



Document 2018 GW1921

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Date 6/18/2018 Time 1:28:02PM

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 Tim Mohs and Jacque Mohs

Address 1899 Nature Court, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Rick D. Clarke and Charity A. Clarke

Address 1899 Nature Court, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

1899 Nature Court, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Lot Twenty-three (23) of Copper Fox Estates
Subdivision located in the East Half (1/2) of the Southeast Quarter (1/4) of Section Seventeen (17), in
Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County,
Iowa.

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)

321-6397

Telephone No.: _____



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

Property information

Current owner Tim and Jacque Mohs
Buyer _____ Realtor Sarah Cowman
Mailing address 67 E. Jefferson, Winterset, Iowa, 50273
Site Address/County 1899 Nature Court, Winterset, IA, 50273
Legal Description _____
No. of bedrooms 4 Last occupied? Current Records available _____

Permit/installation date 7-17-06 Separation distances ok/no? _____

Septic system information

Septic tank(s): size 2,000 / 500 gal pump tank material Concrete condition good
Tank pumped? yes date 10-18-17 licensed pumper ST237
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? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type Pump tank size 500 gal condition good

Distribution system: distribution box yes outlets used 5 condition good
Header pipe(s) 4" SDR35 # of lines 5 Pressure dosed? _____

Secondary treatment:
length of absorption fields 500' determined by Map
condition of fields dry determined by Inspection
type of trench material 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? _____ permitted? _____ NOI provided _____



Time of Transfer Inspection Report

Other components:

Alarms yes Working? yes disinfection _____ working? _____

Control box _____ Timers _____ inspection ports _____

Other components _____

Overall condition of the private sewage disposal system

Report system status System working properly at inspection

Explain (attach additional pages as needed): tanks good, D-box good,
lateral field dry, Hydraulic test good

Comments: Electrical junction box broke, but still working.
Tank riser screw lip partly broke, but lid is still
able to be screwed on.

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: Ben Beedwell Date: 6-1-18
Name (print): Ben Beedwell Certificate #: 11612
Address: 2424 Quaker St. Saint Charles, FOWA, 50240
Phone #: 515-681-2053

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

N

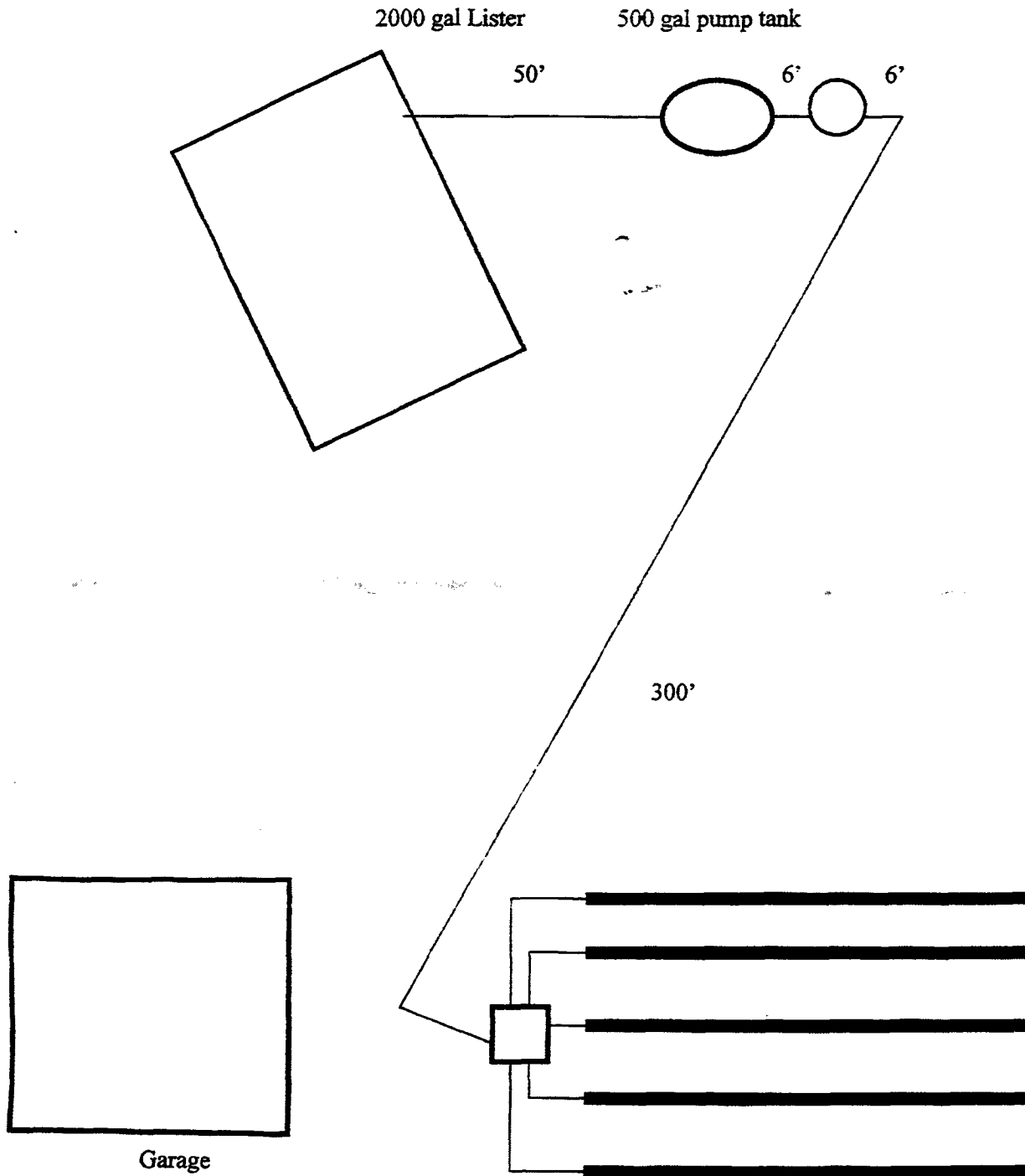
Permit No 032-06

Date of Inspection: 7-17-06

Contractor: Allen Akers

Name: Tim & Jacque Mohs

Inspected by: Jean Thompson



Bedwell Builders

20 Years Of Service
2924 Quaker Street
St. Charles, Iowa 50240
641-396-2462

CUSTOMER'S ORDER NO.		PHONE		DATE		
		15-468-0409		6-1-18		
NAME Sarah Cowman						
ADDRESS 67 E. Jefferson, Winterset, IA, 50273						
SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDSE. RET'D	PAID OUT
QTY.	DESCRIPTION				PRICE	AMOUNT
1	Time of Transfer Inspection				350	350 00
Due Upon Receipt Thank You For Your Business						350 00
					TAX	NA
RECEIVED BY					TOTAL	350 00

2476

Thank You!

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