



Book 2022 Page 1054

Document 2022 GWH-1054 Type 53 001 Pages 9  
Date 4/01/2022 Time 8:43:00AM  
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR  
DELAWARE COUNTY IOWA

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

**TRANSFEROR:**

Name: Zachary G. Lyness  
Address: 1510 275th Street, Ryan, IA 52330

**TRANSFeree:**

Name: Richard Schwarte  
Address: 2805 150th Ave., Ryan, IA 52330

Address of Property Transferred:  
2805 150th Ave., Ryan, Iowa 52330

Legal Description of Property: (Attach if necessary)  
Parcel 2018-19 Part of the NE¼ of the NE¼ Section 2, T87N, R6W of the Fifth P.M., Delaware County, Iowa  
according to plat recorded in Book 2018, Page 649

**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.

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

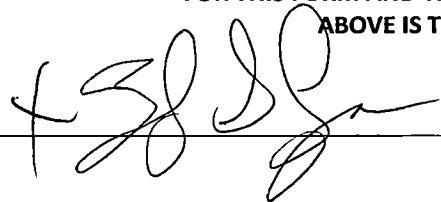
- ☐ This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
- ☒ There is a building served by private sewage disposal system on this property or a building without any lawful sewage disposal system. A certified inspector's report 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 10' South 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.: \_\_\_\_\_

(972) 745-1814



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

### Property information

Current Owner Elizabeth Lyness

Buyer \_\_\_\_\_

Realtor \_\_\_\_\_

Mailing Address 2805 150th ave Ryan, Iowa

Site Address/County 2805 150th ave Ryan, Iowa

No. of Bedrooms 3 Last Occupied? present Disposal? Y / N Softener? Y / N H<sub>2</sub>O Supply? well

Records Available yes Permit/Installation Date permit 2632/6/19/2017 Installer Gudenkauf Tilling

### Septic System Information

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

Tank Pumped? yes Date 5/19/2020 Licensed Pumper 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 na Size na Condition na

Distribution System: Distribution Box yes Outlets Used 3 Condition good

Header Pipe(s) 3 Number of Lines 3

Pressure Dosed? no

### Secondary Treatment

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

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 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): Load test was performed at 5gpm for 60min. System accepted water very well.

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: 5/21/2020

Name (print): Luke Ogden Certificate #: 6715

Address: 207 Quaker mill dr. Manchester, Iowa

Phone # 563-927-6503

DELAWARE COUNTY  
BOARD OF SUPERVISORS

PERMIT NO. 2632

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 2805 150th Ave Ryan SECTION 2 TOWNSHIP Adams  
LOCATION QT     QT     SEC 2 T 87 N R 6 W Parcel# 29002000 1500  
Owner Elizabeth Lyness Plumber Gadenhauf  
Lot size 78 Type Commercial     Residential (No. Bedrooms) 3  
Fixtures: Stools 1 Bath tubs     Showers 1 Sinks 2 Automatic Laundry 1 Lift Pump      
Septic tank made by Swales Construction Material Crete Gallon Cap. 1500 Garbage disposal      
Absorption Field: Total length of Laterals 3-4 No. of lateral lines 300 Size of leach bed      
Trench Material Chambers Secondary Treatment Type      
This system is new construction X Existing    

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. 19 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. 19.

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

Name Elizabeth Lyness Date 6-19-2017  
Applicant

I have studied the information contained herein and certify that the application complies with Delaware County Ordinance No. 19 and Iowa Administrative Code 567—69, Private Sewage Disposal Systems.

Name Dennis Lyness Date 6-19-17  
Delaware County Representative

DELAWARE COUNTY SANITATION

EnvTrack #

Application #

Permit # 2432

Completion Report for Private Sewage Disposal System

Owner: Beth Lyness  
 Site Address: 2805 15th Ave Township: Adams  
 Parcel #: 29002000 1500 Lot # \_\_\_\_\_ Legal S-T-R: 2-87-6  
 Mailing Address: \_\_\_\_\_  
 Contractor: Goodheart Bedroom #: 3

Water Supply: Private

Primary Treatment: Latitude: 42.38308 Longitude: -91.50102

Septic Tank Volume (g): 1500 Manuf: \_\_\_\_\_ Material: \_\_\_\_\_ # Pieces: \_\_\_\_\_ # Cmp: \_\_\_\_\_

Riser Ht Lid 1 (in): 24" Riser Ht Lid 2 (in): 12" Filter Brand: poly 6 Diameter (in): 4 Distance to well (ft): 75'

Note: Effluent filter requires frequent cleaning.

Dose Tank Volume(g): \_\_\_\_\_ Pump or Siphon Dose: \_\_\_\_\_ Gallons/dose: \_\_\_\_\_ Riser Ht (in): \_\_\_\_\_ Alarm: \_\_\_\_\_

D-Box: Latitude: 42.38445 Longitude: -91.49797 Depth: \_\_\_\_\_

Subsurface Absorption Type: Chamber Chamber Manuf: \_\_\_\_\_ Lineal Ft: 300 # Trenches: 3

Inches rock under pipe: \_\_\_\_\_ Trench Depth (in): 24" Trench width (in): 3' Distance to well (ft): 100'

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.

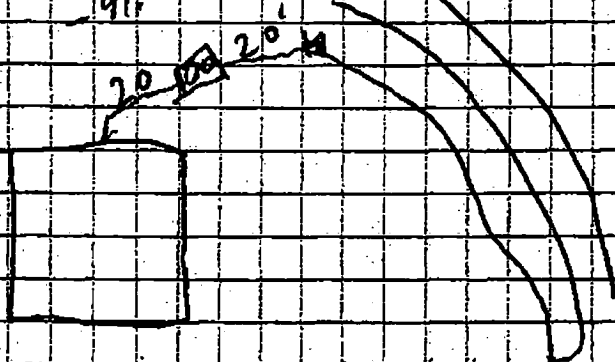
Was any portion of the field covered before the inspection: no System installation approved: yes

Date of Final Inspection: 6-21- Environmental Health Specialist: [Signature]

Scanned ☐ \_\_\_\_\_

This APPROVAL in no way makes the County responsible for the continued operation of this sanitation system

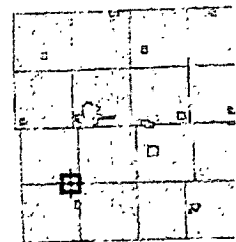
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91 50002



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**Overview**



**Legend**

- ☐ Corporate Limits
- ☐ Parcels
- ☐ <all other values>
- Yes
- Roads

Parcel ID	290020001500	Alternate ID	n/a	Owner Address	Lyness, Elizabeth M
Sec/Twp/Rng	2-87-6	Class	A		2805 150th Ave
Property Address	2805 150TH AVE	Acreage	77.81		Ryan, IA 52330
	RYAN				
District	ADAMS WEST DELAWARE FD 11				
Brief Tax Description	N 1/2 NE				
	(Note: Not to be used on legal documents)				

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## CONNECTEXPLORER

Elizabeth Lyness

Options

Group Filter

Line

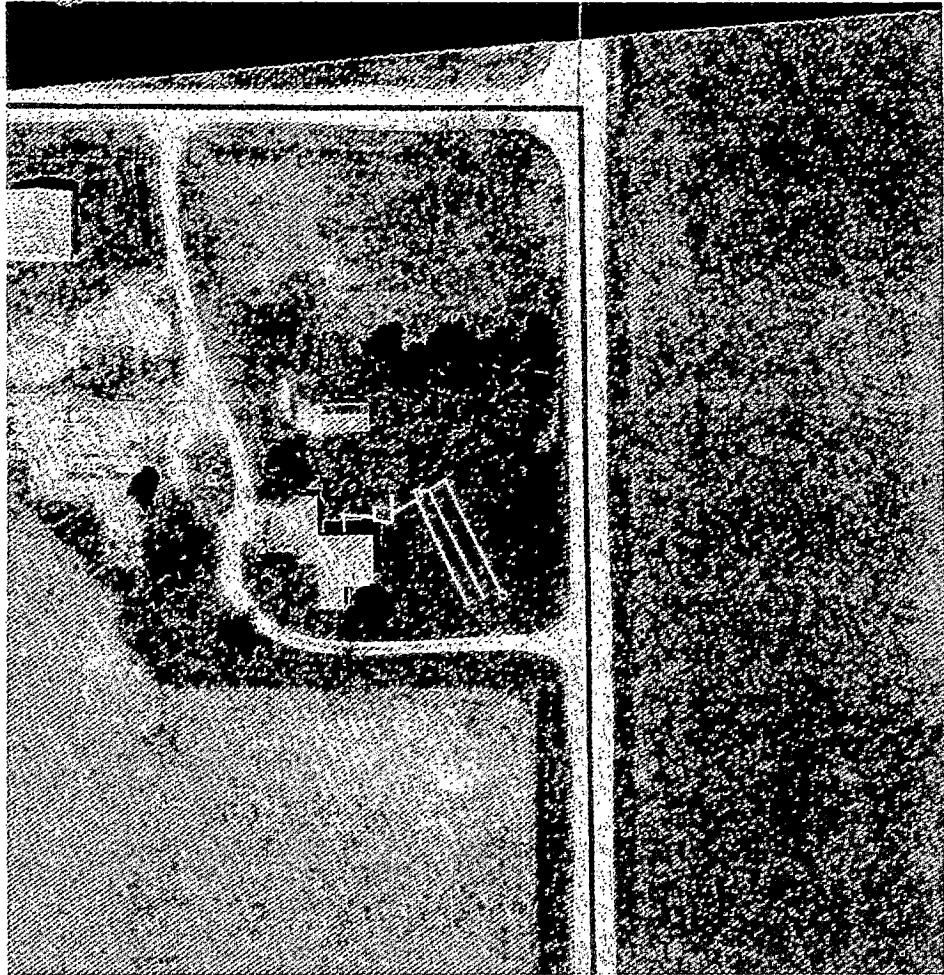
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