



Book 2025 Page 1853

Document 2025 GWH-1853 Type 53 001 Pages 13  
Date 7/15/2025 Time 9:44:58AM  
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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: Lana Drake

Address: 2629 315th St, Hopkinton, IA 52237

**TRANSFeree:**

Name: Edward Stutzman and Esther Stutzman

Address: 2607 315th St, Hopkinton, IA 52237

Address of Property Transferred:

2629 315th St, Hopkinton, Iowa 52237

Legal Description of Property: (Attach if necessary)

That part of the South One-Half (S1/2) of the Northeast Quarter (NE1/4) of the Southwest Quarter (SW 1/4) of Section Twenty-Three (23), Township Eighty-Seven North (T87N), Range Four West (R4W) of the Fifth P.M., Delaware County, Iowa, described as commencing at the Northwest corner of the Southwest Quarter (SW1/4) of the Southwest Quarter (SW1/4) of said Section Twenty-Three (23), thence South 89°-20' East one thousand three hundred twenty five and two-tenths (1,325.2) feet to the Southwest corner of the Northeast Quarter (NE1/4) of the Southwest Quarter (SW1/4) of said Section Twenty-Three (23), thence North three hundred thirty and three-tenths (330.3) feet to the centerline of County Road D47, said point being the point of beginning, thence North 73°-06' East four hundred twenty and six tenths (420.6) feet, thence concave Northeasterly along a three thousand two hundred ninety nine (3,299.0) feet radius curve five hundred fifty two and nine-tenths (552.9) feet, thence North 83°-18' East three hundred eighty one and four-tenths (381.4) feet, thence North one and nine-tenths (1.9) feet, thence North 89°-20' West one thousand three hundred twenty and four-tenths (1,320.4) feet, thence South two hundred ninety seven and four-tenths (297.4) feet to the point of beginning, The West line of the Northeast Quarter (NE1/4) of the Southwest Quarter (SW1/4) of said Section Twenty-Three (23) is assumed to bear due North and South.

**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."

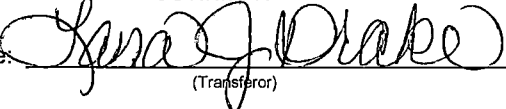
Please consult your realtor or legal counsel for further advice on this exemption. By law, the owner of the property is responsible for the accuracy of this statement, and the Department provides this information for statutory reference only.

- 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:

There is a drilled well located 60 feet North  
of the dwelling

I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature:   
(Transferor)

Telephone No.: (563) 920-8031



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS  
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

## TIME OF TRANSFER INSPECTION TOT# 15812 ROBB HARTER CERT # 9343

### Site Information

Parcel Description: **370230001000**

Address: **2629 315th Street, Hopkinton, IA 52237**

County: **Delaware**

### Owner Information

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

Business Name:

Owner Name: **Lana Drake**

Email Address:

Address: **2629 315th Street, Hopkinton, IA 52237**

Phone No:

### Site related information

No Of Bedrooms: **2**

Facility Type: **Residential**

Last Occupied:

Permit issued by County: **Yes**

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

Property Information Comments:

Inspection Date: **06/03/2025**

Currently Occupied: **Yes**

System Installation Date:

Permit Number:

County contacted for records: **Yes**

### Primary Treatment

#### Tank 1

Tank Name: **Tank 1**

Type: **Septic Tank**

Tank Size (Gal): **1500**

Tank Material: **Concrete**

Tank Corrosion Type: **Slight**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **Yes**

Licensed Pumper Name: **Harter Custom Pumping**

Date Pumped: **6/3/2025**

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**

Accessible: **Yes**

Box Opened: **Yes**

Baffle Present: **Yes**

Speed Levelers Present: **No**

Watertight: **Yes**

Functioning As Designed: **Yes**

General Distribution System Comments :

#### Secondary Treatment

##### Lateral Field1

Distribution Type: **Distribution Box**

Material Type: **Rock and PVC Pipe**

Trench Width: **24**

Lines: **3**

Total Length of Absorption Line: **300**

System Hydraulic Loaded: **Yes**

Gallons Loaded: **500**

Meets Setback to Well: **Yes**

Well Type: **Private**

Distance To Well (Ft): **150**

Lateral Lines Probed: **Yes**

Saturation or Ponding Present: **No**

Grass Cover Present: **Yes**

Lateral Lines Equal Length: **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: **1500 Gallon tank and pumped at the time of inspection. Everything was in good working order. The south lid has a filter in it that needs to be cleaned once a year. Recommend pumping every three to five years. Do not drive, park or plant on the lateral field.**



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS  
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

## TIME OF TRANSFER INSPECTION TOT# 15812 ROBB HARTER CERT # 9343

Owner Name: Lana Drake

Address: 2629 315th Street , Hopkinton , IA 52237

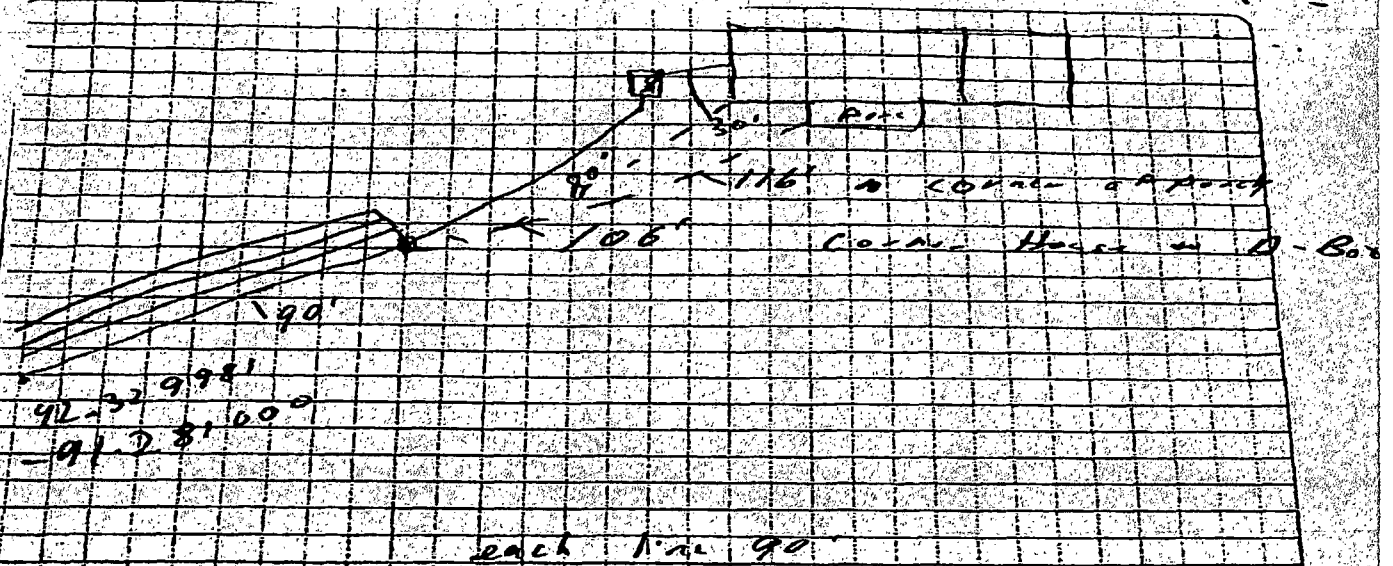
County: Delaware

Inspection Date: 06/03/2025

Submitted Date: 6/9/2025

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).

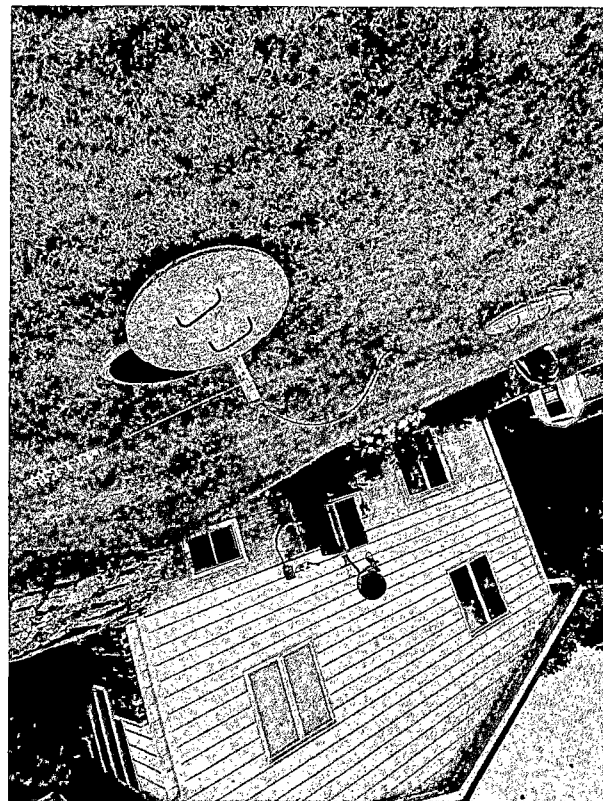
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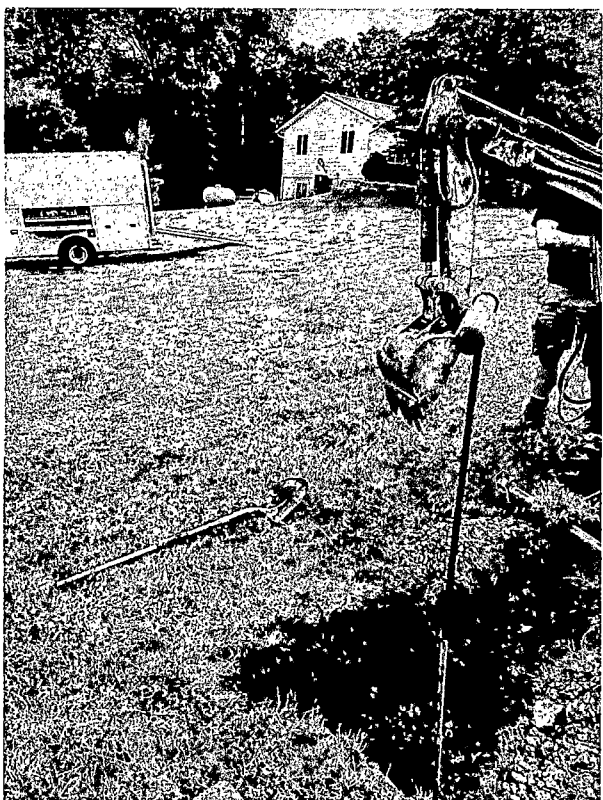
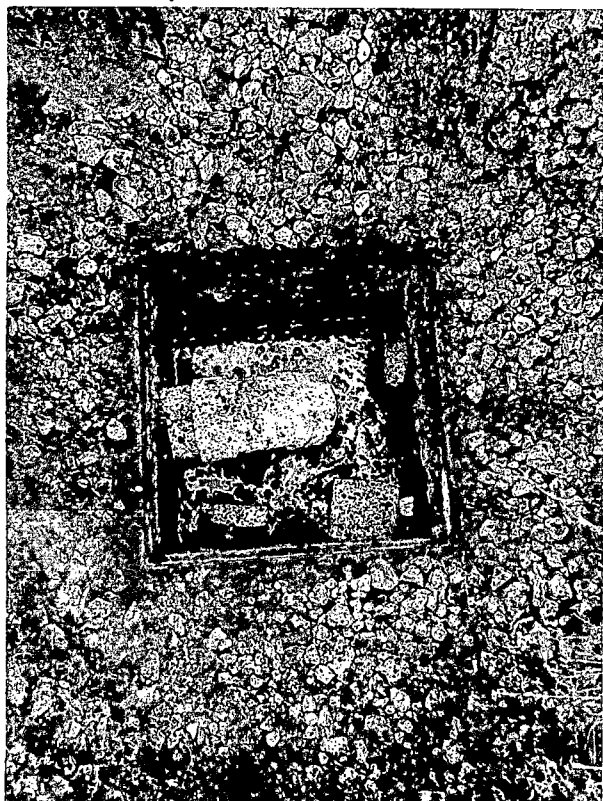












Application # \_\_\_\_\_ DELAWARE COUNTY SANITATION \_\_\_\_\_

Owner: \_\_\_\_\_ Completion Report for Private Sewage Disposal System \_\_\_\_\_

Site Address: Dan Deane \_\_\_\_\_

Parcel ID: 2620 2155A \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Lot # \_\_\_\_\_ Township: Union \_\_\_\_\_

County: \_\_\_\_\_ Legal S-T-R: \_\_\_\_\_

Contractor: Booniger \_\_\_\_\_

Reference #: 2 \_\_\_\_\_

Water Supply: \_\_\_\_\_

Private \_\_\_\_\_

Septic Treatment: \_\_\_\_\_

Latitude: 41.35442 \_\_\_\_\_ Longitude: -91.28055 \_\_\_\_\_

Septic Tank Volume (ft<sup>3</sup>): 1500 \_\_\_\_\_ Material: concrete \_\_\_\_\_ # Pipes: \_\_\_\_\_ # Comp: \_\_\_\_\_

Flow Rate (LPM): 100 \_\_\_\_\_ Flow Rate (GPM): 100 \_\_\_\_\_ Diameter (in): \_\_\_\_\_

Effluent Eff. Requires frequent cleaning \_\_\_\_\_

Sanitary Tank Volume (ft<sup>3</sup>): \_\_\_\_\_ Pump or Siphon Hose: \_\_\_\_\_ Gallons/day: \_\_\_\_\_

Riser (ft) (in): \_\_\_\_\_ Alarm: \_\_\_\_\_

Latitude: 41.33058 \_\_\_\_\_ Longitude: -91.28074 \_\_\_\_\_

Depth: 2' 3" \_\_\_\_\_

Surface Absorption Type: \_\_\_\_\_ Chamber Manifold \_\_\_\_\_

Latitude: 41.33058 \_\_\_\_\_ Longitude: -91.28074 \_\_\_\_\_

Depth: 2' 3" \_\_\_\_\_

Surface Absorption Type: \_\_\_\_\_ Chamber Manifold \_\_\_\_\_

Latitude: 41.33058 \_\_\_\_\_ Longitude: -91.28074 \_\_\_\_\_

Depth: 2' 3" \_\_\_\_\_

Rock under pipe (in): \_\_\_\_\_ Trench Depth (in): \_\_\_\_\_ Trench Width (in): \_\_\_\_\_

Distance to well (ft): \_\_\_\_\_

Surface Absorption Type: \_\_\_\_\_

Overall length (ft): \_\_\_\_\_ Overall width (ft): \_\_\_\_\_

Rock bed height (ft): \_\_\_\_\_ Rock bed width (ft): \_\_\_\_\_

Length of laterals (ft): \_\_\_\_\_ # Laterals: \_\_\_\_\_

Rock type: \_\_\_\_\_ Distance to well (ft): \_\_\_\_\_ Depth to bottom of trench (in): \_\_\_\_\_

Bed and Media Filter: \_\_\_\_\_

Sand filter length (ft): \_\_\_\_\_ Sand filter width (ft): \_\_\_\_\_ Sand filter sq. ft.: \_\_\_\_\_

Distance to well (ft): \_\_\_\_\_ # Distributor lines: \_\_\_\_\_ # Collector lines: \_\_\_\_\_

Filter line type: \_\_\_\_\_

Separating layer: \_\_\_\_\_ Discharge GPS (ft x long): \_\_\_\_\_

# Filter: Sand #1 \_\_\_\_\_ Closed or Open bottom: \_\_\_\_\_ Lined Ft. absorption: \_\_\_\_\_ # Laterals: \_\_\_\_\_

Rock, river rock or chamber \_\_\_\_\_ Trench width (ft): \_\_\_\_\_ Rock under pipe (in): \_\_\_\_\_

Distance to well (ft): \_\_\_\_\_

Inches soil cover over trench: \_\_\_\_\_ Discharge GPS (ft x long): \_\_\_\_\_

Existing Toilet Flare: \_\_\_\_\_ Brand Name: \_\_\_\_\_

Distance to well (ft): \_\_\_\_\_

Discharge GPS (ft x long): \_\_\_\_\_

Absorption (ftal installed after no discharge) \_\_\_\_\_

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

Effluent Eff. Requires frequent cleaning \_\_\_\_\_

Was any portion of the field covered before the inspection: no System installation approved: yes  
Date of Final Inspection: 9-10-8 Environmental Health Specialist: David L. [Signature]  
Scanned ☐ [Signature]  
This APPROVAL in no way makes the County responsible for the continued operation of this sanitation system

**BOARD OF SUPERVISORS**

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWER DISPOSAL SYSTEM

PARTY NO. 2311

ADDRESS: 2629 - 3<sup>rd</sup> St. SECTION 23 TOWNSHIP 14 N

LOCATION: QT QT SEC. 23 & R W 14 NEAR 3705 401 800

OWNER: Dan Danks Plumber: Don Green Berkey

Lot Size: 7 Acres Type Commercial Residential (No. Bedroom) \_\_\_\_\_

Septic Tank: 2 Sanitary Showers: 2 Sinks: 3 Automatic Laundry \_\_\_\_\_

Drinking Water made by: Sand Construction Material: 1-1/4 Gallon Cap 1500 LB PUMP

Absorption Field: Total length of Lateral: 300 No. of lateral lines: 3-4 Size of each bed \_\_\_\_\_

Trench Material: flexible pipe Secondary Treatment type: 3' to 4'

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

I hereby grant the above information is correct and that all proposed work will be completed in accordance with  
Dakota county Regulations.

Date Approved: 9-11-14 \_\_\_\_\_

APPLICANT'S SIGNATURE: Don H. Danks

by: Don H. Danks

INSPECTOR