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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

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

TRANSFEROR:

Name Jana Peters

Address 1826 Green Ln Winterset IA 50273
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Leen LLC

Address 1826 GREEN LN WINTERSET IA 50273
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

1826 Green Ln Winterset IA 50273
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

The Northeast Quarter (1/4) of the Southeast Quarter (1/4) of Section Eighteen (18), Township Seventy-six (76) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa; AND all that part of the Northwest Quarter (1/4) of the Southeast Quarter (1/4) of said Section Eighteen (18) lying East of the river; AND all that part of the Southwest Quarter (1/4) of the Southeast Quarter (1/4) of said Section Eighteen (18) lying North and East of the river; AND all that part of the Southeast Quarter (1/4) of the Southeast Quarter (1/4) of said Section Eighteen (18) lying North and West of the river; EXCEPT a tract of land located in the Northeast Quarter (1/4) of the Southeast Quarter (1/4) of said Section Eighteen (18), more particularly described as follows, to-wit: Commencing at the Southeast corner of the Northeast Quarter (1/4) of the Southeast Quarter (1/4) of Section Eighteen (18), running thence West 1040 feet, thence North 62° East, 402.3 feet thence North 48° East, 230 feet, thence North 38° East, 565 feet, thence North 26° East, 396 feet, thence South 1171 feet to the place of beginning.

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:

_____ North of the stable _____

I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM

AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: Jana Bettis Telephone No.: (319) 269-8213
(Transferor or Agent)

Madison County
Office of Zoning and
Environmental Health

***Authorization to Construct a
Private On-site Wastewater
Treatment System (POWTS)***

112 N. John Wayne Drive
P.O. Box 152
Winterset, IA 50273-0152
Telephone: (515) 462-2636

Permit Number: 077-19

Date Issued: 8/7/2019

Issued to: Jana Peters
Address: 1826 Green Ln.
Winterset, IA 50273

TOS #052-19

Legal Description: 45.60A W PT/E 56A N ½ SE PID# 430081322011000
Sec 18 T76N R28W Douglas TWP

POWTS Components Specifications: Replacing Septic Tank. Installing 1250 gal. AK Poly septic tank
Adding Clean out if tank is over 100' away.

General Conditions:

1. System must be constructed in conformance with attached system layout, profiles, and cross-sections.
2. Structures must be constructed in conformance with 567 IAC Chapter 69 and the Madison County Environmental Health Regulations.
3. Permit shall be null and void if system is not constructed within one year of permit issuance. The Environmental Health Officer must approve any request for extension of permit.
4. The Environmental Health Officer must approve any design modifications to the permitted system prior to construction.
5. Once constructed, all system components must be uncovered for inspection and the system must be approved before it can be put into operation. Notice for inspection must be received with 24 hours in advance (8 a.m. through 4:30 p.m., Monday - Friday). If weather necessitates the need to cover the system components, then the system owner or contractor must notify and follow the procedures given by the Environmental Health Officer.

Special Conditions:

At least a 24-hour notice for inspections.



***Environmental Health Officer Assistant
Madison County
Office of Zoning and Environmental Health***

Application to Construct
Private Sewage Disposal System (PSDS)

Office Use Only					Temp E911:	
Tracking No.	Date Received	Fee Paid	Check #	Date Issued	Section/Township	
077-19	8-7-19	100.00		8-7-19	18-Douglas	

Application will not be accepted until site and soil analysis/percolation information have been received and fee has been paid. For systems requiring an NPDES General Permit #4 (surface discharge), its application must be submitted to this office along with appropriate forms for recording before a permit will be issued.

Please Print All Information.

Septic TANK Replacement

1. Owner Information (Applicant)			2. Installation Contractor Information		
First Name	Last Name		First Name	Last Name	
JANA	Peters		MIKE	HARKIN	
Address			Address		
1826 Green Lane			3311 140th St		
City	State	Zip	City	State	Zip
Winterset	Ia	50273	Cumming	Ia	52061
Phone Number	Cell Phone		Phone Number (area code)	Cell Phone	
319-269-8213				515-360-0399	
Email: Jpeters1826@gmail.com					

3. System Requirement Information		4. Site and Soil Evaluator (Percolation Test/Soils Analysis)	
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED		PERCOLATION/SOILS ANALYSIS MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT	
	Minimum Tank Size Required	Date test taken _____	Test taken by _____
1-3 Bedroom	1250	Passed: _____	Failed: _____
4 Bedroom	1500	Percolation Rate: _____	Soils Loading Rate: _____
5 Bedroom	1750		
6 Bedroom	2000		

5. Type of Submittal	6. Address Information
<input type="checkbox"/> New House <input checked="" type="checkbox"/> Existing House <input checked="" type="checkbox"/> Repair, Tank <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement Previous Permit #:	911 Address or nearest road: 1826 Green Lane Legal Description: 45.60A W 1/4 E 56A N 1/2 SE PID # 360061880020000 18-76-28

7. Type of Building (Completed by Owner)		
Building Square ft.: 2050	Number of Bedrooms: 3	Number of Bathrooms: 2
Other buildings served by this system:		Non-Residential uses:
Shed toilet toilet		Any other circumstances which may affect water usage:
Water softeners must be routed to a brine pit independent of septic system.		

Your contractor or system designer should complete the remaining portion of this application.

8. Tanks			
Septic Tank	Type: plastic	Size: 1300	Manufacturer: AK
Pump Tank	Type:	Size:	Manufacturer:
Additional Tank	Type:	Size:	Manufacturer:

9. Secondary Treatment Area				
Laterals	Type:	Length of each:	Total number:	Maximum trench Depth:
Sand Filter	Square ft.:	Length:	Width:	
Peat System	Model:	Manufacturer:		
Other	Description: Clean out if tank is farther than 100'			

I hereby attest the truth and accuracy of all facts and information presented on this application. Request for inspection of the system must be made 24 hours in advance. Water at the site to test the distribution box must be available. Discharging systems must be covered by a maintenance agreement, which shall be recorded in the Madison County Recorders Office. Discharging systems also require periodic testing as set forth in IAC Chapter 69 and Madison County Environmental Health Regulations.		It is unlawful to start construction, reconstruction, or repair of any PSDS prior to issuance of a PSDS permit by the Environmental Health Officer.
Applicant Signature:	Date:	
<i>[Signature]</i>	8-7-19	



Overview



Legend

- City Limits
- Sections
- Parcels
- Subdivisions
- Road Centerlines
- Townships

Parcel ID	360061880020000	Alternate ID	n/a	Owner Address	PETERS, JANA DEE
Sec/Twp/Rng	18-76-28	Class	A		1826 GREEN LANE
Property Address	1826 GREEN LN WINTERSET	Acreage	45.6		WINTERSET, IA 50273
District	DOUGLAS EARLHAM EFD				
Brief Tax Description	45.60A W PT / E 56A N1/2 SE (Note: Not to be used on legal documents)				

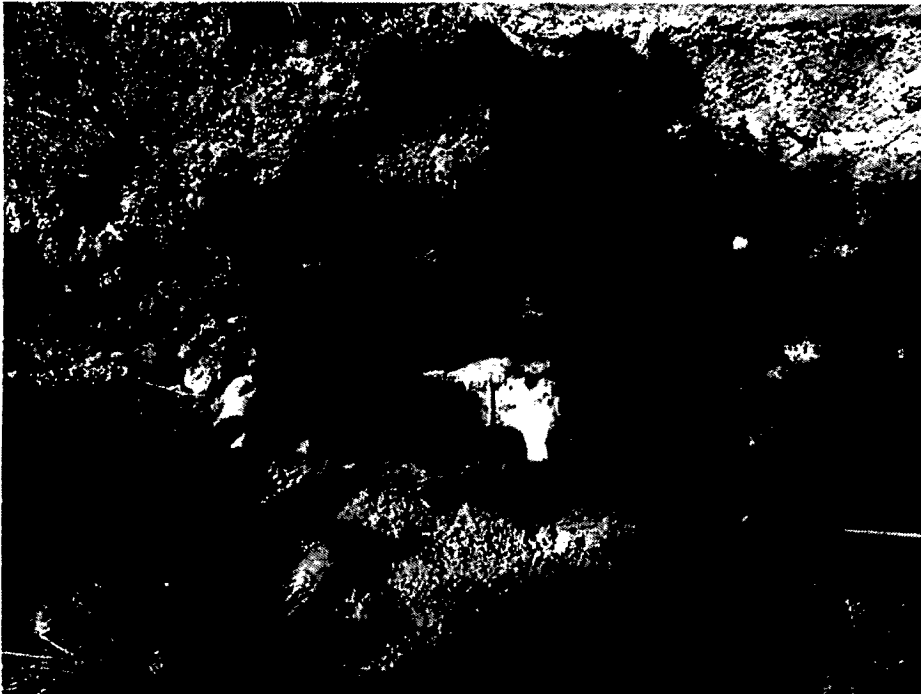
Date created: 8/28/2019
Last Data Uploaded: 8/27/2019 11:31:48 PM

Developed by  **Schneider**
GEO SPATIAL

8-27-2019

1826 Green Lane
Winterset

Permit# 077-19



8-27-2019

1826 Green Lane
Winterset

Permit# 077-19



MADISON COUNTY ENVIRONMENTAL HEALTH DEPARTMENT
PRIVATE SEWAGE SYSTEM INSPECTION REPORT
REPAIR REPORT

GENERAL INFORMATION	
Owner: <i>Jana Peters</i>	Contractor: <i>How KM</i>
Address: <i>1826 Green Lane</i>	Inspector: <i>Fairchild</i>
Inspection Date: <i>8-27-19</i>	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved
Repair Permit #: <i>077-19</i>	

S = Satisfactory U = Unsatisfactory NA = Not Applicable

S	U	NA		SETBACKS
Minimum Setbacks to Closed / Open Portions of Septic System:				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Private Water Well	50' / 100'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shallow Public Water Well	200' / 400'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Deep Public Water Well	100' / 200'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Heat Pump Borehole	50' / 100'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lake or Reservoir	50' / 100'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stream or Pond	25' / 25'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Edge of Drainage Ditch	10' / 10'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dwelling or Other Structure	10' / 10'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Property Lines	10' / 10' (Unless an easement is signed and recorded.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other Subsurface Treatment Systems	5' / 10'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Line under Pressure	10' / 10'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suction Water Line	50' / 100'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Foundation Drain or Subsurface Tiles	10' / 10'

Notes

This report and the corresponding permit indicate the condition of the above-mentioned private sewage system at the time of inspection. To the best of my knowledge, all of the listed local and state ordinances have been adhered to. This does not guarantee the future condition or proper function of the system.

Scott J. Fairchild *8-27-19*

Inspector

Date