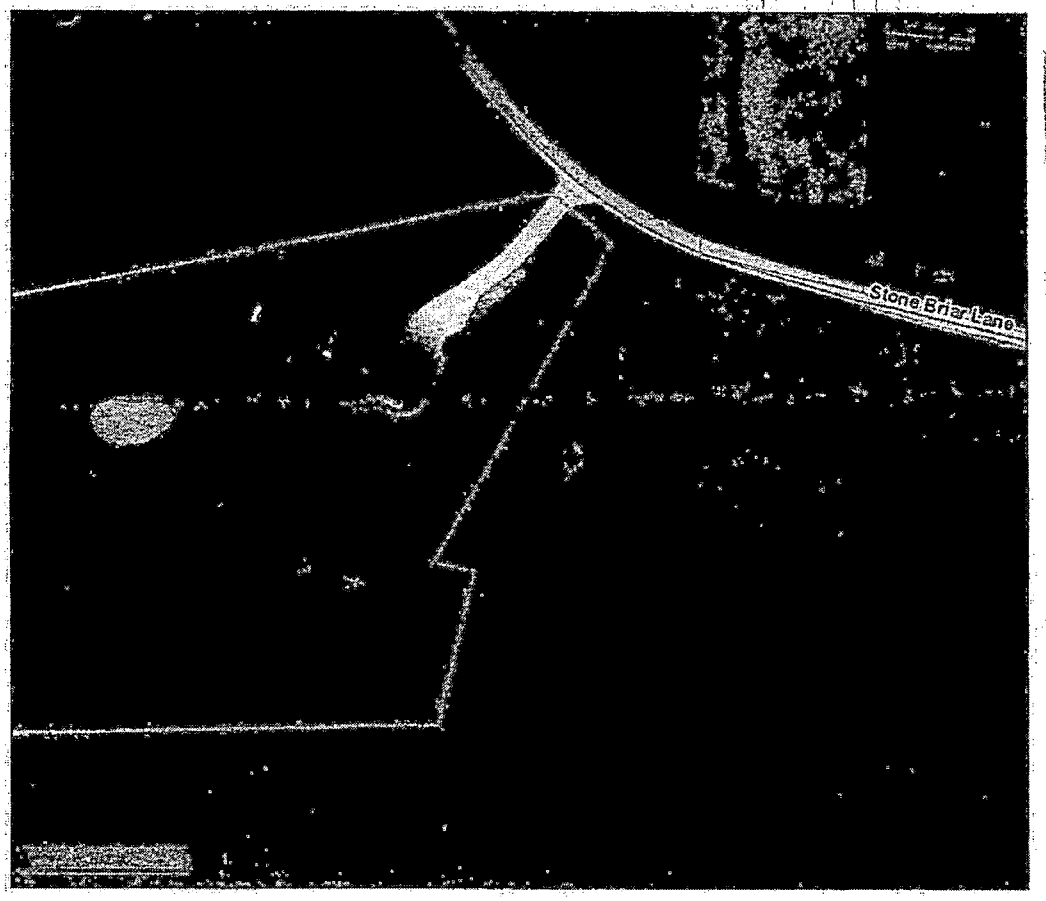
Additional Comments / Repairs needed:

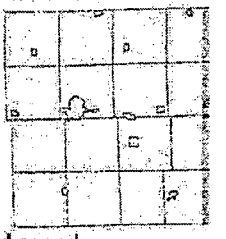
All in working condition. Keep Pump 3-4 years.

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: 12-27-19

Beacon™ Delaware County, IA





Legend
- Corporate Limits
- Political Township

Parcels
- BLL
- Parcel
- Roads

Parcel ID	180250001630	Alternate ID	n/a	Owner Address	Bauer, William A & Robin K
Sec/Twp/Rng	25-89-3	Class	R		20139 Stone Briar Lane
Property Address	20139 STONE BRIAR LANE DYERSVILLE	Acreage	2.5		Dyersville, IA 52040-8701
District	BREMEN WESTERN DUBUQUE				
Brief Tax Description	PARCEL 2014-36 PT PARCELS B & F (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 herin, or its use. Special assessments not shown.

Date created: 12/28/2019
Last Data Uploaded: 12/27/2019 12:50:27 AM

Developed by Schneider GEOSPATIAL

1250 gal tank with Riser on it
D Box is 17Ft west of tanks
D Box is 20" Deep with 4 lines out
Rock Pit = 70 Ft each.
Well is 148 Ft NW of tanks

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

Property information
Current Owner Robin Baker
Buyer _____ Realtor _____
Mailing Address 2539 Stone Briar Lane Dyersville
Site Address/County #18025000/630

No. of Bedrooms 3 Last Occupied? now Disposal? Y (N) Softener (Y) N H_2O Supply? well 148 Ft

Records Available Yes Permit/Installation Date 3-12-92 Installer Auner
#145

Septic System Information
Septic Tank(s): Size 1250 Material Concrete Condition good
Tank Pumped? Yes Date 12-27-19 Licensed Pumper Yes
Septic/Trash/Processing Tank: Size 1000 Material Concrete Condition good
Tank pumped? Yes Date 12-27-19 Licensed Pumper 358

Aerobic treatment unit (ATU) MFGR — Size _____
Tank Pumped? _____ Date _____ Licensed Pumper _____
Maintenance Contract? _____ Expiration Date _____ Service Provider _____
Condition _____

Pump Ttanks/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 70 Ft Determined by Dug up
Condition of Fields good Determined by Dug 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 working condition.

Comments: Keep tank even 3-4 years.

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: [signature] Date: 12-27-19

Name (print): Robb Harter Certficate #: 358

Address: 3031 160th Street Dyersville, Iowa 52040

Phone # 563-542-1010