

BK: 2025 PG: 1548  
Recorded: 6/18/2025 at 10:42:15.0 AM  
Pages 8  
County Recording Fee: \$0.00  
Iowa 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 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: Steven Roger Johnson and Krystal Kae Johnson

Address: \_\_\_\_\_

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

**TRANSFeree:**

Name: Troy Williams and Sandra Williams

Address: 2362 255th Street, Peru, IA 50222

Address of Property Transferred:

2362 255th Street, Peru, Iowa 50222

Legal Description of Property: (Attach if necessary)

Parcel "C" located in the Northwest Quarter (1/4) of the Southeast Quarter (1/4) of Section Twenty (20), Township Seventy-five (25) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, containing 3.00 acres, more or less, as shown in Plat of Survey filed in Book 2020, Page 2891 on August 10, 2020, 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:

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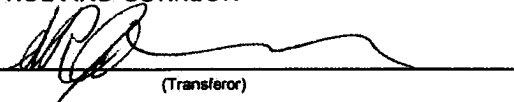
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I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature:  Telephone No.: 641-220-3512  
(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.

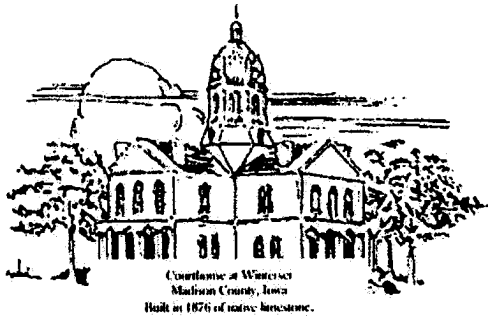
Further descriptive information:

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

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



Telephone No.: 641-220-5712 (transferor)



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

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**Ryan Hobart, Zoning Administrator**  
**Andrew Hornback, Environmental Health Officer**  
Phone: 515-462-2636, Fax: 515-462-5002

May 23, 2025

Steven Johnson  
2362 255<sup>th</sup> St.  
Peru, Iowa 50222

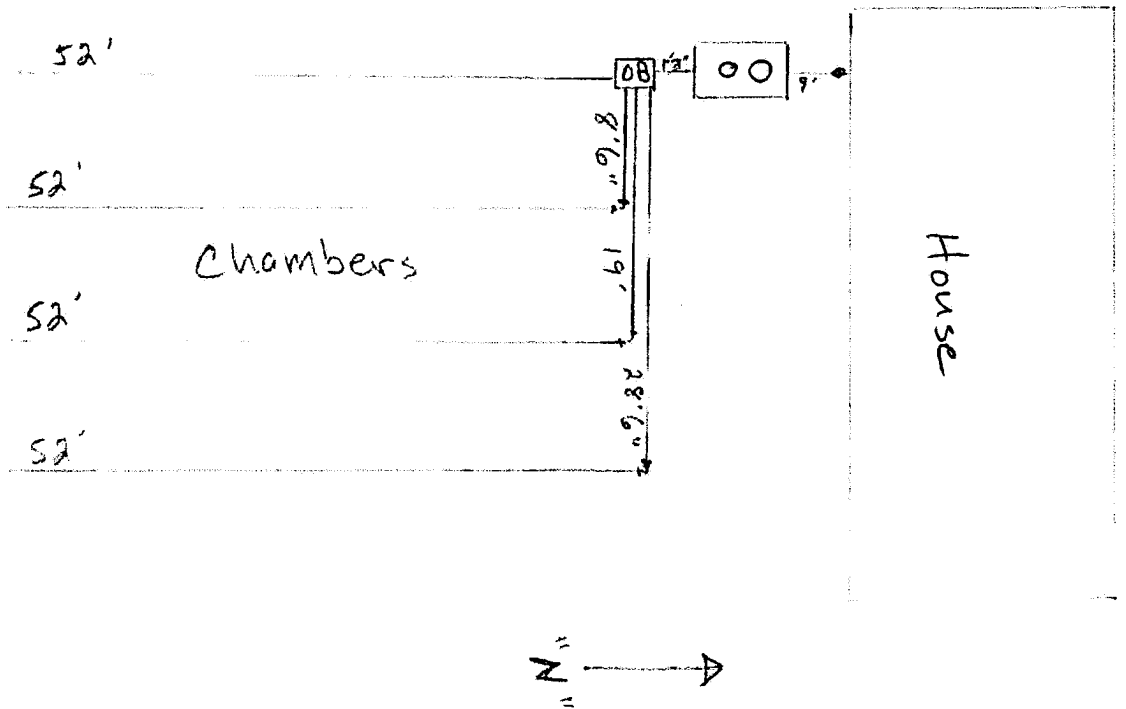
Dear Mr. & Mrs. Johnson,

After the installation and inspection, the new private wastewater treatment system serving the dwelling at 2632 255<sup>th</sup> St, meets the requirements of IAC 567 Chapter 69. Please let me know if you have any questions or concerns.

Sincerely,

A handwritten signature in black ink, which appears to read "Andrew Hornback". The signature is fluid and cursive, written in a professional style.

Andrew Hornback, Environmental Health Officer  
Madison County Environmental Health & Zoning



Steve + Krystal Johnson  
 2362 255th St.  
 Permit # 2025-41  
 6/9/25  
 A. Hornback

**MADISON COUNTY ENVIRONMENTAL HEALTH DEPARTMENT  
PRIVATE SEWAGE SYSTEM INSPECTION REPORT  
SUBSURFACE SOIL ABSORPTION-LATERALS**

GENERAL INFORMATION		
Owner: <u>Steve + Krystal Johnson</u>	Contractor: <u>Self install</u>	
Address: <u>2362 255th St.</u>	Inspector: <u>Andrew Hornback</u>	
Inspection Date: <u>6/9/25</u>	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
S = Satisfactory      U = Unsatisfactory      NA = Not Applicable		

S	U	NA	SITE PREPARATION
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Septic Permit Issued # <u>2025-41</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Soils Analyst ID <u>Josh Abel</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	System Exposed for Inspection <u>02/28/2025</u>

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 signed & 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'

S	U	NA	SEWER PIPE FROM BUILDING TO PRIMARY TREATMENT
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Minimum Setbacks to Wells Private Wells 10' / Public Wells 25'
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Material Sch.40 Plastic Pipe (or SDR 26 or Stronger) or Cast Iron
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cleanouts At Building & every 100' & each >45° Direction Change

S	U	NA	PRIMARY TREATMENT – SEPTIC TANK
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gallon Capacity <input checked="" type="checkbox"/> 1250 <input type="checkbox"/> 1500 <input type="checkbox"/> 1750 <input type="checkbox"/> 2000 <input type="checkbox"/> Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Watertight Material <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Plastic (ribbed const.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manufacturer
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compartments At least 2 Compartments or 2 tanks in series
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Influent Compartment 1/2 to 2/3 of total tank capacity
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Effluent Compartment 1/3 to 1/2 of total tank capacity
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inlet 2" to 4" higher than outlet
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Baffles 4" Diameter Schedule 40 plastic tees
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Effluent Screen Meets NSF Standard 46 or equivalent

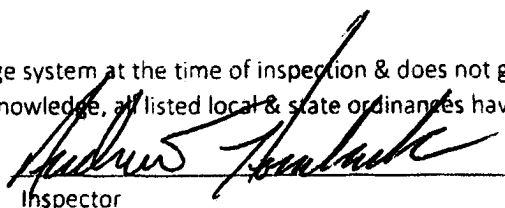
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Watertight Risers	Minimum 18" Diameter at or above ground surface
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inlet/Outlet Connections	Self-sealing gaskets formed or cast into tank material
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Schedule 40 Pipe	At least 5' past outlet & 2' past disturbed ground
S U NA		DOSING SYSTEMS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Type	<input type="checkbox"/> Pump <input type="checkbox"/> Siphon <input type="checkbox"/> Other:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Watertight Pit	At least 24" in diameter
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Watertight Riser	With tight-fitting cover at or above ground level
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Pump	Submersible Pump of corrosion-resistant material
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Pressure Line Size	Not smaller than outlet of pump it serves
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Pressure Line Drainage	Drains between dosing or buried below frost level
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> High Water Alarm	Visual or Audio Alarm to alert of high water in pit
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Electrical Connection	No Connections located inside pump pit

S U NA		DISTRIBUTION BOX	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Placement	Placed on undisturbed soil
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Material	Corrosion-resistant rigid plastic
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Baffle	Pipe tee or baffle at inlet
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Outlet Heights	Outlets at same level & minimum 4" above bottom of box
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Levelers	Outlets equipped with leveling device for equal flow
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Unused Outlets	Securely closed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Header Pipes	Rigid PVC (ASTM Standard 2729 or stronger)

S U NA		LATERALS	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Material	<input checked="" type="checkbox"/> Chamber <input type="checkbox"/> Rock & Pipe <input type="checkbox"/> Other:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Trench Width	<input type="checkbox"/> 24" <input checked="" type="checkbox"/> 36" <input type="checkbox"/> Other:
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Total Length	Required: <u>200</u> Ft.      Installed: <u>208</u> Ft.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Number of Lines	Trenches installed at equal lengths
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Spacing	6' minimum between trenches
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Depth	Max. trench depth of <u>24</u> inches (See perc/soil test)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Soil Cover	6" Minimum soil cover over laterals
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Confining Layer	3' Minimum separation between confining layer & trench bottom
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Perc/Soil Test	Lateral field installed in perc/soil test area
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Water Discharge	No sump, roof, foundation, or storm drains discharging into or upon field
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Distribution Pipe	4" Ridged PVC pipe or approved alternative
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Aggregate Material	Minimum 6" approved aggregate below & enough to cover pipe
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Separation Material	Material laid to separate aggregate from soil
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other Construction	No construction of any kind over system

Additional Comments:

This report indicates the condition of the installed private sewage system at the time of inspection & does not guarantee the future condition or proper function of the system. To the best of my knowledge, all listed local & state ordinances have been adhered to.

  
 Inspector

6/9/85  
 Date