



Document 2012 GW3688

Book 2012 Page 3688 Type 43 001 Pages 5

Date 12/06/2012 Time 10:52 AM

Rec Amt \$.00

INDX ✓

ANNO

SCAN

CHEK

LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Laura M. Watts and Larry D. Watts

Address 2511 Cumming Rd., Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Anthony M. Goff and Delores A. Goff

Address 1597 Wolf Run Drive, Richfield, WI 53076

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2511 Cumming Rd., Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) See 1 in Addendum

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:

**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.: (515) 468-1017

Addendum

1. Lot Eleven (11) of Country Estates West located in the Southeast Quarter ($\frac{1}{4}$) and in the Southwest Quarter ($\frac{1}{4}$) of Section Three (3), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa; AND Parcel "N", a part of Lot 10 of said Country Estates West, containing 0.36 acres, as shown in Plat of Survey filed in Book 2006, page 4449 on October 26, 2006, in the office of the Recorder of Madison County, Iowa, AND Parcel "Y", a part of Lot 5 of Country Estates West Plat II, located in the Southwest Quarter ($\frac{1}{4}$) of the Southwest Quarter ($\frac{1}{4}$) of Section Three (3), containing 0.42 acres, as shown in the Plat of Survey filed in Book 2012, Page 3316 on November 2, 2012, in the office of the Recorder of Madison County, Iowa



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

Property information

Current owner Laura M Watts
Buyer Anthony Goss Realtor Larry Watts
Mailing address 2511 Cumming Rd Wintersel
Site Address/County 2511 Cumming Rd Madison
Legal Description Lot 11 Parcel N 3.54 acres country Estate west section 3
76-27 Union
No. of bedrooms 5 Last occupied? still live in Records available yes
Permit/installation date 11-9-04 Separation distances ok no? 2005

Septic system information

Septic tank(s): size 2-1500 4500 litters tank material Cement 1/2 pump tank condition good
Tank pumped? yes date 10-29-2012 licensed pumper yes
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? Oct 29-2012 yes date Oct 29-2012 licensed pumper yes
Aerobic treatment unit (ATU) mfg _____ size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type Cement size 1/2 of 1500 condition good
is pump tank
Distribution system: distribution box OK outlets used _____ condition good
Header pipe(s) OK # of lines 8 Pressure dosed? _____

Secondary treatment:

length of absorption fields 8-95 ft determined by pictures & probe
condition of fields OK determined by pictures & probe
type of trench material Rock with 18" reduced by 20%

Size of sand filter _____ determined by _____
Vent pipes above grade? _____ discharge pipe located? _____
Effluent sample taken? _____ Results _____

Media filters: type _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

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



Time of Transfer Inspection Report

Other components:

Alarms working Working? yes disinfection _____ working? _____

Control box _____ Timers _____ inspection ports _____

Other components _____

Overall condition of the private sewage disposal system

Report system status Everything looks good

Explain (attach additional pages as needed): has - 2 - 1500 gal Cement tank
last one 1/2 is pump tank

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: 10-30-12
Name (print): Allen Akers Certificate #: 203
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