



Document 2025 GW162

Book 2025 Page 162 Type 43 001 Pages 15

Date 1/17/2025 Time 10:46:35AM

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**

TRANSFEROR:

Name: Susan C. McDonald Revocable Trust
Address: 2678 Truro Road, St. Charles, IA 50240

TRANSFeree:

Name: Madison County Iowa
Address: PO Box 152, Winterset, IA 50273

Address of Property Transferred:
Bare Land

Legal Description of Property: (Attach if necessary)

The Southwest Quarter (1/4) of the Southwest Quarter (1/4) of Section Twenty-five (25), Township Seventy-five (75) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, EXCEPT, Parcel "A" recorded in Book 2, Page 594 on July 19, 1995, AND EXCEPT, Amended Parcel "E" recorded in Book 2010, Page 1354 on June 14, 2010.

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:
_____.

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

Signature: _____

John McDe
(Transferor)

Telephone No.: _____

515-669-4997

TIME OF TRANSFER INSPECTION TOT# 12887 BEN BEDWELL CERT # 11612

Site Information

Parcel Description: **500092566005000**

Address: **2678 truro rd, St. Charles, IA 50240**

County: **Madison**

Owner Information

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

Business Name:

Owner Name: **susan mcdonald trust**

Email Address: **johnmac2678@gmail.com**

Address: **2678 truro rd, St. Charles, IA 50240**

Phone No: **515-669-4997**

Site related information

No Of Bedrooms: **2**

Facility Type: **Residential**

Last Occupied:

Permit issued by County: **Yes**

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

Property Information Comments:

Inspection Date: **10/23/2024**

Currently Occupied: **Yes**

System Installation Date:

Permit Number:

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: **10/24/2024**

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: **36**

Lines: **4**

Total Length of Absorption Line: **400**

System Hydraulic Loaded: **Yes**

Gallons Loaded: **300**

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# 12887 BEN BEDWELL CERT # 11612

Owner Name: **susan mcdonald trust**

Address: **2678 truro rd , St. Charles , IA 50240**

County: **Madison**

Inspection Date: **10/23/2024**

Submitted Date: **10/27/2024**

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: 024-10

Date Issued: 7/2/10

Issued to: John & Susan McDonald

***Address: 2700 Woodland Ave.
St. Charles, IA 50240***

*2678 Inuro Rd.
PID # 500092566005080*

Legal Description: SW SW EX S700' W435' (6.99A) & EX PAR A 3A Section 25-75-26

POWTS Components Specifications: 1500 gal. Septic Tank & 4ea. 36in. Chamber laterals @ 100ft.

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: A curtain drain is to be installed up slope from the lateral field.



***Environmental Health Officer
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		
024-10	7-2-10	150	6152	7-2-10	25 South		

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	
JOHN		McDONALD		MARK		MEASE	
Address				Address			
2700 Woodland				2989 Truro Rd.			
City		State		City		State	
St. Charles		IA		Truro, IA		50257	
Zip		50240		Zip		50257	
Phone Number (area code)		Cell Phone		Phone Number (area code)		Cell Phone	
575-665-4997						515-468-1671	

3. System Requirement Information		4. Site and Soil Evaluator (Percolation Test/Soils Analysis)									
<p>IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED</p> <p>Minimum Tank Size Required</p> <table> <tr> <td>1-3 Bedroom</td> <td>1250</td> </tr> <tr> <td>4 Bedroom</td> <td>1500</td> </tr> <tr> <td>5 Bedroom</td> <td>1750</td> </tr> <tr> <td>6 Bedroom</td> <td>2000</td> </tr> </table>		1-3 Bedroom	1250	4 Bedroom	1500	5 Bedroom	1750	6 Bedroom	2000	<p>PERCOLATION/SOILS ANALYSIS MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT</p> <p>Date test taken 5/14/10 Test taken by Louis Boeckman</p> <p>Passed: <u>L</u> Failed: _____</p> <p>Percolation Rate: _____</p> <p>Soils Loading Rate: <u>1.58</u></p>	
1-3 Bedroom	1250										
4 Bedroom	1500										
5 Bedroom	1750										
6 Bedroom	2000										

<p>5. Type of Submittal</p> <p><input checked="" type="checkbox"/> New House</p> <p><input type="checkbox"/> Existing House</p> <p><input type="checkbox"/> Repair, Tank</p> <p><input type="checkbox"/> Repair, Treatment Area</p> <p><input type="checkbox"/> System Replacement</p> <p>Previous Permit #:</p>	<p>6. Address Information</p> <p>911 Address or nearest road: 2678 Truro Rd.</p> <p>Legal Description: SW SW EX 5700' W 435' (6.99A) + EX Parcel 3A 025 075 026</p>
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7. Type of Building (Completed by Owner)			
Building Square ft.: 2662	Number of Bedrooms: 4	Number of Bathrooms: 2 1/2	Non-Residential uses:
Other buildings served by this system: NA		Any other circumstances which may affect water usage: NONE	
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: CONCRETE	Size: 1500 GAL	Manufacturer: PELLA PRE CAST
Pump Tank	Type:	Size:	Manufacturer:
Additional Tank	Type:	Size:	Manufacturer:

9. Secondary Treatment Area					
Laterals	Type: BIO DYNAMIC	Length of each: 100'	Total number: 4	Maximum trench Depth: 24"-30"	
Sand Filter	Square ft.:	Length:	Width:		
Peat System	Model:	Manufacturer:			
Other	Description:				

<p>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 Records Office. Discharging systems also require periodic testing as set forth in IAC Chapter 69 and Madison County Environmental Health Regulations.</p>		<p>It is unlawful to start construction, reconstruction, or repair of any PSDS prior to issuance of a PSDS permit by the Environmental Health Officer.</p>	
Applicant Signature: JOHN McDONALD		Date: 7-2-2010	

RLI1002 PID 500092566004000 00 Tax Dist 500 000 Class A INQUIRY
2009 061 Map# 000001225300008 GIS#

Real Estate Inquiry

Property 004094100 DED McDonald, John K & Susan C

Ownership 2700 Woodland Ave

St Charles

IA 50240-

000000000

Location 2700 Street WOODLAND AVE

City ST CHARLES

Recorded REC 136 191

Documents

Misc Exempt Code No Ag Cr Vin

Sec-Twp-Rng 025 075 026 Cty-Adn-Blk 00025 Title

Legal Desc SW SW EX S700' W435' (6.99A) & EX PARCEL A 3A

Applications Typ 1 AGL Ovr Amt 12,483 Typ 2 Ovr Amt

Typ 3 Ovr Amt Typ 4 Ovr Amt

			Acres	Typ	Value	Rollback	Acres
100%Gs	22,300	Gr	30.01	LND	22,300	14,779	28.68
100%Nt	22,300	Ex	1.33	EXM			1.33
TaxGrs	14,779	PE	.00				
Milt		Dr	.00				
TaxNet	14,779	Net	28.68				

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



BOECKMAN SERVICES

**1990 CLOVER AVENUE
CRESTON, IA 50801**

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

May 17, 2010

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

RE: Soil Analysis for John McDonald
2678 Truro road
St. Charles, IA 50240
Section 25 South Township

Dear Mr. Root:

Enclosed are the soil analysis results conducted on May 15, 2010 and soil transect for a new home site of **John McDonald** located in **section 25 of South Township** near **St. Charles, Iowa**.

Two sites were investigated for this home site. One of sites is located east of the proposed building and home sites. An alternative site is located west of the home site identified as test hole 6. Both sites have similar soils and occur near drainage ways.

The loading rate is **.58 gallons per square foot** for the **potential soil absorption field**. The total footage for the field if constructed would be **600 feet with a 2-foot trench width** for 600 gallons per day water usage. The wide chamber product can be used with **400 feet of 3-foot trench** at this home site.

Soil borings indicate the soils are **Nira soils**. Soils at this site are **moderately well drained** and have a **seasonal high water table of 2 to 5 feet** during spring months or during heavy rainfall periods. Seasonal high water table was observed at depths of 32-54 inches.


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**. Construction of trenches can be installed upslope from test hole 5 and 6 to allow for greater depth to limiting layers.

It is recommended a curtain drain installed upslope of the field at depth of 5-7 feet. This will maintain a lower water table and improve performance of the field.

At either site, a pump system will be required to service the basement of the home site. There is possibility the shop building will have a bathroom and a sewer dump for a RV camper.

If there are any questions, you can contact me at 641-344-6408.

Respectfully submitted,



Louis Boeckman, CPSS

Enclosure:

Soil Analysis Results
Soil boring & Transect
Drawing of Site
Invoice—Sent to John McDonald

Cc: John McDonald

OIL BORINGS AND TRANSECT OF ON-SITE WASTEWATER TREATMENT AND DISPOSAL SYSTEM SITE

DATE: 5-15-2010 Time Started: 12:00 PM Time Completed: 4:00 PM
 Conducted By: Lois Boeckmann Certification: 0053-PS-02

HOME OWNER: John Pic Donnelly ADDRESS: 2678 Truro Road

LOCATION: 112 feet South of Fence & 76 feet West of Center of Driveway CITY: St. Charles ST: IL ZIP: 60200
 LANDSCAPE/LANDFORM-SLOPE TYPE: (Place "X" on Diagrams-Back of Sheet) SECTION NO.: 25 T. 15 N. R. 26 W. COUNTY: Marion
 SOIL SYMBOL: 570C SOIL NAME: Ni'a Silty Clay loam TOWNSHIP: South LONG: 93.80502

ASPECT (°): E-8E SLOPE (%): 2% SOIL PERMEABILITY: Hard, Silty
 DRAINAGE: 1120 DEPTH OF POTENTIAL SEASONAL HIGH WATER TABLE (ft.): 2-5

THICKNESS OF SURFACE SOIL (in.): 10" NO. 1 10" NO. 2 10" NO. 3 15" NO. 4 9" NO. 5 25" NO. 6 6" NO. 7 12" NO. 8 12" NO. 9 12"
 DEPTH TO Concentrations: 10" DEPTH TO Depletions: 10" DEPTH TO GRAY MATRIX: 35" DEPTH OF LIMITING LAYERS(KD/in.): 1"

DEPTH TO CLAY MAXIMUM: 19-25" DEPTH OF ACTIVE W.T.: 0.54" COATS or CLAY FILMS: 0.36" STRUCTURE: 15-26" CONSISTENCY: 17-22" ROOTS: 16-30" BOUNDARY: 12-22" MOIST STATE: 248" COMPACTION: 248" PM or REMARKS: 1

DEPTH (inches)	HORI. ZON	SOIL TEXTURE	COLOR MATRIX	REDOX	COATS or CLAY FILMS	STRUCTURE	CONSISTENCY	ROOTS	BOUNDARY	MOIST STATE	COMPACTION	PM or REMARKS	LOADING RATE
0-10	AP	sicl	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65-1.2
10-		30 silty clay	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
19-	8W	sicl	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
19-	8W	35% c	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
19-	8W	sicl	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
25-	8W	35% c	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
33-	8W	sicl	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
33-	8W	34% c	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
44-	8W	sicl	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
44-	8W	32-33% c	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
55-	8W	sicl	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
55-	8W	34-35% c	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65
78-	8W	sicl	10YR 5/6			cl	cl	cl	AS	m	100	Loess	0.65

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

Described By: Lois Boeckmann

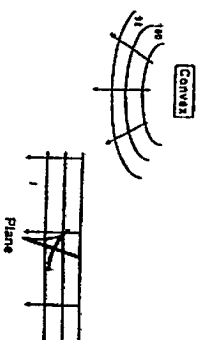
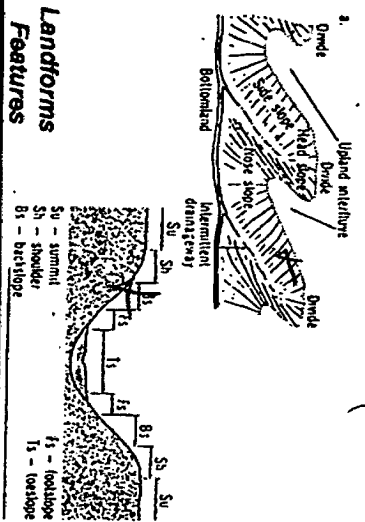
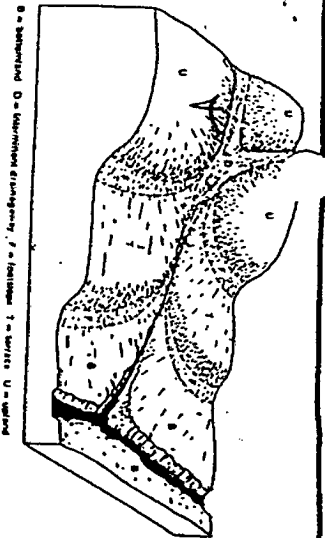
Alternate Site
 Road Test Hole to

Current Drive
 require inspection
 @ 5-20-10

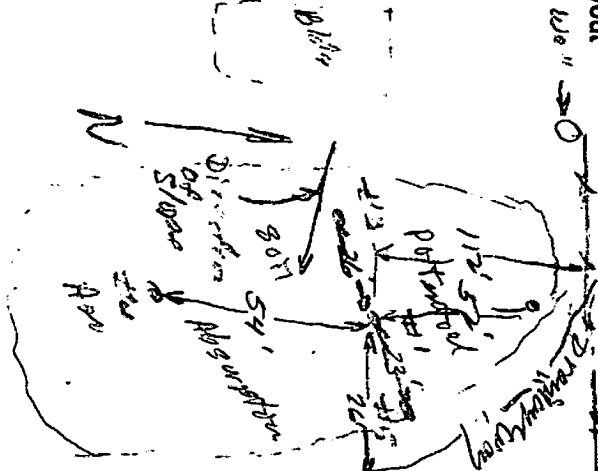
7' road to Road (1120-30")
 @ 24-30" (1120-30")

Formula: $GPD = LLR = \text{FOOTAGE}$
 $LR = \frac{TW}{TW} = \frac{514}{514} = 1.0$
 Average Loading Rate = 1.0
 No. of Bedrooms: 4
 Elev (ft.): 55 ft
 Round to next higher even 100 ft. = 600 ft.

Reduce LR by 1 for compacted layer
 10 = 5.5
 35 = 60
 227.0
 522.5
 55 ft



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

Edward VIII

Permit No 024-10 Name: McDonald 911 Sign Locate ☐

Date of Inspection: 10/1/10 Inspected by: Elton Root

Contractor: Mark Mease

Dwelling under construction or moved in Yes ☒ No ☐

Setbacks

Meets required setbacks.

- | | | |
|---|---|-----------------------------|
| • Rural Water | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Private wells/heat pump wells/suction water lines/lakes | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Outside required 50-foot setback for tank | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Outside required 100-foot setback for laterals | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Streams/ponds (25-25 ft)-ditches (10-10 ft) | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Indications of water lines under pressure | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

Comments:

Building Sewer

- | | | |
|---|---|-----------------------------|
| • Clean outs – one right outside of house | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Location of cleanout inside house and set requirement | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Pipe is SCH 40 and has a 4-inch diameter. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Grade – has adequate fall. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

Comments:

Tank

- | | | |
|---|---|--|
| • Septic Tank Size & Manufacturer Pella 1500 | Concrete <input checked="" type="checkbox"/> | Plastic <input type="checkbox"/> |
| • Pump Tank Size & Manufacturer | Concrete <input type="checkbox"/> | Plastic <input type="checkbox"/> |
| • Septic compartments, meet the specs for capacity. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Baffle | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Inlet/Outlet tees are ok. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Effluent filter in the outlet. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Manuf. Label |
| • Tank depth. 12 inches | | |
| • Risers | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Lids above grade screwed on | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> Will be <input type="checkbox"/> |

Comments:

Distribution Box

- | | | | |
|-------------------------------|---|-----------------------------|---|
| • Brand <u>Tuf-Tite</u> Other | | | |
| • Bedded in cement. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Will be <input checked="" type="checkbox"/> |
| • Has required inlet baffle. | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Will be <input type="checkbox"/> |
| • Outlet levels –are level. | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Unknown <input checked="" type="checkbox"/> |

Comments:

Laterals

- | | | |
|---|--|--|
| • Distribution lines: 4 -inch PVC pipe – SCH40 | | |
| • Lateral used. 36in. Chamber | Reduction? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| • Lateral depth. 28 inches | Perc depth 36 inches | |
| • Laterals were level. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| • Adequate amount of undisturbed soil between laterals. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | |
| • Distance 7 feet between laterals. | | |

Comments:



Permit # 024-10
Inspection 10-1-10

