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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 Jason R. Edwards

Address	Number and Street or RR	City, Town or P.O.	State	Zip
1435 Walnut Lane		Cumming	IA	50061

TRANSFEREE:

Name Neal Scott Behn

Address	Number and Street or RR	City, Town or P.O.	State	Zip
1339 21 3/4 St		Cameron	WI	54822

Address of Property Transferred:

	Number and Street or RR	City, Town or P.O.	State	Zip
1435 Walnut Lane		Cumming	IA	50061

Legal Description of Property: (Attach if necessary)

Lot Twelve (12) of Walnut Cove Estates Subdivision, Plat No. 2, located in the Northwest Quarter (1/4) of Section Twenty-five (25), Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa; AND Tract 2, a part of Parcel "A" located in the Southeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Twenty-five (25), Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, containing 0.503 acres, as shown in Plat of Survey filed in Book 2017, Page 1227, on April 19, 2017, 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: _____ Telephone No.: (515) 556 7162
(Transferor or Agent)

Time of Transfer Inspection Report

Property Information

Current Owner: Jason Edwards

Buyer: _____ Realtor: _____

Mailing Address: 1435 Walnut Ln Cumming, IA 50061

Site Address/County: 1435 Walnut Ln Cumming IA 50061 Madison County

Legal Description LOT 12 PLAT 2 WALNUTCOVE ESTATES

No. of bedrooms: 4 Last occupied: Still Records available: Yes

Permit/ installation date: _____ Separation distances (ok/no?): Okay

Septic System Information

Septic tank(s): Size: 2000 gallons Material: Concrete Condition: Good

Tank pumped? ☒ Y ☐ N Date: 11/14/18 Licensed pumper: River to River

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

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

Aerobic treatment unit (ATU) mfgr _____ Size _____

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

Maintenance contract? ☐ Y ☐ N Expiration date: _____ Service provider: _____

Condition: _____

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

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

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

Secondary Treatment:

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 Yes Results: BOD 8 TSS 4

Media Filters: Type: Premier Tech Bio Filter

Maintenance contract? ☒ Y ☐ N Expiration date: 3-1-19 Service provider: Jon Cornish

Condition: Good at this time, peat was replenished in October

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: _____ Timers: _____ Inspection Ports: _____

Other components: _____

Overall condition of the private sewage disposal system:

Report system status: Good at this time

Explain (attach additional pages as needed): Peat was just replaced and tank was pumped out on Nov 14, 2018

Comments: Everything is in good working condition at this 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: Thomas Behle Date: 12/21/18

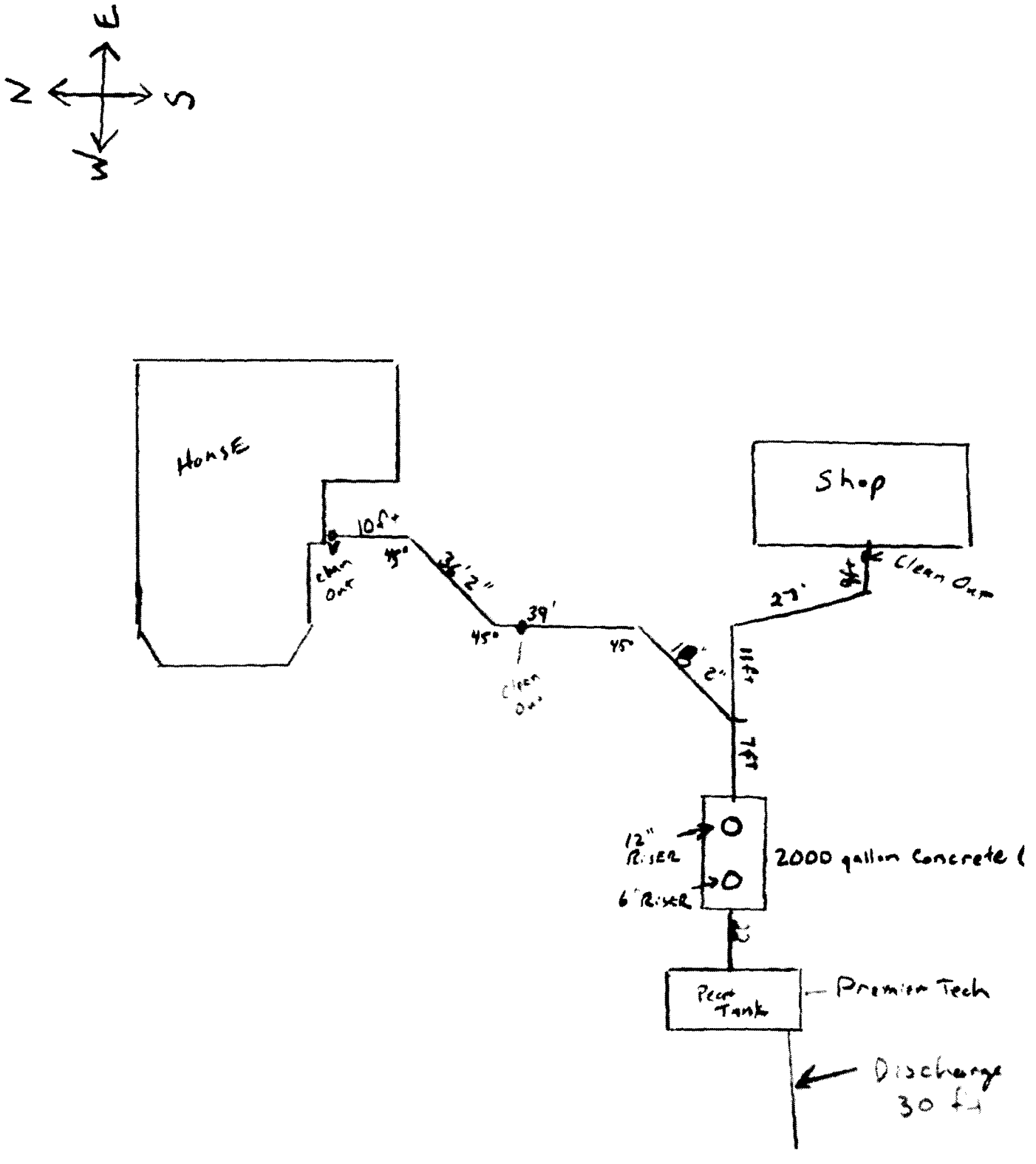
Name (print): Thomas Behle Certificate #: 11613

Address: PO Box 460 Waukee IA 50263

Phone #: 515-987-3913

Provide a copy of this report, the narrative report and sketch to the seller/agent, buyer/agent, the county sanitarian/environmental health office in the county the inspection was conducted, the county recorder and to:

Iowa DNR Onsite Wastewater Program
502 E 9th St
Des Moines IA 50319


N
E
S
W
House
Shop
10ft
45°
clean out
36'2"
39'
45°
45°
Clean Out
27'
Clean Out
11ft
7ft
12" Riser
6" Riser
2000 gallon Concrete
Pump Tank
Premier Tech
Discharge
30 ft