

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

TRANSFEROR:

Name Sonja J. Roberts

Address 1623 Woodland Ave, Des Moines, IA 50309

Number and Street or RR

City, Town or PO

State

Zip

TRANSFeree:

Name Andrew H. Susanin

Address 2277 Carver Rd, Winterset, IA 50273

Number and Street or RR

City, Town or PO

State

Zip

Address of Property Transferred:

2277 Carver Rd, Winterset, IA 50273

Number and Street or RR

City, Town or PO

State

Zip

Legal Description of Property: (Attach if necessary)

See Attached Exhibit 'A'

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:

The well is active and location is 450 feet North of the house.

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

Signature: _____

(Transferor or Agent)

Telephone No.: _____

575-208-9114



077-21

Time of Transfer Inspection Report (DNR Form 542-0191)

Property information

John G
Current owner Jack Hatch Q? Sen-Ja Roberts
Buyer Andrew & Sarah Susgin Realtor NO
Mailing address 2277 Carver Rd Winterset IA 50273

Site Address/County 2277 Carver Rd Winterset IA 50273
Legal Description same as address

No. of bedrooms 3 Last occupied? Still there Records available yes
Permit/installation date 10-17-16 847-16 Separation distances OK no? NO

Septic system information

Septic tank(s): size 1500-500 pump tank material Cement condition Looks ok at this time
Tank pumped? yes date 9-29-2021 licensed pumper yes ST 237
Septic/trash/processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfg size
Tank pumped? date licensed pumper
Maintenance contract? NO expiration date service provider
Condition

Pump tanks/vaults: type size condition

Distribution system: distribution box Plastic & Cement outlets used 6 condition OK at this time
Header pipe(s) 6-54/35 # of lines 6 Pressure dosed? NO

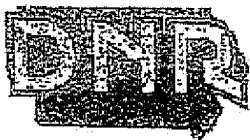
Secondary treatment:

length of absorption fields 840 ft x 6 determined by Probe & Grass
condition of fields Look ok at this time determined by map & Probe
type of trench material 36" Chamber

Size of sand filter NO determined by
Vent pipes above grade? discharge pipe located?
Effluent sample taken? NO Results

Media filters: type
Maintenance contract? NO expiration date service provider
Condition

NPDES General Permit No. 4: required? NO permitted? NO NOI provided



Time of Transfer Inspection Report

Other components:

Alarms yes Working? yes disinfection no working? —

Control box yes Timers no inspection ports yes

Other components has 2 Compartment tank 1500 gal 500 gal pump rises to top for ground

Overall condition of the private sewage disposal system

Report system status Everything looked at this time tank is over top -

Explain (attach additional pages as needed): the Cabin's East Side

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: 9-29-2021
Name (print): Allen Akers Certificate #: 1023
Address: 2204 179th St Winterset IA 50273
Phone #: 515-462-1015
515-468-0691

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

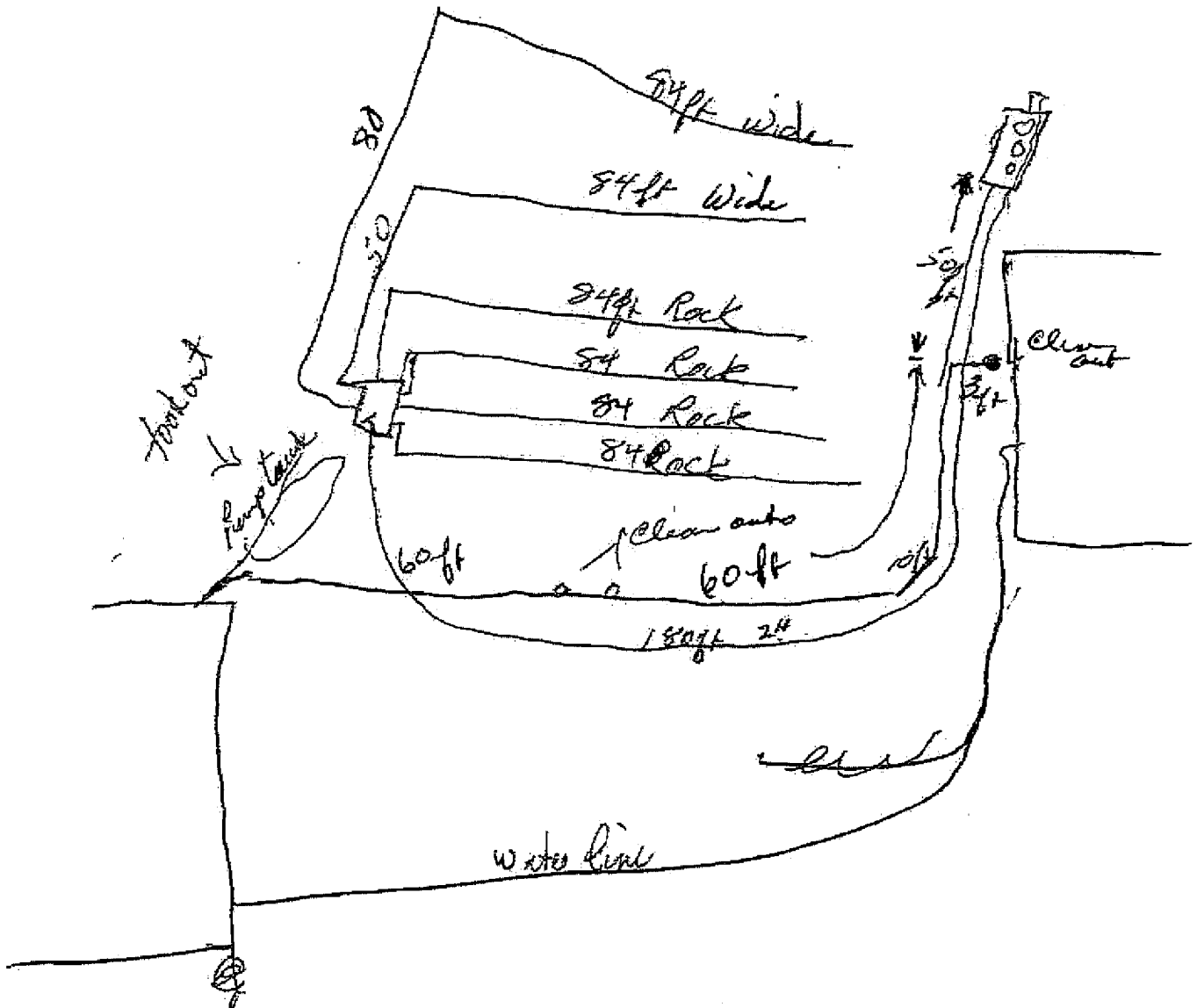
10-15-16-17

Permit # 047-16
2277 Carver Rd
Installation 10/17/16

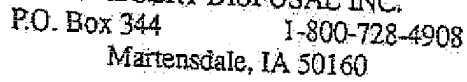
Pittet

Gray Poly Lock
Lister-1500-500 pump tank
Pump + Alarm
18" Deep Tank
36" Chamber 24" Deep

North



E.D.I.N 42-1421732



Date 9-25-21

Address 2277 Carver Rd Windsor

QUAN.	DESCRIPTION	PRICE	AMOUNT
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[illegible]

Net 15 Days

TAX	22	75
TOTAL	347	75

SIGNATURE _____

