



Document 2023 GW3185

Book 2023 Page 3185 Type 43 001 Pages 22

Date 12/27/2023 Time 1:18:01PM

Rec Amt \$.00

INDX  
ANNO  
SCAN

BRANDY MACUMBER, COUNTY RECORDER  
MADISON COUNTY IOWA

CHEK

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

If the transaction is exempt from filing a declaration of value pursuant to Iowa Code 428A.1(2), **STOP HERE**. Pursuant to Iowa Code section 558.69(1), when no declaration of value is submitted during a transaction, you are not required to submit a groundwater hazard statement or include the statutory language in Iowa Code section 558.69(8A). Please consult your realtor or legal counsel for further advice, including on whether a declaration of value is required. The Department provides this information for statutory reference only.

Instructions for this document can be found at:

<https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960%20Instructions.pdf>

Attachment 1, if required, can be found at: <https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960a.pdf>

**TRANSFEROR:**

Name: Benjamin J. Waigand

Address: 1672 330th Street, Lorimor, IA 50149

Number and Street or RR, City, Town or P.O., State Zip

**TRANSFeree:**

Name: Tim Beeler

Address: 1672 330th Street, Lorimor, IA 50149

Number and Street or RR, City, Town or P.O., State Zip

Address of Property Transferred:

1672 330th Street, Lorimor, IA 50149

Number and Street or RR, City, Town or P.O., State Zip

Legal Description of Property:

**Parcel "B" located in the Northwest Quarter (1/4) of the Northeast Quarter (1/4) of Section Thirty-one (31), Township Seventy-four (74) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, containing 3.00 acres, as shown in Plat of Survey filed in Book 2008, Page 1631 on May 20, 2008, in the Office of the Recorder of Madison County, Iowa.**

**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:  
\_\_\_\_\_.

Review the following two directions carefully:

- A. If you selected a box stating "No Condition" for every numbered section above, **STOP HERE**. Do not submit this form. Instead, pursuant to Iowa Code section 558.69(8A), you must include the following language on the first page of the recorded deed, instrument, or other writing:

"There is no known private burial site, well, solid waste disposal site, underground storage tank, hazardous waste, or private sewage disposal system on the property as described in Iowa Code section 558.69, and therefore the transaction is exempt from the requirement to submit a groundwater hazard statement."

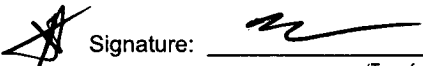
Please consult your realtor or legal counsel for further advice on this exemption. By law, the owner of the property is responsible for the accuracy of this statement, and the Department provides this information for statutory reference only.

- B. If you checked any box stating "Condition Present" for any of the numbered sections above, continue below. You must complete this form, including providing all required information, and you must submit this form to the county recorder's office with declaration of value.

Information required by statements checked above should be provided here or on separate sheets attached hereto:

one well and one septic present. DNR BT Attached  
well Diagram Attached

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.: 641-340-2974  
(Transferor)

**GROUNDWATER HAZARD STATEMENT**

ATTACHMENT #1

**NOTICE OF WASTE DISPOSAL SITE**

**a. Solid Waste Disposal (check one)**

There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.

There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.

**b. Hazardous Wastes (check one)**

There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.

There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.

Further descriptive information:

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

Signature: \_\_\_\_\_

(Transferor)

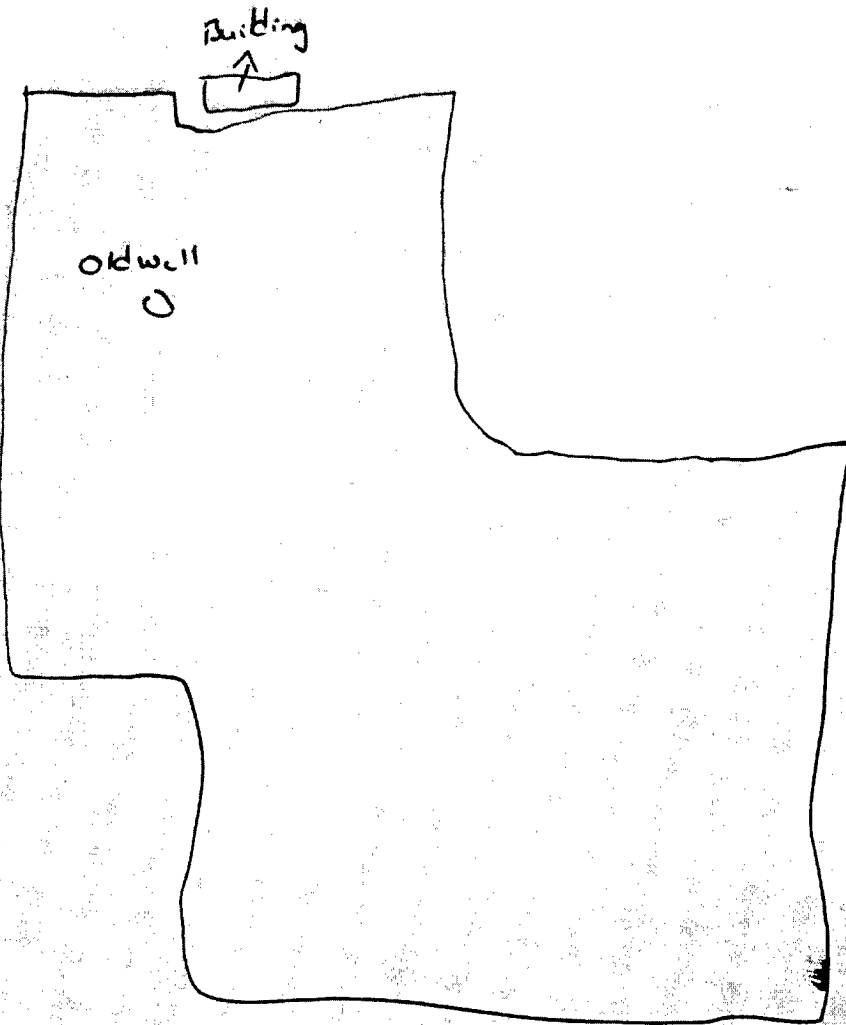
Telephone No.: \_\_\_\_\_

641-340-2974

Madison Site

Well Exhibit N

330<sup>th</sup> St.



Heritage Ave.



**TIME OF TRANSFER INSPECTION TOT# 8228 SETH BROWN CERT # 13190**

Site Information

Parcel Description: **660143124002000**  
Address: **1672 330th St, Lorimor, IA 50149** County: **Madison**

Owner Information

Property is owned by a business: **No**  
Business Name:  
Owner Name: **Benjamin Waigand**  
Email Address: **bjwpork@gmail.com**  
Address: **1672 330th St, Lorimor, IA 50149**  
Phone No:

Site related information

No Of Bedrooms: **1** Inspection Date: **11/29/2023**  
Facility Type: **Residential** Currently Occupied: **No**  
Last Occupied: System Installation Date:  
Permit issued by County: **N/A** Permit Number:  
All plumbing fixtures enter septic system: **Yes** County contacted for records: **Yes**  
Property Information Comments:

Primary Treatment

**Tank 1**

Tank Name: <b>Tank 1</b>	Type: <b>Septic Tank</b>	Tank Size (Gal): <b>1000</b>
Tank Material: <b>Concrete</b>	Tank Corrosion Type: <b>Slight</b>	Liquid Level Type: <b>Normal</b>
No. of Compartments: <b>2</b>	Pump Tank Chamber: <b>No</b>	Licensed Pumper Name: <b>Rogers Septic</b>
Date Pumped: <b>11/29/2023</b>	Meets Setback to Well: <b>N/A</b>	Well Type:
Distance To Well (Ft.):	Is Accessible: <b>Yes</b>	Lid Intact: <b>No</b>
Risers Intact: <b>No</b>	Effluent Filter Present: <b>Yes</b>	Watertight: <b>Yes</b>

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: <b>Distribution Box 1</b>	Material Type: <b>Plastic</b>	Accessible: <b>Yes</b>
Box Opened: <b>Yes</b>	Baffle Present: <b>Yes</b>	Speed Levelers Present: <b>Yes</b>
Watertight: <b>Yes</b>	Functioning As Designed: <b>Yes</b>	

General Distribution System Comments :

Secondary Treatment

**Lateral Field1**

Distribution Type: <b>Distribution Box</b>	Material Type: <b>Rock and PVC Pipe</b>	Trench Width: <b>24</b>
Lines: <b>2</b>	Total Length of Absorption Line: <b>200</b>	System Hydraulic Loaded: <b>Yes</b>
Gallons Loaded: <b>150</b>	Meets Setback to Well: <b>N/A</b>	Well Type:
Distance To Well (Ft.):	Lateral Lines Probed: <b>Yes</b>	Saturation or Ponding Present: <b>No</b>
Grass Cover Present: <b>Yes</b>	Lateral Lines Equal Length: <b>Yes</b>	System Located on Owner Property: <b>No</b>
Easement Present: <b>N/A</b>	Functioning as Designed: <b>Yes</b>	
Comments:		

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: **All wastewater goes to septic. 1000 gallon watertight concrete septic tank in working condition with none to very slight deterioration. Accessible by inlet and outlet risers and lids to ground surface. Inlet ez 20" lid is cracked and broken allowing potential rain fall into septic system. Inlet riser is also cracked/broken and not able to secure lid down. Outlet lid is cracked and broken allowing potential rainfall into septic system. Riser is also cracked and broken allowing critters/rain into septic. Would recommend replacing inlet and outlet risers and lids. Inlet and outlet baffles present, outlet filter present. Watertight plastic distribution box in working condition in neighboring field. Unknown easement. Baffle and speed levelers present. Hydraulic load tested 2x100 equaling 200 ft of rock and pipe laterals with 150 gallons. Each lateral took water and probed dry and clean.**



**TIME OF TRANSFER INSPECTION TOT# 8228 SETH BROWN CERT # 13190**

Owner Name: **Benjamin Waigand**

Address: **1672 330th St , Lorimor , IA 50149**

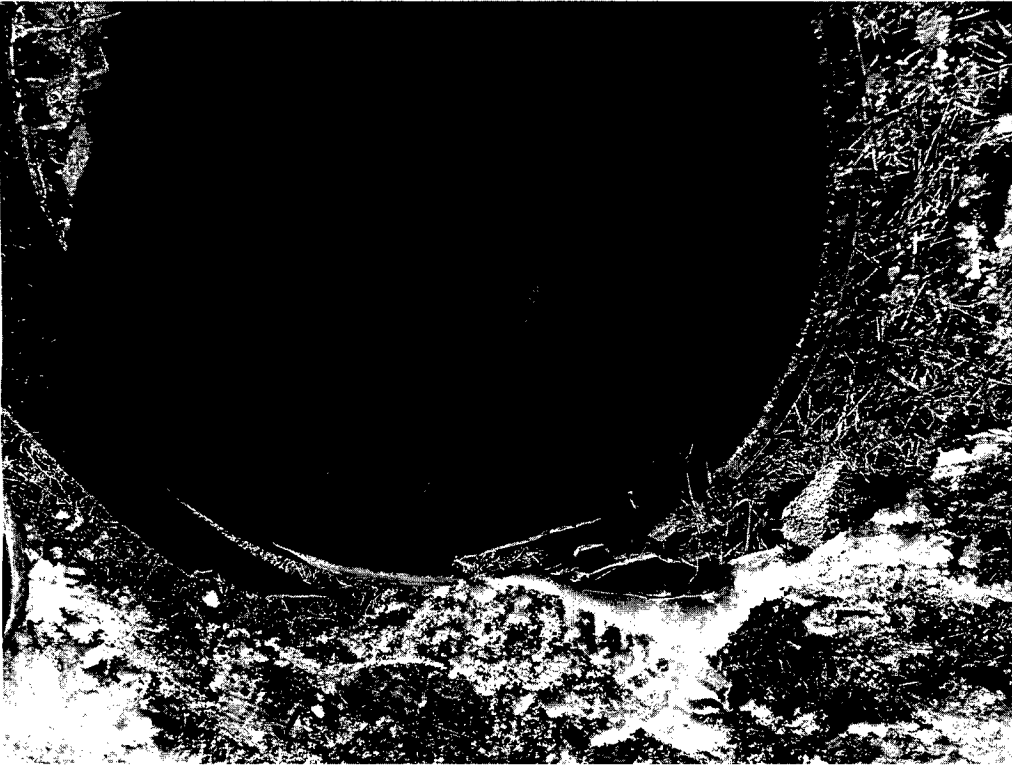
County: **Madison**

Inspection Date: **11/29/2023**

Submitted Date: **11/29/2023**

This page certifies a Time of Transfer inspection was conducted and submitted for the property listed above in accordance with Subrule 567 IAC 69.2(8).







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: 061-08**

**Date Issued: 10/28/08**

**Issued to: Arnold Lourens**  
**Address: 1103 State Hwy 169**  
**Lorimor, IA 50149**

1672 330<sup>th</sup> St.

660143124002000

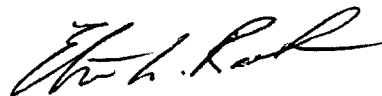
**Legal Description: NW NE Section 31-74-28 Monroe Twp.**

**POWTS Components Specifications: 1000 gal. Septic Tank & 200 ft. of Rock & Pipe Laterals**

**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:**



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

Application to Construct  
Private On-Site Wastewater Treatment  
System (POWTS)

Office Use Only					Temp E911		
Tracking No.	Date Received	Fee Paid	Date Issued	Date Inspected	Date Approved	Section/Township	NPDES Authorization #
061-08	10/28/08	150	10/28/08			31 Monroe	

Application will not be accepted until site and soil analysis/percolation information, and two diagrams of the system layout, profiles and cross-sections 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 and appropriate forms recorded before a permit will be issued.

Please Print All Information.

1. Owner Information (Applicant)			2. Contractor Information		
First Name	Last Name		First Name	Last Name	
Arnold	Lawrence		Larry	Huff	
Address			Address		
1103 State Hwy 169			1996 295 + L 2 W		
City	State	Zip	City	State	Zip
Lorimor	IA	50149	Winterset	IA	50273
Phone Number (area code)	Fax or E-mail	Cell Phone	Phone Number (area code)	Fax or E-mail	Cell Phone
					468 1668

3. System Requirement Information	4. Site and Soil Evaluator (Percolation Test)
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED	PERCOLATION TEST MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT
Minimum Tank Size Required	Date test taken _____ Test taken by _____
1-3 Bedroom 1000	Test Results: Hole 1 _____ min/in Hole 2 _____ min/in
4 Bedroom 1250	Hole 3 _____ min/in Hole 4 _____ min/in
5 Bedroom 1500	Average _____ min/in Depth of Test Holes _____
6 Bedroom 1750	Number of Laterals Required _____
150 gpd Office	Length of Laterals Required _____ ft. ea

5. Type of Submittal	6. Address Information
<input type="checkbox"/> New	Location, Number & Street of project (if unknown, indicate nearest road): 1649 - 330th St
<input type="checkbox"/> Revision	Legal Description:
<input type="checkbox"/> Repair, Tank	NW NE Section 31-74-28
<input type="checkbox"/> Repair, Treatment Area	
<input type="checkbox"/> System Replacement	
Previous Permit #:	

7. Type of Building (Completed by Owner)	
<input type="checkbox"/> Residential	Number of Bedrooms: _____
<input type="checkbox"/> Commercial/Other Non-Residential	Use: OFFICE
Other buildings served by this system:	
<input type="checkbox"/> Garbage Disposal	<input type="checkbox"/> High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: _____

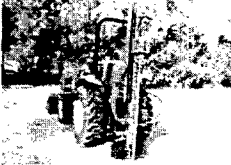
Your contractor or system designer should complete the remaining portion of this application.

8. Primary and/or Mechanical Treatment	Type: Concrete	Manufacturer: Cister	Model:	Size (gal): 1000
9. Pump/Siphon	Type:	Manufacturer:	Model:	Dosing Frequency:
<input type="checkbox"/> Not Applicable				

10. Secondary Treatment Area				
Type of Laterals	Number of Laterals	Length of ea. Lateral	Other	Maximum Trench Depth (inches)
Rock + Pipe	2	100		36

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. Mechanical systems require use of a free-access sand filter and must be covered by a maintenance agreement, which must be recorded in the Madison County Records Office. Discharge from mechanical systems and sand filters require periodic testing as set forth in IAC Chapter 69 and the results submitted to BOH.	It is unlawful to start construction, reconstruction, or repair of any POWTS prior to issuance of a POWTS permit by the Environmental Health Officer.
Applicant Signature: Larry Huff for Arnold Lawrence	Date:

Chris Trislev (641) 202 4079



## **BOECKMAN SERVICES**

1990 CLOVER AVENUE  
CRESTON, IA 50801

PHONE: (641)-782-4595  
Louis Boeckman, CPSS-PSCI

September 18, 2008

MADISON COUNTY HEALTH & ZONING  
Elton Root, Sanitarian  
PO Box 152  
Winterset, IA 50273-0152

RE: Soil Analysis for Lourens Farms  
- 330<sup>th</sup> Street  
Lorimor, IA 50149  
Section 31 Monroe Township

Dear Mr. Root:

Enclosed are the soil analysis results conducted on September 17, 2008 and soil transect for new office building for a hog facility of **the Lourens Farms** located in **section 31 of Monroe Township** near **Lorimor, Iowa**.

The loading rate is **.59 gallons per square foot** for the **potential soil absorption field**. The total footage for the field if constructed would be **200 feet with a 2-foot trench width** for 150 gallons per day water usage.

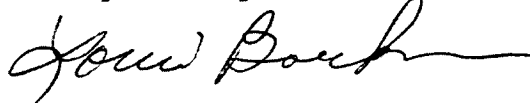
The wide chamber product can be used with **100 feet of 3-foot trench** at this home site. **Please note that it would be best to construct 50 foot trenches in the suitable soil area**. This area is located about **500-600 feet south to southwest of the office building on a foot slope at the base of a hill slope near the valley**. Also note this area is **west a tile line that extends from the building site to a ditch**.

Soil borings indicate the soils are **Judson soils**. Soils at this site are **moderately well drained** and have a **seasonal high water table of 4 to 6 feet** during spring months or during heavy rainfall periods.

If this site is used for soil absorption field, **trenches must be constructed at depths of 24-30 inches with a maximum depth of 36 inches**. Suitable area is located between test holes 1 and 2. Test holes 3, 4, 5 and 6 are not suitable for soil absorption system because depth to limiting layer is too shallow for adequate treatment of wastewater. **Please note there is no flag at test hole 5**. So construction of trenches must be located near the tile line, as mentioned above, and westward and downslope from test holes 1 and 2. Tractor track also marks the area where construction can take place.

If there are any questions, you can contact me at 641-344-3408.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "Louis Boeckman".

Louis Boeckman, CPSS

Enclosure:

Soil Analysis Results  
Soil boring & Transect  
Drawing of Site  
Receipt-Sent to Lourens Farms

Cc: Lourens Farms

**JIL BORINGS AND TRANSECT OF ON-SITE WASTEWATER TREATMENT AND DISPOSAL SYSTEM SITE**

DATE: 9-17-08 Time Started: 1:30pm Time Completed: 4:30pm  
 Conducted By: Louis Boeckman Certification: CSS-PSOZ

HOME OWNER: Lourens Farms (Arnold Lourens)  
 ADDRESS: 330th Street

LOCATION: About 500-600 feet S-SW of office Bldg

CITY: Lorimer ST: IA ZIP: 50149  
 SECTION NO.: 31 T. 74 N. R. 28W. COUNTY: Madison

LANDSCAPE-LANDFORM-SLOPE TYPE: (Place "X" on Diagrams-Back of Sheet)

TOWNSHIP: Monroe Lat: 41° 16' 20"

SOIL SYMBOL: SB SOIL NAME: Judson silty clay loam, 27.5 percent sand

Long: -94° 16' 24" Elev. (ft.): 15ft

ASPECT (°): S (215°) SOIL PERMEABILITY: Med. slow

No. of Bedrooms: 1 Average Loading Rate = .59

DRAINAGE: MW DEPTH OF POTENTIAL SEASONAL HIGH WATER TABLE (ft.): 4-6

GPD = 150 LR = .59 Round to next higher even 100 ft.

SOIL BORINGS: NO. 1 NO. 2 NO. 3 NO. 4 NO. 5 NO. 6 NO. 7 NO. 8 NO. 9

LLR = 254 TW = 2 = 127 ft. = 2.0 ft. TW = 3 = 88 ft. = 100 ft.

THICKNESS OF SURFACE SOIL (in.): 22" 24" 22" 8" 10" 6" — — —

DEPTH TO Concentrations: 45" 40" 28" 13" 12" 6" — — —

REDOX FEATURES: Depletions: 45" 40" 28" 13" 12" 6" — — —

DEPTH TO GRAY MATRIX: — — — — — — — — —

DEPTH OF LIMITING LAYERS(KD/in.): 1174" — 1136" 1113" 1112" 116" — — —

DEPTH TO CLAY MAXIMUM: >45" >40" >34" >73" >78" >6" — — —

DEPTH OF ACTIVE W.T.: >92" >90" >91" >44" >44" >30" — — —

Formula: GPD = LLR = FOOTAGE

LR TW

DEPTH (inches)	HORI-ZON	SOIL TEXTURE	COLOR		COATS or CLAY FILMS	STRUC-TURE	CONSIS-TENCY	ROOTS	BOUN-DARY	MOIST STATE	COMPAC-TION	PM or REMARKS	LOADING RATE
			MATRIX	REDOX									
0-12	AP	Silcl 5-10% VPS 30% C	10YR 2/1			cdy 2Mgy	fv	cl	AS	m	yes	colluvium	.65-1.2 .55
12-22	A	Silcl 5-10% VPS 31-32% C	10YR 3/2			1Msf gy	fv	fl	CS		no		.6
22-32	BW	Silcl 5-10% VPS 33% C	10YR 4/3		10YR 4/3	1Msf sh	fv	fl	CS				.6
32-45	BW	Silcl 34-35% C	10YR 4/4		10YR 4/3	1Msf sh	fv	fol	gs				.6
45-64	BW	Silcl 35-36% C	10YR 4/4	pcp 10YR 4/4		10YR 4/4	fv	uvf	gs				.6
64-74	BC	cl 26% S 35-36% C	10YR 4/6	emp 10YR 4/6	10YR 4/3	10PV	fv	-	CS				.4
74-92	2BW	cl 35-40% S 35-36% C	10YR 5/6	emp 10YR 5/6		10PV	fv	-	-			Glacial Till	.2

Reduce LR by 1/2 for Compaction Key.  
 12 = 6.6  
 35 / 60 = .59  
 48 / 60 = .8  
 = 28.6

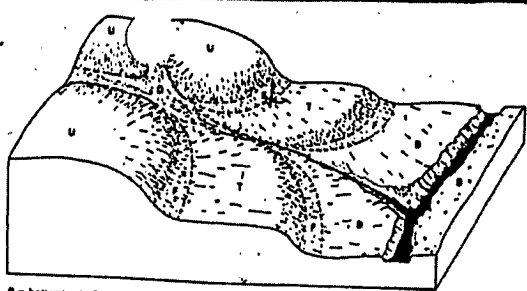
PM = PARENT MATERIAL--(1) Loess, (2) Glacial Till, (3) Weathered Glacial Till, (4) Valley Fill, (5) Outwash, (6) Eolian, & (7) Alluvium

Described By: [Signature]

#5 No Flag

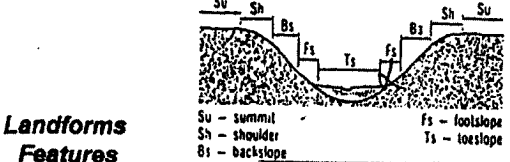
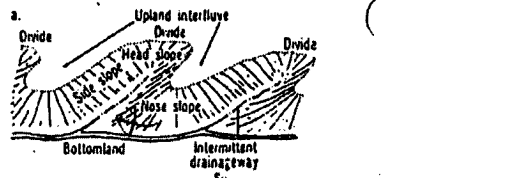
Trench Depth 3, 4, 5 & 6 one No. suitable

Trench Depth @ 18-30" may @ 36"



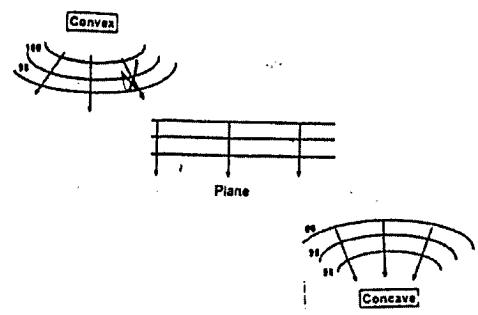
B = bottomland D = intermittent drainageway F = footslope T = terrace U = upland

Landscape Position



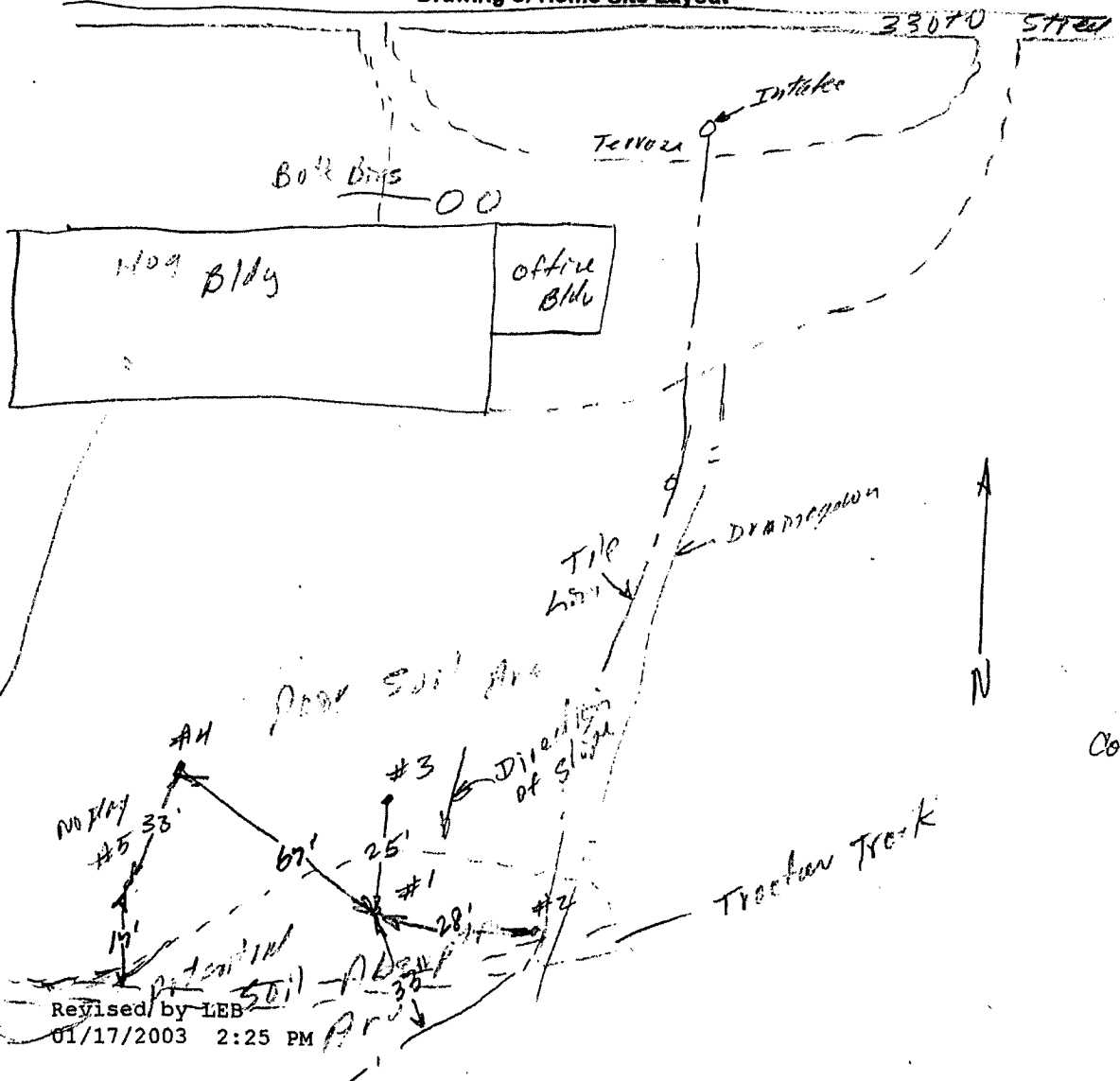
Su - summit  
Sh - shoulder  
Bs - backslope  
Fs - footslope  
Ts - toeslope

Landforms Features



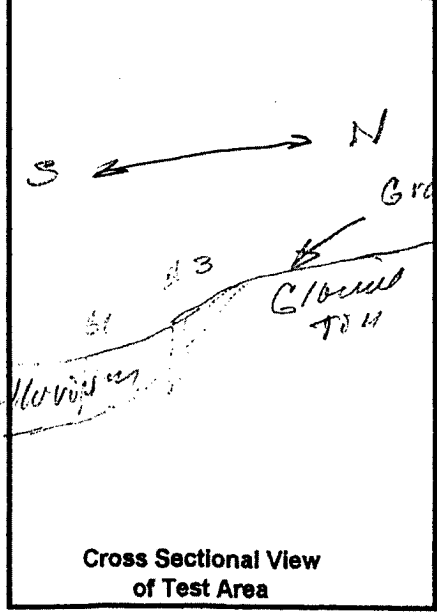
Slope Type

Drawing of Home Site Layout



Home Site Checklist:

1. Location of house
2. Location of wells
3. Location of utilities
4. Location of Soil Absorption Field.
5. Location of Street and Driveway
6. Show Direction of Slope
7. Show Orientation from North.
8. Show Owner's Name & Address
9. Show Section & Township
10. Location & Distance of Soil Borings



Cross Sectional View of Test Area

Revised by LEB  
01/17/2003 2:25 PM

02:0



Property 003766400 DED LOURENS, ARNOLD  
 Ownership 1103 STATE HWY 169  
 LORIMOR IA 50149

000000000  
 Location 000000 Street City  
 Recorded DED 2006 4949 11/30/2006 4949 2006/11/29

Documents .....  
 Misc ..... Exempt Code ..... No Ag Cr Vin  
 Sec-Twp-Rng 031 074 028 Cty-Adn-Blk 00031 Title

Legal Desc NW NE  
 Applications Typ 1 AGL Ovr Amt 11,353 Typ 2 ..... Ovr Amt  
 Typ 3 ..... Ovr Amt Typ 4 ..... Ovr Amt

	Acres	Typ	Value	Rollback	Acres
100%Gs	12,600	Gr	40.00 LND	12,600	11,826
100%Nt	12,600	Ex	1.00 EXM		39.00
TaxGrs	11,826	PE	.00		1.00
Milt		Dr	.00		
TaxNet	11,826	Net	39.00		

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

**Permit No 061-08**  
**Date of Inspection: 11-5-08**  
**Contractor: Larry Huff**  
**Existing Dwelling**

**Name: Arnold Lourens**  
Inspected by: Jean Thompson

**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  Will be \_\_\_\_\_
- **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: \_\_\_\_\_

**Tank**

- Tank. Manufacture Lister Concrete  Plastic
- Capacity 1000 -gallon
- Two compartments, both meet the specifications for capacity. Yes  No
- Baffle Yes  No
- Inlet/Outlet tees are ok. Yes  No
- Effluent filter in the outlet. Yes  No  Manufacture: Zobel
- Tank depth. 24"
- Risers Yes  at grade No  Less than 12"
- 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: will screw in levelers and glue in tee

**Laterals**

- Distribution lines: 2 -inch PVC pipe – 40 SDR.
- Distribution lines screwed to laterals. Yes  Will be
- Lateral used. 36" chamber 2 @ 100' Reduction? Yes  No
- Lateral depth less than 28 Perc depth 36 inches
- Laterals were level. Yes  No
- Adequate amount of undisturbed soil between laterals. Yes  No
- Between \_\_\_\_\_ feet between laterals.

Comments: \_\_\_\_\_

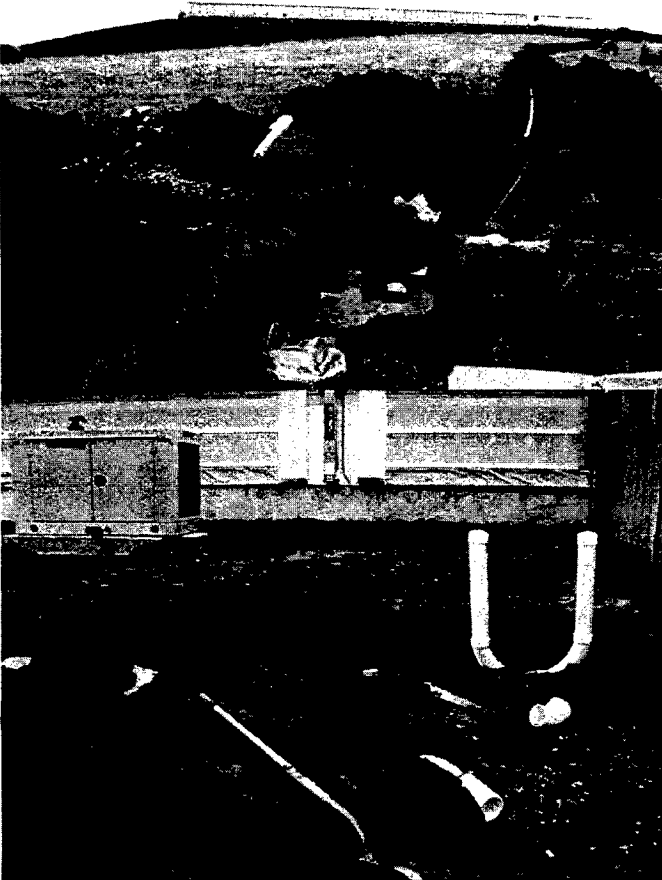
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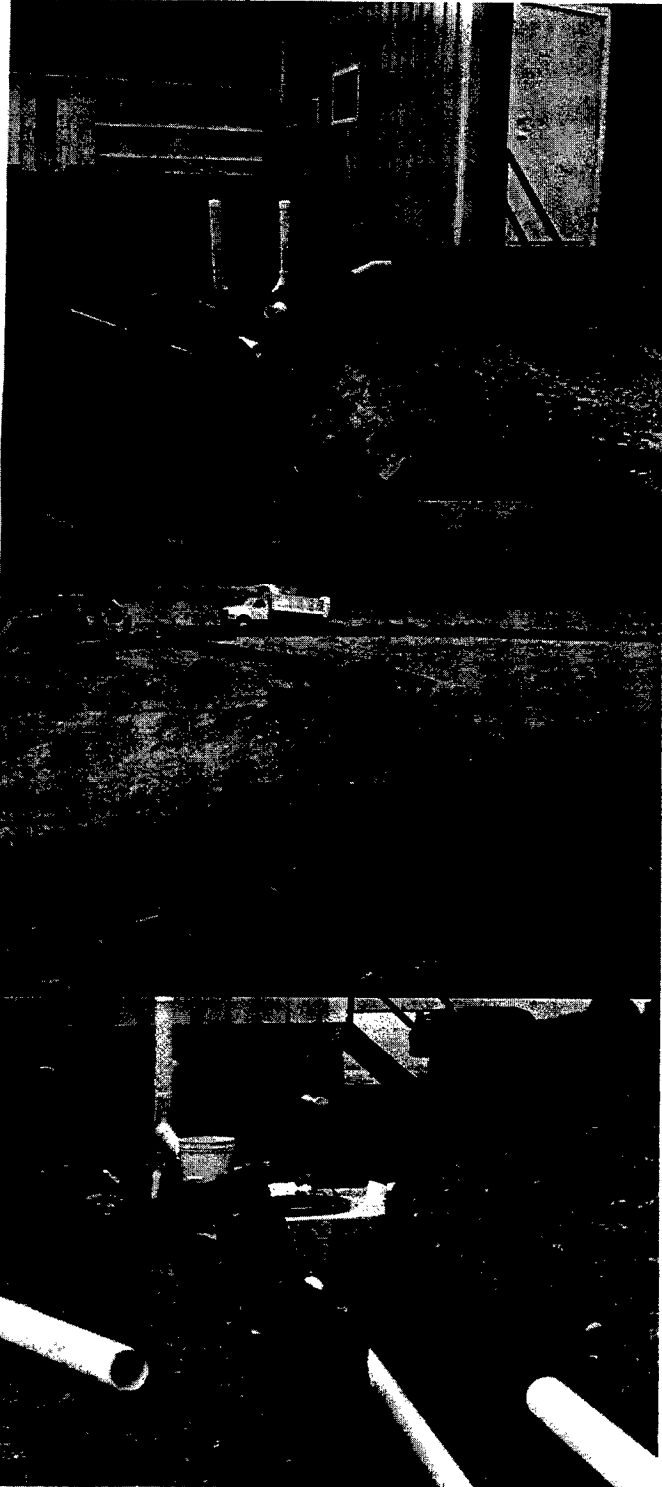
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