



Book 2024 Page 2181

Document 2024 GWH-2181 Type 53 001 Pages 1
Date 9/06/2024 Time 11:31:29AM
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: Russell Hunt and Krista Hunt
Address: 26328 211th Ave., Manchester, IA 52057

TRANSFeree:

Name: Michael W. Cole and Lori L. Cole
Address: 20687 Kayak Ct., Manchester, IA 52057

Address of Property Transferred:

26328 211th Ave., Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

Lot Forty One (41) of Turtle Creek Camp Replat being part of the Southwest Quarter (SW $\frac{1}{4}$) of the Northeast Quarter (NE $\frac{1}{4}$), part of the Northeast Quarter (NE $\frac{1}{4}$) of the Northeast Quarter (NE $\frac{1}{4}$), and part of the Southeast Quarter (SE $\frac{1}{4}$) of the Northeast Quarter (NE $\frac{1}{4}$) all in Section Twenty-six (26), Township Eighty-eight North (T88N), Range Five West (R5W) of the Fifth Principal Meridian, Delaware County, Iowa; also being part of the Northwest Quarter (NW $\frac{1}{4}$) of the Northwest Quarter (NW $\frac{1}{4}$), and part of the Southwest Quarter (SW $\frac{1}{4}$) of the Northwest Quarter (NW $\frac{1}{4}$), Section Twenty-five (25), Township Eighty-eight North (T88N), Range Five West (R5W) of the Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 1999, Page 4340, and also all lake frontage running to the middle of the Maquoketa River bed with regard to said Lot Forty One (41); also Parcel FF Part of Lot 40 of the Turtle Creek Camp Replat of the Southwest Quarter (SW $\frac{1}{4}$) of the Northwest Quarter (NW $\frac{1}{4}$), Section Twenty-Five (25), Township Eighty-Eight North (T88N), Range Five West (R5W) of the Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 2004, Page 3790

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- functional well located approximately 100' ~~south~~ west 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:  Telephone No.: 563-910-3215

TIME OF TRANSFER INSPECTION TOT# 11934 BILL DOWNS CERT # 8880

Site Information

Parcel Description: **Russ Hunt**

Address: **26328 211th Ave, Manchester, IA 52057**

County: **Delaware**

Owner Information

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

Business Name:

Owner Name: **Russ Hunt**

Email Address: **russhunt74@gmail.com**

Address: **26328 211th Ave, Manchester, IA 52057**

Phone No: **563-920-3214**

Additional Contact Information

Name

Email Address

Affiliate Type

Russ Hunt

russhunt74@gmail.com

Owner

Site related information

No Of Bedrooms: **3**

Inspection Date: **09/01/2024**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date: **12/12/2018**

Permit issued by County: **Yes**

Permit Number: **2801**

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): **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: **9/1/2024**

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: **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**

Material Type: **Plastic and Concrete**

Accessible: **Yes**

Box Opened: **Yes**

Baffle Present: **No**

Speed Levelers Present: **Yes**

Watertight: **Yes**

Functioning As Designed: **Yes**

General Distribution System Comments :

Secondary Treatment

Absorption Bed 1

Distribution Type: **Distribution Box**

Material Type: **Gravelless Pipe**

Absorption Bed Width: **20**

Absorption Bed Length: **50**

Total Absorption Area: **1000**

System Hydraulic Loaded: **Yes**

Gallons Loaded: **500**

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: **EZ flow per pictures**

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **Newer system working good at time of inspection. Filter in outlet needs cleaned every spring & fall**

TIME OF TRANSFER INSPECTION TOT# 11934 BILL DOWNS CERT # 8880

Owner Name: **Russ Hunt**

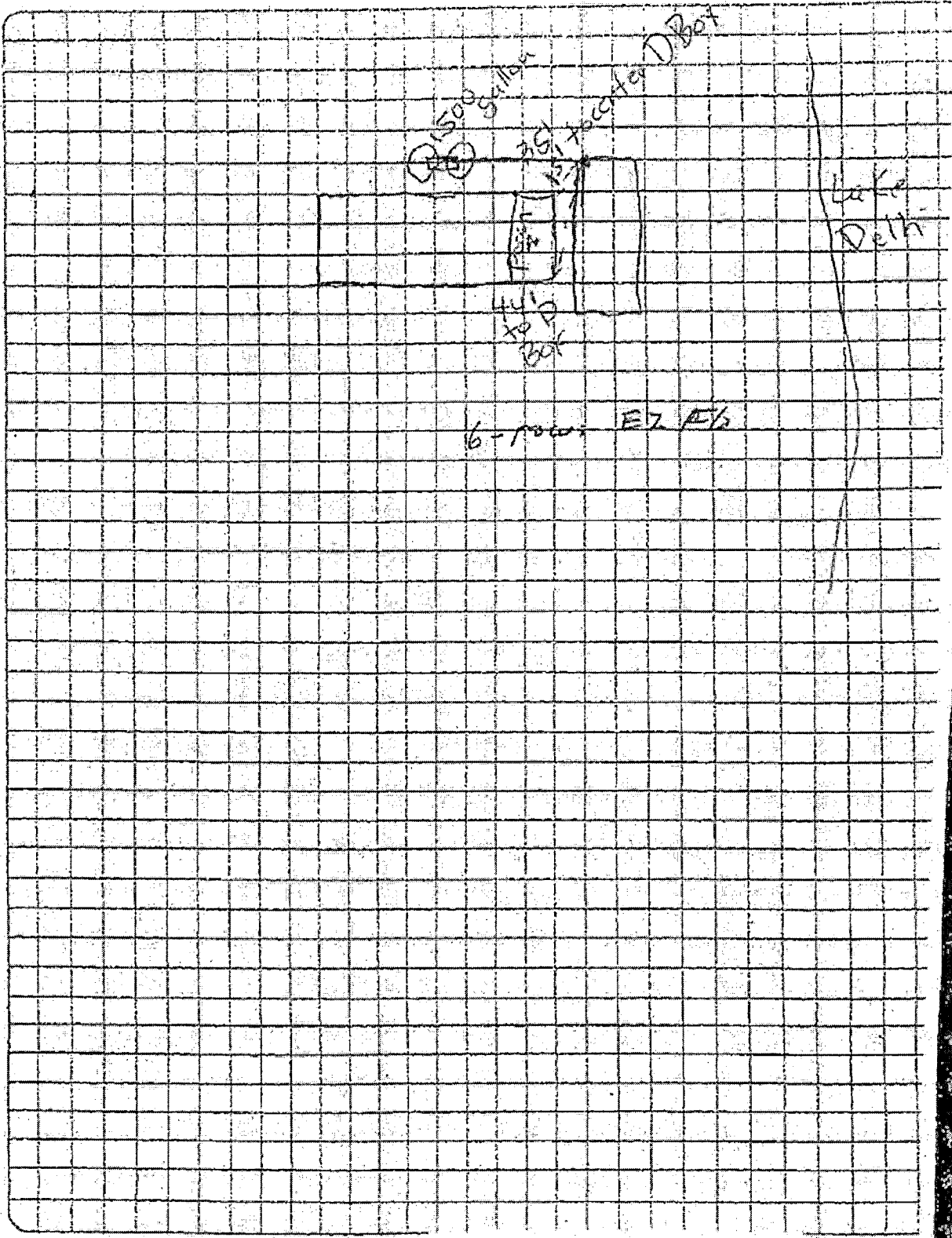
Address: **26328 211th Ave , Manchester , IA 52057**

County: **Delaware**

Inspection Date: **09/01/2024**

Submitted Date: **9/3/2024**

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).



DELAWARE COUNTY

BOARD OF SUPERVISORS

PERMIT NO. 2801

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 26328 211th Ave Manchester SECTION 25 TOWNSHIP Milo

LOCATION QT QT SEC 25 T 88 N R 5 W Parcel# 250250202500

Owner Doug Ernst - Russ Hunt Plumber Chad Finnal

Lot size _____ Type Commercial _____ Residential (No. Bedrooms) 3

Fixtures: Stools 2 Bath tubs 2 Showers 2 Sinks 3 Automatic Laundry 1 Lift Pump _____

Septic tank made by Schnitz Construction Material Crow Gallon Cap. 1500 Garbage disposal _____

Absorption Field: Total length of Laterals _____ No. of lateral lines _____ Size of leach bed 900

Trench Material _____ Secondary Treatment Type EZ-Flo

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.

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 received and read the above disclaimer.

Name Chad Finnal Date _____
Applicant

I have studied the information contained herein and certify that the application complies with Delaware County Ordinance No. 40 and Iowa Administrative Code 567-69, Private Sewage Disposal Systems.

Name Dennis Luoro Date 12-12-18
Delaware County Representative

DELAWARE COUNTY SANITATION

EnvTrack # _____
Permit # 2801

Application # _____

Completion Report for Private Sewage Disposal System

Owner: Russ Hunt

Property Address: 26328 211th Ave Township: M:10

Parcel #: 250 25020 2500 Lot #: _____ Legal S-T-R: 25-88-5

Billing Address: _____

Contractor: Chad F. Noel Bedroom #: 3

Water Supply: private

Primary Treatment: Latitude: 42.40802 Longitude: -91.3813

Septic Tank Volume (g): 1500 Manuf: Schmalz Material: crete # Pieces: 1 # Comp: 2

Riser Ht Lid 1 (in): _____ Riser Ht Lid 2 (in): _____ Filter Brand: _____ Diameter (in): _____ Distance to well (ft): 7100

Note: Effluent filter requires frequent cleaning.

Septic Tank Volume (g): _____ Pump or Siphon Dose: _____ Gallons/dose: _____ Riser Ht (in): _____ Alarm: _____

Box: Latitude: 42.40832 Longitude: -91.3813 Depth: 18"

Surface Absorption Type: EZ-F10 Chamber Manuf: _____ Lineal Ft: 50' # Trenches: 6

Is there rock under pipe: _____ Trench Depth (in): 18" Trench width (in): 20 Distance to well (ft): 7100

Surface Absorption Type: _____ Overall length (ft): _____ Overall width (ft): _____

Rock bed length (ft): _____ Rock bed width (ft): _____ Length of laterals (ft): _____ # Laterals: _____

Lateral pipe diameter (in): _____ Rock type: _____ Distance to well (ft): _____ Depth to bottom of trench (in): _____

Checked Bed Media Filter: _____ Sand filter length (ft): _____ Sand filter width (ft): _____ Sand filter sq ft: _____

Number: _____ Distance to well (ft): _____ # Distributor lines: _____ # Collector lines: _____

Distributor line type: _____ Separating layer: _____ Discharge GPS (lat x long): _____

Peat Filter: Serial #: _____ Closed or Open bottom: _____ Lineal Ft absorption: _____ # Laterals: _____

Washed rock, river rock or chamber: _____ Trench width (ft): _____ Rock under pipe (in): _____

Distance to well (ft): _____ Inches soil cover over trench: _____ Discharge GPS (lat x long): _____

Recirculating Textile Filter: Brand Name: _____ Distance to well (ft): _____

Discharge GPS (lat x long): _____ Absorption field installed after (no discharge) _____

Note: A maintenance agreement with a manufacturer-approved contractor must be maintained for the life of the septic system.

Comments: Effluent filter requires frequent cleaning.

Was any portion of the field covered before the inspection: no System installation approved: yes

Date of Final Inspection: 12-14 Environmental Health Specialist: Donald Lynn

Approved

This APPROVAL in no way makes the County responsible for the continued operation of this sanitation system

Beacon™ Delaware County, IA



Overview

Legend

- Corporate Limits
- Political Township
- Parcels
 - B/L
 - Parcel
 - Roads

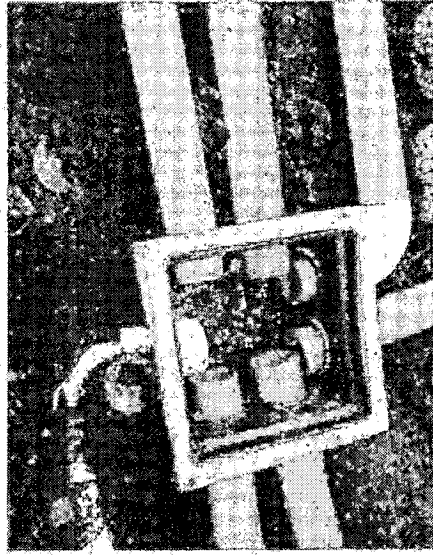
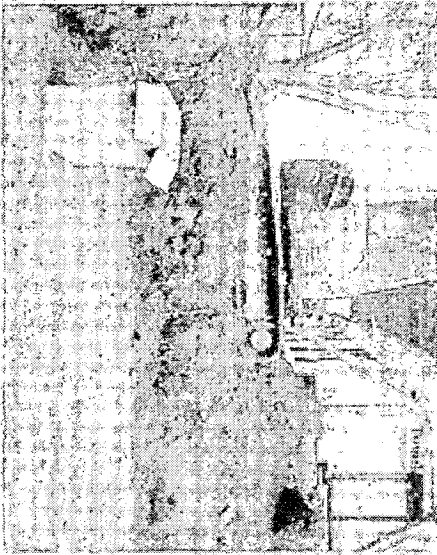
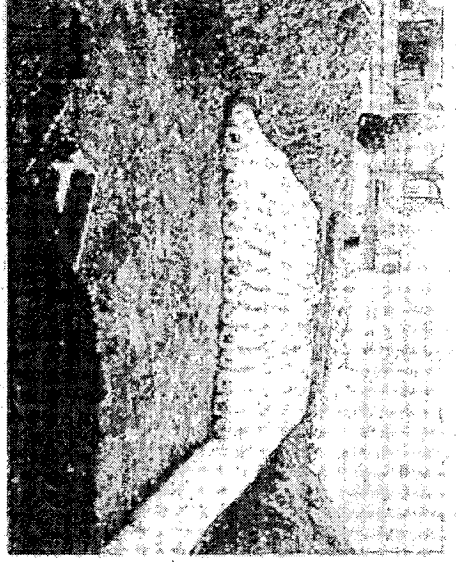
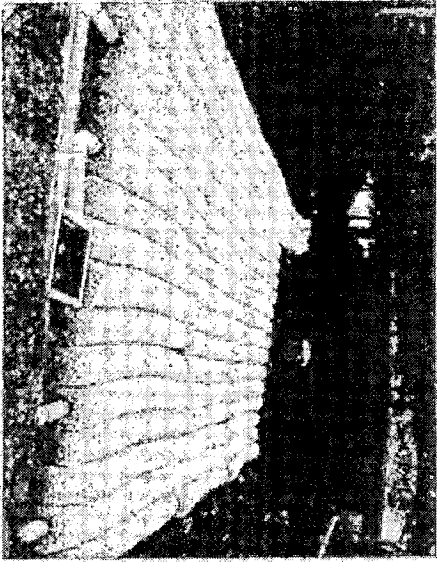
Parcel ID	250250202500	Alternate ID	n/a	Owner Address	Ernst Douglas W
Sec/Twp/Rng	25-88-8	Class	R		29326 211th Ave
Property Address	26328 211TH AVE MANCHESTER	Acres	0.70		Manchester, IA 52057
District	MILOMAQ V LAKE PD 12				
Brief Tax Description	LOT 41 TURTLE CREEK CAMP REPI AT & LAKE FRONTAGE THEREOF & PARCELS PTLT 40 26328 211TH AVE MANCHESTER, IA 52057				

Disclaimer: The information on this web site represents current data found working files which is updated continuously. Reference is below. I do not take any actual responsibility for the information. No warranty, be it oral or implied, is made for the data shown. Please use the information at your own risk.

Data created: 11/06/2015
Last Data Update: 11/02/2015 12:47:12 AM

Developed by Schneider
GEO SPATIAL

1500 - tank get OK
1000 - sq Ft Bed



[Handwritten text, likely a letter or document, written in a cursive script.]

