

BK: 2023 PG: 797
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Pages 11
County Recording Fee: \$0.00
Iowa E-Filing Fee: \$0.00
Combined Fee: \$0.00
Revenue Tax:
BRANDY L. MACUMBER, RECORDER
Madison 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: Nicole Bettis

Address: 1584 Prairieview Avenue, Van Meter, IA 50261

TRANSFeree:

Name: Matthew A. Van Pelt and Tammy Van Pelt

Address: 1568 Prairieview Avenue, Van Meter, IA 50261

Address of Property Transferred:

1584 Prairieview Avenue, Van Meter, Iowa 50261

Legal Description of Property:

Lot One (1) of GARNER SUBDIVISION, located in the Northwest Quarter (1/4) of the Southwest Quarter (1/4) of Section Thirty-three (33), in Township Seventy-seven (77) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa.

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:

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

Signature: Nicolo Bettis Telephone No.: 515-480-7211
(Transferor)

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:

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

Signature: Mirco Belter Telephone No.: 515-480-7211
(Transferor)



Time of Transfer Inspection Report

Property Information

Site Information

Parcel Description: "E" in NW 1/4 of SW 1/4 Sec. 33-77-27 Address: 1584 Viel Ave
City: Van Meter State: IA Zip: 50261 County: Madison

Owner Information

☐ Property is owned by a business Business name: _____
First Name: Nicole Last Name: Bettis State: IA Zip: 50261
Address: 1584 Prairie View Ave City: Van Meter Phone: 515-480-7211
Email: _____

Additional Contact Information

☒ Buyer ☐ Realtor ☐ Entity ☐ Attorney ☐ Tenant ☐ Other
First Name: Matthew & Tammy Last Name: Van Pelt
Email: mtrkvp@aol.com
☐ Buyer ☐ Realtor ☐ Entity ☐ Attorney ☐ Tenant ☐ Other
First Name: Michael Last Name: Scherer
Email: carlkam@ank.com
☐ Buyer ☐ Realtor ☐ Entity ☐ Attorney ☐ Tenant ☐ Other
First Name: _____ Last Name: _____
Email: _____

Site Related Information

No of Bedrooms: 3 Currently Occupied ☒ Yes ☐ No Last Occupied 3-29-23
County Contacted for Records ☒ Yes ☐ No Permit issued by County? ☐ Yes ☐ No
Inspection Date 4-15-23 Permit Number 1697
System Installation Date 6-5-1998 All plumbing fixtures enter septic system ☒ Yes ☐ No
Facility Type: ☒ Residential ☐ Commercial ☐ Other
Comments: _____

Primary Treatment

☐ No Primary Treatment

Tank 1

Tank Name: _____ Type: ☒ Septic Tank ☐ Pump Tank ☐ Pump Vault ☐ Holding Tank
Size (Gall): 1500 Material: ☐ Brick ☒ Concrete ☐ Fiberglass ☐ Other ☐ Plastic ☐ Steel ☐ Wood
Corrosion: ☒ None ☐ Slight ☐ Moderate ☐ Excessive
Liquid Level: ☒ Normal ☐ Above Baffle ☐ Below Baffle Number of Compartments: ☐ 1 ☒ 2 ☐ 3
☐ Pump Tank Chamber
Licensed pumper: Wiegert Septic Date Pumped: 4-15-23
Meets Setback to Well: ☐ Yes ☐ No ☒ NA

Distribution System

☐ No Distribution System Present

Distribution Box

D Box Name: _____

Material Type: ☐ Plastic ☐ Concrete ☒ Plastic & Concrete ☐ Other

Accessible: ☒ Yes ☐ No

Box Opened: ☒ Yes ☐ No

Baffle Present: ☒ Yes ☐ No

Speed Levelers Present: ☒ Yes ☐ No

Watertight: ☒ Yes ☐ No

Functioning as Designed: ☒ Yes ☐ No

Drop Box

Material Type: ☐ Plastic ☐ Concrete ☒ Plastic & Concrete ☐ Other

Accessible: ☐ Yes ☐ No

Box Opened: ☐ Yes ☐ No

Speed Levelers Present: ☐ Yes ☐ No

Watertight: ☐ Yes ☐ No

Functioning as Designed: ☐ Yes ☐ No

Header Pipe

Header Pipe Name: _____

Material Type: ☐ Plastic ☐ Concrete ☒ Plastic & Concrete ☐ Other

Accessible: ☐ Yes ☐ No

Functioning as Designed: ☐ Yes ☐ No

Pump System

Pump System Name: _____

Accessible: ☐ Yes ☐ No

Control Box Functioning: ☐ Yes ☐ No

Alarms Present and Functioning: ☐ Yes ☐ No

Functioning as Designed: ☐ Yes ☐ No

Siphon/Flout

Siphon/Flout Name: _____

Material Type: ☐ Manufactured ☐ Homemade

Device Type: ☐ Flout ☐ Siphon ☐ Other

Accessible: ☐ Yes ☐ No

Functioning as Designed: ☐ Yes ☐ No

Other

Other Name: _____

Comments: _____

General Distribution System Comments

Secondary Treatment

☐ No Secondary Treatment Present

Lateral Field

Lateral Field Name: _____

Distribution Type: ☒ Distribution Box ☐ Drop Box ☐ Header Pipe ☐ Pump System ☐ Siphon/Flout ☐ Other

Material Type: ☐ Rocks & PVC Pipe ☐ EPS ☐ Leaching Chamber ☒ Gravelless Pipe ☐ Clay Tile

☐ Orangeburg ☐ Other

Disinfection Present: ☐ Yes ☐ No

Disinfection Type: ☐ Chlorination ☐ UV ☐ Other

Tertiary Treatment Present: ☐ Yes ☐ No

Tertiary Treatment Type: ☐ Soil Absorption Field ☐ Sand Filter ☐ Other

Meets Setback to Well: ☐ Yes ☐ No ☐ NA

Type of Well: ☐ Private ☐ Public ☐ Unknown

Alarm Present: ☐ Yes ☐ No

Outlet Found: ☐ Yes ☐ No

System Located on Owner Property: ☐ Yes ☐ No

NPDES GP4 Permitted: ☐ Yes ☐ No

Functioning as Designed: ☐ Yes ☐ No

Comments:

Distance to Well (ft): _____

Alarm Functioning: ☐ Yes ☐ No

Sample Taken: ☐ Yes ☐ No

Easement Present: ☐ Yes ☐ No

NPDES GP4 Required: ☐ Yes ☐ No

Other

Other Name: _____

System Hydraulic Loaded: ☐ Yes ☐ No

Meets Setback to Well: ☐ Yes ☐ No ☐ NA

Type of Well: ☐ Private ☐ Public ☐ Unknown

System Located on Owner Property: ☐ Yes ☐ No

NPDES GP4 Permitted: ☐ Yes ☐ No

Functioning as Designed: ☐ Yes ☐ No

Comments:

Gallons Loaded: _____

Distance to Well (ft): _____

Easement Present: ☐ Yes ☐ No

NPDES GP4 Required: ☐ Yes ☐ No

General Secondary Treatment Comments

Vent(s) Located: ☐ Yes ☐ No
Outlet Found: ☐ Yes ☐ No
System Located on Owner Property: ☐ Yes ☐ No
NPDES GP4 Permitted: ☐ Yes ☐ No
Functioning as Designed: ☐ Yes ☐ No

Media Present: ☐ Yes ☐ No
Sample Taken: ☐ Yes ☐ No
Easement Present: ☐ Yes ☐ No
NPDES GP4 Required: ☐ Yes ☐ No

Comments:

Sand Filter

Sand Filter Type: ☐ Subsurface ☐ Free Access
Distribution Type: ☐ Distribution Box ☐ Drop Box ☐ Header Pipe ☐ Pump System ☐ Siphon/Flout ☐ Other
Material Type: ☐ Rock & PVC Pipe ☐ EPS ☐ Leaching Chamber ☐ Gravel-less Pipe ☐ Other ☐ Unknown
Absorption Area (sq/ft.): _____

System Hydraulic Loaded: ☐ Yes ☐ No

Gallons Loaded: _____

Discharge at the Time of Inspection: ☐ Yes ☐ No

CBOD Results (mg/L): _____

TSS Results (mg/L): _____

Disinfection Present: ☐ Yes ☐ No

Disinfection Type: ☐ Chlorination ☐ UV ☐ Other

Tertiary Treatment Present: ☐ Yes ☐ No

Tertiary Treatment Type: ☐ Soil Absorption Field ☐ Sand Filter ☐ Other

Meets Setback to Well: ☐ Yes ☐ No ☐ NA

Type of Well: ☐ Private ☐ Public ☐ Unknown

Distance to Well (ft): _____

Sand Filter Probed: ☐ Yes ☐ No

Outlet Found: ☐ Yes ☐ No

Vent(s) Located: ☐ Yes ☐ No

Sample Taken: ☐ Yes ☐ No

Saturation or Ponding Present: ☐ Yes ☐ No

System Located on Owner Property: ☐ Yes ☐ No

Grass Cover Over System: ☐ Yes ☐ No

Easement Present: ☐ Yes ☐ No

Functioning as Designed: ☐ Yes ☐ No

NPDES GP4 Required: ☐ Yes ☐ No

Comments:

ATU

ATU Name: _____

Manufacturer: _____

Model Number: _____

Current Maintenance Contract: ☐ Yes ☐ No

Maintenance Provider: _____

Serial Number: _____

System Hydraulic Loaded: ☐ Yes ☐ No

Gallons Loaded: _____

Discharge at the Time of Inspection: ☐ Yes ☐ No

CBOD Results (mg/L): _____

TSS Results (mg/L): _____

Type of Well: ☐ Private ☐ Public ☐ Unknown
Lines or Bed Probed: ☐ Yes ☐ No
Grass Cover Over Systems: ☐ Yes ☐ No
Valve Box(es) Present: ☐ Yes ☐ No
Easement Present: ☐ Yes ☐ No
Comments:

Distance to Well (ft): _____
Saturation or Ponding Present: ☐ Yes ☐ No
Inspection Ports Present: ☐ Yes ☐ No
System Located on Owner Property: ☐ Yes ☐ No
Functioning as Designed: ☐ Yes ☐ No

Mound

Mound Name: _____
Distribution Type: ☐ Distribution Box ☐ Drop Box ☐ Header Pipe ☐ Pump System ☐ Siphon/Flout ☐ Other
Material Type: ☐ Rocks & PVC Pipe ☐ EPS ☐ Leaching Chamber ☐ Gravelless Pipe ☐ Other
Absorption Area Width (sq/ft.): _____
System Hydraulic Loaded: ☐ Yes ☐ No
Meets Setback to Well: ☐ Yes ☐ No ☐ NA
Type of Well: ☐ Private ☐ Public ☐ Unknown
Mound Probed: ☐ Yes ☐ No
Saturation or Ponding Present: ☐ Yes ☐ No
System Located on Owner Property: ☐ Yes ☐ No
Functioning as Designed: ☐ Yes ☐ No
Comments:

Gallons Loaded: _____

Distance to Well (ft): _____

Valve Box(es) Present: ☐ Yes ☐ No
Grass Cover Over Systems: ☐ Yes ☐ No
Easement Present: ☐ Yes ☐ No

Pkg Treatment Media Filter

Pkg Treatment Media Filter Name: _____
Media Type: ☐ Coco ☐ Foam ☐ Peat Moss ☐ Polystyrene Beads ☐ Textile ☐ Other
Manufacturer: _____ Model Number: _____
Serial Number: _____
Current Maintenance Contract: ☐ Yes ☐ No
System Hydraulic Loaded: ☐ Yes ☐ No
Discharge at the Time of Inspection: ☐ Yes ☐ No
CBOD Results (mg/L): _____ TSS Results (mg/L): _____
Disinfection Present: ☐ Yes ☐ No
Disinfection Type: ☐ Chlorination ☐ UV ☐ Other
Tertiary Treatment Present: ☐ Yes ☐ No
Tertiary Treatment Type: ☐ Soil Absorption Field ☐ Sand Filter ☐ Other
Meets Setback to Well: ☐ Yes ☐ No ☐ NA
Type of Well: ☐ Private ☐ Public ☐ Unknown
Distance to Well (ft): _____

OMR Form 562-0191

Trench Width (in.): 24" Lines (1-15): 3 Total Length of Absorption Line (ft.): 300 ft
 System Hydraulic Loaded: ☒ Yes ☐ No Gallons Loaded: 400 gal
 Meets Setback to Well: ☐ Yes ☐ No ☒ NA
 Type of Well: ☐ Private ☐ Public ☐ Unknown
 Lateral Lines Probed: ☒ Yes ☐ No
 Grass Cover Over Systems: ☒ Yes ☐ No
 System Located on Owner Property: ☒ Yes ☐ No
 Functioning as Designed: ☒ Yes ☐ No
 Comments:

Distance to Well (ft):
 Saturation or Ponding Present: ☐ Yes ☒ No
 Lateral Lines Equal Length: ☒ Yes ☐ No
 Easement Present: ☐ Yes ☒ No

Absorption Bed

Absorption Bed Name: _____
 Distribution Type: ☐ Distribution Box ☐ Drop Box ☐ Header Pipe ☐ Pump System ☐ Siphon/Flout ☐ Other
 Material Type: ☐ Rocks & PVC Pipe ☐ EPS ☐ Leaching Chamber ☐ Gravelless Pipe ☐ Clay Tile
☐ Orangeburg ☐ Other
 Absorption Bed Width (in.): _____
 Total Absorption Area (sq/ft.): _____ (the application calculates this for you)
 System Hydraulic Loaded: ☐ Yes ☐ No
 Meets Setback to Well: ☐ Yes ☐ No ☐ NA
 Type of Well: ☐ Private ☐ Public ☐ Unknown
 Absorption Bed Probed: ☐ Yes ☐ No
 Grass Cover Over Systems: ☐ Yes ☐ No
 Easement Present: ☐ Yes ☐ No
 Comments:

Absorption Bed Length (ft.): _____
 Gallons Loaded: _____
 Distance to Well (ft): _____
 Saturation or Ponding Present: ☐ Yes ☐ No
 System Located on Owner Property: ☐ Yes ☐ No
 Functioning as Designed: ☐ Yes ☐ No

At-Grade

At-Grade Name: _____
 Distribution Type: ☐ Distribution Box ☐ Drop Box ☐ Header Pipe ☐ Pump System ☐ Siphon/Flout ☐ Other
 Material Type: ☐ Rocks & PVC Pipe ☐ EPS ☐ Leaching Chamber ☐ Gravelless Pipe ☐ Clay Tile
☐ Orangeburg ☐ Other
 At-Grade Width (in.): _____
 Total At-Grade Area (sq/ft.): _____ (the application calculates this for you)
 System Hydraulic Loaded: ☐ Yes ☐ No
 Meets Setback to Well: ☐ Yes ☐ No ☐ NA
 Gallons Loaded: _____

Type of Well: ☐ Private ☐ Public ☐ Unknown
Accessible: ☒ Yes ☐ No
Risers Intact: ☒ Yes ☒ No
Outlet Baffle: ☒ Yes ☐ No
Watertight: ☒ Yes ☐ No

Distance to Well (ft): 10
Lid Intact: ☒ Yes ☐ No
Inlet Baffle: ☒ Yes ☐ No
Effluent Filter Present: ☐ Yes ☒ No
Tank/Vault Pumped: ☒ Yes ☐ No
Functioning as Designed: ☒ Yes ☐ No

Comments: _____

Tank 2

Tank Name: _____ Type: ☐ Septic Tank ☐ Pump Tank ☐ Pump Vault ☐ Holding Tank
Size (Gal): _____ Material: ☐ Brick ☐ Concrete ☐ Fiberglass ☐ Other ☐ Plastic ☐ Steel ☐ Wood
Corrosion: ☐ None ☐ Slight ☐ Moderate ☐ Excessive
Liquid Level: ☐ Normal ☐ Above Baffle ☐ Below Baffle Number of Compartments: ☐ 1 ☐ 2 ☐ 3
☐ Pump Tank Chamber
Licensed pumper: _____ Date Pumped: _____

Meets Setback to Well: ☐ Yes ☐ No ☐ NA
Type of Well: ☐ Private ☐ Public ☐ Unknown
Accessible: ☐ Yes ☐ No
Risers Intact: ☐ Yes ☐ No
Outlet Baffle: ☐ Yes ☐ No
Watertight: ☐ Yes ☐ No

Distance to Well (ft): _____
Lid Intact: ☐ Yes ☐ No
Inlet Baffle: ☐ Yes ☐ No
Effluent Filter Present: ☐ Yes ☐ No
Tank/Vault Pumped: ☐ Yes ☐ No
Functioning as Designed: ☐ Yes ☐ No

Comments: _____

Tank 3

Tank Name: _____ Type: ☐ Septic Tank ☐ Pump Tank ☐ Pump Vault ☐ Holding Tank
Size (Gal): _____ Material: ☐ Brick ☐ Concrete ☐ Fiberglass ☐ Other ☐ Plastic ☐ Steel ☐ Wood
Corrosion: ☐ None ☐ Slight ☐ Moderate ☐ Excessive
Liquid Level: ☐ Normal ☐ Above Baffle ☐ Below Baffle Number of Compartments: ☐ 1 ☐ 2 ☐ 3
☐ Pump Tank Chamber
Licensed pumper: _____ Date Pumped: _____

Meets Setback to Well: ☐ Yes ☐ No ☐ NA
Type of Well: ☐ Private ☐ Public ☐ Unknown
Accessible: ☐ Yes ☐ No
Risers Intact: ☐ Yes ☐ No
Outlet Baffle: ☐ Yes ☐ No
Watertight: ☐ Yes ☐ No

Distance to Well (ft): _____
Lid Intact: ☐ Yes ☐ No
Inlet Baffle: ☐ Yes ☐ No
Effluent Filter Present: ☐ Yes ☐ No
Tank/Vault Pumped: ☐ Yes ☐ No
Functioning as Designed: ☐ Yes ☐ No

Comments: _____