



Document 2018 GW717

Book 2018 Page 717 Type 43 001 Pages 6

Date 3/05/2018 Time 11:35:12AM

Rec Amt \$.00

INDX

ANNO

SCAN

LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

CHEK

**REAL ESTATE TRANSFER – GROUNDWATER HAZARD STATEMENT
TO BE COMPLETED BY TRANSFEROR**

TRANSFEROR:

Name CHARLES E. WEBB

Address 1402 Juniper Trail Earlham Iowa 50072
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name RYAN S. BEARGEON

Address 1402 Juniper Trail Earlham Iowa 50072
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:
1402 Juniper Trail Earlham Iowa 50072
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) _____
NW 1/4 NW 1/4 Section 27, Township 77, Range 28, Madison County

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.

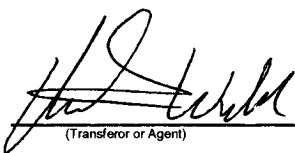
6. **Private Sewage Disposal System (check one)**

- ☐ 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 a 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 a 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 acknowledgement 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 acknowledgement is attached to this form.
☐ There is a building served by private sewage disposal system on this property. The buyer has executed a binding acknowledgement with the county board of health to install a new private sewage disposal system on this property with an agreed-upon time period. A copy of the binding acknowledgement 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 acknowledgement with the county board of health to demolish the building within an agreed-upon time period. A copy of the binding acknowledgement 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:

Well Located middle of turnaround drive

**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) 480-6375



Time of Transfer Inspection Report

542-0191

Property Information

Current Owner: Charles Webb

Buyer: Ryan Beargson

Realtor: Take Hibbert

Mailing Address: 2207 Grand Ave Des Moines 50312

Site Address/County: 1402 Juniper Trl Earlham, IA 50072

Legal Description NW 1/4 NW 1/4 Fr. Section - 27 - Township - T77N R28W Madison County

No. of bedrooms: 3 Last occupied: Currently Records available: yes

Permit/ installation date: 9/30/1997- #1646 Separation distances (ok/no?): OK

Septic System Information:

Septic tank(s): Size: _____ Material: _____ Condition: _____

Tank pumped? ☐ Y ☐ N Date: _____ Licensed pumpier: _____

Septic/Trash/Processing tank: Size: _____ Material: _____ Condition: _____

Tank pumped? ☐ Y ☐ N Date: _____ Licensed pumpier: _____

Aerobic treatment unit (ATU) Mfgr: Consolidated - Multi-Flo Size 750gl

Tank pumped? ☒ Y ☐ N Date: 2/27/18 Licensed pumpier: Weigert Disposal

Maintenance contract? ☒ Y ☐ N Expiration date: 5/31/2018 Service provider: O.W.W.T. LLC

Condition: Good

Pump tanks/vaults: Type: _____ Size: _____ Condition: _____

Distribution system: Distribution box _____ Outlets used _____ Condition: _____

Header pipe(s): _____ No. of lines: _____ Pressure dosed? _____

Secondary Treatment: 5'x10' Free Access Sand Filter

Length of absorption fields: _____ Determined by: _____

Condition of fields: _____ Determined by: _____

Type of trench material: _____

Size of sand filter: _____ Determined by: _____

Vent pipes above grade? ☐ Y ☐ N Discharge pipe located? ☐ Y ☐ N

Effluent sample taken 10/24/17 & 6/6/17 Results: CBOD <4 TSS <1.7

Media Filters: Type: _____

Maintenance contract? ☒ Y ☐ N Expiration date: 5/31/2018 Service provider: O.W.W.T. LLC

Condition: Good

NPDES General Permit No. 4: Required? ☐ Y ☒ N Permitted? ☐ Y ☒ N NOI provided: No



Time of Transfer Inspection Report

Other components:

Alarms: ☒ Y ☐ N Working: ☒ Y ☐ N Disinfection: ☐ Y ☒ N Working: ☐ Y ☐ N
Control Box: NA Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:

Report system status: Status of system is: In good condition & operating properly.

Explain (attach additional pages as needed): will order new outside alarm

& return to install when it gets in. will also
Comments: Recover PAF with new lid at same time

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: Gary Main Date: 2/27/18

Name (print): Gary Main Certificate #: 10160

Address: 3826 E 27th St Des Moines, IA 50317

Phone #: 515-402-3127

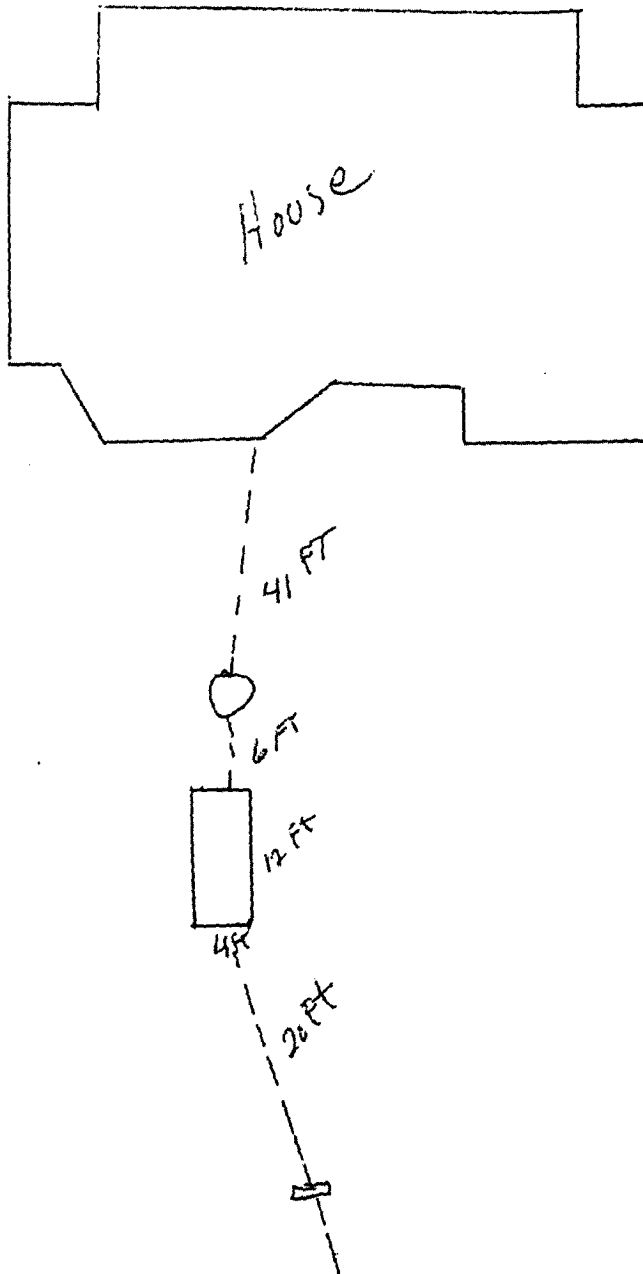
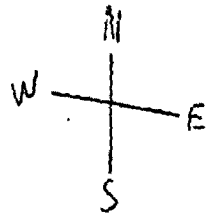
Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent or the person ordering the inspection, the county sanitarian/environmental health office and to:

Iowa DNR
Private Sewage Disposal Program
502 E 9th St
Des Moines IA 50319

Charles Webb

102 Juniper Tel. Durham, Ill 50072

33100



DNR Time of Transfer Narrative

I Gary Main, Inspector (#10160) on above date performed the Time of Transfer Inspection on the Private Wastewater Treatment system on property located at 1402 Juniper TRL Earlham, IA 50072. All piping in house was checked to make sure all water from house ran into septic system. Also at this time the 750gl Multi-Flo unit was pumped, inspected, & serviced. All parts of unit were inspected & found to be in good operating condition. A 30min hydraulic loading test was performed & all water ran through system was taken. The free Access Sand Filter was serviced & inspected and also found to be working properly. It is the opinion of this inspector that the entire system is operating properly at time of this inspection.

Gary Main

Gary E Main

Inspector #10160