



Document 2016 GW2260

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INDX
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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

CHEK

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

TRANSFEROR:

Name Don Schutz and Holly Schutz

Address 3089 Applewood Avenue, Macksburg, IA 50155

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Kalli Hildebrand and Rainer Hildebrand

Address 2919 Homestead Avenue, Lorimor, IA 50149

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

3115 Applewood Avenue, Macksburg, IA 50155

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Parcel "B", as shown in the Plat of Survey dated March 24, 2016, and filed March 28, 2016, in Book 2016, Page 729, in the office of the recorder of Madison County, Iowa, and located in a portion of the Fractional Northwest Quarter of Section 19, Township 74 North, Range 29 West of the 5th P.M., in Madison County, Iowa, lying North and East and adjacent to Parcel "A" of said Section 19.

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. See well

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:

Copy of prior time of Transfer of 4/30/16 attached

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

Signature: *Don Schatz*
(Transferor or Agent)

Telephone No.: (641) 344-4275

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

Property information

Current owner Rad Abell
Buyer Don Schatz Realtor Katha Ripberger
Mailing address 3089 Applewood Ave, Blackburg VA 50155
Site Address/County 3115 Applewood Ave Madison Co
Legal Description _____

No. of bedrooms 3 Last occupied? 4-29-16 Records available yes
#031-06
Permit/installation date 4-10-06 Separation distances ☒ no? OK

Septic system information

Septic tank(s): size 1000 gal material concrete condition good
Tank pumped? yes date 4-29-16 licensed pumper yes
Septic/trash/processing tank: size - material - condition -
Tank pumped? - date - licensed pumper -

Aerobic treatment unit (ATU) mfr - size -
Tank pumped? - date - licensed pumper -
Maintenance contract? - expiration date - service provider -
Condition -

Pump tanks/vaults: type - size - condition -

Distribution system: distribution box Plastic + concrete outlets used 6 condition good
Header pipe(s) - # of lines 6 Pressure dosed? No

Secondary treatment:
length of absorption fields 6-74 ft determined by Maps & Probe
condition of fields good determined by probe & grow
type of trench material Dome Chambers

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 None Working? — disinfection — working? —

Control box — Timers — inspection ports Risers to top of ground

Other components Risers on tank

Overall condition of the private sewage disposal system

Report system status looks good May want to put Dist on lines

Explain (attach additional pages as needed): _____

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: 4-30-16
Name (print): Allen Akers Certificate #: 203
Address: 2204 175th St Winterset IA 50273
Phone #: 515-462-7015

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

515-468 0091
SIS - 462 - 1015

Allen Akers

2204 175th Ct Winterset IA 50273
4-29. 16

Rod Allen

1000 gal
Pump Tank
Time of Transfer
dig up 2 Box & Paper
Box

400 00

350 00

750 00

Perm. # 031-06 Abell Inspection 4/10/06

3115 Applewood Ave.

North
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