MADISON COUNTY
BOARD OF HEALTH
COURTHOUSE
P.O. BOX 152
WINTERSET, IOWA 50273

FILED NO.**000688**
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MICHELLE UTSLER
RECORDER
MADISON COUNTY, IOWA

INTERMITTENT SAND FILTERS
MECHANICAL AEROBIC WASTEWATER TREATMENT SYSTEM

PROPERTY OWNERS AGREEMENT TO FOLLOW CHAPTER 69 REQUIREMENTS

567—69.9(455B) Intermittent sand filters.
   Sampling. Effluent sampling of intermittent sand filters shall be performed **annually** or as directed by the administrative authority.

567—69.10(5) Mechanical Aerobic Wastewater Treatment System
   Maintenance Contract. A maintenance contract with a manufacturer certified technician shall be maintained at all times. Maintenance agreements and responsibility waivers shall be recorded with the county recorder and in the abstract of title for the premises on which mechanical aerobic treatment systems are installed. Mechanical aerobic units shall be inspected for proper operation at least **twice a year on six month intervals.**

   69.10(6) Effluent Sampling. Any open discharge from systems involving mechanical aeration shall have the effluent sampled at each inspection. A copy of the findings shall be mailed to the Madison County Sanitarian immediately thereafter. If the BOD tests higher than the allowable limits as set by the Department of Natural Resources the system must be shut down and repaired.

   These requirements shall run with the following real estate described as follows:

   22.18A N OF ROAD FRL W 1/4 NE SECTION 03 T75 R26 SOUTH TWP

Name __Jerry Jorgensen__   Address __9301 Dewey Gibbs Road__

City __Des Moines__   State __Iowa__   Zip Code __50322__

Type of Disposal Treatment:

__XX__ **Intermittent Sand Filters** ____ **Mechanical Aerobic Wastewater Treatment System**

Certification:
   I certify the above information is true and accurate, to the best of my knowledge. I agree to abide by all terms and conditions stated above. The permitted system will be constructed in conformance with the requirements of IAC 567 – Chapter 69 and all applicable County requirements.

Name (please print) __Jerry M. Jorgensen__

Signature __Jerry M. Jorgensen__   Date __8-13-99__

Subscribed and sworn to before me this __13th__ day of __August__, 1999

__Kerry B. Staples__

Title: ____

KERRY B. STAPLES
MY COMMISSION EXPIRES
January 14, 2000