

Recorded: 7/2/2021 at 4:01:24.0 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: 2021 PG: 2405

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

TRANSFEROR:

Name: Timothy L. Felderman and Kristin L. Felderman
Address: 2034 145th Ave., Manchester, IA 52057

TRANSFeree:

Name: Steven D. Proctor and Kimberly A. Proctor
Address: 4222 Shady Lane Court, Alburnett, IA 52202

Address of Property Transferred:
2034 145th Ave, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

Parcel 2018-78 Part Of Parcel B And Part Of Parcel 2016-62 In The SW¼- NE¼; In Section 26, T89N, R6W Of The Fifth P.M., Delaware County, Iowa, according to plat recorded in Book 2018, Page 2224

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)

FILE WITH RECORDER

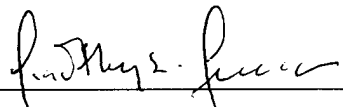
DNR form 542-0960 (July 18, 2012)

- ☐ 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:

1- functional well located approximately 30'-35'
off of the SE corner 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.: 515-209-9491

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)



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

Property information

Current Owner Tim Felderman

Buyer _____ Realtor _____

Mailing Address 2034 145th Ave. Manchester, Iowa

Site Address/County 2034 145th Ave. Manchester, Iowa

No. of Bedrooms 3 Last Occupied? present Disposal? Y / N Softener? Y / N H₂O Supply? well

Records Available yes Permit/Installation Date permit 2750 8/3/18 Installer Oasis Pump Service

Septic System Information

Septic Tank(s): Size 1000 / 250 Material concrete (Swales) Condition good

Tank Pumped? yes Date 5/17/2021 Licensed Pumper D & S st-49

Septic/Trash/Processing Tank: Size na Material na Condition na

Tank pumped? na Date na Licensed Pumper na

Aerobic treatment unit (ATU) MFGR na Size na

Tank Pumped? na Date na Licensed Pumper na

Maintenance Contract? na Expiration Date na Service Provider na

Condition na

Pump Tanks/Vaults: Type no Size na Condition na

Distribution System: Distribution Box yes Outlets Used 3 Condition good

Header Pipe(s) _____ Number of Lines 3

Pressure Dosed? no

Secondary Treatment

Length of Absorption Fields 3 @ 100' Determined by map and probe

Condition of Fields good Determined by load test

Type of Trench Material Infiltrator eq-24

Size of Sand Filter na Determined by na

Vent Pipes Above Grade? na Discharge Pipe Located? na

Effluent Sample Taken? na Results na

Media Filters: Type na

Maintenance Contract? na Expiration Date na Service Provider na

Condition na

NPDES General Permit No. 4: Required? no Permitted? no NOI submitted no



Time of Transfer Inspection Worksheet

Other Components

Alarms no Working? na Disinfection no Working? na

Control Box no Timers no Inspection Ports no

Other Components none

Overall condition of the private sewage disposal system

Acceptable? _____ Unacceptable? _____

Explain (attach additional pages as needed): _____

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.

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: Luke Ogden Date: 5/18/2021

Name (print): Luke Ogden Certificate #: 6715

Address: 207 Quaker Mill Dr. Manchester, Iowa 52057

Phone # 563-927-6503



Septic Inspection
Tim Felderman
2034 145th Ave.
Manchester, IA 52057

Description:

Home is located at 2034 145th Ave. Manchester, IA. Home consists of 3 bedrooms and 2½ bathrooms. Home has a softener and sewage lift station.

Septic Description:

Septic system was installed 1994 and was redone on August 3, 2018. A 250 gallon tank was added to the 1000 gallon existing septic tank and 300' Infiltrator was installed with a 7 hole distribution box, baffles and septic filter.

Septic Condition:

Septic system was pumped and a load test was performed at 5GPM at 60 minutes for a total of 300 gallons of water. System accepted water.

Company Disclaimer

Based on what we were able to observe and our experience with on-site wastewater technology, we submit this sanitary sewage disposal system inspection report based on the present condition of the on-site sewage disposal system. Oasis Pump Service has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time in the future. Because of numerous factors (usage, soil characteristics, previous failures, etc.) which effect the proper operation of a septic system as well as the inability of our Company to supervise or monitor the use or maintenance of the system, this report shall not be constructed as a warranty by our Company that the system will function properly for any particular buyer. Oasis Pump Service **DISCLAIMS ANY WARRANTY**, either expressed or implied, arising from the inspection of the septic system or this report. We are also not ascertaining the impact the system is having on the ground water.

I have studied the information contained herein and that my assessment is honest, thorough, and, to the best of my ability correct.

Certified by Luke Ogden #6715

Luke Ogden Date 5/18/21
P.O.

Owner: Tim Felderman 2034 145th Ave. Manchester, IA 52057



1332 N. Franklin, Manchester, Iowa 52057
563-727-6503 563-646-6503
www.oasiswell.com

OWNER: Tim Felderman

DATE: 5/17/2021

SITE ADDRESS: 2034 145th Ave

TOWN/COUNTY: Manchester / Delaware

GPS: Long: _____ Lat: _____

TANK SIZE: 1000 / 250 Plastic OR Concrete

D-BOX: 7 or 9 OUTLETS USED: 3

SECONDARY TREATMENT: EQ 24 Flat/Inlet 300'

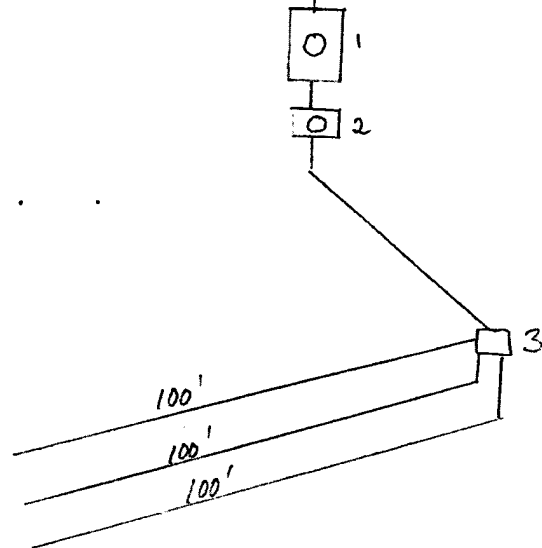
System upgraded with 250 tank + 200' leach field 8-3-2018

Garage

House

A B
Deck

A-1 = 59' 6"
A-2 = 67'
A-3 = 116'
B-1 = 60'
B-2 = 68'
B-3 = 108'



DELAWARE COUNTY

BOARD OF SUPERVISORS

redo 321

N/L

PERMIT NO. 2750

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 2034 175th Ave SECTION 26 TOWNSHIP C-6

LOCATION QT QT SEC 24 89 N R 6 W Parcel# 130 26 000 1620

Owner David Entsminger Plumber OASIS

Lot size Type Commercial Residential (No. Bedrooms) 3

Fixtures: Stools 2 Bath tubs Showers 3 Sinks 4 Automatic Laundry 1 Lift Pump

Septic tank made by old 250 Construction Material Gallon Cap. Garbage disposal

Absorption Field: Total length of Laterals 3 No. of lateral lines 100' Size of leach bed

Trench Material Chambers Secondary Treatment Type

This system is new construction Existing X

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

Delaware County Septic System Disclaimer

The issuance of a permit and the completion of the inspection required by Delaware County Ordinance No. 40 do not serve as any type of warranty, guarantee, or certification regarding the proper functioning of a private septic system for any period of time in the future. Delaware County and its employees or agents are unable to supervise or monitor the numerous factors (usage, soil characteristics, previous failures, etc.) that may affect the proper operation or the use and maintenance of the system.

The issuance of a permit and/or the completion of the inspection do not constitute any type of warranty, guarantee, or certification regarding the impact the system is or is not having on the groundwater. Delaware County and its employees or agents are not able to determine the impact a septic system is having on the groundwater.

Delaware County hereby DISCLAIMS ALL WARRANTIES, either expressed or implied, associated with this permit and the inspection required under Ordinance No. 40.

By signing below, I acknowledge that I have received and read the above disclaimer.

Name [Signature] Date 8/3/18
Applicant

I have studied the information contained herein and certify that the application complies with Delaware County Ordinance No. 40 and Iowa Administrative Code 567-69, Private Sewage Disposal Systems.

Name [Signature] Date 8-3-18
Delaware County Representative

DELAWARE COUNTY SANITATION

Application # _____

EnvTrack # _____
Permit # 2750

Completion Report for Private Sewage Disposal System

Owner: David Entsminger
Site Address: 2034 145th Ave Manchester Township: Coffee Crn
Parcel #: 12 026000 1620 Lot # _____ Legal S-T-R _____
Mailing Address: _____
Contractor: Oasis Bedroom #: 3

Water Supply: Private
Primary Treatment: Latitude: 42.492926 Longitude: -91.518870
Septic Tank Volume (g): 1000 Manuf: Subit Swook Material: Cork # Pieces: 2 # Comp: 3
Riser Ht Lid 1 (in): 29 Riser Ht Lid 2 (in): 29 Filter Brand: _____ Diameter (in): _____ Distance to well (ft): _____
Note: Effluent filter requires frequent cleaning.

Dose Tank Volume (g): _____ Pump or Siphon Dose: _____ Gallons/dose: _____ Riser Ht (in): _____ Alarm: _____
D-Box: Latitude: 42.492845 Longitude: -91.518988 Depth: _____
Subsurface Absorption Type: infiltrator Chamber Manuf: _____ Lineal Ft: 360 # Trenches: 3
Inches rock under pipe: _____ Trench Depth (in): _____ Trench width (in): _____ Distance to well (ft): _____

Surface Absorption Type: _____ Overall length (ft): _____ Overall width (ft): _____
Rock bed length (ft): _____ Rock bed width (ft): _____ Length of laterals (ft): _____ # Laterals: _____
Header pipe diameter (in): _____ Rock type: _____ Distance to well (ft): _____ Depth to bottom of trench (in): _____

Packed Bed Media Filter: _____ Sand filter length (ft): _____ Sand filter width (ft): _____ Sand filter sq ft: _____
Liner: _____ Distance to well (ft): _____ # Distributor lines: _____ # Collector lines: _____
Distributor line type: _____ Separating layer: _____ Discharge GPS (lat x long): _____

*Peat Filter: Serial #: _____ Closed or Open bottom: _____ Lineal Ft absorption: _____ # Laterals: _____
crushed rock, river rock or chamber _____ Trench width (ft): _____ Rock under pipe (in): _____
Distance to well (ft): _____ Inches soil cover over trench: _____ Discharge GPS (lat x long): _____

*Recirculating Textile Filter: Brand Name: _____ Distance to well (ft): _____
Discharge GPS (lat x long): _____ Absorption field installed after (no discharge) _____

*Note: A maintenance agreement with a manufacturer-approved contractor must be maintained for the life of the septic system.

Comments: Effluent filter requires frequent cleaning.

Was any portion of the field covered before the inspection: No System installation approved: yes

Date of Final Inspection: 8-3-18 Environmental Health Specialist: Dennis Lynn

I cannot ☐ This APPROVAL in no way makes the County responsible for the continued operation of this sanitation system