



Book 2024 Page 2646

Document 2024 GWH-2646 Type 53 001 Pages 1  
Date 10/21/2024 Time 8:09:35AM  
Rec Amt \$.00

Daneen Schindler, RECORDER/REGISTRAR  
DELAWARE COUNTY IOWA

(1)

**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: Philip A. Neuhaus and Olivia Neuhaus a/k/a Olivia M. Neuhaus  
Address: 1924 Hwy 13, Manchester, IA 52057

**TRANSFeree:**

Name: Philip W. Holtz and Abby J. Holtz  
Address: 1911 Honey Creek Road, Manchester, IA 52057

Address of Property Transferred:

1924 Hwy 13, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

Lot One (1) of Neuhaus Subdivision, Part of Lot 4 of Lux Trust Subdivision, Part of the NE $\frac{1}{4}$ -NW $\frac{1}{4}$ , NW $\frac{1}{4}$ -NE $\frac{1}{4}$ , SE $\frac{1}{4}$ -NW $\frac{1}{4}$  and SW $\frac{1}{4}$ -NE $\frac{1}{4}$  of Section 20, and Part of the SW $\frac{1}{4}$ -SE $\frac{1}{4}$  of Section 17, all in T89N, R5W Delaware County, Iowa according to plat recorded in Book 2015, Page 339

**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



**TIME OF TRANSFER INSPECTION TOT# 12048 BILL DOWNS CERT # 8880**

Site Information

Parcel Description: **Phil Neuhaus**  
 Address: **1924 Hwy 13, Manchester, IA 52057** County: **Delaware**

Owner Information

Property is owned by a business: **No**  
 Business Name:  
 Owner Name: **Phil Neuhaus**  
 Email Address:  
 Address: **1924 Hwy 13, Manchester, IA 52057**  
 Phone No:

Site related information

No Of Bedrooms: **4** Inspection Date: **09/07/2024**  
 Facility Type: **Residential** Currently Occupied: **Yes**  
 Last Occupied: System Installation Date: **02/25/2014**  
 Permit issued by County: **Yes** Permit Number: **2232**  
 All plumbing fixtures enter septic system: **Yes** County contacted for records: **Yes**  
 Property Information Comments:

Primary Treatment

**Tank 1**

Tank Name: <b>Tank 1</b>	Type: <b>Septic Tank</b>	Tank Size (Gal): <b>2000</b>
Tank Material: <b>Concrete</b>	Tank Corrosion Type: <b>None</b>	Liquid Level Type: <b>Normal</b>
No. of Compartments: <b>2</b>	Pump Tank Chamber: <b>No</b>	Licensed Pumper Name: <b>Bill Downs</b>
Date Pumped: <b>9/7/2024</b>	Meets Setback to Well: <b>Yes</b>	Well Type: <b>Private</b>
Distance To Well (Ft.): <b>100+</b>	Is Accessible: <b>Yes</b>	Lid Intact: <b>Yes</b>
Risers Intact: <b>Yes</b>	Effluent Filter Present: <b>No</b>	Watertight: <b>Yes</b>

Tank/Vault Pumped: **Yes**      Inlet Baffle Present: **Yes**      Outlet Baffle Present: **Yes**      Functioning as Designed: **Yes**  
Tank Comments: **system looks like new**

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: **40**  
Absorption Bed Length: **40**      Total Absorption Area: **1600**      System Hydraulic Loaded: **Yes**  
Gallons Loaded: **450**      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: **System working well at time of inspection. Ground is very sandy. Pictures attached with report.**

**TIME OF TRANSFER INSPECTION TOT# 12048 BILL DOWNS CERT # 8880**

Owner Name: **Phil Neuhaus**

Address: **1924 Hwy 13 , Manchester , IA 52057**

County: **Delaware**

Inspection Date: **09/07/2024**

Submitted Date: **9/10/2024**

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).











140-200000110

DELAWARE COUNTY  
BOARD OF SUPERVISORS

(Print or Type)

Permit No. \_\_\_\_\_

2232

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 1929 Hwy 13

Section 20

Township Delaware

LOCATION: \_\_\_\_\_

Case 20

T-88-N

R-5-W

Owner: Phil Nehaus

Tenant: \_\_\_\_\_

Plumber: \_\_\_\_\_

SELE

Lot Size: \_\_\_\_\_

Type Commercial: \_\_\_\_\_

Residential: (No. Bedrooms) \_\_\_\_\_

4

Fixtures: Sinks 4

Lavatories \_\_\_\_\_

Bath Tubs 2

Showers 3

Sinks 6

Automatic Laundry \_\_\_\_\_

Sump Pump \_\_\_\_\_

Septic Tank made by Swales

Garbage Grinder \_\_\_\_\_

Construction Material concrete

2250

Gallons Cap 2250

Percolation Test: 1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Made by: \_\_\_\_\_

Absorption Field: Total length of laterals \_\_\_\_\_

400

or 1600

sq. ft.

No. of lateral lines \_\_\_\_\_

This system is new X Existing \_\_\_\_\_

42,510380

- 91-461036

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 \_\_\_\_\_

2-25-14

By \_\_\_\_\_

Dennis Hyer

INSPECTOR

SEAL

APPLICANT'S SIGNATURE

Neuhaus  
inspected