

Book 2015 Page 3713 Type 06 023 Pages 1 Date 12/16/2015 Time 2:00:45PM

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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

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Prepared By & Return To / MADISON COUNTY BOARD OF HEALTH

P.O. BOX 152, WINTERSET, IOWA 50273 (515) 462-2636

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 26A 3.94A Plat 2 Woodland Valley Estates S 1/2 of the NW 1/4 Section 21 T77N R26W As Recorded Book 2015 Page 1981

Name: Forrest Leigh Ridgway III	Address: 4305 Cody Drive		
City: West Des Moines	State: Iowa	Zip Code: 50265	
Type of Disposal Treatment: Sui *Mechanical Aerobic *Other	bsurface Sand Filter ☐ r ☑ Coco Filter	Free Access Sand Filter	*Peat Biofilter
* System requires a mainter technician shall be maintair		ith a manufacturer-c	ertified
Certification: I certify the above information iterms and conditions stated above.	s true and accurate, to the	e best of my knowledge. I agre	e to abide by all of the
Signature: FWS+LV2	100		
Printed Name: Forrest Leigh Ridgwa	ny III		
STATE OF IOWA S.S.			

On this 17th day of July, 2015 before me a Notary Public in and for said County and State, personally appeared Forrest Leigh Ridgway III, to be the persons named in and who executed the foregoing and acknowledged that he/she executed

COUNTY OF MADISON

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same as his/her wellingar page and deed.

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NOTARY PUBLIC STATE OF IOWA My commission Expires: