Recorded: 2/10/2023 at 3:31:33.0 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: 2023 PG: 317

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

TRANSFEROR:

Name: Timothy Lyle Nadermann a/k/a Timothy L. Nadermann

Address: 52339 State Hwy 17, Gays Mills, WI 54631

TRANSFEREE:

Name: Douglas Ryan Nadermann

Address: 2477 250th Street, Delhi, IA 52223

Address of Property Transferred:

2154 230th Ave, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

Vacated Lots Ninety Four (94) through One Hundred Twenty One (121), inclusive, Delaware, Iowa, according to plat recorded in Book 2 L.D., Pages 488-489, except that part included in Parcel I Part of the SW1/4, Sec. 32, T89N R4W Of The Fifth P.M. Town of Delaware, Delaware County, Iowa, according to the plat recorded in Book 2005, Page 2612

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
Inform hereto	ation required by statements checked above should be provided here or on separate sheets attached :
	1- functional well located approximately 120 from the east side 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.

Trusty Lylu hedren Telephone No.: 563 608 2181

PLEASE COMPELTE THE FOLLOWING ITEMS BELOW:

- 1) What type of well do you have? <u>Submersible pump</u>
 2) Is the well active or inactive? <u>active</u>
- 3) Please draw an X on the diagram below where the well is located.

BACK OF THE HOUSE

HOUSE

FRONT OF THE HOUSE





IOWA DEPARTMENT of NATURAL RESOURCES TIME of TRANSFER INSPECTION AGREEMENT BINDING AGREEMENT for FUTURE INSPECTION 542-0062 470000000

This agreement, in accordance with Iowa Code 455B.172 (11), is entered into this day of
February 20 23 by and between De aware County Board
of Health and Doug Nader Mann. 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 2154 230th file Mmulti from being conducted,
that the required inspection shall be completed no later than 500 15+, 20 23 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 day of February 20 23.
Syll_ Mr Sinter
PRÓPERTY BUYER COUNTY BOARD OF HEALTH OF AUTHORIZED REPRESENTATIVE
This instrument was acknowledged before me on <u>February</u> 6, 20 <u>23</u>
by, Alla Sicke
CARLA K BECKER Commission Number 744418 MY COMMISSION EXPIRES DECEMBER 14, 2023 Notary Public