

Recorded: 8/19/2021 at 10:13:24.0 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: 2021 PG: 2975

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

TRANSFEROR:

Name: Larry J. Benn and Cheryl A. Benn
Address: 30546 Pin Oak, Dyersville, IA 52040

TRANSFeree:

Name: Brian K. Montz and Katherine R. Montz
Address: 200 Glenns Ln #214, Dunedin, FL 34698

Address of Property Transferred:
26116 209th Avenue, Delhi, Iowa 52223

Legal Description of Property: (Attach if necessary)

Lots Three (3), Four (4), Five (5), and Six (6) of the Subdivision of Lot 106 in "Clairview Acres" at Delhi, Iowa in Sections 23 and 26, Milo Township, Delaware County, Iowa, according to plat recorded in Book 3 Plats, Page 148

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

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

information of the decedent(s) is stated below or on an attached separate sheet, as necessary.

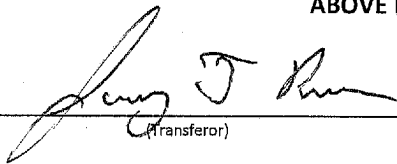
6. Private Sewage Disposal System (check one)

- ☐ 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: _____


(transferor)

Telephone No.: (563) 599-1491



Time of Transfer Inspection Report

Property Information

Seller Larry BennBuyer: N/A

Mailing Address: _____

Site Address/County: 26116 - 209th Ave., Delhi, Ia 52223 /Delaware County

Legal Description _____

No. of bedrooms: 3 Last occupied: current Records available: yesPermit/ installation date: 2275/ 7/31/2015 Separation distances (ok/no?): ok

Septic System Information

Septic tank(s): Size: 1500 gal. Material: concrete Condition: goodTank pumped? YES Date: 8/3/2021 Licensed pumper: Groth ServicesSeptic/Trash/Processing tank: Size: N/A Material: N/A Condition: N/ATank pumped? ☐ Y ☐ N Date: N/A Licensed pumper: N/AAerobic treatment unit (ATU) mfr N/A Size N/ATank pumped? Date: N/A Licensed pumper: N/AMaintenance contract? Yes N/A Expiration date: N/A Service provider: N/A

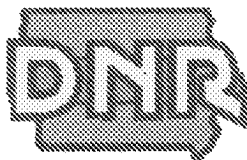
Condition: _____

Pump tanks/vaults: Type: N/A Size: N/A Condition: N/ADistribution system: Distribution box YES Outlets used 3 Condition: GOODHeader pipe(s): 1 No. of lines: 3 Pressure dosed? NO

Secondary Treatment:

Length of absorption fields: 38' Determined by: MAPCondition of fields: GOOD Determined by: HYD.Type of trench material: ROCK AN PIPESize of sand filter: N/A Determined by: N/AVent pipes above grade? N/A Discharge pipe located? _____Effluent sample taken _____ Results: N/AMedia Filters: Type: N/AMaintenance contract? ☐ Y ☐ N Expiration date: N/A Service provider: N/A

Condition: _____



NPDES General Permit No. 4: Required? ☐ Y ☐ N Permitted? ☐ Y ☐ N NOI provided: N/A

Time of Transfer Inspection Report

Other components:

Alarms: N/A Working: _____ Disinfection: _____ Working: _____

Control Box: _____ Timers: N/A Inspection Ports: N/A

Other components: N/A

Overall condition of the private sewage disposal system:

1500 Gal. concrete 2 compartment tank is in good condition at the time of inspection.

The D-Box is in good Condition, The Length of absorption fields has 3 lines of 38' of

Report system status: rock and pipe. It passed the HYD. test

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 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: Jody Antrim Date: 8/4/2021

Name (print): Jody Antrim Certificate #: 8874

Address: 20984 - 265th St. Manchester, IA 52057

Phone #: 563.920.9388

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent or the person ordering the inspection, the county sanitarian/environmental health office and to:

Iowa DNR
Private Sewage Disposal Program
502 E 9th St
Des Moines IA 50319

DELAWARE COUNTY

BOARD OF SUPERVISORS

PERMIT NO. 2275

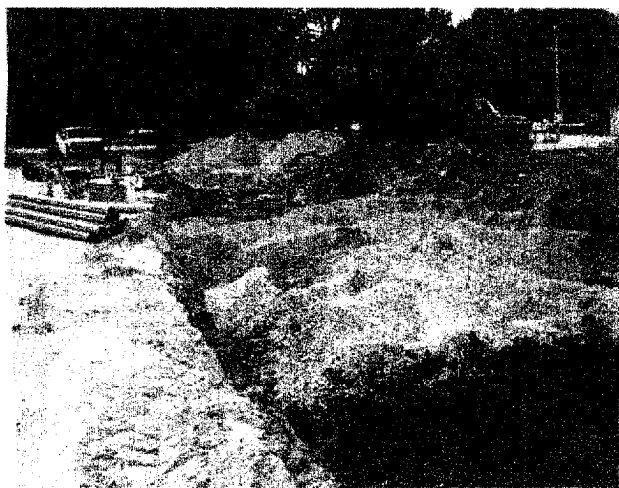
APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 26117-2nd St New Orleans SECTION 26 TOWNSHIP M:10LOCATION QT QT SEC 26 T 88 N R5 W Parcel# 250 230713300Owner Larry Bean Plumber HarburtLot size _____ Type Commercial _____ Residential (No. Bedrooms) 3Fixtures: Stools 2 Bath tubs 2 Showers 3 Sinks 3 Automatic Laundry _____ Lift Pump _____Septic tank made by Smiley Construction Material brick Gallon Cap. 1500 Garbage disposal 42 41083 91-3388Absorption Field: Total length of Laterals _____ No. of lateral lines _____ Size of leach bed 15x50Trench Material rock-pipe Secondary Treatment Type _____This system is new construction ☒ Existing _____ 42.4090 91.38876 750 sq. Ft.

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

Date Approved 7-31-14By Dennis Thompson APPLICANT'S SIGNATURE

INSPECTOR



SEWAGE DISPOSAL FINAL INSPECTION

PERMIT NO: 2275

APPLICANT: Larry Benz

PLUMBER Harbach

SITE ADDRESS 26117- 210th Ave

SEPTIC TANK SIZE 1500

EFFLUENT FILTER IN PLACE yes

MANUFACTURER Swales

DEPTH 12"

DISTANCE TO STRUCTURE OR HOME 30'

DISTANCE FROM WELL 7200

DISTRIBUTION BOX: DEPTH _____

IS IT LEVEL AND SECURE yes

DISTANCE FROM HOUSE OR STRUCTURE 24'

24- in rock and pipe

DISTANCE FROM WELL 7200

TRENCH # 1 LENGTH 50' WIDTH 15" DEPTH 24"

TRENCH # 2 LENGTH _____ WIDTH _____ DEPTH _____

TRENCH # 3 LENGTH _____ WIDTH _____ DEPTH _____

TRENCH # 4 LENGTH _____ WIDTH _____ DEPTH _____

ITEMS IF APPLICABLE

IS ANY ELECTRICAL ITEMS DONE TO CODE NA

ARE ALL BAFFLES IN CORRECT yes

DOES HOMEOWNER HAVE DRAWING AND UNDERSTAND THE USE OF EFFLUENT FILTER - no

IF TRENCHES USED DID THEY STOMP DOWN THE SIDES WITH DIRT -

IF A SAND FILTER IS INSTALLED IS IT VENTED

ANY CONCERNS BY INSPECTOR None

APPROVED (p) _____ REJECTED () WHY () INSPECTED BY Dennis Lynn

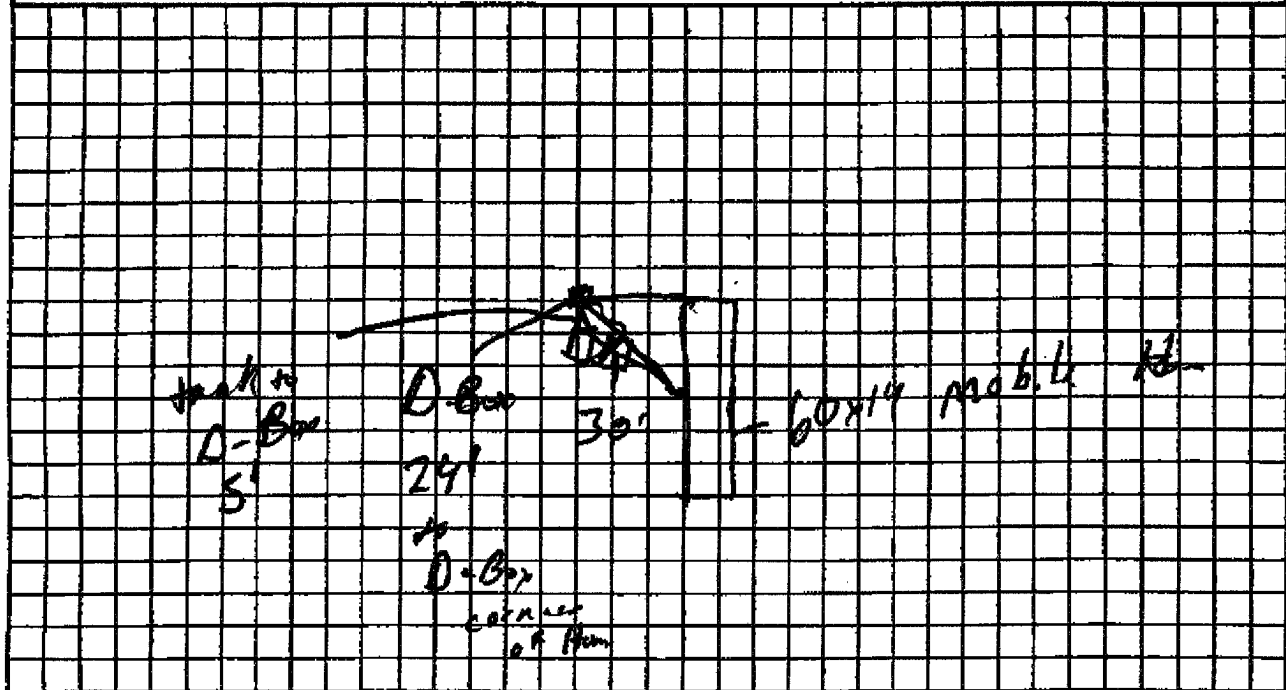
DATE 8-4-14

DELAWARE COUNTY INSPECTION SHEET

Contact Information Project ID: v 05.31.13

Property Owner/Client:

Address:



List any construction issues:

Mapping Checklist

Map scale: _____ indicate north _____ show slope _____ % direction _____

Locate

- ☐ Lot Dimensions/Property Lines
- ☐ Dwellings and Other Improvements
- ☐ Existing or Proposed System(s)
- ☐ Replacement Area
- ☐ Unsuitable Area(s)
- ☐ Public Water Supply Wells
- ☐ Pumping Access
- ☐ Inner Wellhead Zone

Easements

- ☐ Phone
- ☐ Electric
- ☐ Gas

Elevations

- ☐ Benchmark
- ☐ Borings
- ☐ Perc Tests
- ☐ Horizontal and Vertical Reference Points

Setbacks

- ☐ Building
- ☐ All water wells within 100 feet
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines
- ☐ Lot Dimensions/Property Lines

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

(Designer)

(Signature)

(License #)

(Date)

ome, septic tank, soil treatment system, additional treatment components,
supply, and other pertinent reference points. Record any know distances or
sketch of your system may have been provided along with the permit, or may be
contractor or your local health department if your system was recently installed

