



Book 2022 Page 3554

Document 2022 GWH-3554 Type 53 001 Pages 7
Date 12/02/2022 Time 12:44:17PM
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

TRANSFEROR:

Name Richard L. Beaudine & Marilyn I. Beaudine

Address 18850 173rd Manchester IA 52057
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Marissa A. Duart

Address 405 Oak St. Elkader IA 52403
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

18850 173rd Ave Manchester IA 52057
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

See Attached 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.

Shared well is located on the neighbors property to the south. The well is on the SW corner of their property

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: _____

Michael J. Beaudine
(Transferdoor Agent)

Telephone No.: 563-920-5066



TIME OF TRANSFER INSPECTION TOT# 2248 BILL DOWNS CERT # 8880

Site Information

Parcel Description: **Richard & Marilyn Beaudine**
Address: **18850 173rd Ave, Manchester, IA 52057** County: **Delaware**

Owner Information

Property is owned by a business: **No**
Business Name:
Owner Name: **Richard & Marilyn Beaudine**
Email Address:
Address: **18850 173rd Ave, Manchester, IA 52057**
Phone No:

Site related information

No Of Bedrooms: **3** Inspection Date: **09/12/2022**
Facility Type: **Residential** Currently Occupied: **Yes**
Last Occupied: System Installation Date: **04/10/2009**
Permit issued by County: **Yes** Permit Number: **1674**
All plumbing fixtures enter septic system: **Yes** County contacted for records: **Yes**
Property Information Comments:

Primary Treatment

Advantex

Tank Name: Advantex	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: No	Licensed Pumper Name: Bill Downs
Date Pumped: 4/13/2022	Meets Setback to Well: Yes	Well Type: Private
Distance To Well (Ft.): 150	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:

General Primary Treatment Comments:

Distribution Type

Distribution Box 1

Label: **Distribution Box 1**

Box Opened: **Yes**

Watertight: **Yes**

Material Type: **Plastic and Concrete**

Baffle Present: **Yes**

Functioning As Designed: **Yes**

Accessible: **Yes**

Speed Levelers Present: **Yes**

General Distribution System Comments :

Secondary Treatment

Absorption Bed1

Distribution Type: **Distribution Box**

Absorption Bed Length: **20**

Gallons Loaded: **300**

Distance To Well (Ft.): **150**

Grass Cover Present: **Yes**

Functioning as Designed: **Yes**

Comments:

Material Type: **Rock and PVC Pipe**

Total Absorption Area: **320**

Meets Setback to Well: **Yes**

Absorption Bed Probed: **Yes**

System Located on Owner Property: **Yes**

Absorption Bed Width: **16**

System Hydraulic Loaded: **Yes**

Well Type: **Private**

Saturation or Ponding Present: **No**

Easement Present: **N/A**

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **System is in working condition**



TIME OF TRANSFER INSPECTION TOT# 2248 BILL DOWNS CERT # 8880

Owner Name: **Richard & Marilyn Beaudine**

Address: **18850 173rd Ave , Manchester , IA 52057**

County: **Delaware**

Inspection Date: **09/12/2022**

Submitted Date: **9/22/2022**

This page certifies a Time of Transfer inspection was conducted and submitted for the property listed above in accordance with Subrule 567 IAC 69.2(8).

Site Evaluation Map

page 2 of 2

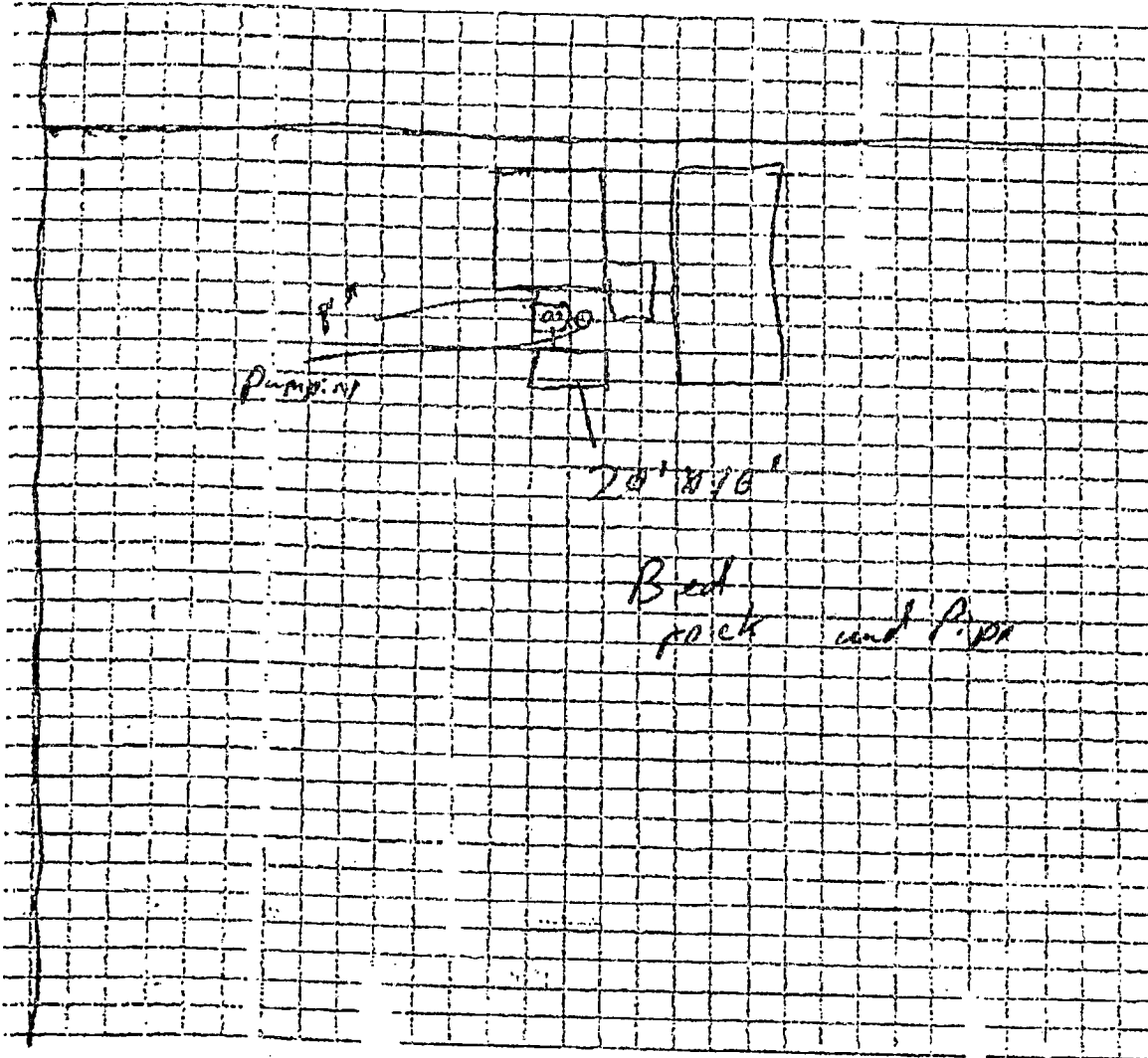
Designer

Ogden

List any construction issues:

Baseline

Permit



Mapping Checklist

- Map scale: _____ indicate north _____ show slope _____ % direction _____
- | | | |
|--|--------------------------------|------------------------------------|
| locate | _____ easements | _____ setbacks |
| _____ lot dimensions/property lines | _____ phone | _____ building |
| _____ dwellings and other improvements | _____ electric | _____ all water wells within 100ft |
| _____ existing and/or proposed system(s) | _____ gas | _____ pressure pipe |
| _____ replacement area | _____ elevations | _____ water suction pipe |
| _____ unsuitable area(s) | _____ borings | _____ streams, lakes, rivers |
| _____ public water supply wells | _____ benchmark | _____ floodway and fringe |
| _____ pumping access | _____ perc tests | |
| _____ inner wellhead zone | _____ horiz&vert reference pts | |

