



Book 2023 Page 2151

Document 2023 GWH-2151 Type 53 001 Pages 15
Date 9/05/2023 Time 8:48:42AM
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR
DELAWARE COUNTY IOWA

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

If the transaction is exempt from filing a declaration of value pursuant to Iowa Code 428A.1(2), **STOP HERE**. Pursuant to Iowa Code section 558.69(1), when no declaration of value is submitted during a transaction, you are not required to submit a groundwater hazard statement or include the statutory language in Iowa Code section 558.69(8A). Please consult your realtor or legal counsel for further advice, including on whether a declaration of value is required. The Department provides this information for statutory reference only.

Instructions for this document can be found at:

<https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960%20Instructions.pdf>

Attachment 1, if required, can be found at: <https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960a.pdf>

TRANSFEROR:

Name: Janet Rae Tayek and James Tayek
Address: PO Box 102, Luana, IA 52156

TRANSFeree:

Name: Lucas James Hermsen and Isabelle Rose Behnke
Address: 1463 180th Ave., Manchester, IA 52057

Address of Property Transferred:

1463 180th Ave., Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

The South thirty-three (33) acres of the Northeast Quarter (NE¼) of the Southeast Quarter (SE¼), and the North one (1) acre of the Southeast Quarter (SE¼) of the Southeast Quarter (SE¼) of Section Twenty Nine (29), Township Ninety (90) North, Range Five (5), west of the Fifth Principal Meridian,

AND

Parcel 2015-07 in the NW¼-SE¼ Section 29-T90N-R5W Delaware County, Iowa, according to plat recorded in Book 2015, Page 338

Transfer Tax: \$1,199.20

1. Wells (check one)

- No Condition - There are no known wells situated on this property.
- Condition Present - 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)

- No Condition - There is no known solid waste disposal site on this property.
- Condition Present - 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)

- No Condition - There is no known hazardous waste on this property.
- Condition Present - 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)

- No Condition - 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.)
- Condition Present - 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)

- No Condition - There are no known private burial sites on this property.
- Condition Present - 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)

- No Condition - All buildings on this property are served by a public or semi-public sewage disposal system.
- No Condition - This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
- Condition Present - 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.
- Condition Present - 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.
- Condition Present - There is a building served by private sewage disposal system on this property. The system is failing to ensure effective wastewater treatment or is otherwise improperly functioning, and 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.
- Condition Present - 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 #7]
- Condition Present - There is a building served by private sewage disposal system on this property. This property is exempt from the private sewage disposal inspection requirements pursuant to the following Exemption [Note: for exemption #7 use prior check box]:

- Condition Present - There is a building served by private sewage disposal system on this property. The private sewage disposal system has been installed within the past two years pursuant to permit number:

Review the following two directions carefully:

A. If you selected a box stating “No Condition” for every numbered section above, **STOP HERE**. Do not submit this form. Instead, pursuant to Iowa Code section 558.69(8A), you must include the following language on the first page of the recorded deed, instrument, or other writing:

“There is no known private burial site, well, solid waste disposal site, underground storage tank, hazardous waste, or private sewage disposal system on the property as described in Iowa Code section 558.69, and therefore the transaction is exempt from the requirement to submit a groundwater hazard statement.”

Please consult your realtor or legal counsel for further advice on this exemption. By law, the owner of the property is responsible for the accuracy of this statement, and the Department provides this information for statutory reference only.

B. If you checked any box stating “Condition Present” for any of the numbered sections above, continue below. You must complete this form, including providing all required information, and you must submit this form to the county recorder’s office with declaration of value.

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: Janet Rae Jayek Telephone No.: (563) 329-0253
(Transferor)



TIME OF TRANSFER INSPECTION TOT# 6520 BILL DOWNS CERT # 8880

Site Information

Parcel Description: **Janet Tayek**
Address: **1463 180th Ave, Manchester, IA 52057** County: **Delaware**

Owner Information

Property is owned by a business: **No**
Business Name:
Owner Name: **Janet Tayek**
Email Address:
Address: **PO box 102, Luana, IA 52146**
Phone No:

Additional Contact Information

Name	Email Address	Affiliate Type
Ali Werger	aliwerger@gmail.com	Realtor

Site related information

No Of Bedrooms: 0	Inspection Date: 08/02/2023
Facility Type: Residential	Currently Occupied: No
Last Occupied: 04/11/2022	System Installation Date: 06/06/2014
Permit issued by County: Yes	Permit Number: 2253
All plumbing fixtures enter septic system: Yes	County contacted for records: Yes
Property Information Comments: Shop with toilet and sink	

Primary Treatment

Tank 1

Tank Name: Tank 1	Type: Septic Tank	Tank Size (Gal): 1250
Tank Material: Concrete	Tank Corrosion Type: None	Liquid Level Type: Normal
No. of Compartments: 2	Pump Tank Chamber: Yes	Licensed Pumper Name: Bill Downs

Date Pumped: **8/2/2023** Meets Setback to Well: **Yes** Well Type: **Private**
 Distance To Well (Ft.): **100+** Is Accessible: **Yes** Lid Intact: **Yes**
 Risers Intact: **Yes** Effluent Filter Present: **No** 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

Header Pipe 1

Label: **Header Pipe 1** Material Type : **Plastic** Accessible: **Yes**
 Functioning As Designed: **Yes**

General Distribution System Comments :

Secondary Treatment

Lateral Field1

Distribution Type: Header Pipe	Material Type: Rock and PVC Pipe	Trench Width: 48
Lines: 1	Total Length of Absorption Line: 50	System Hydraulic Loaded: Yes
Gallons Loaded: 100	Meets Setback to Well: Yes	Well Type: Private
Distance To Well (Ft.): 100+	Lateral Lines Probed: Yes	Saturation or Ponding Present: No
Grass Cover Present: Yes	Lateral Lines Equal Length: 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: **Shop with a toilet and 1 sink**



TIME OF TRANSFER INSPECTION TOT# 6520 BILL DOWNS CERT # 8880

Owner Name: **Janet Tayek**

Address: **1463 180th Ave , Manchester , IA 52057**

County: **Delaware**

Inspection Date: **08/02/2023**

Submitted Date: **8/9/2023**

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).

DELAWARE COUNTY INSPECTION SHEET

v 05.31.13

Contact information	Project ID:
Property Owner/Client:	
Address:	

List any construction issues:

Mapping Checklist

- | | | | |
|------------------|----------------------|------------------|-------------------|
| Map scale: _____ | _____ indicate north | _____ show slope | _____ % direction |
|------------------|----------------------|------------------|-------------------|
- | | | |
|--|--|--|
| <p>Locate</p> <input type="checkbox"/> Lot Dimensions/Property Lines
<input type="checkbox"/> Dwellings and Other Improvements
<input type="checkbox"/> Existing or Proposed System(s)
<input type="checkbox"/> Replacement Area
<input type="checkbox"/> Unsuitable Area(s)
<input type="checkbox"/> Public Water Supply Wells
<input type="checkbox"/> Pumping Access
<input type="checkbox"/> Inner Wellhead Zone | <p>Easements</p> <input type="checkbox"/> Phone
<input type="checkbox"/> Electric
<input type="checkbox"/> Gas

<p>Elevations</p> <input type="checkbox"/> Benchmark
<input type="checkbox"/> Berings
<input type="checkbox"/> Perc Tests
<input type="checkbox"/> Horizontal and Vertical Reference Points | <p>Setbacks</p> <input type="checkbox"/> Building
<input type="checkbox"/> All water wells within 100 feet
<input type="checkbox"/> Lot Dimensions/Property Lines
<input type="checkbox"/> Lot Dimensions/Property Lines
<input type="checkbox"/> Lot Dimensions/Property Lines |
|--|--|--|

I hereby certify that I have completed this work in accordance with all applicable ordinances, rules and laws.

(Designer)	(Signature)	(License #)	(Date)
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SEWAGE DISPOSAL FINAL INSPECTION

PERMIT NO: 2253 APPLICANT: Mark Short
PLUMBER Oas?S SITE ADDRESS 1463 180th Ave
SEPTIC TANK SIZE 1250 EFFLUENT FILTER IN PLACE Yes
MANUFACTURER Swales DEPTH 12"
DISTANCE TO STRUCTURE OR HOME 74' DISTANCE FROM WELL 100
DISTRIBUTION BOX: DEPTH NA IS IT LEVEL AND SECURE NA
DISTANCE FROM HOUSE OR STRUCTURE _____
DISTANCE FROM WELL 7100
TRENCH # 1 LENGTH 58 WIDTH 4' DEPTH 2'
TRENCH # 2 LENGTH _____ WIDTH _____ DEPTH _____
TRENCH # 3 LENGTH _____ WIDTH _____ DEPTH _____
TRENCH # 4 LENGTH _____ WIDTH _____ DEPTH _____

ITEMS IF APPLICABLE

IS ANY ELECTRICAL ITEMS DONE TO CODE NA
ARE ALL BAFFLES IN CORRECT yes
DOES HOMEOWNER HAVE DRAWING AND UNDERSTAND THE USE OF EFFLUENT FILTER
IF TRENCHES USED DID THEY STOMP DOWN THE SIDES WITH DIRT
IF A SAND FILTER IS INSTALLED IS IT VENTED
ANY CONCERNS BY INSPECTOR _____

APPROVED REJECTED () WHY () INSPECTED BY Dennis [Signature]

DATE 5-6-74

DELAWARE COUNTY

106629 00 013 00

BOARD OF SUPERVISORS

PERMIT NO. 2253

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 1963 - 18th Ave SECTION 29 TOWNSHIP H.C

LOCATION QT QT SEC 29 T 90N R 5 W Parcel#

Owner Mike Short plumber Davis

Lot size _____ Type Commercial Shop Residential (No. Bedrooms) 5

Fixtures: Stools 1 Bath tubs _____ Showers _____ Sinks 1 Automatic Laundry _____ Lift Pump _____

Septic tank made by Suel's Construction Material 1/2 in. 4 Gallon Cap. 1250 Garbage disposal 42.578377 - 91.490752

Absorption Field: Total length of laterals 50 No. of lateral lines 1 Size of leach bed 4' x 5'

Trench Material rock and p.i.p. Secondary Treatment Type 42.578377 - 91.450811

This system is new construction Existing _____

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

Date Approved 6-6-14 Applicant's Signature [Signature]

By [Signature]

INSPECTOR



TIME OF TRANSFER INSPECTION TOT# 6517 BILL DOWNS CERT # 8880

Site Information

Parcel Description: **Janet Tayek**
Address: **1463 180th Ave, Manchester, IA 52057** County: **Delaware**

Owner Information

Property is owned by a business: **No**
Business Name:
Owner Name: **Janet Tayek**
Email Address:
Address: **PO box 102, Luana, IA 52146**
Phone No:

Additional Contact Information

Name	Email Address	Affiliate Type
Ali Werger	aliwerger@gmail.com	Realtor

Site related information

No Of Bedrooms: 2	Inspection Date: 08/02/2023
Facility Type: Residential	Currently Occupied: No
Last Occupied: 04/11/2022	System Installation Date:
Permit issued by County: No	Permit Number:
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): 950
Tank Material: Concrete	Tank Corrosion Type: Slight	Liquid Level Type: Normal
No. of Compartments: 1	Pump Tank Chamber: Yes	Licensed Pumper Name: Bill Downs

Date Pumped: **8/2/2023** Meets Setback to Well: **Yes** Well Type: **Private**
 Distance To Well (Ft.): **100+** Is Accessible: **Yes** Lid Intact: **Yes**
 Risers Intact: **Yes** Effluent Filter Present: **No** 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** Material Type: **Plastic** Accessible: **Yes**
 Box Opened: **Yes** Baffle Present: **No** Speed Levelers Present: **Yes**
 Watertight: **Yes** Functioning As Designed: **Yes**

General Distribution System Comments : **D Box was bad so we replaced it. Hooked up 3 lines, speed levelers working good**

Secondary Treatment

Lateral Field1

Distribution Type: **Distribution Box** Material Type: **Rock and PVC Pipe** Trench Width: **unknown**
 Lines: **3** Total Length of Absorption Line: **est. 225** System Hydraulic Loaded: **Yes**
 Gallons Loaded: **300** Meets Setback to Well: **Yes** Well Type: **Private**
 Distance To Well (Ft.): **100+** Lateral Lines Probed: **Yes** Saturation or Ponding Present: **No**
 Grass Cover Present: **Yes** Lateral Lines Equal Length: **Yes** System Located on Owner Property: **Yes**
 Easement Present: **N/A** Functioning as Designed: **Yes**
 Comments: **older but working ok**

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **D box was bad so it was replaced, before and after pictures attached. Older system but working ok.**



TIME OF TRANSFER INSPECTION TOT# 6517 BILL DOWNS CERT # 8880

Owner Name: **Janet Tayek**

Address: **1463 180th Ave , Manchester , IA 52057**

County: **Delaware**

Inspection Date: **08/02/2023**

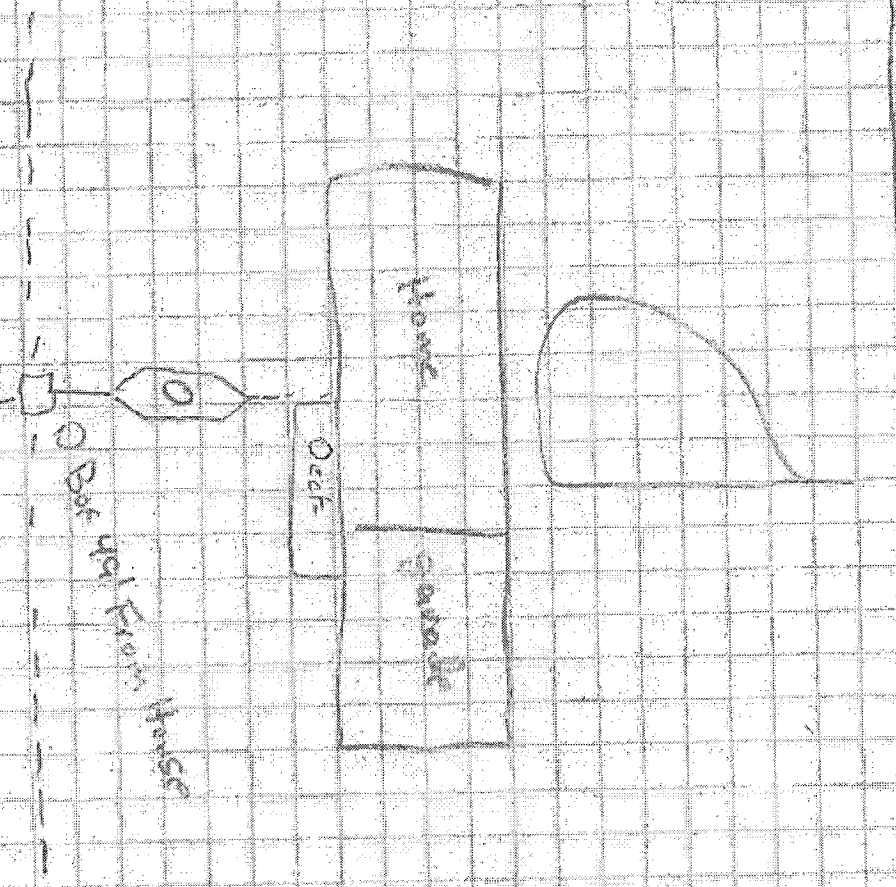
Submitted Date: **8/9/2023**

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).

N

S

180th Ave



Driv
House
Garage



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8/9/23, 8:34 AM

