

Recorded: 8/27/2025 at 8:23:22.0 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: 2296

**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 Larry E Peter\*

Address 8900 C Ave NE #203, Marion, Iowa 52302

Number and Street or RR

City, Town or PO

State

Zip

**TRANSFeree:**

Name Brian A Mangold\*

Address 3334 340th St. Radcliffe, Iowa 50230

Number and Street or RR

City, Town or PO

State

Zip

Address of Property Transferred:

20806 263rd St., Manchester, Iowa 52057

Number and Street or RR

City, Town or PO

State

Zip

Legal Description of Property: (Attach if necessary)

SEE EXHIBIT

**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:

Active  
Drilled  
SE corner of home  
   
   
 

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

Signature: Larry E. Peter Telephone No.: 563-920-9833  
(Transferor or Agent)

## **Exhibit A**

**Parcel P Comprised Of Part Of Parcel H Of The Southeast Quarter (SE1/4) Of The Northeast Quarter (NE1/4), In Section Twenty-Six (26), Township Eighty-Eight North (T88N), Range Five West (R5W) Of The Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 2000, Page 1557; also Parcel AA Part Of Lot Fifteen (15) Of Turtle Creek Camp Replat Of The Southeast Quarter (SE1/4) Of The Northeast Quarter (NE1/4), Section Twenty-Six (26), Township Eighty-Eight North (T88N), Range Five West (R5W) Of The Fifth Principal Meridian Delaware County, Iowa, according to plat recorded in Book 2002, Page 767**



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS  
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

## TIME OF TRANSFER INSPECTION TOT# 16052 ROBB HARTER CERT # 9343

### Site Information

Parcel Description: **250250205210**

Address: **20806 263rd St, Manchester, IA 520257**

County: **Delaware**

### Owner Information

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

Business Name:

Owner Name: **Larry E & Evelyn M Peter**

Email Address:

Address: **8900 C Ave NE #203, Marion, IA 52302**

Phone No:

### Site related information

No Of Bedrooms: **3**

Inspection Date: **06/19/2025**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date:

Permit issued by County: **N/A**

Permit Number:

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: **Slight**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **Yes**

Licensed Pumper Name: **D & S Portables**

Date Pumped: **9/16/2024**

Meets Setback to Well: **Yes**

Well Type: **Private**

Distance To Well (Ft): **60**

Is Accessible: **Yes**

Lid Intact: **Yes**

Risers Intact: **Yes**

Effluent Filter Present: **No**

Watertight: **Yes**

Tank/Vault Pumped: **No**      Inlet Baffle Present: **Yes**      Outlet Baffle Present: **Yes**      Functioning as Designed: **Yes**  
Tank Comments: **Receipt for the pump out done by D&S Portables is attached in photos It was done in September of 2024**

General Primary Treatment Comments:

**Distribution Type**

**Distribution Box 1**

Label: <b>Distribution Box 1</b>	Material Type: <b>Plastic</b>	Accessible: <b>Yes</b>
Box Opened: <b>Yes</b>	Baffle Present: <b>No</b>	Speed Levelers Present: <b>No</b>
Watertight: <b>Yes</b>	Functioning As Designed: <b>Yes</b>	

General Distribution System Comments :

**Secondary Treatment**

**Lateral Field1**

Distribution Type: <b>Distribution Box</b>	Material Type: <b>Rock and PVC Pipe</b>	Trench Width: <b>24</b>
Lines: <b>3</b>	Total Length of Absorption Line: <b>300</b>	System Hydraulic Loaded: <b>Yes</b>
Gallons Loaded: <b>300</b>	Meets Setback to Well: <b>Yes</b>	Well Type: <b>Private</b>
Distance To Well (Ft): <b>120</b>	Lateral Lines Probed: <b>Yes</b>	Saturation or Ponding Present: <b>No</b>
Grass Cover Present: <b>Yes</b>	Lateral Lines Equal Length: <b>Yes</b>	System Located on Owner Property: <b>Yes</b>
Easement Present: <b>N/A</b>	Functioning as Designed: <b>Yes</b>	
Comments:		

General Secondary Treatment Comments:

**Narrative Report**

TOT Inspection Report Overall Narrative Comments: **1500 tank was pumped by D&S Portables in September of 2024 by D&S Portables. The inspection was done by Harter Custom Pumping. Everything in good working order at the time of inspection. Do not drive, park, build or plant trees in the lateral field. Recommend pumping every three to five years. All fixtures go to the septic tank.**

**TIME OF TRANSFER INSPECTION TOT# 16052 ROBB HARTER CERT # 9343**

Owner Name: **Larry E & Evelyn M Peter**

Address: **20806 263rd St , Manchester , IA 52057**

County: **Delaware**

Inspection Date: **06/19/2025**

Submitted Date: **6/23/2025**

DELAWARE COUNTY  
BOARD OF SUPERVISORS

(Print or Type)

Permit No. 891

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 20506 263 ST MANCHESTER Section 26 Township 14160

LOCATION: NE 1/4 of NW 1/4 of SW 1/4 T 84N R 5W

Owner: LARRY PETER Tenant: \_\_\_\_\_ Plumber: SCHULTZ

Lot Size: 117' X 300' Type Commercial: \_\_\_\_\_ Residential: (No. Bedrooms) 3

Fixtures: Sinks 2 Lavatories 2 Bath Tubs 2 Showers 1 Sinks 1 Automatic Laundry 1 Sump Pump \_\_\_\_\_

Septic Tank made by \_\_\_\_\_ Garbage Grinder \_\_\_\_\_ Construction Material CONCRETE Gallons Cap 1000

Percolation Test: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ Made by: \_\_\_\_\_

Absorption Field: Total length of laterals 300' W/1' BACK No. of lateral lines \_\_\_\_\_

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

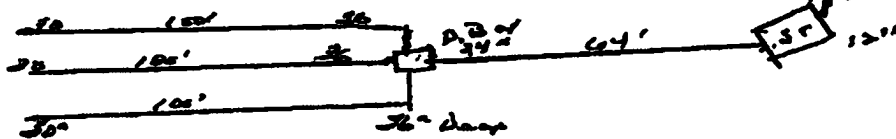
I certify that the above information is correct and that all proposed work will be completed in accordance with the Delaware County Regulations.

Date Approved 6/9/00

By Morton Welles  
INSPECTOR

SEAL

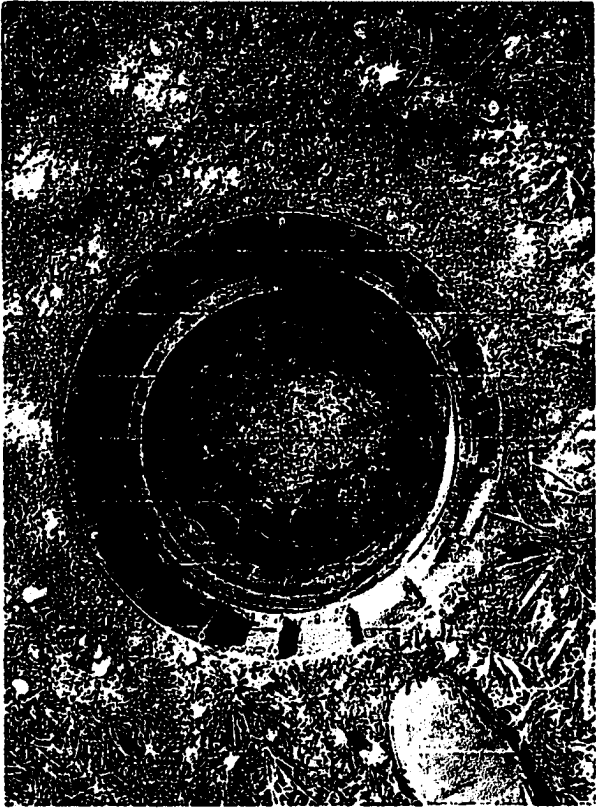
Larry E. Peter  
APPLICANT'S SIGNATURE

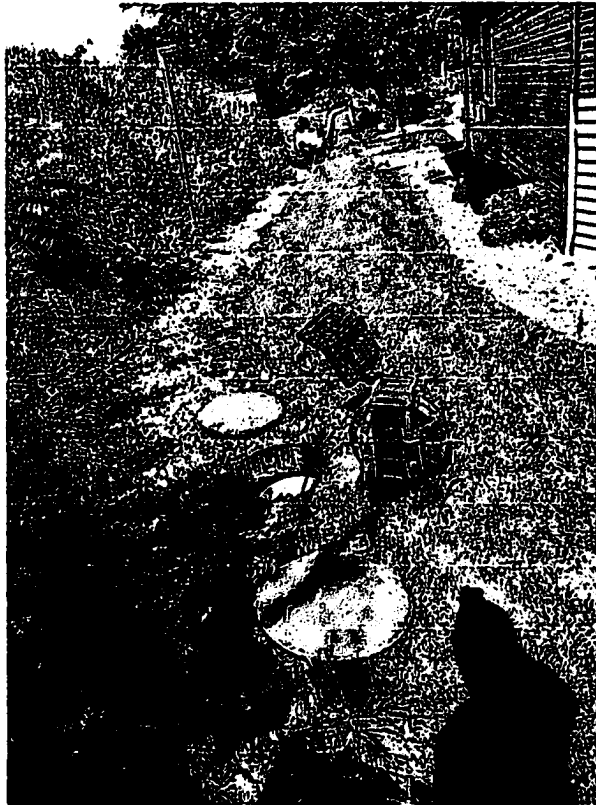




1750-25-02-051-10







Standard Check	
Amount	\$450.00
Pay to the order of	Standard Check
From	Premium Plus Sales Insurance
Delivered by	20 SEP 2024
Frequency	One Time