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Document 2021 GWH-4121 Type 53 001 Pages 5
Date 11/29/2021 Time 3:15:42PM
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name: Chad A. Rave and Kristal A. Rave
Address: 1630 190th Ave, Manchester, IA 52057

TRANSFeree:

Name: Cody L. Naber and Kathryn J. Naber
Address: 128 Circle Dr, Manchester, IA 52057

Address of Property Transferred:
1630 190th Ave, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

That part of the Southwest Quarter (SW1/4) of the Northwest Quarter (NW1/4) of Section Three (3), Township Eighty Nine (89) North, Range Five (5), West of the Fifth Principal Meridian, described as commencing at the Northwest corner of said Southwest Quarter (SW1/4) of the Northwest Quarter (NW1/4), and running thence South 12° 19' West four hundred eighty nine and six-tenths (489.6) feet along the West line of the Northwest Quarter (NW1/4) of said Section Three (3), thence South 80° 56' East two hundred fifty two (252.0) feet, thence North 5° 20' East sixty three and three-tenths (63.3) feet, thence South 85° 40' East eighty four and eight-tenths (84.8) feet, thence North 6° 13' East one hundred ninety five (195.0) feet, thence South 89° 56' East nine hundred thirty six and six-tenths (936.6) feet, thence South 7° 33' East thirty two and six-tenths (32.6) feet, thence South 86° 39' East one hundred fifty eight and three-tenths (158.3) feet, thence North 7° 35' East two hundred seventy one (271.0) feet, thence North 46° 56' West ninety two and nine-tenths (92.9) feet, thence South 89° 27' West one thousand three hundred twenty two and eight-tenths (1322.8) feet along the North line of the Southwest Quarter (SW1/4) of the Northwest Quarter (NW1/4) of said Section Three (3) to the point of beginning.

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

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DNR form 542-0960 (July 18, 2012)

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: Chris Roe Telephone No.: (563) 920-7949
(Transferor)



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

Property information

Current Owner Chad & Kristal Rave

Buyer _____

Realtor Diers Realty

Mailing Address 1630 190th Ave. Manchester, IA 52057

Site Address/County 1630 190th Ave. Manchester, IA 52057

No. of Bedrooms 4 Last Occupied? presesnt Disposal? Y / N Softener? Y / N H₂O Supply? well

Records Available well Permit/Installation Date permit 1799 5/24/2010 Installer Erickson Construction

Septic System Information

Septic Tank(s): Size 1500 Material concrete Condition good

Tank Pumped? yes Date 11/1/2021 Licensed Pumper Kuehl Construction - Donnie Kuehl

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 Ttanks/Vaults: Type na Size na Condition na

Distribution System: Distribution Box Yes Outlets Used 4 Condition good

Header Pipe(s) 4 Number of Lines 4

Pressure Dosed? no

Secondary Treatment

Length of Absorption Fields 4 @ 80' Total 320' Determined by Map and Permit

Condition of Fields Good Determined by Load Test

Type of Trench Material Infiltrator

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 na Timers na Inspection Ports na

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: 11/12/2021
Name (print): Luke Ogden Certificate #: 6715
Address: 207 Quaker Mill Dr. Manchester, IA 52057
Phone # 563-927-6503



Septic Inspection
Chad & Kristal Rave
1630 190th Ave.
Manchester, IA 52057

Home Description:

Home is a 2 story home with 4 bedrooms and 2 bathrooms with a water softener.

Septic Description:

Septic system was installed May 24, 2010 – permit #1799. Septic consists of a 1500 gallon 2 compartment concrete septic tank, 1 – 7 hole distribution box, 4 – 80' lines of Infiltrator for a total of 320'.

Septic Condition:

Septic tank was pumped by Kuehl Construction: a water load test was performed at 3.5GPM for 80 minutes. Leach filed accepted the 280 gallons of water. Distribution box is 16" below grade, leach field is 24-30" in depth.

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 4/12/21
T.O.

Owner: Chad and Kristal Rave 1630 190th Ave. Manchester, IA 52057