



Document 2018 GW2469

Book 2018 Page 2469 Type 43 001 Pages 5

Date 7/31/2018 Time 12:03:12PM

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 Bruce A. Bjorn

Address 2676 State Hwy 92, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

TRANSFeree:

Name Amanda Gould

Address 1011 N. O St. INDIANOLA IA 50125

Number and Street or RR

City, Town or P.O.

State

Zip

Address of Property Transferred:

2675 Hwy 92, Winterset, IA 50273

Number and Street or RR

City, Town or P.O.

State

Zip

Legal Description of Property: (Attach if necessary) Parcel "F", a portion of Parcel "C", located in the Northeast Quarter (1/4) of Section Twenty-six (26), Township Seventy-six (76) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, containing 25.0051 acres, as shown in Plat of Survey filed in Book 3, Page 665 on December 29, 2000, in the Office of the Recorder of 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.

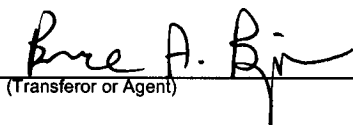
6. Private Sewage Disposal System (check one)

- ☒ 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)

Telephone No.: (712) 438-0210



#066-17

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

Property information

26-Union

Current owner Michele & Bruce Bjorn
Buyer Elizabeth Robbins Realtor no realtor
Mailing address _____

Site Address/County 2675 Hwy 92 Winterset Town 50273
Legal Description Parcel F Nobility 92 NE 1/4 section 26 Union township
still there

No. of bedrooms 4 Last occupied? 11-16-17 Records available yes
permat # 1987

Permit/insurance date 5-7-2001 Separation distances ok no? _____

Septic system information

Septic tank(s): size 1500 gal material Cement condition good
Tank pumped? yes date Nov 16 2017 licensed pumper yes Country Side
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 outlets used 4 condition good
Header pipe(s) 4.1.35 # of lines 4 Pressure dosed? no

Secondary treatment:

length of absorption fields 4-10 ft determined by Map
condition of fields looks good determined by gator looking at Aug 1
type of trench material plastic Chambers up 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 _____

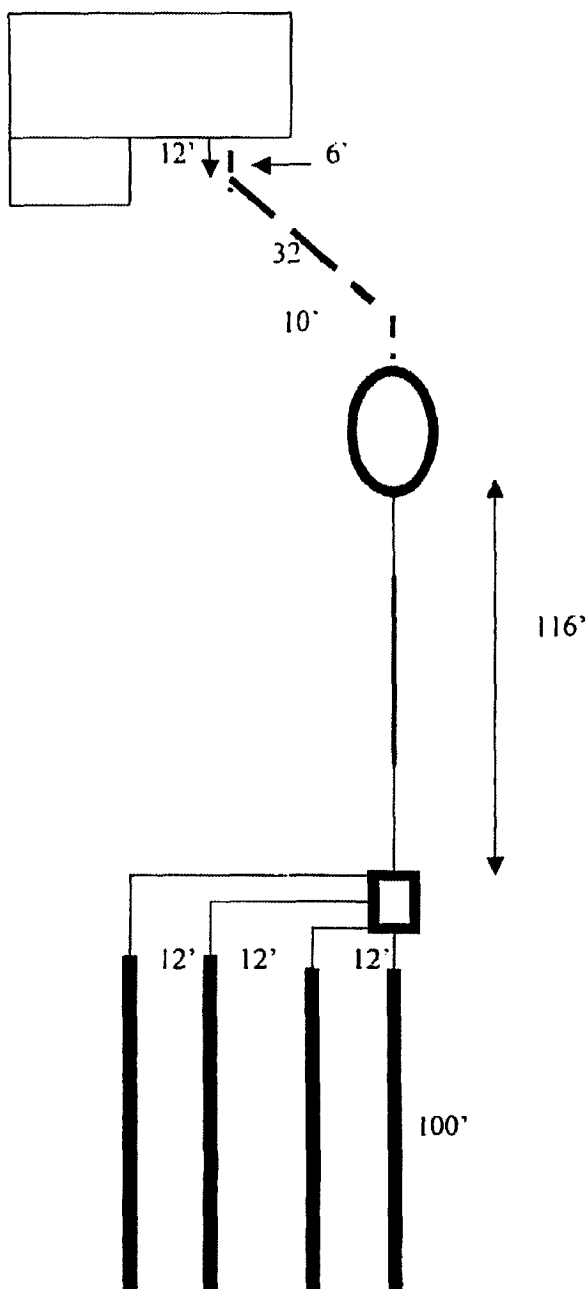
NPDES General Permit No. 4: required? _____ permitted? _____ NOI provided _____

2675

State Hwy 92

Permit #

Permit # 1987 May 7, 2001



2.

W



Time of Transfer Inspection Report

Other components:

Alarms Working? disinfection working?

Control box Timers inspection ports riiser outwork

Other components

Overall condition of the private sewage disposal system

Report system status has Roper on tank & filter in west End

Explain (attach additional pages as needed): ring up 1 End of line like to look at Chambers

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: 11-13-17
Name (print): Allen Akers Certificate #: 203-1023
Address: 2204 175th Winderford Iowa 50273
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