

Recorded: 4/15/2022 at 2:21:50.0 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: 2022 PG: 1216

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

TRANSFEROR:

Name Jon M. Dunn Kristina M. Dunn

Address 3242 Natual Dam Rd. Natural Dam AR 72948
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Elizabeth Blank

Address 4546 Spencers Grove Rd. Walker IA 52352
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
3146 140th Ave. Ryan IA 52352
Number and Street or RR City, Town, or P.O. State Zip

Legal Description of Property: (Attach if necessary) _____

See Exhibit A

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.
- ☐ 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:

Well is approx. 30' east of home, active and drilled.

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

Signature: _____

(Transferor or Agent)

Telephone No.: (319) 929-4119

Exhibit A

That part of the Southwest Quarter (SW1/4) of the Northwest Quarter (NW1/4) of Section Twenty Three (23), Township Eighty Seven (87) North, Range Six (6), West of the Fifth P.M. described as commencing at the Southwest corner of said Northwest Quarter (NW1/4), thence East five hundred (500) feet, thence North five hundred (500) feet, thence West five hundred (500) feet to the West line of said Section, thence South five hundred (500) feet to the place of beginning



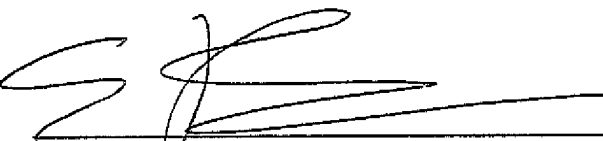
IOWA DEPARTMENT of NATURAL RESOURCES
TIME of TRANSFER INSPECTION AGREEMENT
BINDING AGREEMENT for FUTURE INSPECTION

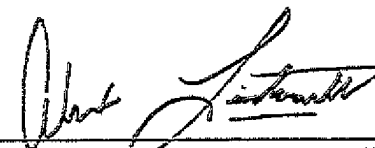
542-0062 310230000500

This agreement, in accordance with Iowa Code 455B.172 (11), is entered into this 13th day of April 20 22 by and between Delaware County Board of Health and Elizabeth Bunk. It is agreed that due to weather or other

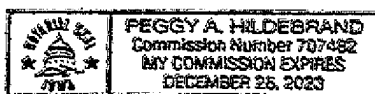
temporary physical conditions that prevent the certified inspection of the private sewage disposal system at the property located at 3146 140th Ave Ryan from being conducted, that the required inspection shall be completed no later than July 1st, 20 22. The buyer further agrees to be responsible for any required modifications to the private sewage disposal system as identified by the certified inspection.

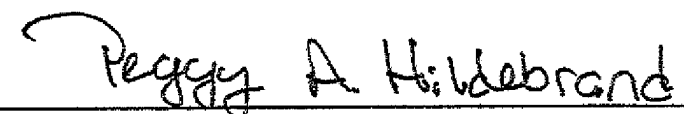
Dated the 13th day of April 20 22.


PROPERTY BUYER


COUNTY BOARD OF HEALTH or AUTHORIZED REPRESENTATIVE

This instrument was acknowledged before me on April 13, 20 22
by, Alex Linderwell




Notary Public