

Recorded: 5/19/2026 at 10:40:10.0 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: 2026 PG: 1279

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/media/5465>.

Attachment 1, if required, can be found at: <https://www.iowadnr.gov/media/5466>.

TRANSFEROR:

Name	Zachary A. Muller and Breanna Recker			
Address	19044 171st Ave	Manchester	IA	52057
	Number and Street or RR	City, Town or PO	State	Zip

TRANSFeree:

Name	Angela K. Wendt			
Address	2253 230th St	Delhi	IA	52223
	Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

19044 171st Ave	Manchester	Iowa	52057
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

Lot Three (3) of Frankenfeld's Replat of Part of Block Three (3) of Sunset Beach Subdivision, Delaware County, Iowa, according to plat recorded in Book 3 Plats, Page 159, being also described as that part of Lot Two (2) of Block Three (3), and of the alley in said Block Three (3), of Sunset Beach, a subdivision of parts of Sections Seventeen (17), Eighteen (18) and Twenty (20), Township Eighty Nine (89) North, Range Five (5) West of the Fifth Principal Meridian, according to plat recorded in Book 2, Plats, Page 20, described as commencing at the Northeast corner of Lot Eight (8) of Block Three (3) of said Subdivision, and running thence North 70° 08' West one hundred eighteen and seventy eight one-hundredths (118.78) feet to the Easterly line of Lakeview Road of said Subdivision, said point being also the Northwest corner of Lot Nine (9) of Block Three (3) of said Subdivision, thence North 22° 10' East along the Easterly line of said Lakeview Road eighty five (85.0) feet, thence South 77° 34' East to a point which is North 19° 52' East one hundred (100.0) feet from the point of beginning, thence South 87° 35' East sixty one (61.0) feet, thence South 27° 50' West ninety six and three-tenths (96.3) feet, thence North 70° 08' West fifty (50.0) feet, thence South 19° 52' West twenty (20.0) feet to the point of beginning.

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 sand point well located in the* _____
 _____ *basement 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: *Jakey Mho*
(Transferor or Agent)

Telephone No.: (563) 608-6320



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 20982 BILL DOWNS CERT # 8880

Site Information

Parcel Description: **Zach Muller**

Address: **19044 171st Ave, Manchester, IA 52057**

County: **Delaware**

Owner Information

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

Business Name:

Owner Name: **Zach Muller**

Email Address:

Address: **19044 171st Ave, Manchester, IA 52057**

Phone No: **563-608-6320**

Additional Contact Information

Name

Email Address

Affiliate Type

Jane Hanson

jane@hansonlawia.com

Attorney

Site related information

No Of Bedrooms: **3**

Inspection Date: **05/13/2026**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date:

Permit issued by County: **Yes**

Permit Number: **1349**

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

County contacted for records: **Yes**

Property Information Comments:

Primary Treatment

Multi flow

Tank Name: **Multi flow**

Type: **Septic Tank**

Tank Size (Gal): **750**

Tank Material: **Concrete**

Tank Corrosion Type: **None**

Liquid Level Type: **Normal**

No. of Compartments: **1**

Pump Tank Chamber: **Yes**

Licensed Pumper Name: **Bill Downs**

Date Pumped: **8/8/2025** 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: **No** Watertight: **Yes**
Tank/Vault Pumped: **No** Inlet Baffle Present: **Yes** Outlet Baffle Present: **Yes** Functioning as Designed: **Yes**
Tank Comments: **sand point well system**

General Primary Treatment Comments:

Distribution Type

Distribution System : **No**

General Distribution System Comments :

Secondary Treatment

Absorption Bed1

Distribution Type: **Header Pipe** Material Type: **Leaching Chamber** Absorption Bed Width: **30**
Absorption Bed Length: **20** Total Absorption Area: **600** System Hydraulic Loaded: **Yes**
Gallons Loaded: **300** 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: **Multi flow system - bed with no open discharge. Very poor systems multi flows are very high maintenance - lots of tree roots in bed.**

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **New pump was put in May 2023. System working fine at time of inspection - pump working at date of inspection.**



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 20982 BILL DOWNS CERT # 8880

Owner Name: **Zach Muller**

Address: **19044 171st Ave , Manchester , IA 52057**

County: **Delaware**

Inspection Date: **05/13/2026**

Submitted Date: **5/14/2026**

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).

OSWAP Approval Form

Requires County Signatures for (1) Onsite System Plan and (2) Final Inspection

County Delaware County Permit # 1349

Owner's Name: Tracy L. Woods

Address: 19044 171st Ave. Manchester, Iowa 52057

Phone: (Home) 563-927-2787 (Work) 319-431-0208 (Cell)

Property Address: 19044 171st Ave. Manchester, Iowa 52057

Legal Description SE 1/4 SW 1/4 SW 1/4 Section 17 Tier 89 Range 5
Lat. 42.5134 Long. -91.4682

Problem with Existing System: Backing Up

Type of Building (check one box below):

Home: # Bedrooms (BRs) 3 Other (e.g. Shop, Office, etc):

System Design Flow in Gallons/Day (150 x # BRs, if a home): 450

Soil Evaluation: Is Site Suitable for Soil Absorption System? Yes No

Soil Test Method (check one or both boxes): Percolation Test Soil Evaluation Other:

Soil Absorption Rate: (Minutes/Inch) Other Factors:

Limiting Layer Depth: 27' Limitation Type (Rock, Impervious Clay, Groundwater):

Onsite Wastewater System Plan:

1. Septic Tank: # Tanks 1 Total Capacity (Gallons) 1000 Material (Concrete, Plastic)

2. Secondary Treatment System:

a. Soil Absorption: Type (e.g. Chamber, Gravel, etc) Bed Length 20' Width 30' Depth 2'

b. Other: (e.g. Sand Filter, Peat Filter, etc) Type Multiflo Size 750

Brand (if applicable) Additional Treatment (if applicable)

3. Is This a Surface Discharging System? Yes No Is NPDES Permit Applied For? Yes No

4. System Management Plan: Thru Multiflo into 20x30' Bed - open

Signature of Applicant Tracy L. Woods Date 8/1/05 discharge

(1) Plan Approved Dennis Lyons Date 8/1/05
County Representative

Final Inspection: OSWAP Loan Approved? Yes No Lender:

Is Completed System Same as Plan? Yes No If not, describe completed system:

OSWAP # (Co., Yr., #)

(2) Completed System Approved Dennis Lyons Date 9-23-05
County Representative

140 17 01 043 00

DELAWARE COUNTY
BOARD OF SUPERVISORS

(Print or Type)

Permit No. _____

1349

APPLICATION FOR PERMIT TO INSTALL PRIVATE SEWAGE DISPOSAL SYSTEM

ADDRESS: 190 YV 171 st Avr Section 17 Township Delaware

LOCATION: SEVY SWKY SWKY sec. 17 7-99N R.5-W

Owner: Fairy Woods Tenant: _____ Plumber: Hester

Lot Size: 150x150 Type Commercial: _____ Residential: (No. Bedrooms) 3

Fixtures: Sinks 2 Lavatories 1 Bath 1 Shower 1 Sinks 3 Automatic Laundry 1 Sump Pump _____

Septic Tank made by _____ Garbage Grinder _____ Construction Material _____ Gallons Cap _____

Percolation Test: 1 _____ 2 _____ 3 _____ 4 _____ Made by: _____

Absorption Field: Total length of laterals _____ No. of lateral lines _____

This system is new _____ Existing _____ Mn/A: - F/o 18x15'

I certify that the above information is correct and that all proposed work will be completed in accordance with the Delaware County Regulations. 2 0130

Date Approved 8-2-05

By [Signature] INSPECTOR SEAL APPLICANT'S SIGNATURE _____

