



Book 2022 Page 2632

Document 2022 GWH-2632 Type 53 001 Pages 1:  
Date 9/02/2022 Time 9:54:12AM  
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR  
DELAWARE COUNTY IOWA

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

**TRANSFEROR:**

Name: Jennifer L. Wall and Dustin W. Wall  
Address: 2145 235th Avenue, Manchester, IA 52057

**TRANSFeree:**

Name: Peyton L. Kilburg and Ashleigh N. Kilburg  
Address: 8239 Ginger Court, Peosta, IA 52068

Address of Property Transferred:  
2145 235th Avenue, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

Parcel 'J' Being Part Of The Southeast Quarter Of The Northwest Quarter (SE1/4-NW1/4) Of Section 32, Township 89 North, Range 4 West Of The Fifth Principal Meridian, Delaware County, Iowa, And Parcel 'K' Being Part Of The Southeast Quarter Of The Northwest Quarter (SE1/4-NW1/4) And Part Of The Northeast Quarter Of The Southwest Quarter (NE1/4-SW1/4) Of Section 32, Township 89 North, Range 4 West Of The Fifth Principal Meridian, City Of Delaware, Delaware County, Iowa, according to plat recorded in Book 2012, Page 884

**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:

\_\_\_\_\_  
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) 599-8440

Well located west side of house

**TIME OF TRANSFER INSPECTION TOT# 1673 ROBB HARTER CERT # 9343****Site Information**Parcel Description: **160320000700**Address: **2145 235th Ave., Manchester, IA 52057**County: **Delaware****Owner Information**Property is owned by a business: **No**

Business Name:

Owner Name: **Wall, Dustin W & Hawker, Jennifer W**

Email Address:

Address: **2145 235th Ave., Manchester, IA 52057**

Phone No:

**Site related information**No Of Bedrooms: **4**Inspection Date: **08/12/2022**Facility Type: **Residential**Currently Occupied: **Yes**

Last Occupied:

System Installation Date: **10/05/2013**Permit issued by County: **Yes**Permit Number: **2116**All plumbing fixtures enter septic system: **Yes**County contacted for records: **Yes**

Property Information Comments:

**Primary Treatment****Tank 1**Tank Name: **Tank 1**Type: **Septic Tank**Tank Size (Gal): **1500**Tank Material: **Concrete**Tank Corrosion Type: **None**Liquid Level Type: **Normal**No. of Compartments: **2**Pump Tank Chamber: **Yes**Licensed Pumper Name: **Harter**Date Pumped: **8/12/2022**Meets Setback to Well: **Yes**Well Type: **Private**Distance To Well (Ft): **126**Is Accessible: **Yes**Lid Intact: **Yes**Risers Intact: **Yes**Effluent Filter Present: **Yes**Watertight: **Yes**

Tank/Vault Pumped: **Yes**      Inlet Baffle Present: **Yes**      Outlet Baffle Present: **Yes**      Functioning as Designed: **Yes**  
Tank Comments: **Functioning as designed.**

General Primary Treatment Comments:

Distribution Type

**Distribution Box 1**

Label: **Distribution Box 1**      Material Type: **Plastic**      Accessible: **Yes**  
Box Opened: **Yes**      Baffle Present: **No**      Speed Levelers Present: **No**  
Watertight: **Yes**      Functioning As Designed: **Yes**

General Distribution System Comments : **5ft 8in depth**

Secondary Treatment

**Absorption Bed1**

Distribution Type: **Distribution Box**      Material Type: **Rock and PVC Pipe**      Absorption Bed Width: **20**  
Absorption Bed Length: **60**      Total Absorption Area: **1200**      System Hydraulic Loaded: **Yes**  
Gallons Loaded: **400**      Meets Setback to Well: **Yes**      Well Type: **Private**  
Distance To Well (Ft.): **166**      Absorption Bed Probed: **Yes**      Saturation or Ponding Present: **No**  
Grass Cover Present: **Yes**      System Located on Owner Property: **Yes**      Easement Present: **N/A**  
Functioning as Designed: **Yes**  
Comments:

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **Everything is in working condition. There is a filter on the lid which needs to be cleaned once a year. Pump tank every 2 to 3 years.**



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS  
LT. GOVERNOR ADAM GREGG  
DIRECTOR KAYLA LYNN

## TIME OF TRANSFER INSPECTION TOT# 1673 ROBB HARTER CERT # 9343

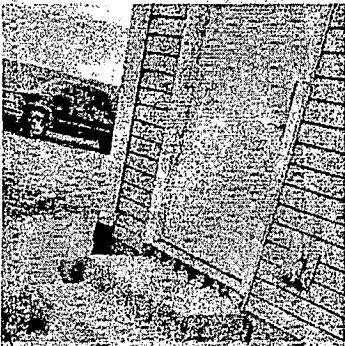
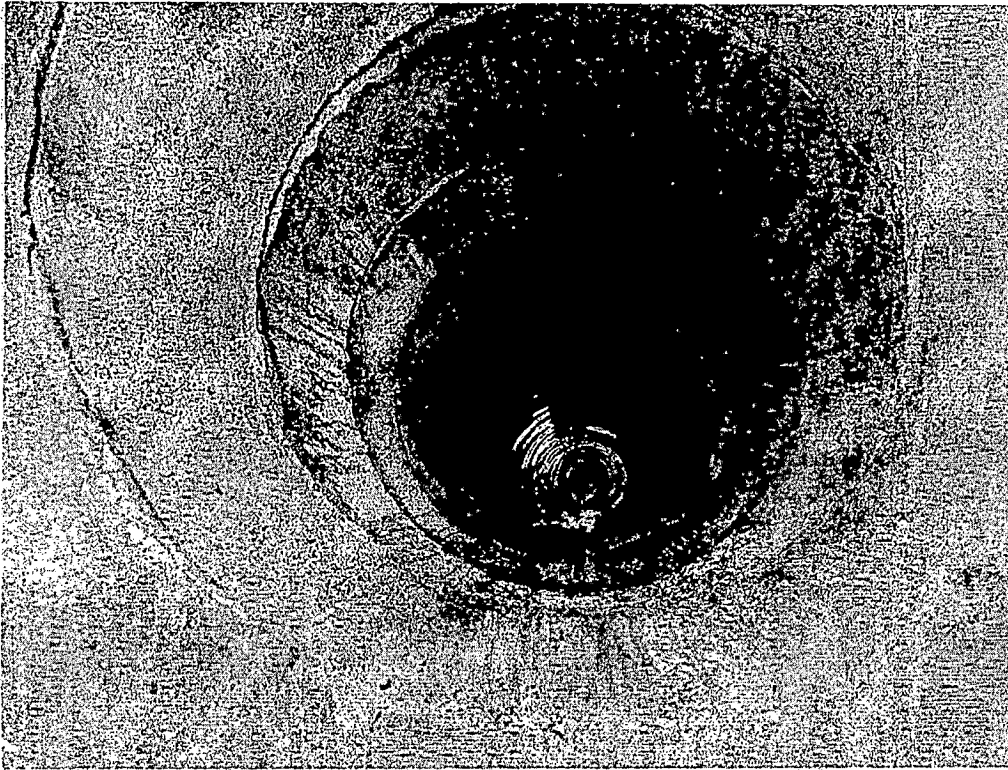
Owner Name: Wall, Dustin W & Hawker, Jennifer W

Address: 2145.235th Ave., Manchester, IA 52057

County: Delaware

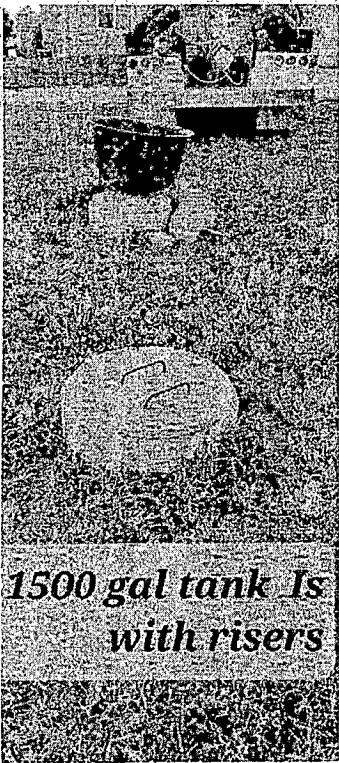
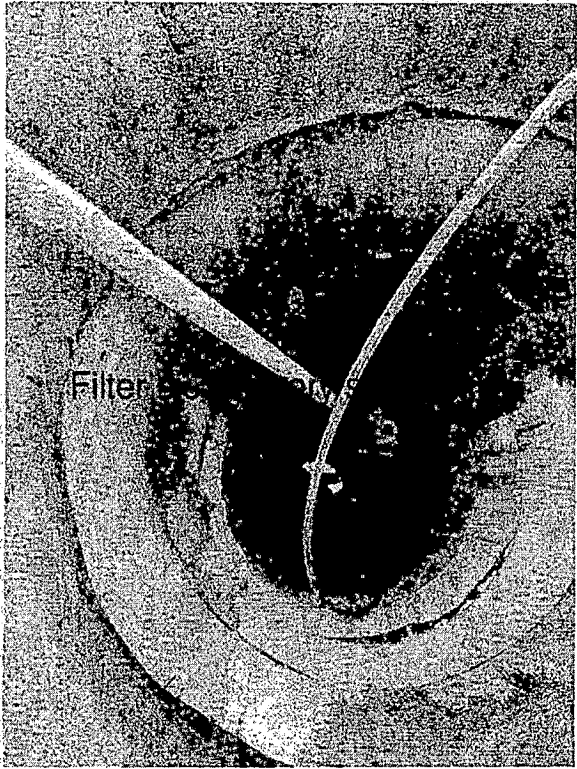
Inspection Date: 08/12/2022

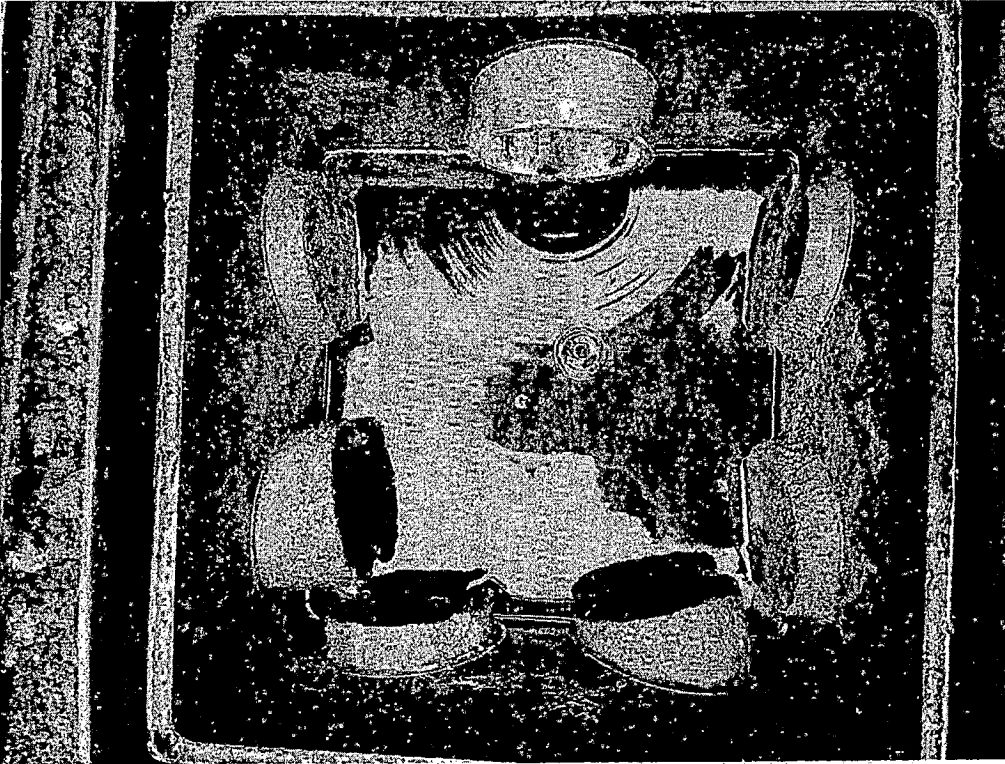
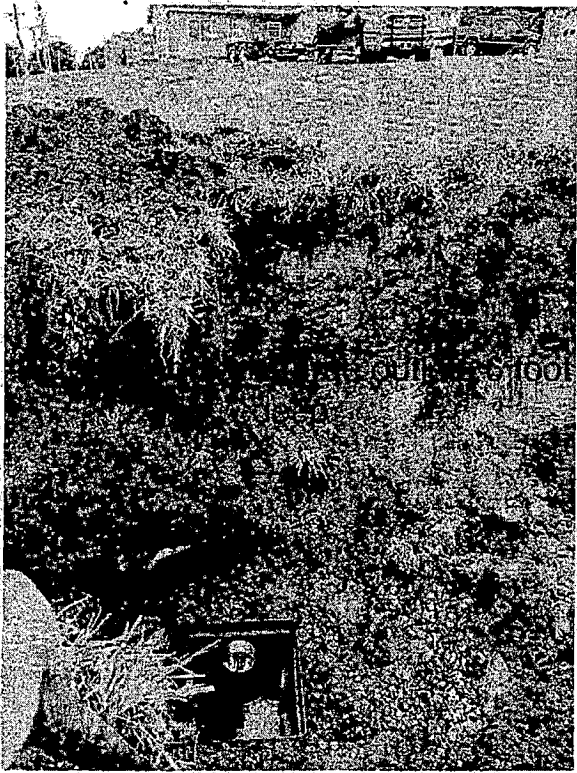
Submitted Date: 8/17/2022

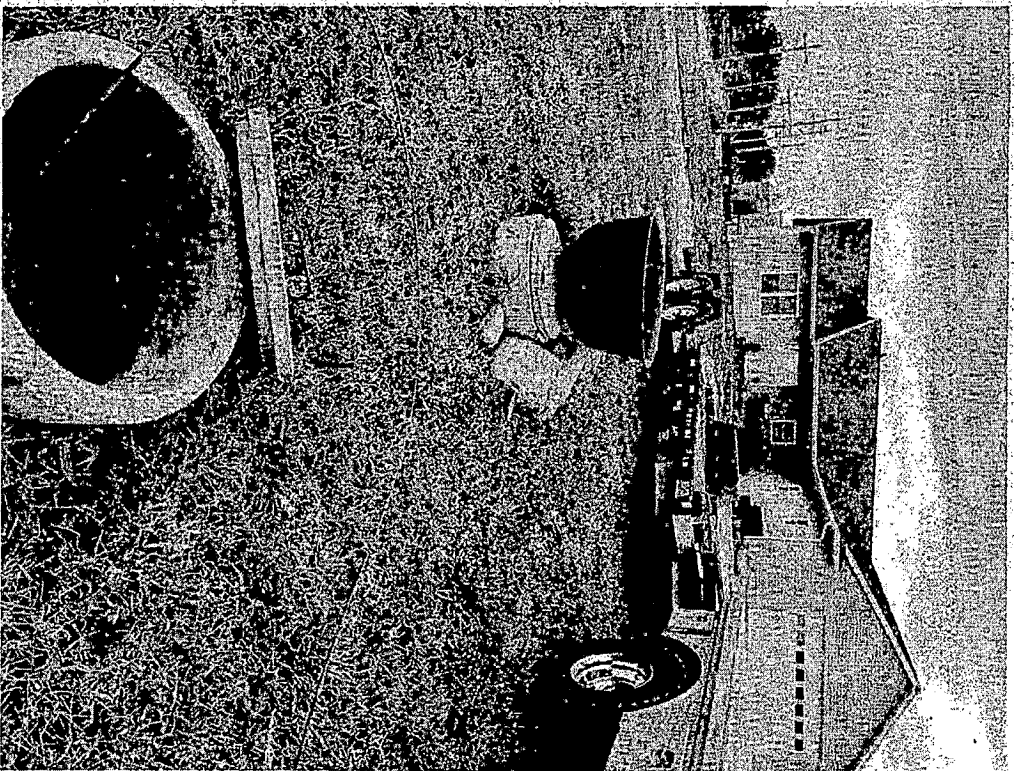
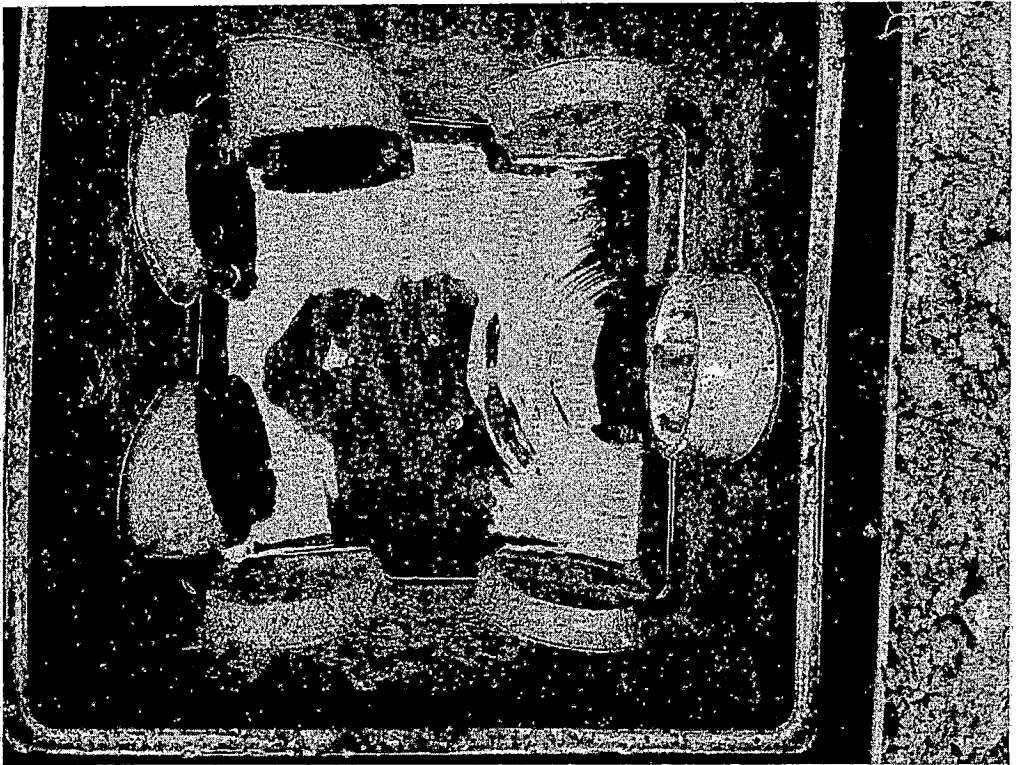


*126 ft well to tank*











# Site Evaluation Map

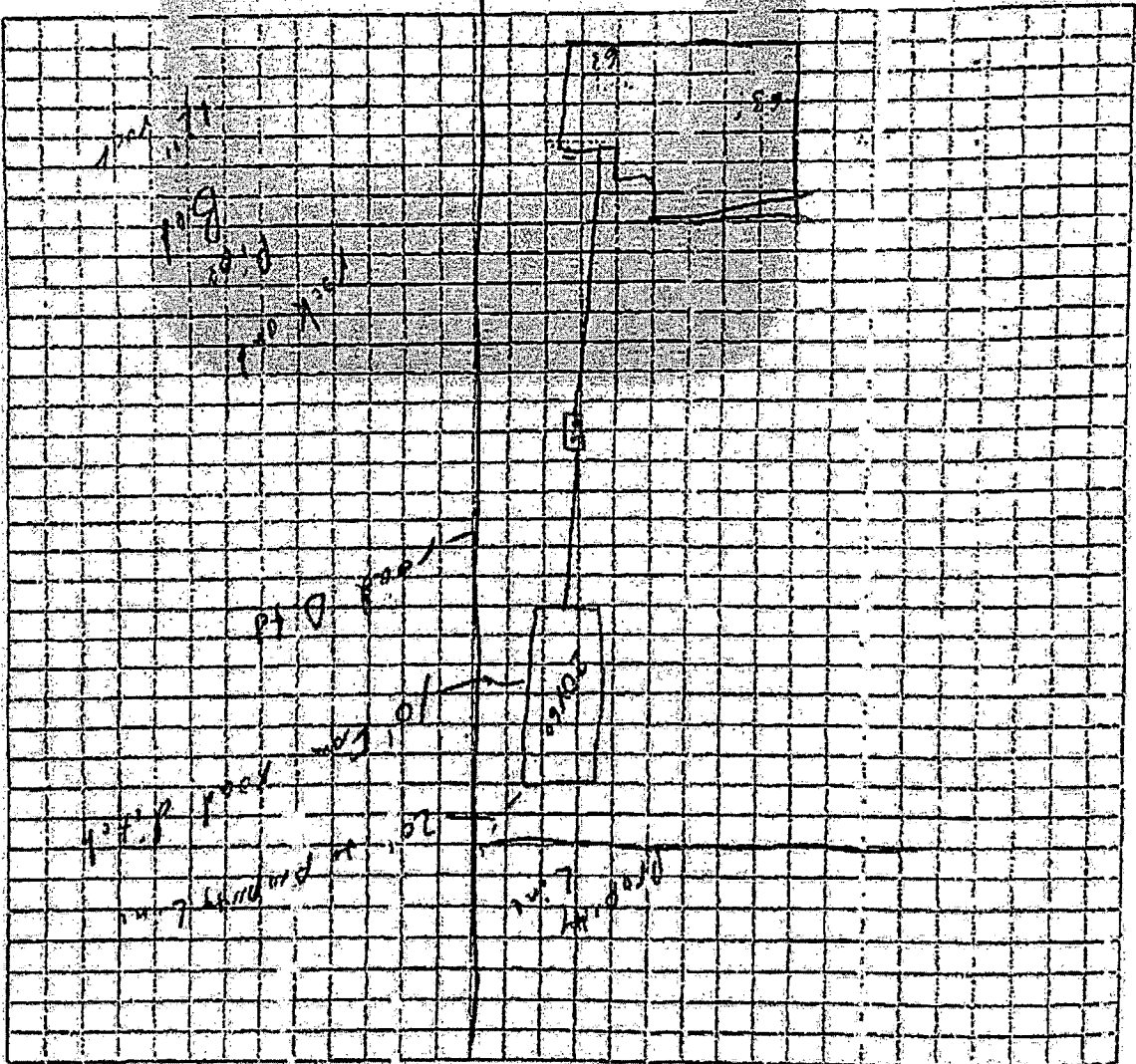
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Designer

List any construction issues:

2013

N. 44°



## Mapping Checklist

Map scale:

Locate

- ☐ lot dimensions/property lines
- ☐ dwellings and other improvements
- ☐ existing and/or proposed systems
- ☐ replacement area
- ☐ unsuitable area(s)
- ☐ public water supply wells
- ☐ pumping access
- ☐ inner wellhead zone

- ☐ easements
- ☐ phone
- ☐ electric
- ☐ gas
- ☐ elevations
- ☐ bonings
- ☐ benchmark
- ☐ perc tests
- ☐ horizontal reference pts
- ☐ setbacks
- ☐ building
- ☐ all water wells within 100ft
- ☐ pressure pipe
- ☐ water suction pipe
- ☐ streams, lakes, rivers
- ☐ floodway and fringe

indicate north

show slope

% direction

DELAWARE COUNTY  
BOARD OF SUPERVISORS

42.47859 V160 32 00 007 00 Pd  
- 91.34176  
(Print or Type) Permit No. 2116

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 2145 23rd Ave Section 32 Township Oneida  
LOCATION: SE 1/4 SE 1/4 NW 1/4 sec 31 T-89-N R-4-W  
Owner: Dustin Wall Tenant: Plumber: Randy Harbach  
Lot Size: 2.4 ac Type Commercial Residential: (No. Bedrooms) 4  
Fixtures: Stools 3 Lavatories Bath Tubs 2 Showers 3 Sinks 5 Automatic Laundry Sump Pump  
Septic Tank made by Swales Garbage Grinder Construction Material Concrete Gallons Cap 1500  
Percolation Test: 1 2 3 4 Made by:  
Absorption Field: Total length of laterals 1200.59 Ft No. of lateral lines  
This system is new ☒ Existing ☐ Rock & Pipe Bed

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

Date Approved 10-5-13

By Dennis Lyons  
INSPECTOR

  
APPLICANT'S SIGNATURE

SEAL