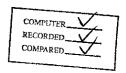
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MICHELLE "MICKI" UTSLER, COUNTY RECORDER

MADISON COUNTY BOARD OF HEALTH

COURTHOUSE P.O. BOX 152 WINTERSE, IOWA 50273



SURFACE DISCHARGING WASTEWATER TREATMENT SYSTEMS

PROPERTY OWNERS AGREEMENT TO FOLLOW CHAPTER 69 REQUIREMENTS

576-69.2 (455B) Requirements when discharged into surface water. All discharges from on-site wastewater treatment and disposal systems which are discharged into any surface water shall be treated in a manner that will conform with the requirements of NPDES General Permit No. 4 issued by the department of natural resources.

NPDES General Permit No. 4 covers the discharge from any On-Site Wastewater Treatment and Disposal System constructed in accordance with 567 IAC Chapter 69 which is not absorbed underground into the soil but discharges to the surface of the ground, into surface waters or into an underground drainage tile.

All conditions of the Iowa Department of Natural Resources National Pollutant Discharge Elimination System (NPDES) General Discharge Permit No.4 for Discharge from On-Site Wastewater Treatment and Disposal Systems and all conditions as set forth in Madison County Health regulations shall be met.

The NPDES permit is non-transferable and must be applied for with a Notice of Intent every time ownership is transferred.

The above requirements shall run perpetuity with the real estate described as Follows: Par B SE SE 10A Section 17 T75N R27W as recorded Book 2004 Page 1429 Address: 2325 St. Charles Rd. Name: Vicki Roberts Zip Code: 50273 State: IA City: Winterset Type of Disposal Treatment: Subsurface Sand Filter Free Access Sand Filter Mechanical Aerobic Other Peat Biofilter Certification:

I certify the above information is true and accurate, to the best of my knowledge. I agree to abide by all of the terms and conditions stated above.

Signature: (

STATE OF IOWA COUNTY OF MADISON

S.S.

On this 3rd day of November, 2004 before me a Notary Public in and for said County and State, personally appeared Vicki Roberts, to be the persons named in and who executed the foregoing and acknowledged that

he/she executed same as his/her voluntary act and deed.

9110

NOTARY PUBLIC STATE OF IOWA My commission Expires:

