



Book 2024 Page 1078

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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: Natalie C. Felton
Address: 1868 Firefly Road, Manchester, IA 52057

TRANSFeree:

Name: Paul Aaron Baca and May Lo
Address: 224 North Eagle Street, Oshkosh, WI 54902

Address of Property Transferred:
1868 Firefly Road, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

The East fourteen (14) rods and nine (9) feet of the South eighteen (18) rods of the North fifty eight (58) rods of the Northwest Quarter (NW1/4) of the Southwest Quarter (SW1/4) of Section Seventeen (17), Township Eighty Nine (89) North, Range Five (5), West of the Fifth P.M.

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: Natalie Felton Telephone No.: (319) 350-0745
(Transferor)

Well location North of Home extra lot
Drilled and active.



TIME OF TRANSFER INSPECTION TOT# 8692 BILL DOWNS CERT # 8880

Site Information

Parcel Description: **Natalie Felton**

Address: **1868 Firefly Rd., Manchester, IA 52057**

County: **Delaware**

Owner Information

Property is owned by a business: **No**

Business Name:

Owner Name: **Natalie Felton**

Email Address:

Address: **1868 Firefly Rd., Manchester, IA 52057**

Phone No: **319-350-0745**

Site related information

No Of Bedrooms: **3**

Inspection Date: **01/08/2024**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date:

Permit issued by County: **Yes**

Permit Number: **1013**

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): **1000**

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: **1/8/2024**

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 : **older system functioning good at time of inspection**

Secondary Treatment

Lateral Field1

Distribution Type: Distribution Box	Material Type: Leaching Chamber	Trench Width: ?
Lines: 3	Total Length of Absorption Line: 75-85' per	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: No	System Located on Owner Property: Yes
Easement Present: N/A	Functioning as Designed: Yes	

Comments: **System was added on, did hydraulic test worked good at time of inspection**

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **System is older but functioning well at time of inspection.**



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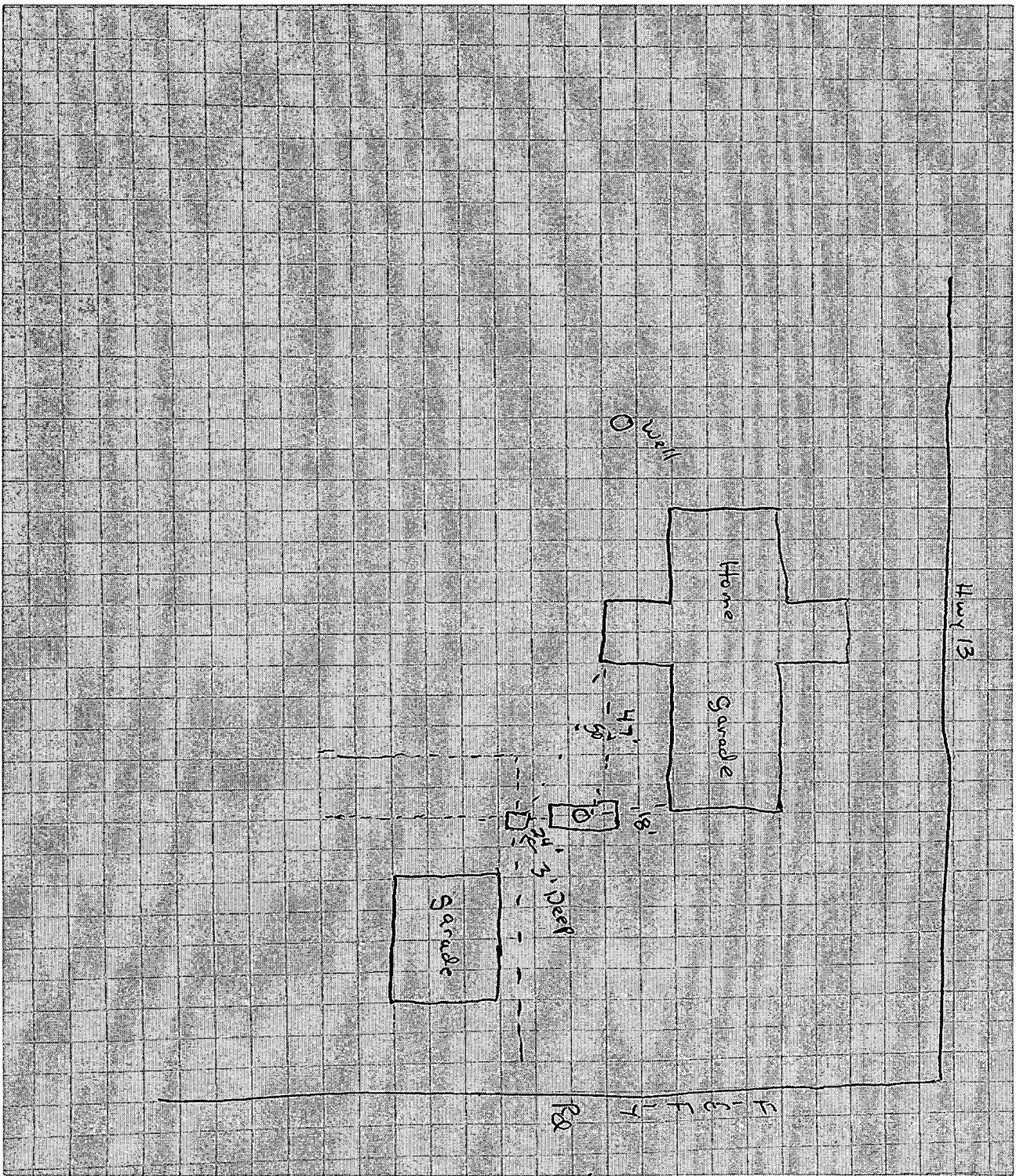
Owner Name: **Natalie Felton**

Address: **1868 Firefly Rd. , Manchester , IA 52057**

County: **Delaware**

Inspection Date: **01/08/2024**

Submitted Date: **1/18/2024**



12, 3, 50

DELAWARE COUNTY BOARD OF SUPERVISORS (Print or Type) Permit No. 1043
 APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 1848 Pinyon Rd. Mansfield Section 17 Township Delaware
 LOCATION: rd/w/1450/4 T-89 R5 a

Owner: Todd M. Starnes Tenant: _____ Plumber: Dolan
 Lot Size: 1.8 Acres Type Commercial: _____ Residential: (No. Bedrooms) 3
 Fixtures: Stools 2 Lavatories 2 Bath Tubs 1 Showers 1 Sinks 2 Automatic Laundry 1 Sump Pump _____
 Septic Tank made by Somos Garbage Grinder _____ Construction Material Concrete Gallons Cap 16

Percolation Test: 1. _____ 2. _____ 3. _____ 4. _____ Made by: _____
 Absorption Field: Total length of laterals _____ No. of lateral lines _____
 This system is new _____ Existing add 100' infrastructure to back lot

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 9/20/11
 By Thomas Dolan INSPECTOR SEAL
Todd M. Starnes APPLICANT'S SIGNATURE SEAL

140-17-00-008-00

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