BK: 2021 PG: 2726

Recorded: 7/1/2021 at 2:25:34.0 PM

DNR form 542-0960 (July 18, 2012)

Pages 6

**County Recording Fee: \$0.00** Iowa E-Filing Fee: \$0.00 Combined Fee: \$0.00

**Revenue Tax:** 

LISA SMITH RECORDER Madison County, Iowa

#### **REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT**

TO BE COMPLETED BY TRANSFEROR

TR	A۱	ıs	FE	R	o	R
----	----	----	----	---	---	---

Name: Tananda Queck and Adam Queck

Address: 18290 NW Cornell Rd., Apt. D, Beaverton, OR 97006

#### TRANSFEREE:

Name: Trenton McNair

Address: 3047 Cumming Rd., Van Meter, IA 50261

### Address of Property Transferred:

5. Private Burial Site (check one)

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

**FILE WITH RECORDER** 

3047 Cumming Rd., Van Meter, Iowa 50261

Legal Description of Property: (Attach if necessary)

A tract of land in the Southeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Twenty-eight (28), Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, containing .803 acres, as shown in Plat of Survey filed in Farm Plat Book 2, Page 82 on September 18, 1987 in the records of the Recorder of Madison County, Iowa.

4	147-11-	1-11-	
1.	vveiis	(check	onei

1.	We	lls (check one)
	$\boxtimes$	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.	Soli	d Waste Disposal (check one)
	$\boxtimes$	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.	Haz	ardous Wastes (check one)
	$\boxtimes$	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.
1.	Und	derground Storage Tanks (check one)
	$\boxtimes$	There are no known underground storage tanks on this property. (Note exclusions such as small farm ar 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.

☐ 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)
<ul> <li>All buildings on this property are served by a public or semi-public sewage disposal system.</li> </ul>
☐ 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.
$\square$ 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:
I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS
FOR THIS FORM AND THAT THE INFORMATION STATED
ABOVE IS TRUE AND CORRECT.
(ila. Paral
Signature: Telephone No.:  Telephone No.:  Telephone No.:  Telephone No.:  Telephone No.:  Telephone No.:  Telephone No.:  Telephone No.:  Telephone No.:
(Transferor)



4/2010 cmz/dao

### **Time of Transfer Inspection Report**

Property Information	ž.				
Current Owner: Adam Queck					
Buyer:	Manufacture of the second seco	Realtor:	Rose	r Queck	
Mailing Address:	A control of the second		****	ı Anow	**************************************
Site Address/County: 3047 Cum	ming Rd, Van Mete	er IA/ Madison C	ountv		<del></del>
Legal Description					***************************************
No. of bedrooms: 3 La	ast occupied:	current	Records	available:	yes
Permit/ installation date: 6-26-04	4 Sep	aration distances		ok	ywo
Septic System Information	The second secon		<b>(</b>	*/**	and a second
Septic tank(s): Size: 1500 gal	Material:	poly	Condition:	good	
Tank pumped? ✓ Y□N Date:	5-18-21	Licensed pumpe		Wiegert	ati digan dina da yang yang ang ang ang ang ang ang ang ang ang
Septic/Trash/Processing tank: Size:	D	Material:		Condition:	description de la constitución d
Tank pumped? □ Y □ N Date:	WITHOUT HOUSE ALCO, b. t	Licensed pumpe		· · · · · · · · · · · · · · · · · · ·	·
Aerobic treatment unit (ATU) mfgr	Tak (Calaba) (Calaba) and Calaba (Calaba) (Calab		All control of the Co	Size	***************************************
Tank pumped? $\square Y \square N$ Date:	MINISTER CONTRACTOR OF THE PROPERTY OF THE PRO	Licensed pum	per:	The state of the s	
Maintenance contract? □ Y □ N	Expiration date:	****	Service prov	rider:	**************************************
Condition:		4#24490444444444444444444444444444444444	~	THE STATE OF THE S	MANAGEMENT OF THE PARTY OF THE
Pump tanks/vaults: Type:	Size:	n Himming and a supplemental the supplemental to the supplemental	Conditio	on:	***************************************
Distribution system: Distribution box	Plastic	Outlets used	3	Condition:	good
Header pipe(s): 4"scl	h40 No. of	lines: 3	Pressu	re dosed?	no
Secondary Treatment:		- the second sec	***************************************	Westerform.	<del>0111111111111111111111111111111111111</del>
Length of absorption fields: 3x	:100°	Determined by:	Co	ounty Map	
Condition of fields: good/dry		Determined by:	hy	draulic test	***************************************
Type of trench material: 36" cha	ambers		***************************************		Na hampyonia e Charles and anno anno anno angestico anno an
Size of sand filter:		Determined by:	Antonian dunuyuga		
Vent pipes above grade? ☐ Y ☐ N	and the forest and the last th	Discharge pipe	located?	ПУПИ	
Effluent sample taken		Results:			
Media Filters: Type:	ample recommendate and any and analysis and any or a confidence of the confidence of	er disabinda ngaranggarangga		The second secon	hort-specific constraints
Maintenance contract? □ Y □ N	Expiration date:		Service prov	ider:	
Condition:		yan and a second		Sport and a second day	
NPDES General Permit No. 4: Require	d? DYDN	Permitted?	IYDN	NOI provided	

DNR Form 542-0191



## **Time of Transfer Inspection Report**

Other compone	nts:							
Alarms: □ Y	□ N Working:	$\Box$ Y $\Box$ N	Disinfection:	OYON	Working:	$\Box$ Y $\Box$ N		
Control Box: Timers:			Inspection	Inspection Ports:				
Other compone	nts:	291HK41HH4114				**************************************		
Overall condition	on of the private sew	age disposal sys	tem:	<u> </u>	***************************************	***************************************		
Report system s			king properly during	g the Inspectio	n			
Explain (attach	additional pages as r		The tank is goo			hydraulic		
test was good. T	The lateral field was	dry. All plumbin			***************************************	***************************************		
Comments:			The state of the s	The state of the s				
***************************************	verrousement and the second se							
Site status at con	nclusion of Time of	Transfer inspecti	On'	Manager and the second		With the fact of the control of the		
<ul><li>Power is a Revisit al</li><li>Gather al</li></ul>	at controls are set on the on to all components. I components to verify tools for removal from the sewage is on the second	v lids are secure.	de.					
Using this works	sheet, write a narrati	ve report of the i	nspection results an	ıd attach a site	sketch.			
This report indic	eates the condition of at it will continue to	the private sew	age disposal system			on. It does		
Signature of Cer	tified Inspector:	Ben B	eduell	Date	5-25-2	21		
Name (print):	Ben Bedwell			Certificate #	<b>#:</b> 11	612		
Address:	1500 N B St, India	mola IA	STATE OF THE PROPERTY OF THE P	****	PP1990404133134141414141414141414141414141414	***************************************		
Phone #:	515-681-2053			and the second s		······································		
Provide a copy o ordering the insp	f this report, the narrection, the county sa	rative report and unitarian/environ	sketch to the seller/ mental health office	'agent, buyer/a e and to:	agent or the	person		
Iowa DNR Private Sewage I	Disposal Program							

502 E 9th St

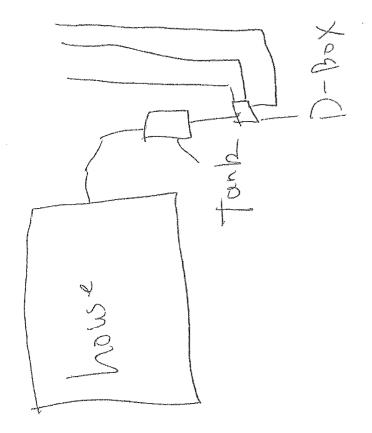
Des Moines IA 50319

GREASE TRAP Recyclable

# The Grease Trap Cleaners A Division of

WIEGERT DISPOSAL INC. P.O. Box 344 1-800-728-4908 Martensdale, IA 50160

old To	5er 300-	Bedu	vell iming		Date 5		
***************************************		**************************************	Chochal	<u> 54</u>	<i>(/8c)</i>	n m	ere
	CHARGE	C.O.D	SALESN	IAN	R	EC. ON	ACCT.
UAN.		DESC	CRIPTION		PRICE	ΛM(	JUNT
4_	Greene	Rap Cleanir	ng SEPTIS	je.		325	
		***************************************		***************************************			
***************************************					The state of the s		~~~
***************************************		3 (\$************************************			**************************************	***************************************	-
54-125-544-8 entergraphy		9000	J to a	3	***************************************	<b></b>	****
······································		Form			***************************************		***
		<u> </u>	. W		Mark the second		
***************************************		***************************************			The same of the sa		-
***************************************	***************************************	***************************************	4*** <u>*********************************</u>	***************************************	***************************************	*	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	***	***************************************			<del>(\$4.6p) marking distribution of the control of the</del>		···
**************************************	***************************************	4-0			***************************************		
The second secon	***************************************	Huink	Mor-				
······································	4	quarr	· · · · · · · · · · · · · · · · · · ·		***************************************		
***************************************		Net 15 Da	F.t.		TAX	22	175
						347	manuscus good



.