BK: 2026 PG: 3345
Recorded: 11/9/2026 at 2:05:10.0 PM
Pages 22
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 Todd R. Montgomery and Renae L. Montgomery

Address	1271 Old Portland Rd	Van Meter	Iowa	50261
	Number and Street or RR	City, Town or PO	State	Zip

TRANSFEREE:

Name Bradley S. Gaskill and Kristine E. Gaskill

Address				
	Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

1271 Old Portland Rd	Van Meter	Iowa	50261
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

Lot One (1) of Terrace Pines Subdivision located in the Southeast Quarter (1/4) of Section Seventeen (17), Township Seventy-seven (77) North, Range Twenty-seven (27) West of the 5th P.M., 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:

① WELL LOCATED NEAR ROAD IS CAPPED OFF AND NOT IN USE.

② SEE TIME OF TRANSFER INSPECTION

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.: 515 240 1685
(Transferor or Agent)

084-25

17-Jefferson

IOWA DNR

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 18422 SETH BROWN CERT # 13190

Site Information

Parcel Description: **121021780011000**

Address: **1271 Old Portland Rd, Van Meter, IA 50261** County: **Madison**

Owner Information

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

Business Name:

Owner Name: **Todd R & Renae L Montgomery**

Email Address: **toddbob@live.com**

Address: **1271 Old Portland Rd, Van Meter, IA 50261**

Phone No: **515-240-1685**

Additional Contact Information

Name	Email Address	Affiliate Type
Andy Wallace	**iamajwallace@gmail.com**	**Realtor**

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: **10/31/2025**

Currently Occupied: **Yes**

System Installation Date: **08/07/2006**

Permit Number: **034-06**

County contacted for records **Yes**

Primary Treatment

Tank 1

Tank Name: **Tank 1**

Type: **Septic Tank**

Tank Size (Gal): **2000**

Tank Material: **Concrete**

Tank Corrosion Type: **Slight**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **No**

Licensed Pumper Name: **Rogers Septic**

Date Pumped: **10/31/2025** | 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: **6** | Total Length of Absorption Line: **450** | System Hydraulic Loaded: **Yes**

Gallons Loaded: **200** | 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: **All wastewater goes to septic. 2000 gallon watertight concrete septic tank in working condition with slight deterioration. Accessible by inlet and outlet risers and lids to ground surface. Inlet and outlet baffles present, outlet effluent filter present. 2 compartment tank. Plastic watertight distribution box in working condition. Baffle and speed levelers present. Hydraulic load tested(via house) 6x75 equaling 450ft of 36" chambered laterals with 200 gallons. Each lateral took water and probed dry and clean.**

IOWA DNR

IOWA DEPARTMENT OF NATURAL RESOURCES

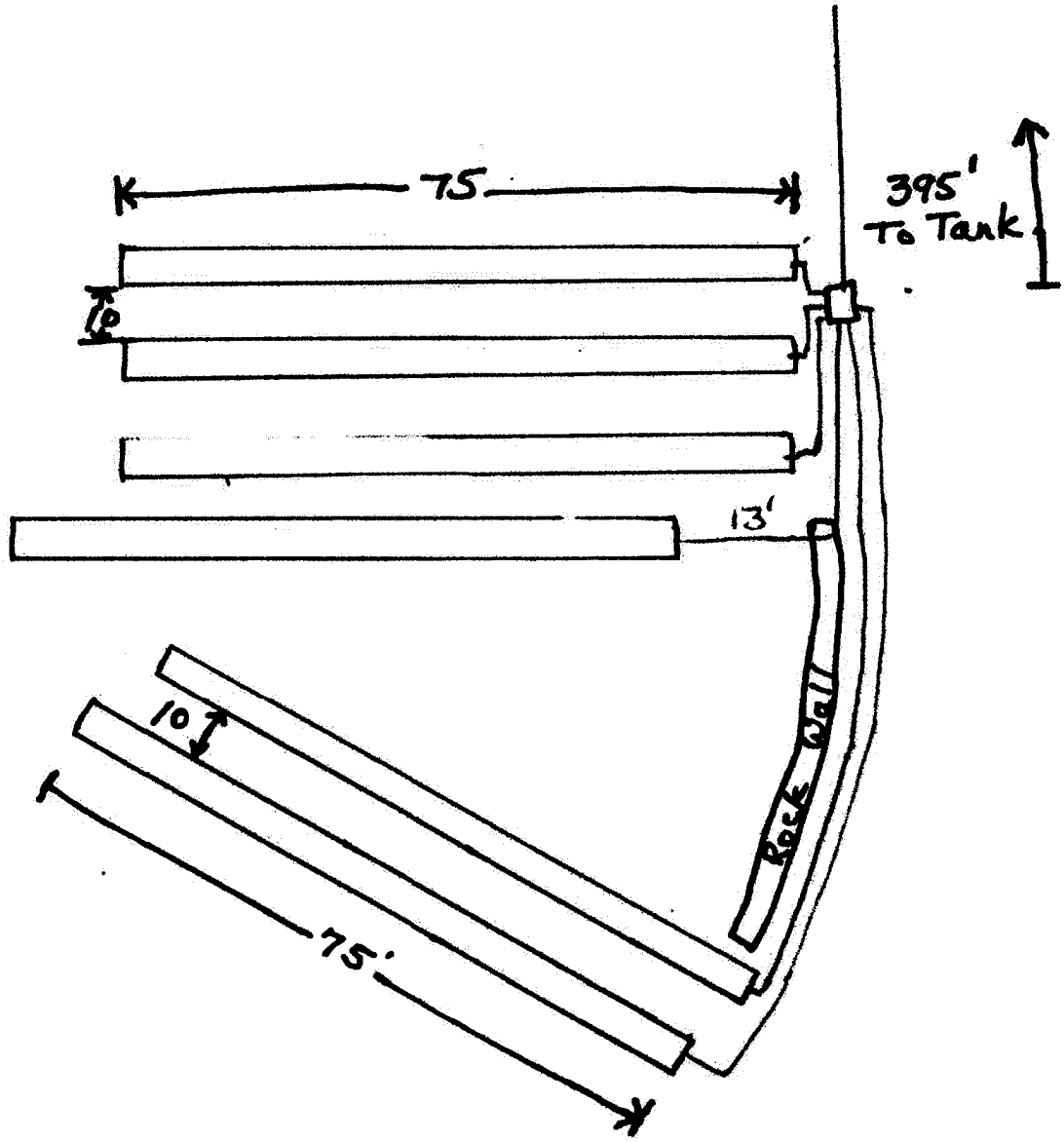
GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 18422 SETH BROWN CERT # 13190

Owner Name:	**Todd R & Renae L Montgomery**		
Address:	**1271 Old Portland Rd , Van Meter , IA 50261**		
County:	**Madison**		
Inspection Date:	**10/31/2025**	Submitted Date:	**11/11/2025**

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).

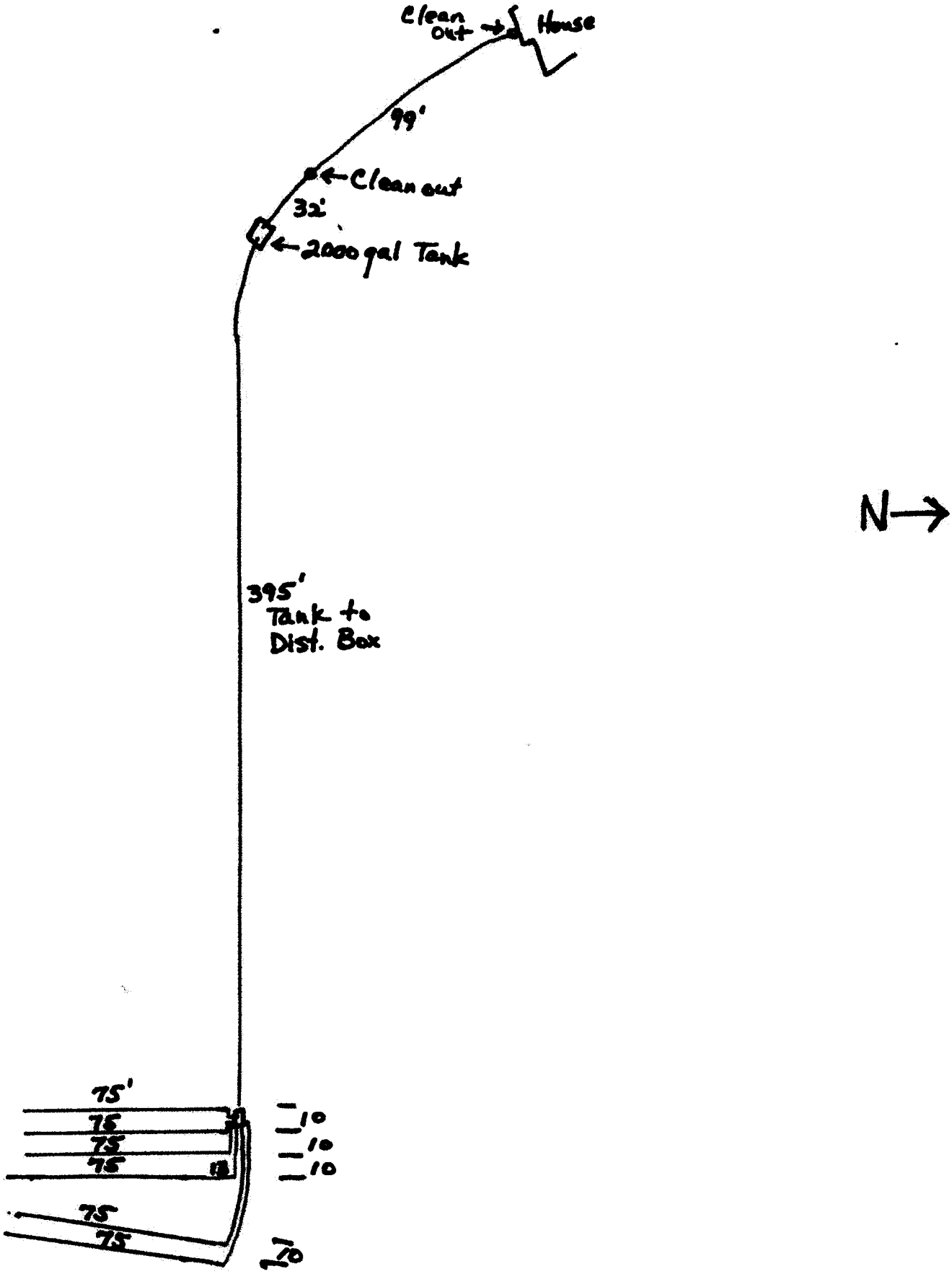


450' 36" Biodiffusers

6 Runs at 75' Each

10' Apart on Center

N →


Clean Out
House
99'
Clean out
32'
2000 gal Tank
N
395'
Tank to
Dist. Box
75'
75
75
75
75
75
10
10
10
10

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 18422 SETH BROWN CERT # 13190

Site Information

Parcel Description: **121021780011000**

Address: **1271 Old Portland Rd, Van Meter, IA 50261** County: **Madison**

Owner Information

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

Business Name:

Owner Name: **Todd R & Renae L Montgomery**

Email Address: **toddbob@live.com**

Address: **1271 Old Portland Rd, Van Meter, IA 50261**

Phone No: **515-240-1685**

Additional Contact Information

Name	Email Address	Affiliate Type
Andy Wallace	**iamajwallace@gmail.com**	**Realtor**

Site related information

No Of Bedrooms: **4**

Inspection Date: **10/31/2025**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date: **08/07/2006**

Permit issued by County: **Yes**

Permit Number: **034-06**

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

County contacted for records: **Yes**

Property Information Comments:

Primary Treatment

Tank 1

Tank Name: **Tank 1**

Type: **Septic Tank**

Tank Size (Gal): **2000**

Tank Material: **Concrete**

Tank Corrosion Type: **Slight**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **No**

Licensed Pumper Name: **Rogers Septic**

Date Pumped: **10/31/2025** | 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: **6** | Total Length of Absorption Line: **450** | System Hydraulic Loaded: **Yes**

Gallons Loaded: **200** | 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: **All wastewater goes to septic. 2000 gallon watertight concrete septic tank in working condition with slight deterioration. Accessible by inlet and outlet risers and lids to ground surface. Inlet and outlet baffles present, outlet effluent filter present. 2 compartment tank. Plastic watertight distribution box in working condition. Baffle and speed levelers present. Hydraulic load tested(via house) 6x75 equaling 450ft of 36" chambered laterals with 200 gallons. Each lateral took water and probed dry and clean.**

IOWA DNR

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 18422 SETH BROWN CERT # 13190

Owner Name:	**Todd R & Renae L Montgomery**		
Address:	**1271 Old Portland Rd , Van Meter , IA 50261**		
County:	**Madison**		
Inspection Date:	**10/31/2025**	Submitted Date:	**11/11/2025**

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: **034-06** *Date Issued:* **3/31/06**

Issued to: **Todd & Renae Montgomery**
Address: ~~**107 High St, P.O. Box 15**~~ 1271 Old Portland Rd.
Booneville, IA 50038

Legal Description: **PAR A EX PAR B 36.18A Section 17-77-27 Jefferson Twp.**

POWTS Components Specifications: **2000 gal. Septic Tank ~~& 5ea 100 ft~~ 36 in. Chamber laterals**
6ea 75ft
TR 5/26/06

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

Madison County
Office of
Zoning & Environmental Health

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

CK # 1696

Office Use Only					Temp E911:		
Permit No.	Date Received	Fee Paid	Date Issued	Date Inspected	Date Approved	Section/Township	NPDES Authorization #
034-06	3/31/06	$150	3/31/06			17 Jefferson	

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)

First Name	Last Name
Todd	Montgomery

Address: 107 High St. Po Box 15

City	State	Zip
Booneville	IA	50038

Phone Number (area code)	Fax or E-mail	Cell Phone
515.987.1930		240-1685

2. Contractor Information

First Name	Last Name
Chris	Neuenkirk

Address: 1831 Macksburg Rd.

City	State	Zip
Lorimor	IA	50149

Phone Number (area code)	Fax or E-mail	Cell Phone
		250-0318

3. System Requirement Information

IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED

	Minimum Tank Size Required
1-3 Bedroom	1000
4 Bedroom	1250
5 Bedroom	1500
6 Bedroom	1750

4. Site and Soil Evaluator (Percolation Test)

PERCOLATION TEST MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT

Date test taken 3/11 Test taken by Jim Vance/Lowe Road
Test Results: Hole 1 40 min/in Hole 2 26.7 min/in
Hole 3 30 min/in Hole 4 40 min/in
Average 34.2 min/in Depth of Test Holes 36"
Number of Laterals Required 6
Length of Laterals Required 100 ft. ea

5. Type of Submittal

- ☑ New
- ☐ Revision
- ☐ Repair, Tank
- ☐ Repair, Treatment Area
- ☐ System Replacement

Previous Permit #:

6. Address Information

Location, Number & Street of project (If unknown, indicate nearest road): 1267 Old Portland Rd.

Legal Description: Par A Ex Par B 36.18A Sec 17-77-27 Jefferson Twp

7. Type of Building (Completed by Owner)

- ☑ Residential — Number of Bedrooms: 4
- ☐ Commercial/Other Non-Residential — Use:

Other buildings served by this system: None

- ☑ Garbage Disposal
- ☑ High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: 1

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

8. Primary and/or Mechanical Treatment	Type: Concrete	Manufacturer: Lister	Model:	Size (gal): 2000
	Type:	Manufacturer:	Model:	Size (gal):
9. Pump/Siphon ☐ Not Applicable	Type:	Manufacturer:	Model:	Dosing Frequency:

10. Secondary Treatment Area Type: ☐ Not Applicable

Type of Laterals	Number of Laterals	Length of ea. Lateral	Other	Other	Maximum Trench Depth (inches):
36" Chamber	5	100			

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: [signature] Date: 3/31/06

It is unlawful to start construction, reconstruction, or repair of any POWTS prior to issuance of a POWTS permit by the Environmental Health Officer.

MADISON COUNTY ENVIRONMENTAL HEALTH

PERCOLATION TEST REPORT

TEST # _____

Date taken: 3-11-06 By: Jim Vance/Mike Read

Owner: Todd Montgomery Site Address: 1267 Old Portland Road Phone No. 987-1930

Lot Size: 36 Ac. Legal Description: The NE.¼ of the SE.¼ of Sec. 17-T77N-R27N

Lot # / Subdivision and/or 1/4 1/4 Sec Twp Range

Structure: X New ___Existing # Bedrooms: 4 Installer:

Owner's Current Mailing Address: P.O. Box 15, Booneville, Iowa 50038

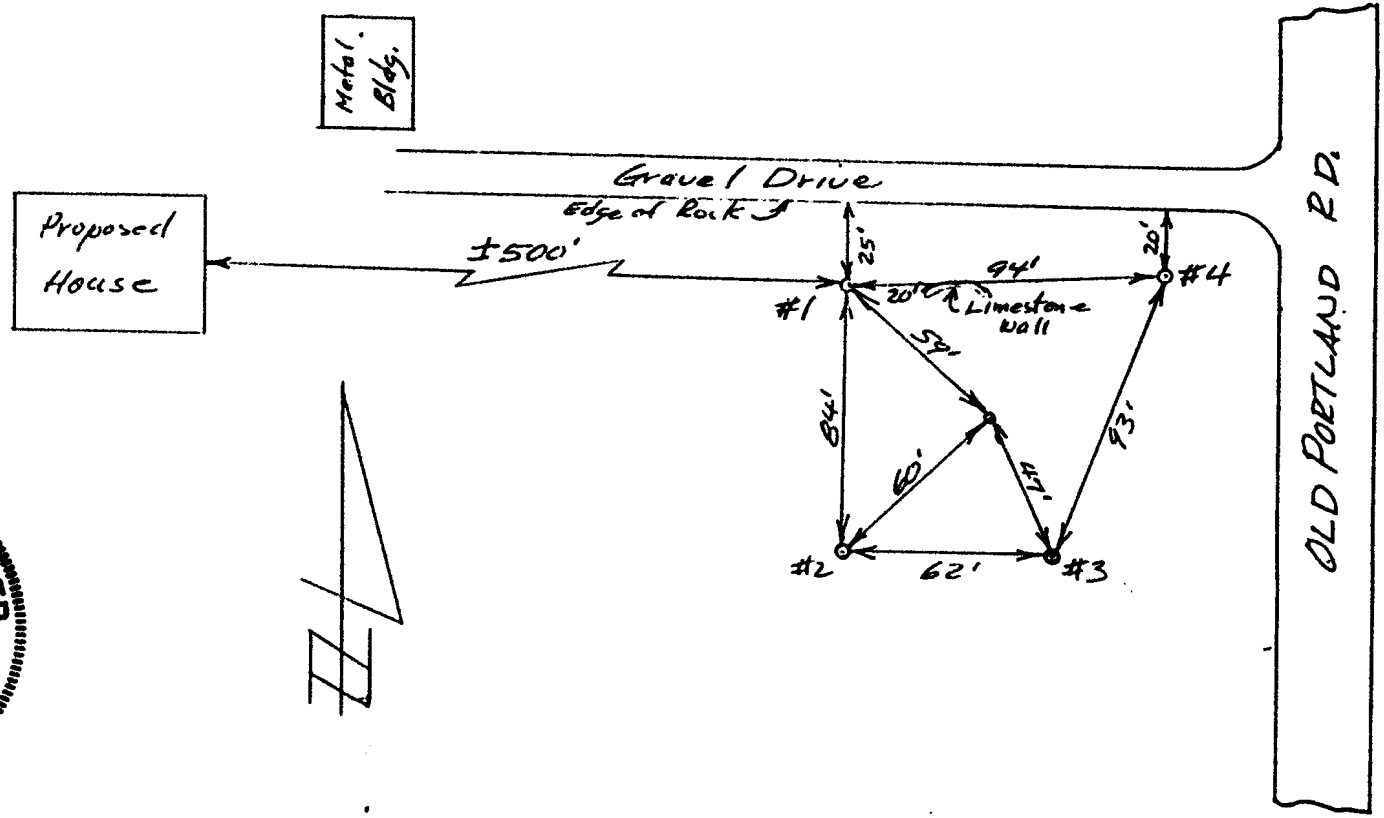
Time for 1 inch of water: 1. 40.0 min 2. 26.7 min. 3. 30.0 min. 4. 40.0 min. 5. _____ 6. _____

Depth of hole at time of test: 1. 36" 2. 36" 3. 36" 4. 36" 5. _____ 6. _____

Results of 6 foot hole: No rock, No water

Min. recommended lateral footage per IAC Ch. 69: 600 feet Drawing of perc site below.

Number of laterals required: 6 each Average length of laterals: 100 feet



PROFESSIONAL ENGINEER LICENSED CHARLES T. VANCE 5041 IOWA LAND SURVEYOR

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 Iowa.

Revised: 20 March 2006

Signed: Charles T. Vance Date: 13 March 2006 Reg. No. 5041 Exp. Date: 31 Dec 2007

RLI1002 **PID** 121021780010000 00 **Tax Dist** 121 000 **Class** A **INQUIRY**
2005 061 **Map#** 000000317400007 **GIS#**

Property 004320470 DED MONTGOMERY, TODD R & RENAE L
Ownership PO BOX 15
BOONEVILLE IA 50038
000000000
Location 1267 **Street** OLD PORTLAND RD **City** VAN METER
Recorded DED 2003 3705 6/25/2003 3705 2003/06/24
Documents ....
Misc **Exempt Code** **No Ag Cr** **VIN#**
Sec-Twp-Rng 017 077 027 **Cty-Adn-Blk** 00017 **Title**
Legal Desc PAR A EX PAR B 36.18
Applications **Typ 1** AGL **Ovr Amt** 8,300 **Typ 2** .... **Ovr Amt**
Typ 3 .... **Ovr Amt** **Typ 4** .... **Ovr Amt**

	100%	Rollback		Acres	Typ	Desc	Value	Rollback	Acres
			Gr	36.18	LND	Land	7,400	7,400	35.66
Grs	17,400	17,400	**Ex**	.52	BLD	Bldgs	10,000	10,000	
Mil			**PE**	.00	EXM	Exempt			.52
Net	17,400	17,400	**Dr**	.00					
			Net	35.66					

F3=Exit F10=Ownership 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

Permit No 034-06 ***Name: Montgomery*** **911 Sign Locate** ☐
Date of Inspection: 8/7/06 Inspected by: Elton Root
Contractor: Klingaman
Dwelling under construction or moved in ***Yes*** ☒ ***No*** ☐
Setbacks
Meets required setbacks.
- Rural Water Yes ☒ No ☐
- Private wells/Groundwater heat pump bore holes/suction water lines/lakes
  Outside required 50-foot setback for tank Yes ☒ No ☐
  Outside required 100-foot setback for laterals Yes ☒ No ☐
- Streams/ponds (25-25 ft)-ditches (10-10 ft) Yes ☒ No ☐
- Indications of water lines under pressure Yes ☒ No ☐

Comments:

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

Comments:

Tank
- Tank. Manufacture Vanderpool Concrete ☒ Plastic ☐
- Capacity 2000 -gallon
- Two compartments, both meet the specs for capacity. Yes ☒ No ☐
- Baffle Yes ☒ No ☐
- Inlet/Outlet tees are ok. Yes ☒ No ☐
- Effluent filter in the outlet. Yes ☒ No ☐ Manuf.Poly Lock Red
- Tank depth.12 inches
- Risers Yes ☒ No ☐
- Lids above grade screwed on Yes ☐ No ☐ Will be ☒

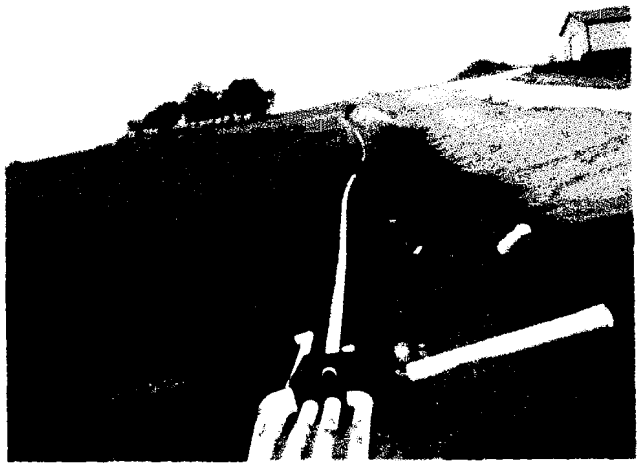
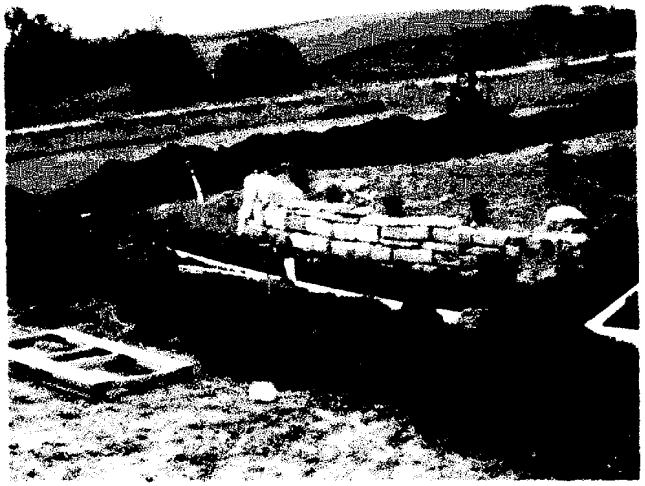
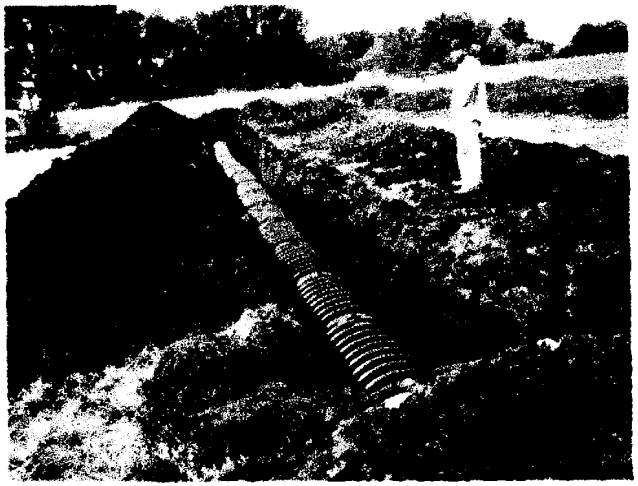
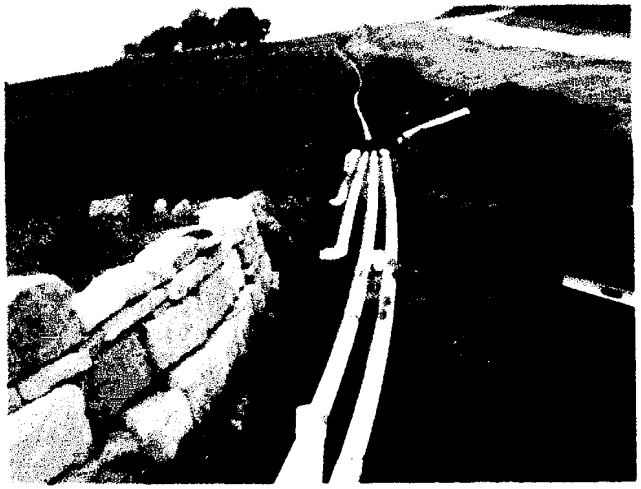
Comments:

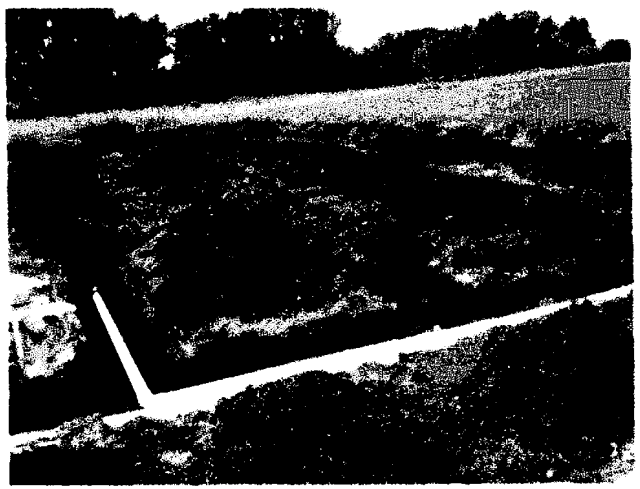
Distribution Box
- Brand <u>Tuf-Tite</u> Other
- Bedded in cement. Yes ☒ No ☐ Will be ☐
- Has required inlet baffle. Yes ☒ No ☐ Will be ☐
- Outlet levels –are level. Yes ☒ No ☐ Unknown ☐

Comments:

Laterals
- Distribution lines: 4-inch PVC pipe – SCH40
- Distribution lines screwed to laterals. Yes ☒ No ☐ Will be ☐
- Lateral used. EQ36 Reduction? Yes ☒ No ☐
- Lateral depth 24 inches Perc depth 36 inches
- Laterals were level. Yes ☒ No ☐
- Adequate amount of undisturbed soil between laterals. Yes ☒ No ☐
- Distance 7 feet between laterals.

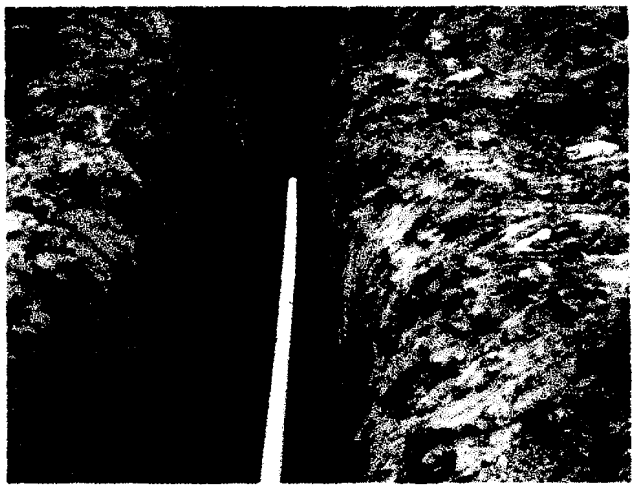
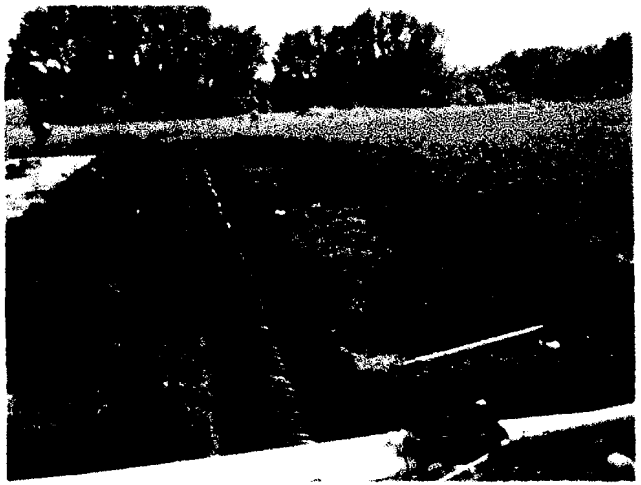
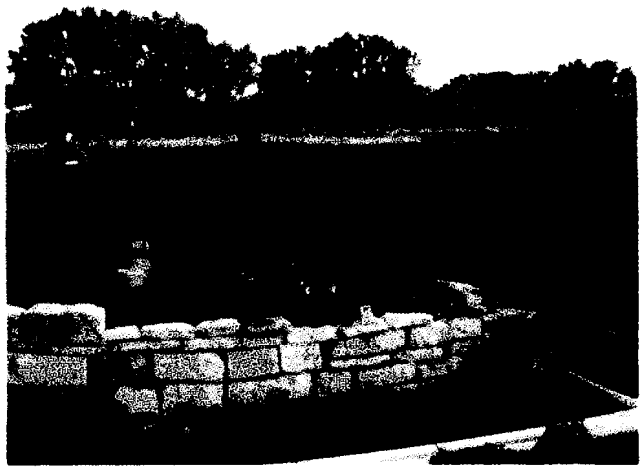
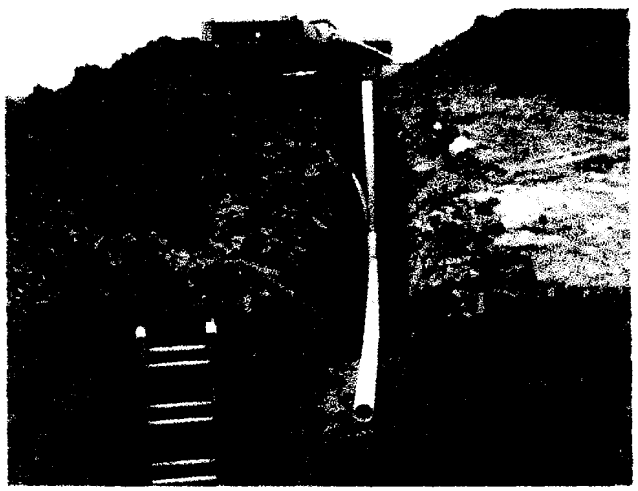
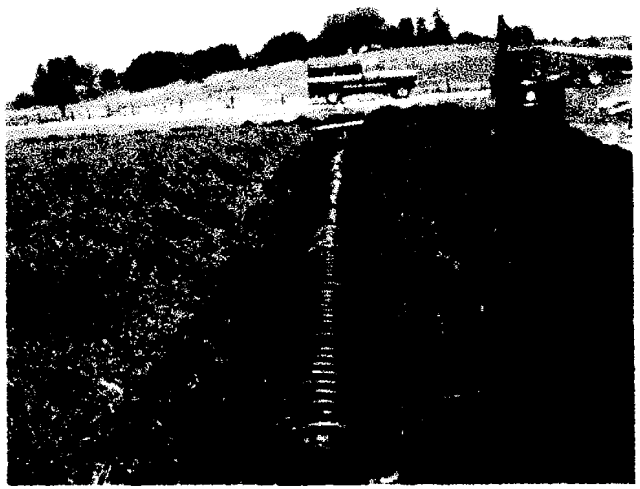
Comments: Contractor was advised to move driveway culvert flow to go around lateral field

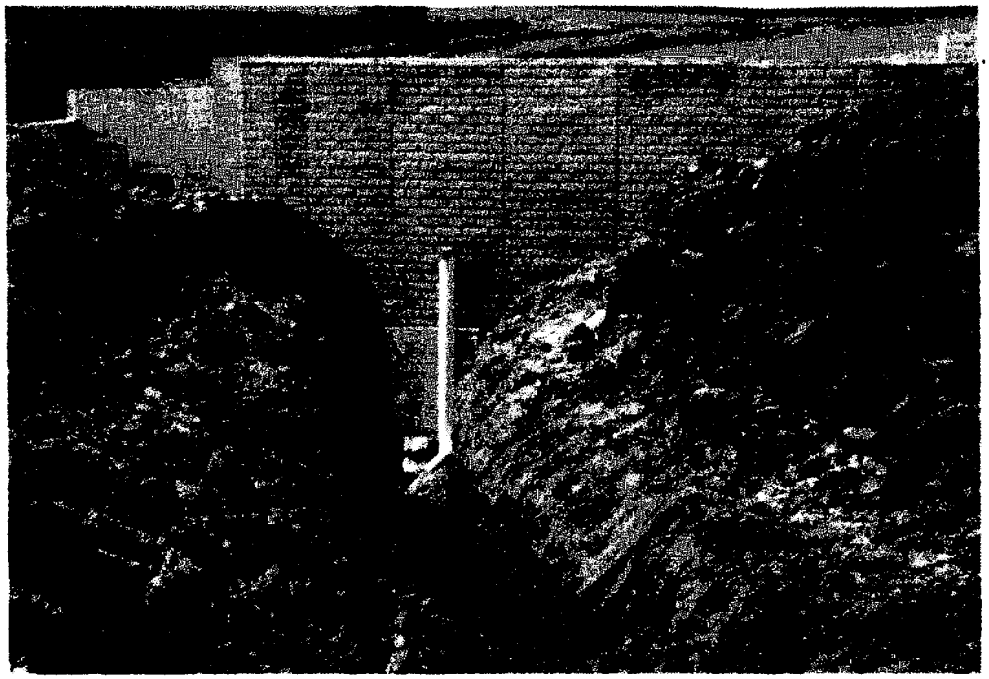






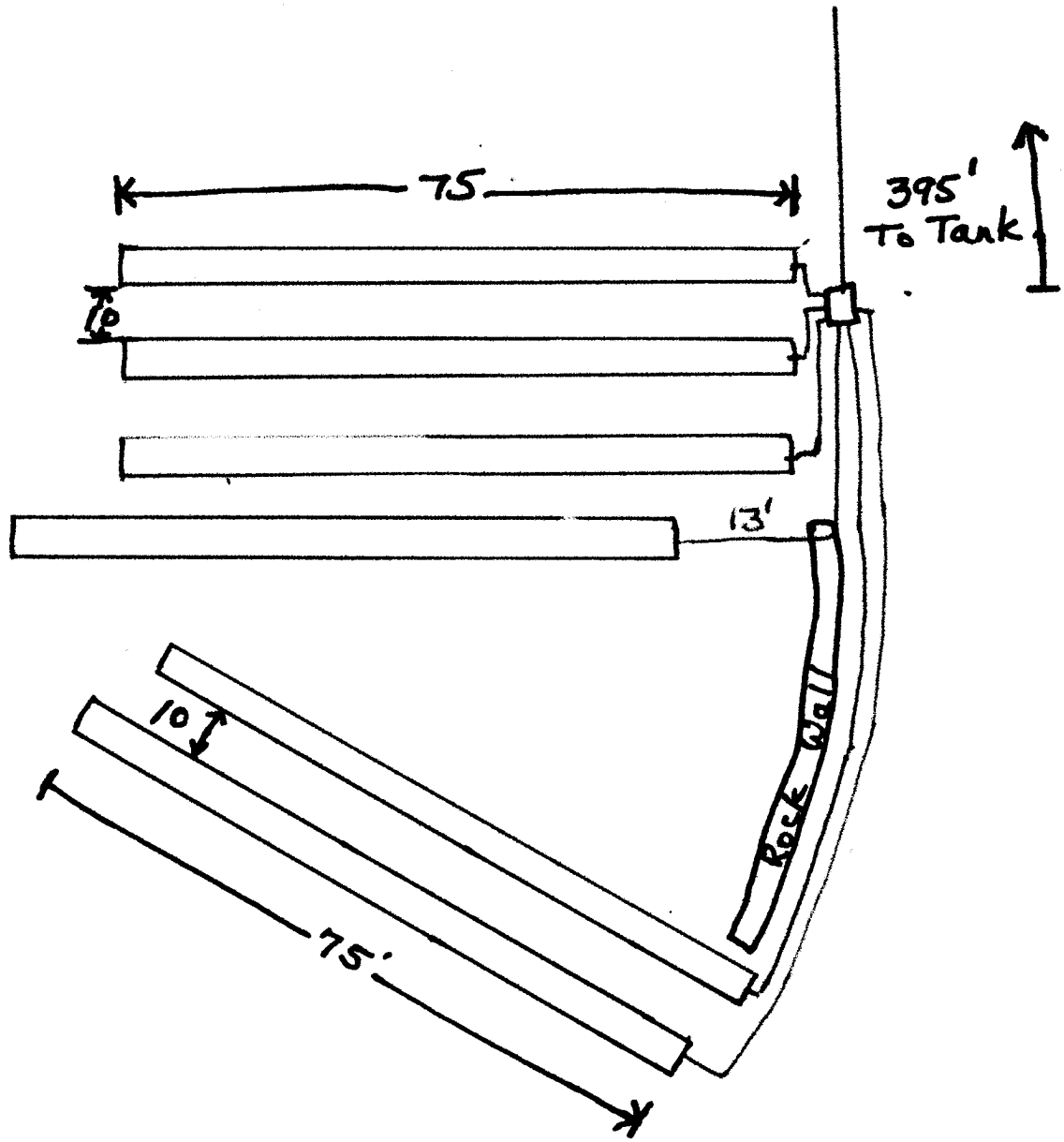












MAY 28 2008

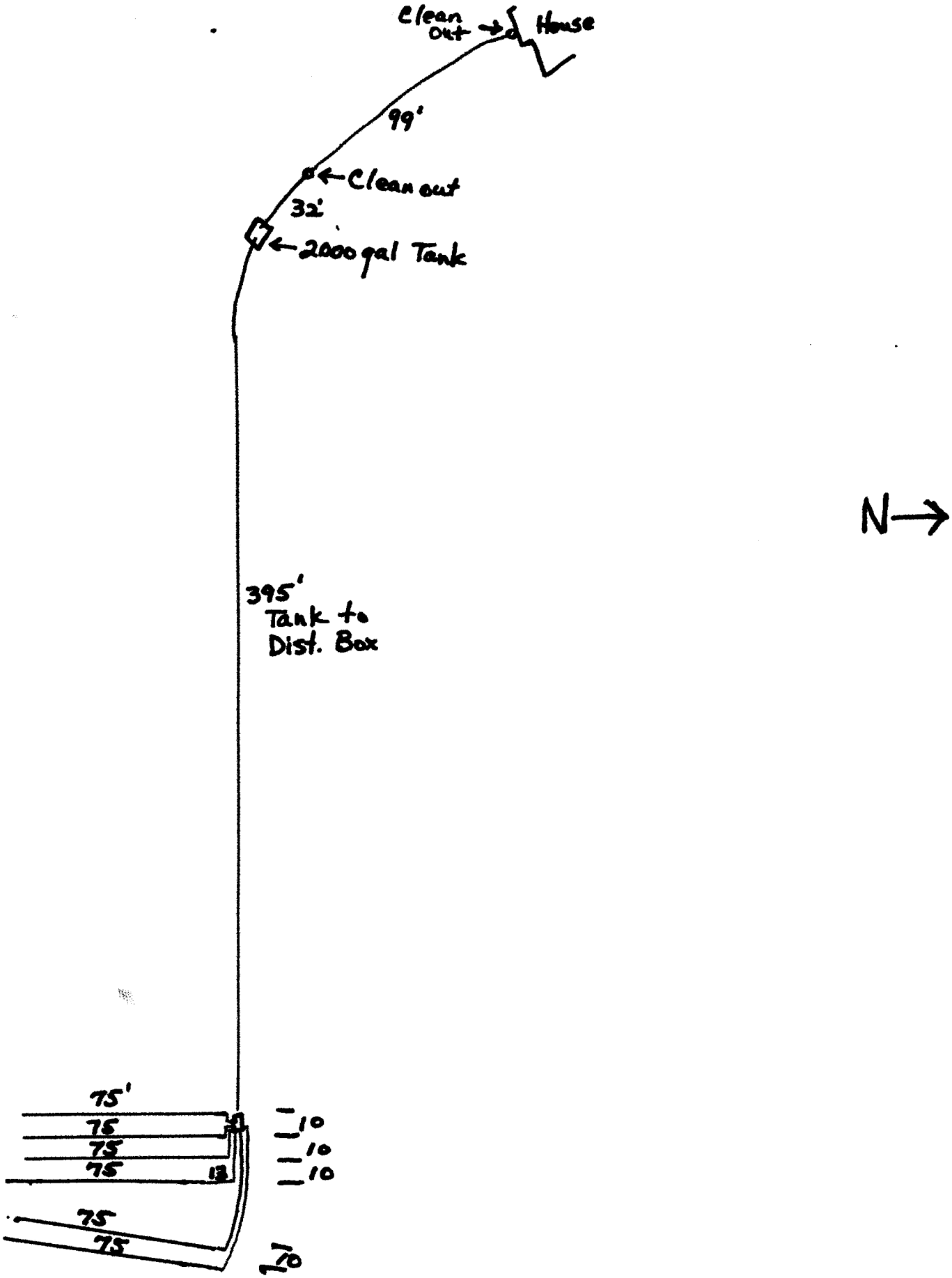


450' 36" Biodiffusers

6 Runs at 75' Each

10' Apart on Center

N →


Clean Out
House
99'
Clean out
32'
2000 gal Tank
N
395'
Tank to
Dist. Box
75'
75
75
75
12
10
10
10
75
75
10

911 Montgomery

