BK: 2024 PG: 1265

Recorded: 6/7/2024 at 12:14:49.0 PM

Pages 14

County Recording Fee: \$0.00 lowa E-Filing Fee: \$0.00 Combined Fee: \$0.00 Revenue Tax: \$0.00

BRANDY L. MACUMBER, RECORDER

Madison County, Iowa

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENTTO BE COMPLETED BY TRANSFEROR

If the transaction is exempt from filing a declaration of value pursuant to lowa Code 428A.1(2), **STOP HERE**. Pursuant to lowa 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 lowa 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: Sarah J Dory and Paul D Do	$oldsymbol{\gamma}$
Address: 2002 Woody Ct, Prole, IA	
	Number and Street or RR, City, Town or P.O., State Zip
TRANSFEREE:	
Name: Scott Olson	
Address: 2002 Woody Ct, Prole, IA	
	Number and Street or RR, City, Town or P.O., State Zip
Address of Property Transferred:	
2002 Woody Ct, Prole, IA	
	Number and Street or RR, City, Town or P.O., State Zip
- · · · · · · · · · · · · · · · · · · ·	e (1) of Woods Addition, located in the Northwest Quarter (1/4) of the Northeast Quarter wnship Seventy-six (76) North, Range Twenty-six (26) West of the 5th P.M., Madison
1. Wells (check one)	
	o known wells situated on this property.
	is a well or wells situated on this property. The type(s), location(s) and legal status are 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.
£	is a solid waste disposal site on this property and information related thereto is provided in

February 15, 2023 FILE WITH RECORDER DNR Form 542-0960

/	rdous 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. Unde	erground Storage Tanks (check one)
A	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. Priva	te 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. Priva	te 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
<u></u>	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 <u>every</u> numbered section above, <u>STOP HERE</u>. Do not submit this form. Instead, pursuant to lowa 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

	complete this form, including the complete this form, including the complete the co		ired information, a	nd you must submit	this form to the o	ounty
Informati	ion required by statements ch	ecked above should	be provided here o	r on separate sheets a	attached hereto:	
			 			w-w

	PECLARE THAT I HAVE REVIE TRUE AND CORRECT.	Do	TIONS FOR THIS F	ORM AND THAT THE	EINFORMATION	STATED

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.
Fu	rther descriptive information:
1 1-	IEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED
	BOVE IS TRUE AND CORRECT.
	1/1/10/10 11/10 TTT 577/00
Sig	gnature: \(\lambda \lambda \la
	(Transferor)





TIME OF TRANSFER INSPECTION TOT# 10266 BEN BEDWELL CERT # 11612

Site Information

Parcel Description: 430082524004100

Address: 2002 Woody Ct, Prole, IA 50229

County: Madison

Owner Information

Property is owned by a business: No

Business Name:

Owner Name: Paul Dory

Email Address: paul@4dgrading.com
Address: 2002 woody ct, Prole, IA 50029

Phone No: 515-577-1823

Site related information

No Of Bedrooms: 4

Facility Type: Residential

Last Occupied:

Permit issued by County: Yes

All plumbing fixtures enter septic system: Yes

Property Information Comments:

Inspection Date: 04/30/2024

Currently Occupied: Yes

System Installation Date: 05/14/2003

Permit Number: 029-03

County contacted for records: Yes

-Primary Treatment

Tank 1

Tank Name: Tank 1

Type: Septic Tank

Tank Size (Gal): 1500

Tank Material: Concrete

Tank Corrosion Type: None

Liquid Level Type: Normal

No. of Compartments: 2

Pump Tank Chamber: No

Licensed Pumper Name: Wiegert

Date Pumped: 4/30/2024

Meets Setback to Well: N/A

Well Type:

Distance To Well (Ft.):

Is Accessible: Yes

Lid Intact: Yes

Risers Intact: No

Effluent Filter Present: No

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

Box Opened: Yes

Watertight: Yes

Material Type: Plastic

Baffle Present: Yes

Functioning As Designed: Yes

Accessible: Yes

Speed Levelers Present: Yes

General Distribution System Comments :

-Secondary Treatment

Lateral Field1

Distribution Type: **Distribution Box**

Lines: 4

Gallons Loaded: **300** Distance To Well (Ft.):

Grass Cover Present: **Yes**Easement Present: **N/A**

easement resent.

Comments:

Material Type: **Leaching Chamber**

Total Length of Absorption Line: 400

Meets Setback to Well: **N/A**Lateral Lines Probed: **Yes**

Lateral Lines Equal Length: Yes

Functioning as Designed: Yes

Trench Width: 24

System Hydraulic Loaded: Yes

Well Type:

Saturation or Ponding Present: No

System Located on Owner Property: Yes

General Secondary Treatment Comments:

-Narrative Report-

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

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 10266 BEN BEDWELL CERT # 11612

Owner Name:

Paul Dory

Address:

2002 Woody Ct , Prole , IA 50229

County:

Madison

Inspection Date:

04/30/2024

Submitted Date:

5/24/2024

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: 029-03

Date Issued: 4/14/03

Issued to:

Dennis Woods

Address:

P.O. Box 151

Prole, IA 50229

2002 Woody Cf. 436682524604100

Legal Description: Lot 1 Woods Addition NW NE Section 25-76-26 Crawford Twp.

POWTS Components Specifications: 1250 gal. Septic Tank & 4 Laterals @ 100ft each

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

The h. Kel

Madison County Office of Zoning & Environmental Health

MC-ZEH Form EH01

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

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

Office Use Only	Temp E911: 7	2002 Woody	, LM
Tracking No. Date Received Fee Page 150 Date Issued Date Inspected 029-03 4/19/03 CK 5347 4/14/03	Date Approved	Section/Township 25 Cracuford	NPDES Authorization #

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 (Applica		2. Contractor Information		
First Name . Last Name Dennic Woods		Pirst Name Last Name Mike Howkin		
Address	^	Address		
2031 Woody	Jane			
Prole Jou	State Zip Va 50229	City Sta	•	
Phone Number (area code) 462 - 5909	Fax or E-mail Cell Phone 491 - 2588	Phone Number (area code) Fax or E-mail	Cell Phone 360-0399	
3. System Requirement Inform	ation	4. Site and Soil Evaluator (Percolation Test)		
IAC CHAPTER 69 DOUBLI	COMPARTMENT TANK REQUIRED	PERCOLATION TEST MUST BE COMPLE TO THE ISSUANCE OF		
100	Minimum Tank Size Required	Date test taken 4/11/03 Test taken by	Tim James	
1-3 Bedroom	1000	Test Results: Hole 1 40 min/in Ho		
4 Bedroom	1 25 0 1 50 0	Hole 3 26.7 min/in Ho		
5 Bedroom	1750	Average 29.4 min/in Depth of Test F		
6 Bedroom	1750	Number of Laterals Required 4	336	
		Length of Laterals Required /00	ft. ea	
		bengin of baterais requires		
5. Type of Submittal	6.Address Information	2.4.1.	1	
⊠ New	Location, Number & Street of project (if	unknown, indicate nearest road): Wood	y spore	
Revision	Legal Description: 25-16-3	6 Sot 1 Woods add	ation	
Repair, Tank		rawford Tup		
☐ Repair, Treatment Area	2	vauros or rup	į	
System Replacement			ļ	
Previous Permit #:				
7. Type of Building (Completed				
⊠ Residential	Number of Bedrooms: 3	Commercial/Other Non-Residential Use:		
Other buildings served by this sys	tem:	☐ Garbage Disposal ☐ High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty:		
	Your contractor or system designer should c	omplete the remaining portion of this application		
T	Type: Concrete Manufacturer (t- in Model:	Size (gal): 1250	
8. Primary and/or Mechanical Treatment	Type: Manufacturer:	Model:	Size (gal):	
9. Pump/Siphon		Model:	Dosing Frequency:	
☐ Not Applicable	- 7,7		5558	
10. Secondary Treatment Area				
Type of Laterals Num	per of Laterals Length of ea. Lateral	Other Other	Maximum Trench Depth	
FO 24	4 100		(inches): 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 Recorders Office. Discharge from mechanical systems and sand filters require periodic testing as set forth in IAC Chapter 69 and the results submitted to BOH. Applicant Signature: Date:				
- //	wood:	4 1403		
MC-ZEH Form PHO	KVZX		April 2001	

4-11-03

Date taken:

Phone No. 491-2588

Jim Vance

By:

Site Address:

Dennis Woods

Owner:

Structure:

Sec.25-T76N-R26W Legal Description: Lot 1, Woods Addition

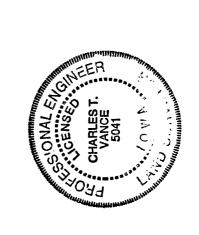
3 ac. Lot Size:

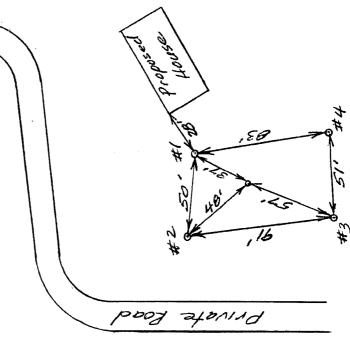
Installer: 50211 Norwalk, Iowa # Bedrooms: Existing New

24.0 min. 26.7 min. ښ ښ ن 26.7 min. 36" نہ نہ Owner's Current Mailing Address: P.O. Box 151, No rock, No water 40.0 min. Time for 1 inch of water: Results of 6 foot hole: Depth of holes tested:

100 feet Drawing of perc site below. Average length of laterals: 400 feet Min. recommended lateral footage per IAC Ch. 69: 4 eac. Number of laterals required:

ANE. 200#





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

Signed:

Date: //

Reg. No. 504

Exp. Date: 31 Dec. 2003

RLI1002. PID 430082524004100 UU Tax Dist 430 UU Class A INQUIRY 2002 061 Map# 000000825201006 GIS# roperty 006580700 DED Woods, Dennis W Po Box 151 wnership Norwalk IA 50211-000000000 ocation 000000 City Street 138 REC 510 ecorded ocuments isc Exempt Code No Ag Cr VIN# ec-Twp-Rng 025 076 026 Cty-Adn-Blk egal Desc LOT 1 WOODS ADDITION NW NE 900 Typ 2 . . . Ovr Amt pplications Typ 1 AGL Ovr Amt Typ 4 Ovr Amt Typ 3 Ovr Amt res Typ Desc 3.02 LND Land Acres Value Rollback Acres Rollback Gr 900 900 2.79 100% ,23 900 900 Ex .23 EXM Exempt rs .00 i1 PE .00 900 900 **Dr**

F3=Exit F10=Ownership F12=Prev F13=Rec Doc F15=Legal F18=Tax History F19=Aplc F20=Value F21=Print

Net

2.79

et

Permit No 029/03 14 Name: Denni		911 Sign Locate 🔀
Date of Inspection: 5/15/02 Inspected by:	Enon Root	
Contractor: Mike Harkin	w 52	x7. □
Dwelling under construction or moved in	Yes 🔀	No 🗌
Setbacks		
Meets required setbacks.	ĺ	
• Rural Water Yes No No	1 1 1 1	4 15 /1.1
• Private wells/Groundwater heat pump bo		
Outside required 50-foot setback		Yes No L
Outside required 100-foot setback fo		Yes No No
• Streams/ponds (25-25 ft)-ditches (10-10		Yes No L
. Indications of water lines under pressure		Yes ⊠ No L
Comments:		
Building Sewer	*, [
• Clean outs – one right outside of house	Yes 📙	No 📙
• location of cleanout inside house and s		-
• Pipe is sch 40 and has a 4-inch diameter.		No 📙
• Grade – has adequate fall.	Yes 🖂	No 📋
Comments: Clean out will be outside of four	idation when h	ooked up.
Tank	5 7 D 1	
• Tank. Manufacture Lister Concrete	e⊠ Plastic	; _ _
• Capacity 1500 -gallon	c	, K7 N 🗀
• Two compartments, both meet the specs		res⊠ No ∐
• Baffle Yes ⊠	No 📙	
• Inlet/Outlet tees are ok. Yes	No 📙	07.1.1
• Effluent filter in the outlet. Yes	No Man	nuf.Zabel
• Tank depth.6 inches plus		
• Risers Yes No 🗌	1	· 15-73
• Lids above grade screwed on Yes] No 🗌 Will b	e 🔀
Comments:		
Distribution Box		
• Brand <u>Tuf-Tite</u> Other	NT. [] XXZ	N 1
• Bedded in cement. Yes⊠		ll be
• Has required inlet baffle. Yes		ll be
• Outlet levels −are level. Yes⊠	No Unkn	own
Comments:		
Laterals	CTT40	
• Distribution lines: 4-inch PVC pipe – So	UH4U V/[]	No V Wall Lo
• Distribution lines screwed to laterals.		No Will be
• Lateral used. EQ24	Reduction?	
	lepth 36 inches	~
• Laterals were level. Yes No		xz⊠ xz-□
Adequate amount of undisturbed soil be	tween laterals.	Yes⊠ No∐
• Distance 8 feet between laterals.		
Comments:		

Permit # 029-03 Dennis Woods Inspection on Lot 1 5/14/03

Looking west from tank to Lateral Field



Looking south at lateral Field

termit # 029-03 Dennis Woods NOT 1 WOODS SUDDIV Inspection 5/14/03

32/22 TIZT House Foundation septic Truck