

BK: 2023 PG: 1182  
Recorded: 5/30/2023 at 10:17:07.0 AM  
Pages 14  
County Recording Fee: \$0.00  
Iowa E-Filing Fee: \$0.00  
Combined Fee: \$0.00  
Revenue Tax:  
BRANDY L. MACUMBER, RECORDER  
Madison County, Iowa

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

**TRANSFEROR:**

Name: Roach Family Trust  
Address: 3263 Cumming Road, Cumming, IA 50061

**TRANSFeree:**

Name: Ryan Shabino and Nicole Shabino  
Address: 3263 Cumming Road, Cumming, IA 50061

Address of Property Transferred:  
3263 Cumming Road, Cumming, Iowa 50061

Legal Description of Property: (Attach if necessary)  
Parcel "A" located in the SE 1/4 of Section 11, Township 77 North, Range 26 West of the 5th P.M., Madison County, Iowa containing 5.00 acres, as shown in Plat of Survey filed in Book 2, Page 486 on July 26, 1994 in the Madison County Recorder's Office.

**1. Wells (check one)**

- No Condition - There are no known wells situated on this property.  
 Condition Present - 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)**

- No Condition - There is no known solid waste disposal site on this property.  
 Condition Present - 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)**

- No Condition - There is no known hazardous waste on this property.  
 Condition Present - 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)**

- No Condition - 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.)  
 Condition Present - 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)**

- No Condition - There are no known private burial sites on this property.
- Condition Present - 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)**

- No Condition - All buildings on this property are served by a public or semi-public sewage disposal system.
- No Condition - This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
- Condition Present - 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.
- Condition Present - 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.
- Condition Present - There is a building served by private sewage disposal system on this property. The system is failing to ensure effective wastewater treatment or is otherwise improperly functioning, and 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.
- Condition Present - 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 #7]
- Condition Present - There is a building served by private sewage disposal system on this property. This property is exempt from the private sewage disposal inspection requirements pursuant to the following Exemption [Note: for exemption #7 use prior check box]:
- Condition Present - There is a building served by private sewage disposal system on this property. 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:**

SW corner of property

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: Mary Roach Telephone No.: 515-229-7681  
(transferor)



# TIME OF TRANSFER INSPECTION TOT# 5073 BEN BEDWELL CERT # 11612

### Site Information

Parcel Description: **011011186022000**

Address: **3263 Cumming Rd, Cumming, IA 50061**

County: **Madison**

### Owner Information

Property is owned by a business: **No**

Business Name:

Owner Name: **Mary Roach**

Email Address:

Address: **3263 Cumming Rd, Cumming, IA 50061**

Phone No:

### Additional Contact Information

Name	Email Address	Affiliate Type
<b>Jennifer Stover</b>	<b>jenniferstover@madisoncountyrealty.com</b>	<b>Realtor</b>

### Site related information

No Of Bedrooms: **3**

Facility Type: **Residential**

Last Occupied:

Permit issued by County: **Yes**

All plumbing fixtures enter septic system: **Yes**

Property Information Comments:

Inspection Date: **04/28/2023**

Currently Occupied: **Yes**

System Installation Date: **06/12/2009**

Permit Number: **032-09**

County contacted for records: **Yes**

### Primary Treatment

#### Tank 1

Tank Name: **Tank 1**

Type: **Septic Tank**

Tank Size (Gal): **2000**

Tank Material: **Concrete**

Tank Corrosion Type: **None**

Liquid Level Type: **Normal**

No. of Compartments: **2** Pump Tank Chamber: **No** Licensed Pumper Name: **CountrySide**  
Date Pumped: **7/20/2022** Meets Setback to Well: **N/A** Well Type:  
Distance To Well (Ft.): Is Accessible: **Yes** Lid Intact: **Yes**  
Risers Intact: **Yes** Effluent Filter Present: **Yes** Watertight: **Yes**  
Tank/Vault Pumped: **Yes** Inlet Baffle Present: **Yes** Outlet Baffle Present: **Yes** Functioning as Designed: **Yes**  
Tank Comments:

General Primary Treatment Comments:

#### Distribution Type

##### Distribution Box 1

Label: **Distribution Box 1** Material Type: **Plastic** Accessible: **Yes**  
Box Opened: **Yes** Baffle Present: **Yes** Speed Levelers Present: **Yes**  
Watertight: **Yes** Functioning As Designed: **Yes**

General Distribution System Comments :

#### Secondary Treatment

##### Lateral Field1

Distribution Type: **Distribution Box** Material Type: **Leaching Chamber** Trench Width: **24**  
Lines: **8** Total Length of Absorption Line: **576** System Hydraulic Loaded: **Yes**  
Gallons Loaded: **250** Meets Setback to Well: **N/A** Well Type:  
Distance To Well (Ft.): Lateral Lines Probed: **Yes** Saturation or Ponding Present: **No**  
Grass Cover Present: **Yes** Lateral Lines Equal Length: **Yes** System Located on Owner Property: **Yes**  
Easement Present: **N/A** Functioning as Designed: **Yes**  
Comments:

General Secondary Treatment Comments:

#### Narrative Report

TOT Inspection Report Overall Narrative Comments: **The system was working properly during the inspection.**



## TIME OF TRANSFER INSPECTION TOT# 5073 BEN BEDWELL CERT # 11612

Owner Name: **Mary Roach**

Address: **3263 Cumming Rd , Cumming , IA 50061**

County: **Madison**

Inspection Date: **04/28/2023**

Submitted Date: **5/15/2023**



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: 032-09**

**Date Issued: 6/9/09**

**Issued to: Thomas & Mary Roach  
Address: 3263 Cumming Rd.  
Cumming, IA 50061**

01101186022000

**Legal Description: Par A SW SE 5A CENT PT 467'x467' Section 11-77-26**

**POWTS Components Specifications: 1500 gal. Septic Tank & 8ea. 24in. Chamber laterals @ 70ft.**

**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: Maximum lateral Trench depth is 30 inches.**



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

Application to Construct  
Private Sewage Disposal System (PSDS)

CK from Huff

Office Use Only					Temp E911:		
Tracking No.	Date Received	Fee Paid	Check #	Date Issued	Section/Township		
030-09	6/11/09	150	4382	6/9/09	11 Lee		

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.

1. Owner Information (Applicant)				2. Installation Contractor Information			
First Name		Last Name		First Name		Last Name	
Thomas		Roach		Huff + Son			
Address				Address			
3263 Cumming Rd				1956 295th Ln			
City		State		City		State	
Cumming		IA		Winterset		IA	
Zip		Zip		Zip		Zip	
50061				4081068		50273	
Phone Number (area code)		Cell Phone		Phone Number (area code)		Cell Phone	
				462-3569		408 1068	

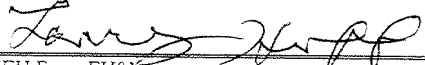
3. System Requirement Information		4. Site and Soil Evaluator (Percolation Test/Soils Analysis)	
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED		PERCOLATION/SOILS ANALYSIS MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT	
Minimum Tank Size Required		Date test taken 6/8/09 Test taken by Russ Hochstetler	
1-3 Bedroom	1250	Passed: Yes Failed: _____	
4 Bedroom	1500	Percolation Rate: _____	
5 Bedroom	1750	Soils Loading Rate: 0.4	
6 Bedroom	2000		

5. Type of Submittal		6. Address Information	
<input type="checkbox"/> New House <input type="checkbox"/> Existing House <input type="checkbox"/> Repair, Tank <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement		911 Address or nearest road: 3263 Cumming Rd	
Previous Permit #:		Legal Description: Par A SW SE SA CEN PT 467' X 467'	
		Section 11-77-26	

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

8. Tanks			
Your contractor or system designer should complete the remaining portion of this application.			
Septic Tank	Type: Concrete	Size: 1500	Manufacturer: Lister
Pump Tank	Type:	Size:	Manufacturer:
Additional Tank	Type:	Size:	Manufacturer:

9. Secondary Treatment Area			
Laterals	Type: 24" Chamber	Length of each: 70'	Total number: 8
Sand Filter	Square ft.:	Length:	Width:
Peat System	Model:	Manufacturer:	
Other	Description:		

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: 6-1-09	



VANCE & HOCHSTETLER, P.C.  
Consulting Engineers  
110 West Green Street  
Winterset, Iowa 50273-1533  
Telephone: (515) 462-3995  
FAX: (515) 462-9845

ONSITE WASTEWATER SITE EVALUATION

Owner: Thomas & Mary Reach  
Address: 3263 Cumming Road Cumming IA 50061  
Property Address: Same  
Legal Description: Parcel "A" SW<sup>1</sup>/<sub>4</sub> SE<sup>1</sup>/<sub>4</sub> Sec. 11-77-26  
  
Phone Number: \_\_\_\_\_  
New/Existing?: existing  
Bedrooms: 3  
Design Flow (gallons/day): 450  
Builder: N/A  
Plumber: Huff Well Co.  
Current Use: Residential  
  
Date of Evaluation: 6-4-09  
Performed by: JRH

NOTES:

1. Proper maintenance and cleaning of the septic tank will extend the useful life span of the lateral drain field. Installation of an effluent filter will also help the performance of the lateral drain field.
2. All parties involved in the construction process shall take care to protect the area of the lateral drain field from any vehicle traffic or other soil disturbances. Any such soil disturbance shall void the results of this site evaluation. ("Other soil disturbances" include the placement of fill dirt or removal of native soil from the area of the lateral drain field).
3. Any changes to the limiting factors of this project (location of house or drain field, size of house or addition of any accessory structures or driveways, for example), shall invalidate the results of this site evaluation unless said changes are reviewed and approved by the design engineer. Said approval shall be in written form and attached to the original site evaluation.
4. This site evaluation was prepared using data obtained from the test locations shown on the attached sheet, the SCS Soil Survey, Madison County, Iowa, and onsite analysis of the test hole data using visual and textural observation of the soil samples. Soil conditions shown on this site evaluation represent the test hole locations only, and do not reflect any variations which may occur in the area of the lateral drain field. If any variations in the soil inside the lateral drain field become evident during construction, it will be necessary to reevaluate this site evaluation.

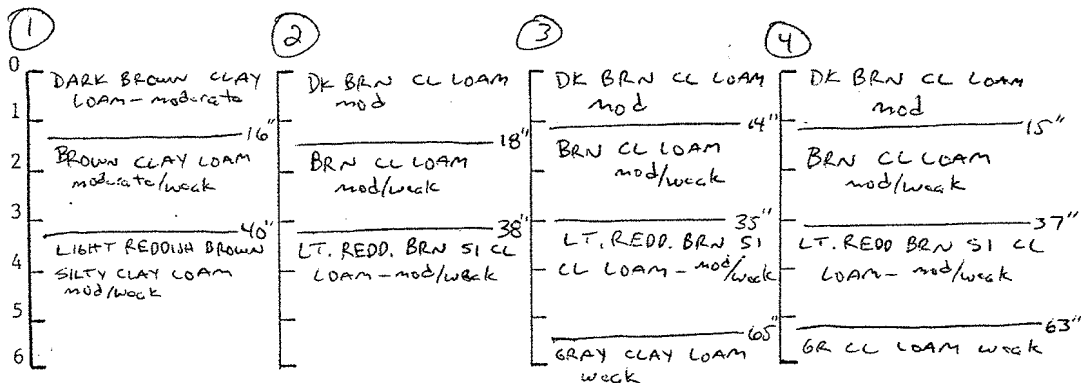
ROACH  
ONSITE WASTEWATER SITE EVALUATION - Sheet 2 of 2

SOIL LOADING RATE: 0.4 gal/sf APPARENT WATER TABLE: 66"  
MAX. DEPTH OF TRENCH: 30"

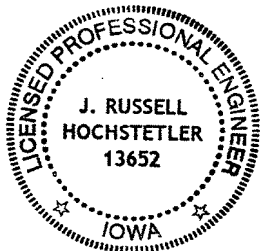
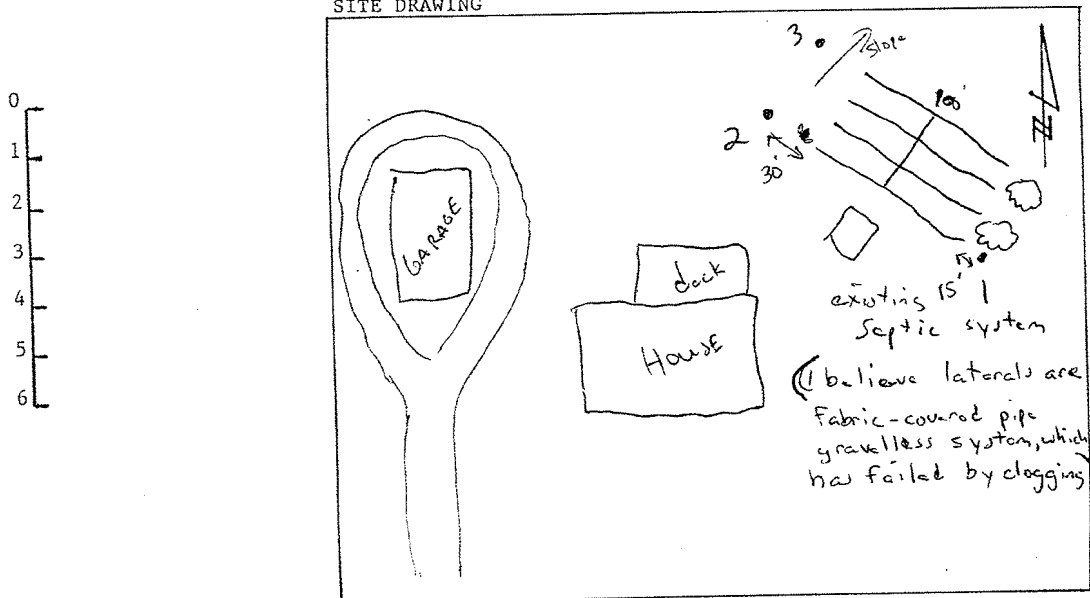
LATERAL FOOTAGE:

2' wide trench: 560' (8 laterals @ 70' each)

3' wide trench: 420'



SITE DRAWING



I hereby certify that this engineering document was prepared by me or under my direct personal supervision and that I am a duly licensed Professional Engineer under the laws of the State of Iowa.

J. Russell Hochstetler Date 6-8-09  
J. RUSSELL HOCHSTETLER  
License #13652

My license renewal date is December 31, 2009.  
Pages or sheets covered by this seal:

SOIL ANALYSIS

RLI1002 PID 011011186022000 00 Tax Dist 011 000 Class A INQUIRY  
2008 061 Map# 000000411400008 GIS#

Property 005142200 DED Roach, Thomas L & Mary A  
Ownership 3263 Cumming Rd  
Cumming IA 50061-

000000000  
Location 3263 Street CUMMING RD City CUMMING

Recorded DED 2009 1282 4/30/2009 1282 2009/04/27  
Documents REC 133 264

Misc Exempt Code No Ag Cr Vin  
Sec-Twp-Rng 011 077 026 Cty-Adn-Blk 00011 Title

Legal Desc PARCEL A SW SE 5A S CENT PT 467'X467'

Applications Typ 1 H Ovr Amt Typ 2 AGL Ovr Amt 1,442  
Typ 3 M05 Ovr Amt Typ 4 Ovr Amt

	Acres	Typ	Value	Rollback	Acres	
100%Gs	213,600	Gr	5.00 LND	1,600	1,502	4.36
100%Nt	213,600	Ex	.64 DWL	207,700	94,689	
TaxGrs	100,227	PE	.00 BLD	4,300	4,036	
Milt	1,852	Dr	.00 EXM			.64
TaxNet	98,375	Net	4.36			

F3=Exit F10=Owners F12=Prev F13=Rec Doc F14=Image F15=Legal F16=Notes  
F17=IE F18=TaxHist F19=Aplc F20=Value F21=Print F22=View Image F23=Indexing



MADISON COUNTY  
BOARD OF HEALTH  
COURT HOUSE  
WINTERSSET, IOWA 50273

PHONE  
515 462 2630  
Jerry K. Trevillyan  
Sanitarian

SEPTIC SEWAGE DISPOSAL SYSTEM  
PERMIT APPLICATION

PERMIT NO. 1415

PERMIT ISSUED: 5/17/94  
FEE PAID: 5/16/94

APPLICANT: Tom Roach TELEPHONE NO. 515-279-1870  
ADDRESS: 1437 44th Street Des Moines, Iowa 50311  
TENANT: same as above TELEPHONE: \_\_\_\_\_  
ADDRESS: R.R. #1 Cumming, Iowa 50061

PROPERTY DESCRIPTION: part of the SW 1/4 of the SE 1/4 SECTION: 11 TOWNSHIP: LEE

PROPOSED: DWELLING: X NUMBER OF: BEDROOMS: 3  
MOBILE HOME: \_\_\_\_\_ PERCOLATION TEST MUST STOOLS: 3  
OTHER: \_\_\_\_\_ BE TAKEN AND APPROVED SHOWERS: 2  
EXISTING: DWELLING: \_\_\_\_\_ PRIOR TO ISSUANCE OF TUBS: 1  
MOBILE HOME: \_\_\_\_\_ THE SEWAGE DISPOSAL PERMIT..... LAVATORIES: 3  
OTHER: \_\_\_\_\_ SINKS: 1

PERCOLATION TEST REPORT: TAKEN: 12/3/1993 BY: Darrel Woods for: Vance & Hochstetler - Winterset, Iowa

RESULTS: TEST HOLE: NO.1: 21.8 MIN./IN. 2.: 17.1 MIN./IN. 3.: 12.6 MIN./IN. 4. 16 MIN./IN.

AVERAGE: 16.9 MIN./IN. NO. OF LATERALS REQ.: 4 LENGTH OF LATERALS: 91.25 FT. EA. (92 ft.ea.)

CONTRACTOR: Mike Killen TELEPHONE NO. 515-989-3469  
ADDRESS: 183 140th Avenue Carlisle, Iowa 50047

DOUBLE COMPARTMENT SEPTIC TANKS REQUIRED/STATE APPROVED.....  
BDR. 800 GALLON 3 BDR. 1000 GALLON 4 BDR. 1250 GALLON 5 BDR. 1500 GALLON

FEES: CHECK PAYABLE TO MADISON COUNTY TREASURER - RETURN FEE WITH APPLICATION  
SEPTIC TANK/ABSORPTION FIELD - 600 FT. LATERALS..... \$15.00  
ALTERNATIVE SYSTEMS: MOUNDS - DOUBLE SAND FILTERS - MULTI-FLO SYSTEMS... \$15.00  
TYPE OF SYSTEM: PVC/GRAVEL: \_\_\_\_\_ GRAVELLESS 8 INCH: \_\_\_\_\_ 10 INCH: \_\_\_\_\_

I hereby certify that the above information is correct to the best of my knowledge and I agree that the system shall be installed in accordance with the rules and regulations of the Madison County Board of Health and Department of Natural Resources, Chapter 69. I further acknowledge that the system must remain open so that proper inspection and approval can be made by the local Health Sanitarian and that the system cannot be put into operation until approved.

DATE: 5-12-94 APPLICANT: Thomas S. Roach

DATE OF INSPECTION: no inspection made INSPECTED BY: not available

NOTE: REQUEST FOR INSPECTION OF THE SYSTEM MUST BE MADE 24 HOURS IN ADVANCE, IF POSSIBLE. WATER AT SITE FOR TESTING OF DISTRIBUTION BOX MUST BE AVAILABLE.

ANY DEVIATION FROM THE RULES AND REGULATIONS MUST BE SUBMITTED TO AND APPROVED BY PROPER AUTHORITY.....

NOTE: MECHANICAL SYSTEMS REQUIRE USE OF FREE ACCESS SAND FILTER AND MUST BE COVERED BY MAINTENANCE AGREEMENT BETWEEN THE APPLICANT AND DEALER....MAINTENANCE AGREEMENT MUST BE RECORDED.

DISCHARGE FROM MECHANICAL SYSTEMS OR SAND FILTER SYSTEMS MUST BE SAMPLED AND TESTED DURING EARLY SPRING, MIDSUMMER AND EARLY FALL.

Permit No 030-09A Name: Roach 911 Sign Locate

Date of Inspection: 6/12/09 Inspected by: Elton Root

Contractor: Huff & Son

Dwelling under construction or moved in Yes  No

**Setbacks**

**Meets required setbacks.**

- Rural Water Yes  No
- Private wells/Groundwater heat pump bore holes/suction water lines/lakes
  - Outside required 50-foot setback for tank Yes  No
  - Outside required 100-foot setback for laterals Yes  No
- Streams/ponds (25-25 ft)-ditches (10-10 ft) Yes  No
- Indications of water lines under pressure Yes  No

Comments:

**Building Sewer**

- Clean outs – one right outside of house Yes  No
- **location of cleanout inside house and set requirement**
- Pipe is sch 40 and has a 4-inch diameter. Yes  No
- Grade – has adequate fall. Yes  No

Comments: Double clean out attached to old line

**Tank**

- Tank. Manufacture Lister Concrete  Plastic
- Capacity 2000 -gallon
- Two compartments, both meet the specs for capacity. Yes  No
- Baffle Yes  No
- Inlet/Outlet tees are ok. Yes  No
- Effluent filter in the outlet. Yes  No  Manuf. Zabel
- Tank depth. 24 Inches
- Risers Yes  No
- Lids above grade screwed on Yes  No  Will be

Comments:

**Distribution Box**

- Brand **Tuf-Tite** Other
- Bedded in cement. Yes  No  Will be
- Has required inlet baffle. Yes  No  Will be
- Outlet levels –are level. Yes  No  Unknown

Comments:

**Laterals**

- Distribution lines: 4 -inch PVC pipe – SCH35
- Distribution lines screwed to laterals. Yes  No  Will be
- Lateral used. EQ24 Reduction? Yes  No
- Lateral depth. 24 inches Perc depth 30 inches
- Laterals were level. Yes  No
- Adequate amount of undisturbed soil between laterals. Yes  No
- Distance 6 feet between laterals.

Comments:

