

Recorded: 6/24/2024 at 1:15:38.0 PM
County Recording Fee: \$0.00
Iowa E-Filing Fee: \$0.00
Combined Fee: \$0.00
Revenue Tax: \$0.00
Delaware County, Iowa
Daneen Schindler RECORDER
BK: 2024 PG: 1410

**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: Gary Bouzek
Address: 24919 207th Ave, Manchester, IA 52057

TRANSFeree:

Name: Clarissa J. Sullivan and John A. Sullivan
Address: 1123 Oak Ridge Road, Forney, TX 75126

Address of Property Transferred:

24919 207th Ave, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

Lot Eleven (11) of Logan-Black First Addition to Delaware County, Iowa A Replat of Lots 1 & 2 of Logan's Fifth Subdivision, according to plat recorded in Book 7 Plats, Page 29, except Parcel 2019-01 Part of Lot 11 of Logan-Black First Addition to Delaware County, Iowa, Section 14, T88N, R5W of the 5th P.M., Delaware County, Iowa, according to corrective plat recorded in Book 2019, Page 209; and also except Parcel 2019-110 Part of Lot 11 of Logan-Black First Addition to Delaware County, Iowa, Section 14, T88N, R5W of the 5th P.J., Delaware County, Iowa, according to plat recorded in Book 2019, Page 3689.

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:

1- four barrel well located approximately 35' north 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.

Signature: X  Telephone No.: 319 241 1324



TIME OF TRANSFER INSPECTION TOT# 9316 BILL DOWNS CERT # 8880

Site Information

Parcel Description: **Gary Bouzek**

Address: **24919 207th Ave, Manchester, IA 52057**

County: **Delaware**

Owner Information

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

Business Name:

Owner Name: **Gary Bouzek**

Email Address:

Address: **24919 207th Ave, Manchester, IA 52057**

Phone No: **319-241-1324**

Additional Contact Information

Site related information

No Of Bedrooms: **3**

Inspection Date: **03/20/2024**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date: **05/17/2018**

Permit issued by County: **Yes**

Permit Number: **2710**

All plumbing fixtures enter septic system: **Yes**

County contacted for records: **Yes**

Property Information Comments:

Primary Treatment

Infiltrator

Tank Name: **Infiltrator**

Type: **Septic Tank**

Tank Size (Gal): **1500**

Tank Material: **Plastic**

Tank Corrosion Type: **None**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **No**

Licensed Pumper Name: **Bill Downs**

Date Pumped: **3/20/2024**

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 and Concrete** Accessible: **Yes**
Box Opened: **Yes** Baffle Present: **No** Speed Levelers Present: **No**
Watertight: **Yes** Functioning As Designed: **Yes**

General Distribution System Comments :

Secondary Treatment

Absorption Bed 1

Distribution Type: **Distribution Box** Material Type: **Rock and PVC Pipe** Absorption Bed Width: **40**
Absorption Bed Length: **20** Total Absorption Area: **800** System Hydraulic Loaded: **Yes**
Gallons Loaded: **300** Meets Setback to Well: **Yes** Well Type: **Private**
Distance To Well (Ft.): **100+** 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: **Newer system. Everything working well at time of inspection.**



TIME OF TRANSFER INSPECTION TOT# 9316 BILL DOWNS CERT # 8880

Owner Name: Gary Bouzek

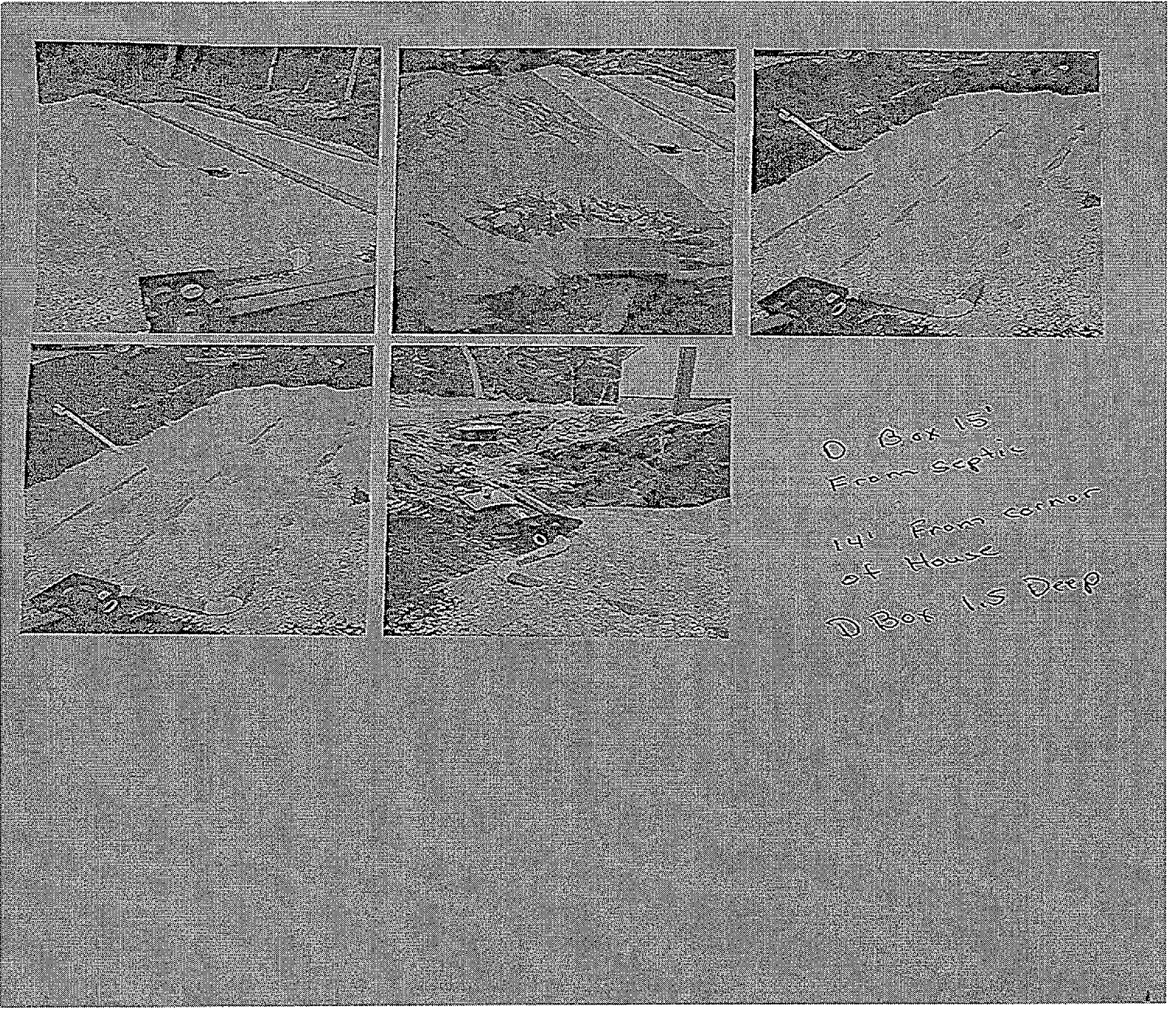
Address: 24919 207th Ave , Manchester , IA 52057

County: Delaware

Inspection Date: 03/20/2024

Submitted Date: 3/26/2024

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).



D Box 15'
From Septic
14' From corner
of House
D Box 1.5 Deep

DELAWARE COUNTY
 BOARD OF SUPERVISORS
 PERMIT NO. 2710

APPLICATION FOR PERMIT TO INSTALL MAINTENANCE DISPOSAL SYSTEM

ADDRESS 2499 1/2 St. Ave. Haverhill SECTION 14E TOWNSHIP M516
 LOCATION QT 14788N135W Parcel 250-19104-02040
 Owner Gay Bowser Number Mike Frisk
 Lot size _____ Type Commercial _____ Residential (No. bedrooms) 3
 Features: Sinks 2 Bath tubs _____ Showers 2 Sinks 3 Automatic Laundry _____ Lift Pump _____
 Septic tank made by 2nd floor Construction Materials Black Galon Can Garbage disposal _____
 Absorption Field: Total length of laterals _____ No. of lateral lines _____ Size of trench bed 600x13
 Trench Material leach pipe Secondary Treatment Type _____
 This system is new construction Existing _____

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

Gay Bowser Mike Frisk
 Delaware County Septic System Disclaimer

The issuance of a permit and the completion of the inspection required by Delaware County Ordinance No. 40, do not serve as any type of warranty, guarantee, or certification regarding the proper functioning of a private septic system for any period of time in the future. Delaware County and its employees or agents are unable to supervise or monitor the numerous factors (usage, soil characteristics, previous failures, etc.) that may affect the proper operation or the use and maintenance of the system.

The issuance of a permit and/or the completion of the inspection do not constitute any type of warranty, guarantee, or certification regarding the impact the system is or is not having on the groundwater. Delaware County and its employees or agents are not able to determine the impact a septic system is having on the groundwater.

Delaware County hereby DISCLAIMS ALL WARRANTIES, either expressed or implied, associated with this permit and the inspection required under Ordinance No. 40.

By signing below, I acknowledge that I have read and read the above disclaimer.

Name Gay Bowser Date 5-7-18
 Applicant

I have studied the information contained herein and certify that the application complies with Delaware County Ordinance No. 40 and Iowa Administrative Code 567-66, Private Sewage Disposal Systems.

Name Michael Frisk Date 5-17-18
 Delaware County Representative

DELAWARE COUNTY SANITATION
 Application # _____ Permit # 2770

Completion Report for Private Sewage Disposal System

Owner Gay Bowser
 Site Address 2499 1/2 St. Ave. Haverhill Township M516
 Parcel # 250-19104-02040 Lot # _____ Local S-T # 14788N135W
 Mailing Address _____
 Contractor Frisk Bedroom # 3

Water Supply: 21005300 private well 92-42-25 90-59161802
 Primary Treatment: Latitude 42-31534 Longitude -92-39378
 Septic Tank: Volume (L) 1500 Material Plastic # Pieces 7 # Comp. 2
 Rise (ft) (L) _____ Rise (ft) (L) _____ Rise (ft) (L) _____
 Note: Effluent filter requires frequent cleaning.

Discharge: Volume _____ Pump or other device _____ Chamber _____
 D-Box: Latitude 42-31534 Longitude 92-39378 Depth 12
 Surface Absorption Type: Chamber Manufacture _____ Lateral # _____ # Chambers _____
 Inlet rock under pipe _____ Trench Depth (ft) _____ Trench width (ft) _____ Distance to well (ft) _____
 Surface Absorption Type: Overall length (ft) 40 Overall width (ft) 23
 Rock bed length (ft) 20 Rock bed width (ft) 16 Length of laterals (ft) _____ # Laterals 7
 Header pipe diameter (in) _____ Rock type _____ Distance to well (ft) _____ Depth to bottom of trench (ft) _____
 Packed Bed Media Filter: Sand filter capacity _____ Sand filter width (ft) _____ Sand filter height _____
 Lateral: Distance to well (ft) _____ # Distribution lines _____ # Collector lines _____
 Distribution line type: _____ Spacing (ft) _____ Discharge (ft) (ft) _____
 # Per. Filter: Serial # _____ Closed or Open bottom _____ Lateral # absorption _____ # Laterals _____
 Equipped rock river rock pre-treatment: Trench width (ft) _____ Rock under pipe (ft) _____
 Distance to well (ft) _____ Inlet and outlet cover over pipe _____ Discharge GPS (lat x long) _____
 Bedrock listing: Bedrock listing: Brand Name _____ Distance to well (ft) _____
 Discharge GPS (lat x long) _____ Absorption field located after (no. discharge) _____
 Note: A maintenance agreement with a manufacturer-approved contractor must be maintained for the life of the septic system.
 Effluent filter requires frequent cleaning.

At any portion of the field covered before the inspection: (A) System installation approved: Y
 (B) Final inspection: OK Environmental Health Specialist: David
 Date: 5-18
 This APPROVAL is in no way in that the County is responsible for the continued operation of this sanitation system.

