

Recorded: 5/15/2025 at 8:46:40.0 AM
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: 2025 PG: 1228

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT
TO BE COMPLETED IN FULL 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 Mitch A. Devlin and Cassie Devlin

Address <u>18976 Getalong Lane</u>	<u>Manchester</u>	<u>IA</u>	<u>52057</u>
Number and Street or RR	City, Town or PO	State	Zip

TRANSFeree:

Name Carolyn S. Clark

Address <u>3062 Cross Country Drive</u>	<u>Germantown</u>	<u>TN</u>	<u>38138</u>
Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

<u>16300 189th Street</u>	<u>Manchester</u>	<u>IA</u>	<u>52057</u>
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

Lot Two (2) of North Ridge Subdivision Located in SE 1/4 of SW 1/4 of Section 18 Twp 89 North, Range 5 West of the 5th P.M. Delaware County, Iowa, according to plat recorded in Book 7 Plats, Page 65

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:
Permit #3329

Location of well: Southwest corner of house

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."

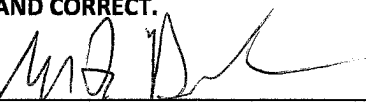
Please consult your realtor or legal counsel for further advice on this exemption. By law, the owner of the property is responsible for the accuracy of this statement, and the Department provides this information for statutory reference only.

- 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:


(Transferor or Agent)

Telephone No.: (563) 608-0139

DELAWARE COUNTY

BOARD OF SUPERVISORS

PERMIT NO. 3329

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS 16300 189th St SECTION 18 TOWNSHIP Delaware

Owner Mitch Devlin Plumber Oasis

LOCATION SEC 18 T 89 N R 5 W Parcel# 140180300200-140

Lot size .79 acres Type Commercial _____ Residential (No. Bedrooms) 3

Fixtures: Stools _____ Bath tubs _____ Showers _____ Sinks _____ Lift Pump Yes

Septic tank made by Swales Construction Material crete Gallon Cap. 1750

Absorption Field: Total length of Laterals 200 No. of lateral lines 3 Size of leach bed _____

Trench Material EZ Flow-Pressurized Secondary Treatment Type _____ Serial No. _____

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.

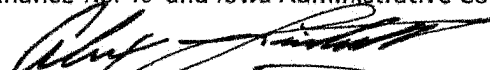
The issuance of a permit and/or the completion of the inspection do not constitute any type of warranty, guarantee, or certification regarding the impact the system is or is not having on the groundwater. Delaware County and its employees or agents are not able to determine the impact a septic system 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  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  Date 8/7/24
Delaware County Representative

DELAWARE COUNTY SANITATION

Application # _____

EnvTrack # _____
Permit # _____

Owner: Mitch Devlin Completion Report for Private Sewage Disposal System

Site Address: _____ Township: _____

Parcel # _____ Lot # _____ Legal S-T-R _____

Mailing Address: _____

Contractor: Oasis Bedroom #: _____

Water Supply: Private

Primary Treatment: _____ Latitude: _____ Longitude: _____

Septic Tank Volume (g): 1750 Manuf: Swales Material: crete # Pieces: 1 # Cmp: 3

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

Note: Effluent filter requires frequent cleaning.

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

D-Box: _____ Latitude: _____ Longitude: _____ Depth: _____

Subsurface Absorption Type: EZ Flow w/ 2" pvc Chamber Manuf: _____ Lineal Ft: 300 # Trenches: 4

Inches rock under pipe: _____ Trench Depth (in): 16 Trench width (in): 36 Distance to well (ft): _____

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

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

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

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

Liner: _____ 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: _____

crushed 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.

Map on GIS no d box - Press
2" thru
EZ-Flow

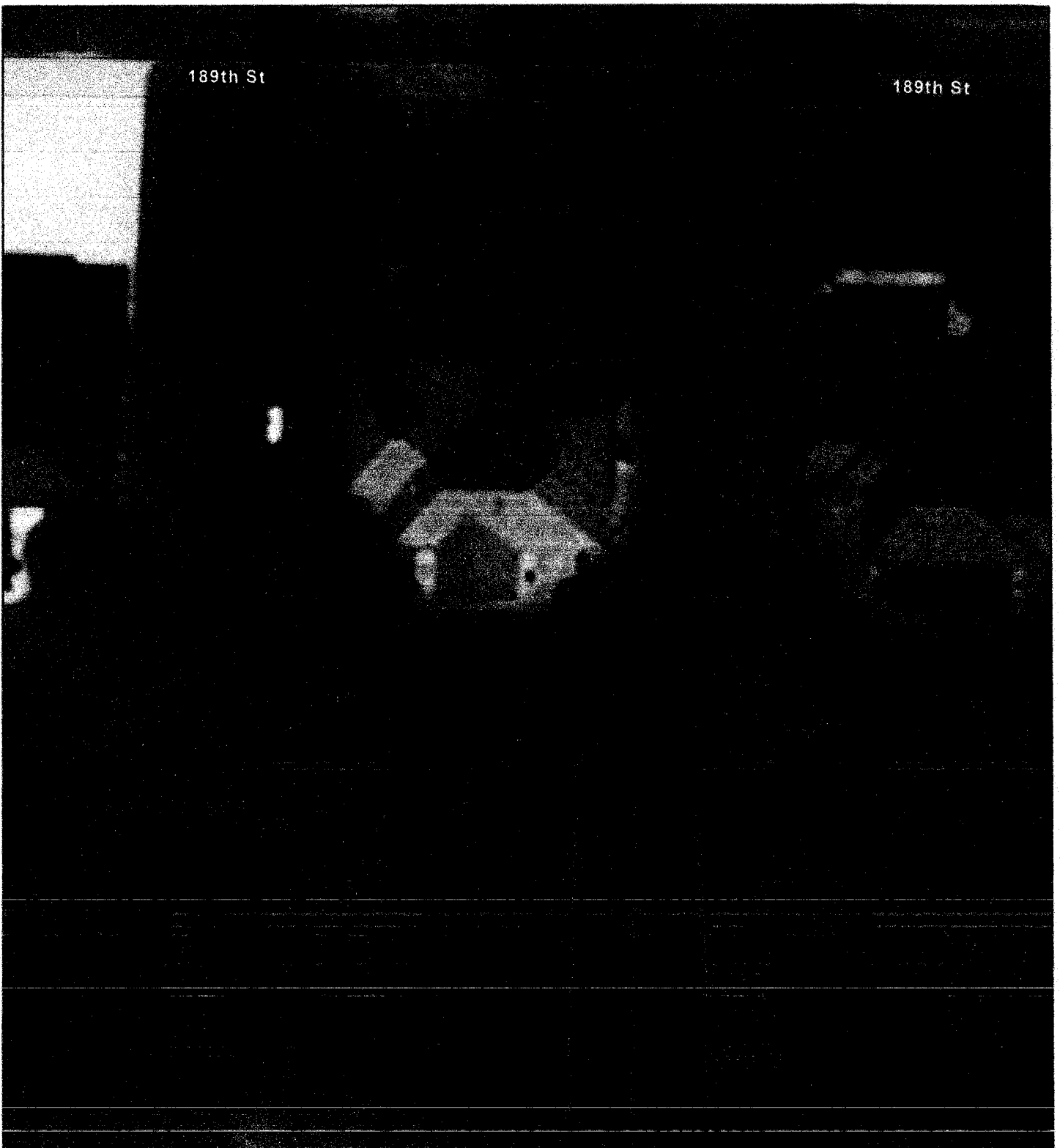
Was any portion of the field covered before the inspection: no System installation approved: 8/7/24

Date of Final Inspection: 8/8/24 Environmental Health Specialist: [Signature]

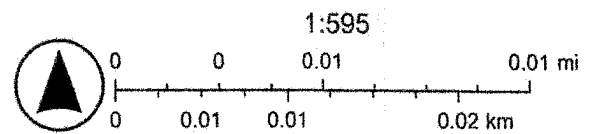
Scanned ☐

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

Devlin



12/13/2024



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GeoTechnologies, Inc. METI/NASA, USGS, EPA, NPS, US Census Bureau,
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