

300k 2022 Page 1489

Document 2022 GWH-1489 Type 53 001 Pages 12 Date 5/10/2022 Time 11:21:04AM Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR DELAWARE COUNTY 10WA

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT

TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name: Kelly D. Salow

Address: 24704 207th Avenue, Delhi, IA 52223

TRANSFEREE:

Name: Jason M. Williams and Brandy L. Williams as trustees of The Jason and Brandy Williams Family Trust

dated May 30, 2017

Address: 2886 61st Street Lane, Vinton, IA 52349

Address of Property Transferred:

24704 207th Avenue, Delhi, Iowa 52223

Legal Description of Property: (Attach if necessary)

Parcel 2021-138, Part Of The NW1/4-SE1/4 & Part Of the SW1/4 SE1/4, all in Section 14, T88N, R5W Of The Fifth P.M., Delaware County, Iowa, according to the plat recorded in Book 2021, Page 4086; also all lake frontage adjacent to said Parcel 1021-138 running to the water's edge, then from the water's edge to the middle of the Maquoketa River in directions forming right angles upon intersection with the middle thread of the Maquoketa River

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)

- 5. Private Burial Site (check one)
 - ☑ There are no known private burial sites on this property.

contained are listed below or on an attached separate sheet, as necessary.

FILE WITH RECORDER

DNR form 542-0960 (July 18, 2012)

	There is a private burial site on this property. The location(s) of the site(s) and known identifying
C Dul	information of the decedent(s) is stated below or on an attached separate sheet, as necessary.
	rate Sewage Disposal System (check one)
	All buildings on this property are served by a public or semi-public sewage disposal system.
. Ц	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.
Ц	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
Inform	ation 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.
	ABOVE IS TRUE AIND CORRECT.
Signatu	re: Telephone No.: (563) 213-0518
	sell Location - Utility room, beside hotwater
,	1) I woom, beside notwer
1 1	Jell Location -
	heater



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

Current Owner Kelly Salow	
Buyer Re	altor Susie Meyer
Mailing Address 24704 207th ave Delhi la	<u> </u>
Site Address/County 24704 207th ave Delhi	
No. of Bedrooms 3 Last Occupied? present Disposa	ıl? Y/N Softener? Y/N H ₂ O Supply? well
Records Available yes Permit/Installation Date permit	t#2823 7/11/2019 Installer Dempster
Septic System Information	
Septic Tank(s): Size 1250 Material cond	rete Condition good installed 1998
Septic Tank(s): Size 1250 Material conc Tank Pumped? yes Date 4/29/2022	Licensed Pumper st-49
Septic/Trash/Processing Tank: Size na Mat	erial 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	
Distribution Systems Distribution Day ves 7 hole Out	lota Used 2 Condition good
Distribution System: Distribution Box yes 7 hole Out	Number of Lines 2
Pressure Dosed? no	Number of Lines
Tressure Dosed:	
Secondary Treatment	
	Determined by map and probe
Length of Absorption Fields 2@ 90' total Condition of Fields 900d	Determined by water load test
Type of Trench Material ez flow 3' wide	
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 Ecoflo 3.4- ABE 941 gravity	
Maintenance Contract? yes Expiration Date 202	Service Provider Oasis
Condition good	
NPDES General Permit No. 4: Required? no P	ermitted? no NOI submitted no

10-2008 542-0191



Time of Transfer Inspection Worksheet

Other Components

Alarms no Wo	orking? na	Disinfection no	Working? na
Control Box no	Timers no	Inspection	Ports no
Other Components			
·	·		
Overall condition of the	private sewage disposal	system	
Acceptable?	Un	acceptable?	
7/11/2019. The ecoflo has been last	serviced 11/8/2021. The septic tan	k was pumped 4/29/2022 . A water l	n 1998. The Ecoflo system was installed oad test was preformed on 4/29/2022 with 300
gallons of water and excepted vi	ery well. The permit, map, maint	tenance agreement, are attached	with septic inspection.
Comments:			
-			
Verify that controls are so Power is on to all components to Gather all tools for removerify that no sewage is	onents. o verify lids are secure. eval from the site.	ode.	
Using this worksheet, w		the inspection results.	
Submit a copy of this rep DNR and the county Rec			environmental health office, the
This report indicates the does not guarantee that i			at the time of the inspection. It
Signature of Certified In	spector:	<u> </u>	Date: 4/29/2022
Name (print): Luke Ogden			Certficate #: 6715
Address: 207 Quaker Mill Dr.	Manchester, Iowa		<u> </u>
Phone # 563-927-6503	<u> </u>	<u>.</u>	

10-2008 542-0191

BOARD OF SUPERVISORS

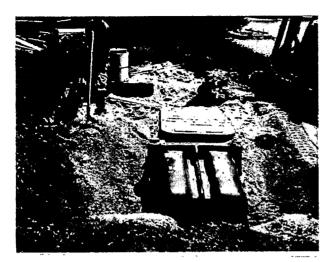
PERMIT NO. 2823

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM			
ADDRESS 24704 20702 Aug Dalhi SECTION 14 TOWNSHIP Mile			
LOCATION QT QT SEC 14 T 88 N R 5 W Parcel# 250 1405 00 100			
Owner Kelly Salow Plumber Demoster			
Lot sizeType CommercialResidential (No. Bedrooms) 3			
Fixtures: Stools 4 Bath tubs Showers 2 Sinks 3 Automatic Laundry / Lift Pump			
Fixtures: Stools 4 Bath tubs Showers 2 Sinks 3 Automatic Laundry Lift Pump Septic tank made by old to st Construction Material cost Gallon Cap. 1250 Garbage disposal			
Absorption Field: Total length of Laterals No. of lateral lines Size of leach bed			
Trench Material EZ F/6W Secondary Treatment Type ECG Pla			
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. Tank $p = f$: 1998			
Delaware County Septic System Disclaimer			
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.			
NameDate			
Applicant			
I have studied the information contained herein and certify that the application complles with Delaware			
County Ordinance No. 40 and Iowa Administrative Code 567—69, Private Sewage Disposal Systems.			
Name Dennis from Date 7-3-19			
Delaware County Representative			

DELAWARE COUNTY SANITATION EnvTrack# Application # Permit # 2823 Completion Report for Private Sewage Disposal System Owner: Site Address: Township: Parcel #: Legal S-T-R Mailing Address Contractor: Bedroom #: Water Supply: Mr: val Latitude: 42, 436/2 Primary Treatment: Longitude: Septic Tank Volume (g): /250 Manuf: C-- # Pieces: Swelse Material: # Cmp: 2 Riser Ht Lid 1 (in): 27 Riser Ht Lid 2 (in): 27 Filter Brand: 1/00 Diameter (in): 7 Distance to well (ft): Note: Effluent filter requires frequent cleaning. Volume(g): Pump or Siphon Dose: Gallons/dose: Riser Ht (in): Alarm: Latitude: 42-3 300 Langitude: -21.38878 Death: 18" Dose Tank D-Box: Longitude: ~9/238878 Subsurface Absorption Type: Chamber Manuf: Lineal Ft: inches rock under pipe: Trench Depth (in): Trench width (in): Distance to well (ft): Surface Absorption Type: Overall length (ft): 106 Overall width (ft): 3 Rock bed length (ft): Length of laterals (ft): 50 Header pipe diameter (in): Distance to well (ft): Depth to bottom of trench (in): Packed Bed Media Filter: ABE 997 Sand filter length(ft): Sand filter width (ft): Sand filter sq ft: Distance to well (ft): # Distributor lines: # Collector lines: Distributor line type: Separating layer: Discharge GPS (lat x long): Closed or Open bottom: Clos. Lineal Ft absorption: /00 # Laterals. *Peat Filter: Serial #: ABE 941 Trench width (ft): crushed rock, river rock or chamber Rock under pipe (in): Distance to well (ft): Inches soil cover over trench: 24 ' 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 comments: Effluent filter requires frequent cleaning. as any portion of the field covered before the inspection: ho System installation approved:

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

ate of Final Inspection: 7-1/-19 Environmental Health Specialist:

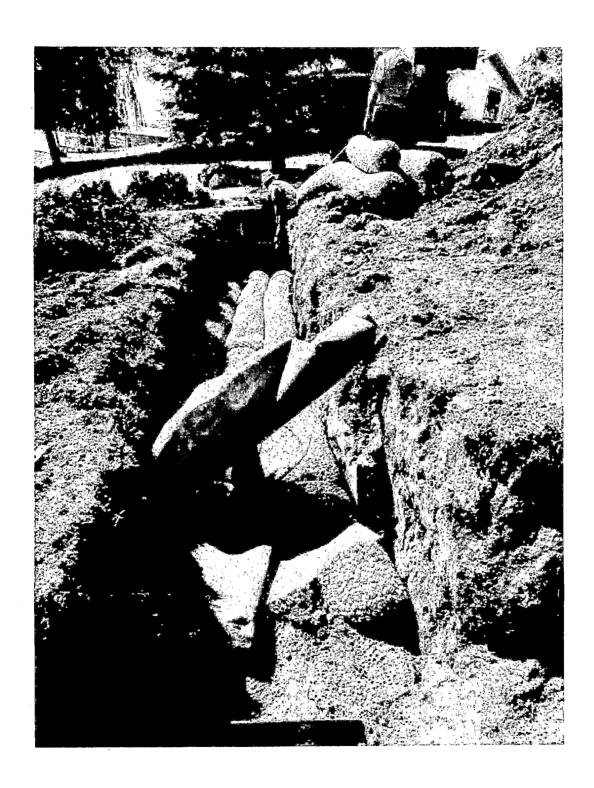












ECOFLO STANDARD MAINTENANCE AGREEMENT

Between:

OASIS PUMP SERVICE

1332 N. Franklin St.

Maintenance Contractor:

·	Manchester, IA 52057	
	Phone: 563-927-6503	
Herinafter called "Maintenance	e Contractor" and	
Customer's Name:	Kelly Salow	Phone:
Address of Installation:	24704 207 th Ave.	
	Delhi, IA 52223	Date Installed: July 2019
Mailing Address:	- Same as Above.	
Hereinafter called the "User"		
USER SYSTEM INFORMATION:		
Number of Ecoflo Biofilters:		
Ecoflo Biofilter Shell In:	Fiberglass Rotomole	dConcrete
Model #/Serial #:ABE-941		
Garbage Disposal Install		
Water Softener Installed	1	
The USER has purchased an Ec services, subject to the followi <u>TERMS:</u>	·	stract with MAINTENANCE CONTRACTOR for maintenance
Annual Cost \$ 150.00		The state of the s
Additional Cost for:	Repair Parts	
	Additional Peat	
	Pumping and Disposal	
	BOD Sampling	
CONDITIONS:		
Annually:		
- Inspect-Site-	e and the	and the second s
- Remove lid and distri	bution plates and rake peat	smooth (get rid of water channeling).
 Add peat if necessary 	<i>(</i> .	
- Check operation of ti	pping tray and pump (if appl	iicable)
- Take pictures, docum	nent and file accordingly	
- Seal up system and r	eport to owner any findings.	
	Λ	
Signatures: ,,///	7 . (/	9-010
USER: Kuly =	edru-	Date: 8 8/1
MAINTENANCE CONRACTOR:	Oasis Pump.	Service Date: 8/14/19

PREMIER TECH AQUA Ecofio ® Biofilter Maintenance Report	Type of Equipment: O ST650 O Other Serial No: ABS 9 41 Last 4 digits	GPS Location Latitude: Longitude: Map:			
Name: Kelly Salow		Date: 1/8/2021			
Address: 24704 367th Ave. Delii, 1A Work Order #					
Phone:	Celiphone:				
Did you access the biofilter? Is the lid (cover) accessible to perform NO? Why?		O No O No			
Is this property in front of a lake or a riv Were you able to remove the tipping b Is there water in zone? (only >4" of co Is the central support Cap in place? Is the tear drop vent clear or obstructe Is the tipping bucket functional or not f What is the level status of the tipping b Are the distribution plates & supports i Are the distribution plates in place? Are the distribution plate supports in g Is there water on the filtering media Bi Indicate if there is still water on the filtering Are there roots in the filter?	ucket and/or the distribution oncern) O Yes How In place of Clear or Clear oncern oncern or Clear oncern o	O Non Functional O Impossible to adjust O Level Adj done O Yes O No O Yes O No O Yes No O Yes O No			
If there are roots, what is the distance	between the filter and the tro	ees?feet			
is the shell in good condition or broken indicate the zone where the sh	• 1	dition O Broken			
What is the compaction level of the fill (distance between the peat and the distrib	ter media? (<12" O rution plates)	12-15" O >15"			
In what condition is the filtering media	? Good	O Degraded O Very Degraded			
What flyer(s) did you leave? O Inacco					

problems, components broken, landscape modifications, water infiltration problems, etc...



1332 N. Frankiin, Manchester, Iowa 52057 569-927-6503 688-666-6503 www.oasiswell.com

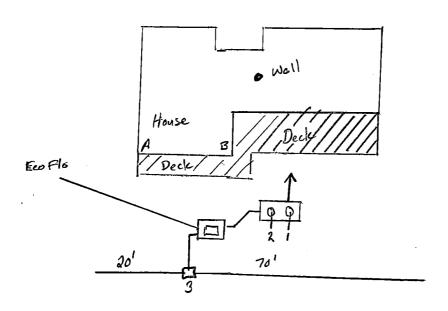
OWNER: |Celly Salow DATE: 4 29 2022

SHTE ADDRESS: 24704 207 Ave Delh: TOWN/COUNTY: Delhi / Delaware

GPS: Long: -91, 38873 Lat: 42.43007

TANK SIZE: 1250 Plastic OR Concrete D-BOX: 7 or 9 OUTLETS USED: 2

SECONDARY TREATMENT: Feo Flo 3.4 with 90 6-2 Flow leach Faild.



A-1 = 52 A-2 = 52 A-3 = 47 B-1 = 17 B-2 = 19'6" B-3 = 37'6" Well to Tank > 50' Well to Distrubuten Box > 100'.