



Book 2025 Page 2328

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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: Christopher M. Olson and Abby L. Olson

Address: 17080 185th Street, Manchester, IA 52057

TRANSFeree:

Name: Joyce M. Wellman

Address: 26236 213th Ave, Delhi, IA 52223

Address of Property Transferred:

17080 185th Street, Manchester, Iowa 52057

Legal Description of Property: (Attach if necessary)

Lot Five (5) of Fawn Trail being a subdivision of Parcel "C" in Section 17 and Parcel "G" in Section 18; all in Township 89 North, Range 5 West of the Fifth Principal Meridian, Delaware County, Iowa, according to plat recorded in Book 2005, Page 1694

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.

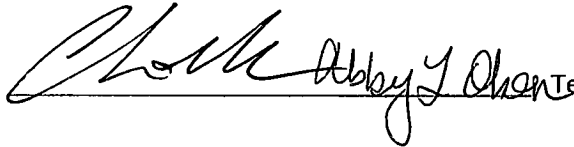
- B. If you checked any box stating "Condition Present" for any of the numbered sections above, continue below. You must complete this form, including providing all required information, and you must submit this form to the county recorder's office with declaration of value.

Information required by statements checked above should be provided here or on separate sheets attached hereto:

Septic Tank, concrete 1500 gallons installed 10/16/2022 permit #2121

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

Signature:

 Abby L. Olson

Telephone No.:

309-204-7017

GROUNDWATER HAZARD STATEMENT

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

a. Solid Waste Disposal (check one)

- ☐ There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.
- ☐ There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

b. Hazardous Wastes (check one)

- ☐ There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.
- ☐ There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

N/A to my knowledge, none present.

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

Signature: _____

Abby L Olsen

Telephone No.: _____

309-204-7017



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 17178 ROBB HARTER CERT # 9343

Site Information

Parcel Description: **140170400500**

Address: **17080 185th Street, Manchester, IA 52057**

County: **Dubuque**

Owner Information

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

Business Name:

Owner Name: **Christopher M & Abby L Olson**

Email Address:

Address: **17080 185th Street, Manchester, IA 52057**

Phone No:

Site-related information

No Of Bedrooms: **3**

Facility Type: **Residential**

Last Occupied:

Permit issued by County: **Yes**

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

Property Information Comments:

Inspection Date: **08/15/2025**

Currently Occupied: **Yes**

System Installation Date:

Permit Number: **2121**

County contacted for records: **Yes**

Primary Treatment

Tank 1

Tank Name: **Tank 1**

Tank Material: **Concrete**

No. of Compartments: **2**

Date Pumped: **8/15/2025**

Distance To Well (Ft.): **100**

Type: **Septic Tank**

Tank Corrosion Type: **Slight**

Pump Tank Chamber: **Yes**

Meets Setback to Well: **Yes**

Is Accessible: **Yes**

Tank Size (Gal): **1500**

Liquid Level Type: **Normal**

Licensed Pumper Name: **Harter Custom Pumping**

Well Type: **Private**

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: **No** Speed Levelers Present: **Yes**
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: **36**
Lines: **3** Total Length of Absorption Line: **300** System Hydraulic Loaded: **Yes**
Gallons Loaded: **400** Meets Setback to Well: **Yes** Well Type: **Private**
Distance To Well (Ft.): **100** 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: **System in good working condition at the time of inspection. 1500 gallon two compartment tank. There is a filter in the system that needs to be cleaned one time per year. Recommend pumping every three to four years. This inspection in no way makes Harter Custom Pumping responsible for the continued operation of this system.**

TIME OF TRANSFER INSPECTION TOT# 17178 ROBB HARTER CERT # 9343

Owner Name: **Christopher M & Abby L Olson**

Address: **17080 185th Street , Manchester , IA 52057**

County: **Dubuque**

Inspection Date: **08/15/2025**

Submitted Date: **8/22/2025**

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).

8/22/2025, 4:48 PM





8/22/2025, 4:48 PM

