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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

Prepared By & Return To

MADISON COUNTY BOARD OF HEALTH

COURTHOUSE
P.O. BOX 152
WINTERSET, IOWA 50273

SURFACE DISCHARGING PERMIT
WASTEWATER TREATMENT SYSTEM

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 in perpetuity with the real estate described as Follows:

Lot 19 5.04A BENNETT SUB DIV IN N1/4 SEC 11 T76N R28W, As Recorded Book 2008 Page 2364

Name: Tracy Hockemeier Address: 2778 St Charles Rd.

City: St. Charles State: Iowa Zip Code: 50240

Type of Disposal Treatment: Subsurface Sand Filter ☒ Free Access Sand Filter ☐
*Peat Biofilter ☐ *Mechanical Aerobic ☐ *Other ☐

*** System requires a maintenance contract with a manufacturer-certified technician shall be maintained at all times.**

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: Tracy Hockemeier

Printed Name: Tracy Hockemeier

STATE OF IOWA S.S.
COUNTY OF MADISON

On this 20th day of July, 2011 before me a Notary Public in and for said County and State, personally appeared Tracy Hockemeier, 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.

Deputy

NOTARY PUBLIC
STATE OF IOWA
My commission Expires: