



Document 2020 GW4219

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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

**REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT
TO BE COMPLETED BY TRANSFEROR**

TRANSFEROR:

Name John C. Williams and Sandra A. Williams

Address 2683 Settlers Trail, St. Charles, IA 50240

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Tucker Baker and Sarah A. Baker

Address 417 S. 2nd Street, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2683 Settlers Trail, St. Charles, IA 50240

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) A tract of land located in the North Half (1/2) of the Northwest Fractional Quarter (1/4) of Section Thirty-one (31), Township Seventy-five (75) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, containing 17.85 acres, as shown in Plat of Survey filed in Farm Plat Book 2, Page 28 on April 24, 1986, in the Office of the Recorder of Madison County, Iowa.

1. Wells (check one)

☐ There are no known wells situated on this property.

☒ 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)

☒ There is no known solid waste disposal site on this property.

☐ 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)

☒ There is no known hazardous waste on this property.

☐ 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)

☒ 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.)

☐ 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)

- ☒ There are no known private burial sites on this property.
☐ 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)

- ☐ All buildings on this property are served by a public or semi-public sewage disposal system.
☐ This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
☒ 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.
☐ 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.
☐ There is a building served by private sewage disposal system on this property. 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.
☐ 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 #9]
☐ This property is exempt from the private sewage disposal inspection requirements pursuant to the following exemption [Note: for exemption #9 use prior check box]: _____
☐ The private sewage disposal system has been installed within the past two years pursuant to permit number _____

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

150 feet Northwest of the house by the driveway.
Well #2 400 feet South of the house by the pond.

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

Signature: John C. Williams
(Transferor or Agent)

Telephone No.: (515) 250-6714



Time of Transfer Inspection Report

Other components:

Alarms No Working? _____ disinfection No working? _____

Control box No Timers _____ inspection ports No

Other components None

Overall condition of the private sewage disposal system

Report system status _____

Explain (attach additional pages as needed): has Riser on tank to top of ground
has new DISTRIBUTION BOX

Comments: _____

Site status at conclusion of Time of Transfer inspection:

- Verify that controls are set on the appropriate mode.
- Power is on to all components.
- Revisit all components to verify lids are secure.
- Gather all tools for removal from the site.
- Verify that no sewage is on the ground surface.

Using this worksheet, write a narrative report of the inspection results and attach a site sketch.

This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified inspector: Allen Akers Date: 8-17-2020
Name (print): Allen Akers Certificate #: #1023
Address: 2204 175th Ct
Phone #: 515-462-1015

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office, county Recorder in the county the inspection was conducted and to;

Iowa DNR Onsite Wastewater Program
502 E. 9th St.
Des Moines, IA 50319

Anytime Septic Services II
502 W. Main St.
Saint Charles, Iowa
50240

877187

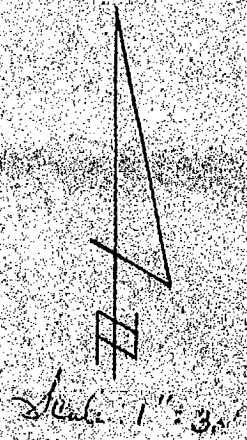
CUSTOMER'S ORDER NO.		DEPARTMENT		DATE	
515-245-3406		515-245-3406		6-15-18	
NAME John & Sandra Williams					
ADDRESS 2683 South St. W.					
CITY, STATE, ZIP Perry IA 50450					
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		MOSE RETO.		PAID OUT	
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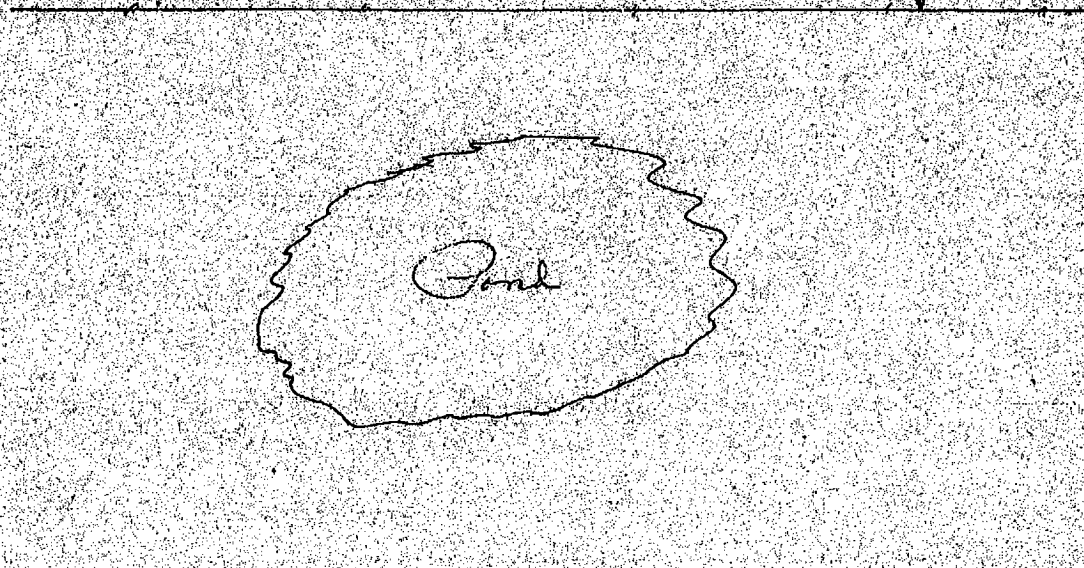
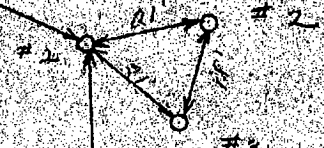
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Dean Ross

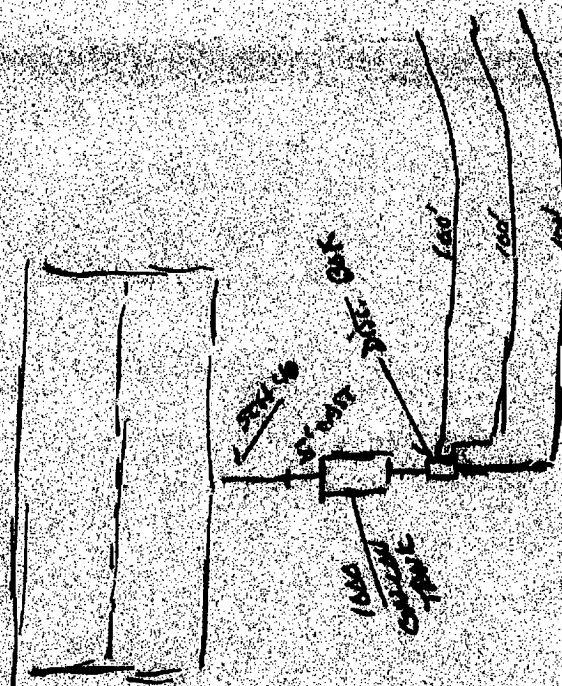


Mobile Home
Site



60'





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