



Document 2017 GW2791

Book 2017 Page 2791 Type 43 001 Pages 11

Date 9/05/2017 Time 12:52:12PM

Rec Amt \$.00

INDX  
ANNO  
SCAN

LISA SMITH, COUNTY RECORDER  
MADISON COUNTY IOWA

CHEK

**REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT  
TO BE COMPLETED BY TRANSFEROR**

**TRANSFEROR:**

Name Karla A. Roberts

Address 2621-160th St VAN METER IA 50261  
Number and Street or RR City, Town or P.O. State Zip

**TRANSFeree:**

Name Jason D. Pendergraft

Address 2621 160th St, Van Meter, IA 50261  
Number and Street or RR City, Town or P.O. State Zip

**Address of Property Transferred:**

2621 160th St, Van Meter, IA 50261  
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary) Lot One (1) of Evan Acres located in the  
Southwest Quarter (1/4) of the Southwest Quarter (1/4) of Section Thirty-five (35), Township  
Seventy-seven (77) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa

**1. Wells (check one)**

- There are no known wells situated on this property.
- 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)**

- There is no known solid waste disposal site on this property.
- 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)**

- There is no known hazardous waste on this property.
- 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)**

- 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.)
- 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)**

- There are no known private burial sites on this property.
- 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)**

- All buildings on this property are served by a public or semi-public sewage disposal system.
- This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
- 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.
- 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.
- There is a building served by private sewage disposal system on this property. 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.
- 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 #9]
- This property is exempt from the private sewage disposal inspection requirements pursuant to the following exemption [Note: for exemption #9 use prior check box]: \_\_\_\_\_.
- The private sewage disposal system has been installed within the past two years pursuant to permit number \_\_\_\_\_.

Information required by statements checked above should be provided here or on separate sheets attached hereto:

DNR transfer has been submitted

**I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.**

Signature: Karla Roberts  
(Transferor or Agent)

Telephone No.: 515-339-3522



**Time of Transfer Inspection Report (DNR Form 542-0191)**

Property information

Current Owner Karla Roberts  
Buyer \_\_\_\_\_ Realtor Jeff Weidman  
Mailing Address 2621 160th St Van Meter IA 50261

Site Address/County 2621 160th St Van Meter IA 50261 MADISON CO

No. of Bedrooms 4 Last Occupied? currently Disposal? Y / N Softener? Y / N H<sub>2</sub>O Supply? rural

Records Available Yes Permit/Installation Date Sept. 2003 Installer Garry Huff

Septic System Information

Septic Tank(s): Size 2000 gal Material Concrete Condition Good working Condition  
Tank Pumped? Yes Date 7-6-16 Licensed Pumper Forest septic  
Septic/Trash/Processing Tank: Size \_\_\_\_\_ Material \_\_\_\_\_ Condition \_\_\_\_\_  
Tank pumped? \_\_\_\_\_ Date \_\_\_\_\_ Licensed Pumper \_\_\_\_\_

Aerobic treatment unit (ATU) MFGR \_\_\_\_\_ Size \_\_\_\_\_  
Tank Pumped? \_\_\_\_\_ Date \_\_\_\_\_ Licensed Pumper \_\_\_\_\_  
Maintenance Contract? \_\_\_\_\_ Expiration Date \_\_\_\_\_ Service Provider \_\_\_\_\_  
Condition \_\_\_\_\_

Pump Tanks/Vaults: Type \_\_\_\_\_ Size \_\_\_\_\_ Condition \_\_\_\_\_

Distribution System: Distribution Box Plastic Outlets Used 5 Condition working  
Header Pipe(s) \_\_\_\_\_ Number of Lines \_\_\_\_\_  
Pressure Dosed? \_\_\_\_\_

Secondary Treatment

Length of Absorption Fields 5 x 100 = 500ft Determined by Drawling and probing  
Condition of Fields Working condition Determined by Hydraulic load test. W/200 gal.  
Type of Trench Material 24" wide chambers

Size of Sand Filter \_\_\_\_\_ Determined by \_\_\_\_\_  
Vent Pipes Above Grade? \_\_\_\_\_ Discharge Pipe Located? \_\_\_\_\_  
Effluent Sample Taken? \_\_\_\_\_ Results \_\_\_\_\_

Media Filters: Type \_\_\_\_\_  
Maintenance Contract? \_\_\_\_\_ Expiration Date \_\_\_\_\_ Service Provider \_\_\_\_\_  
Condition \_\_\_\_\_

NPDES General Permit No. 4: Required? \_\_\_\_\_ Permitted? \_\_\_\_\_ NOI submitted \_\_\_\_\_



Time of Transfer Inspection Worksheet

Other Components

Alarms \_\_\_\_\_ Working? \_\_\_\_\_ Disinfection \_\_\_\_\_ Working? \_\_\_\_\_

Control Box \_\_\_\_\_ Timers \_\_\_\_\_ Inspection Ports \_\_\_\_\_

Other Components \_\_\_\_\_  
\_\_\_\_\_

Overall condition of the private sewage disposal system

Acceptable? YES \_\_\_\_\_ Unacceptable? \_\_\_\_\_

Explain (attach additional pages as needed): All waste water goes from house to septic. 2000 gal concrete tank with outlet tee and filter in good working condition. Plastic d-box in good working condition. 5x100ft=500ft 24" wide chambers laterals in good working condition. Hydraulic load tested with 200 gal.

Comments: This is not a guarantee but a report of condition at time of inspection.

Site status at conclusion of Time of Transfer inspection:

- Verify that controls are set on the appropriate mode.
- Power is on to all components.
- Revisit all components to verify lids are secure.
- Gather all tools for removal from the site.
- Verify that no sewage is on the ground surface.

Using this worksheet, write a narrative report of the inspection results.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified Inspector: *Rick Rogers* Date: 8-1-17  
 Name (print): Rick Rogers Certificate #: 9597  
 Address: 401 NE 52nd Ave Des Moines IA 50313  
 Phone #: 515-745-8352

Madison County  
Office of Zoning and  
Environmental Health

*Authorization to Construct a  
Private On-site Wastewater  
Treatment System (POWTS)*

150023566012100

112 N. John Wayne Drive  
P.O. Box 152  
Winterset, IA 50273-0152  
Telephone: (515) 462-2636

*Permit Number:* 106-03

*Date Issued:* August 28, 2003

*Issued to:* Jerry & Brenda Mitchell  
*Address:* 2621 - 160<sup>th</sup> Street  
Winterset, Iowa 50273

*Legal Description:* LOT 1 EVAN ACRES Section 35 T77 R27 Jefferson Twp

*POWTS Components Specifications:* 2000 gal septic tank - EQ24 5 @ 100'

***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 Assistant  
Madison County  
Office of Zoning and Environmental Health*

Application to Construct  
Private On-Site Wastewater Treatment  
System (POWTS)

Office Use Only					Temp E911:	
Tracking No.	Date Received	Fee Paid	Date Issued	Date Approved	Section/Township	NPDES Authorization #
106-03	8-28-03	\$150	8-28-03			

Application will not be considered complete 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 (Customer 1)			2. Contractor Information (Customer 2)		
First Name <i>JERRY</i>	Last Name <i>Mitchell</i>		First Name <i>Sarry Huff</i>	Last Name	
Company Name			Company Name <i>1996 - 295th St</i>		
Address <i>2621 160th St IA 50261</i>			Address <i>Winterset, IA</i>		
City <i>Van Meter</i>	State	Zip	City	State	Zip
Phone Number (area code) <i>(515) 462-3495</i>	Fax or E-mail	Cell Phone	Phone Number (area code) <i>462-3569</i>	Fax or E-mail	Cell Phone
3. Designer Information (Customer 3), if different than Customer 2			4. Site and Soil Evaluator (Customer 4)		
First Name			First Name		
Last Name			Last Name		
Company Name			Company Name		
Address			Address		
City			City		
State			State		
Zip			Zip		
Phone Number (area code)			Phone Number (area code)		
Fax or E-mail			Fax or E-mail		
Cell Phone			Cell Phone		
5. Type of Submittal		6. Project Information			
<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision <input type="checkbox"/> Repair, Tank <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement Previous Permit #:		Location, Number & Street of project (if unknown, indicate nearest road): <i>160th Street</i> Legal Description: <i>Sp1 6 Acre 35-77-27 Jefferson Twp</i>			
7. Type of Building (Completed by Owner)					
<input checked="" type="checkbox"/> Residential		Number of Bedrooms: <i>4 maybe 5</i>		<input type="checkbox"/> Commercial/Other Non-Residential	
Other buildings served by this system: <i>None</i>		<input checked="" type="checkbox"/> Garbage Disposal <input type="checkbox"/> High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: <i>0</i>			
Your contractor or system designer should complete the remaining portion of this application.					
8. Primary and/or Mechanical Treatment		Type: <i>Concrete</i>	Manufacturer: <i>Pella</i>	Model:	Size (gal): <i>2000</i>
		Type:	Manufacturer:	Model:	Size (gal):
9. Pump/Siphon		Type:	Manufacturer:	Model:	Dosing Frequency:
<input type="checkbox"/> Not Applicable					
10. Secondary Treatment Area Type: <input type="checkbox"/> Not Applicable					
Design Flow (gpd): <i>6024</i>	Dispersal Area Required: <i>5 @ 100</i>	Dispersal Area Proposed:	Loading Rate (gpd/sqft):	Ave. Percolation Rate (min/inch):	Proposed Trench Depth (inches): <i>30</i>
11. Tertiary Treatment Area Type: <input type="checkbox"/> Not Applicable					
Design Flow (gpd):	Dispersal Area Required:	Dispersal Area Proposed:	Loading Rate (gpd/sqft):	Ave. Percolation Rate (min/inch):	Proposed Trench Depth (inches):

I hereby attest the truth and accuracy of all facts and information presented on this application.		It is unlawful to start construction, reconstruction, or repair of any POWTS prior to issuance of a POWTS permit by the Environmental Health Officer.	
Applicant Signature: <i>Jerry Mitchell</i>	Date: <i>8-28-03</i>		

Date taken: 8-27-03

By: Jim Vance

Owner: Jerry Mitchell

Site Address: 2621 160th Street

Phone No. 462-3495

Lot Size: Legal Description:

Structure:  New  Existing # Bedrooms: 4

Owner's Current Mailing Address: 2621 160th St. Street, Van Meter, Iowa 50261

Installer: Larry Huff

50261

Time for 1 inch of water: 1. 17.1 min. 2. 18.5 min. 3. 20.0 min. 4. 20.0 min.

Depth of holes tested: 1. 30" 2. 30" 3. 30" 4. 30"

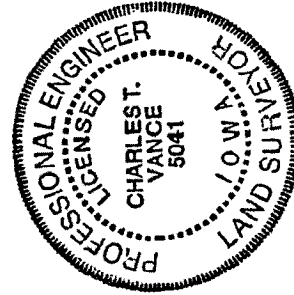
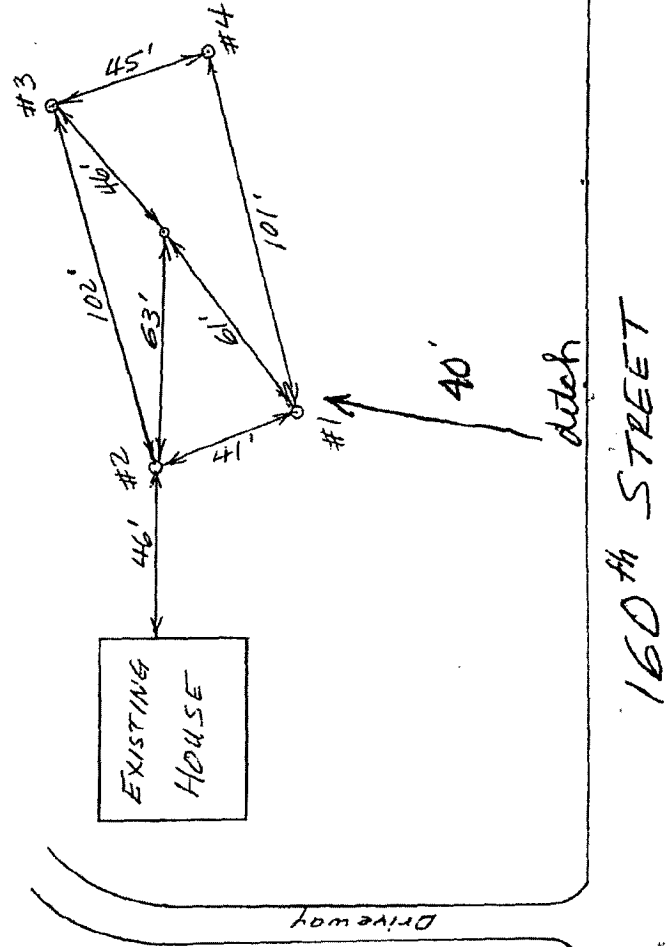
Results of 6 foot hole: No rock, No water

Min. recommended lateral footage per IAC Ch. 69: 500 feet

Number of laterals required: 5 Each Average length of laterals: 100 feet

Drawing of perc site below:

*No water found - 50' - 50' - 50' - 50' - 50'*



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.

Signed: *Charles T. Vance* Date: 27 Aug. 2003 Reg. No. 5041 Exp. Date: 31 Dec. 2003

RLI1002 P1D 150023566012100 00 Tax Dist 150 00 Class R INQUIRY  
 2002 061 Map# 000000335300014 GIS#

Property 004289500 DED Mitchell, Jerry & Brenda  
 Ownership 2621 160Th St  
 Van Meter IA 50261-

000000000  
 Location 2621 Street 160TH ST City VAN METER  
 Recorded REC 141 745 PLT 3 475  
 Documents

Misc Exempt Code No Ag Cr VIN#  
 Sec-Twp-Rng 035 077 027 Cty-Adn-Blk 00035 Title

Legal Desc LOT 1 EVAN ACRES

Applications Typ 1 H... Ovr Amt Typ 2 .... Ovr Amt  
 Typ 3 .... Ovr Amt Typ 4 .... Ovr Amt

	100%	Rollback	Gr	Acres	Typ Desc	Value	Rollback	Acres
Grs	148,500	76,310	Ex	5.05	LND Land	60,000	30,832	4.79
Mil			PE	.26	BLD Building	88,500	45,478	
Net	148,500	76,310	Dr	.00	EXM Exempt			.26
			Net	4.79				

F3=Exit F10=Ownership F12=Prev F13=Rec Doc F14=Image F15=Legal  
 F18=Tax History F19=Aplc F20=Value F21=Print F22=View Image F23=Indexing



Permit No 106-03 Name: Mitchell 911 Sign Locate   
Date of Inspection: 9/3/03 Inspected by: Elton Root  
Contractor: Huff & Son  
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 Lister 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.Zabel
- Tank depth. 6 inches
- Risers Yes  No
- Lids above grade screwed on Yes  No  Will be

Comments:

**Distribution Box**

- Brand Tuf-Tite Other
- Bedded in cement. Yes  No  Will be
- Has required inlet baffle. Yes  No  Will be
- Outlet levels –are level. Yes  No  Unknown

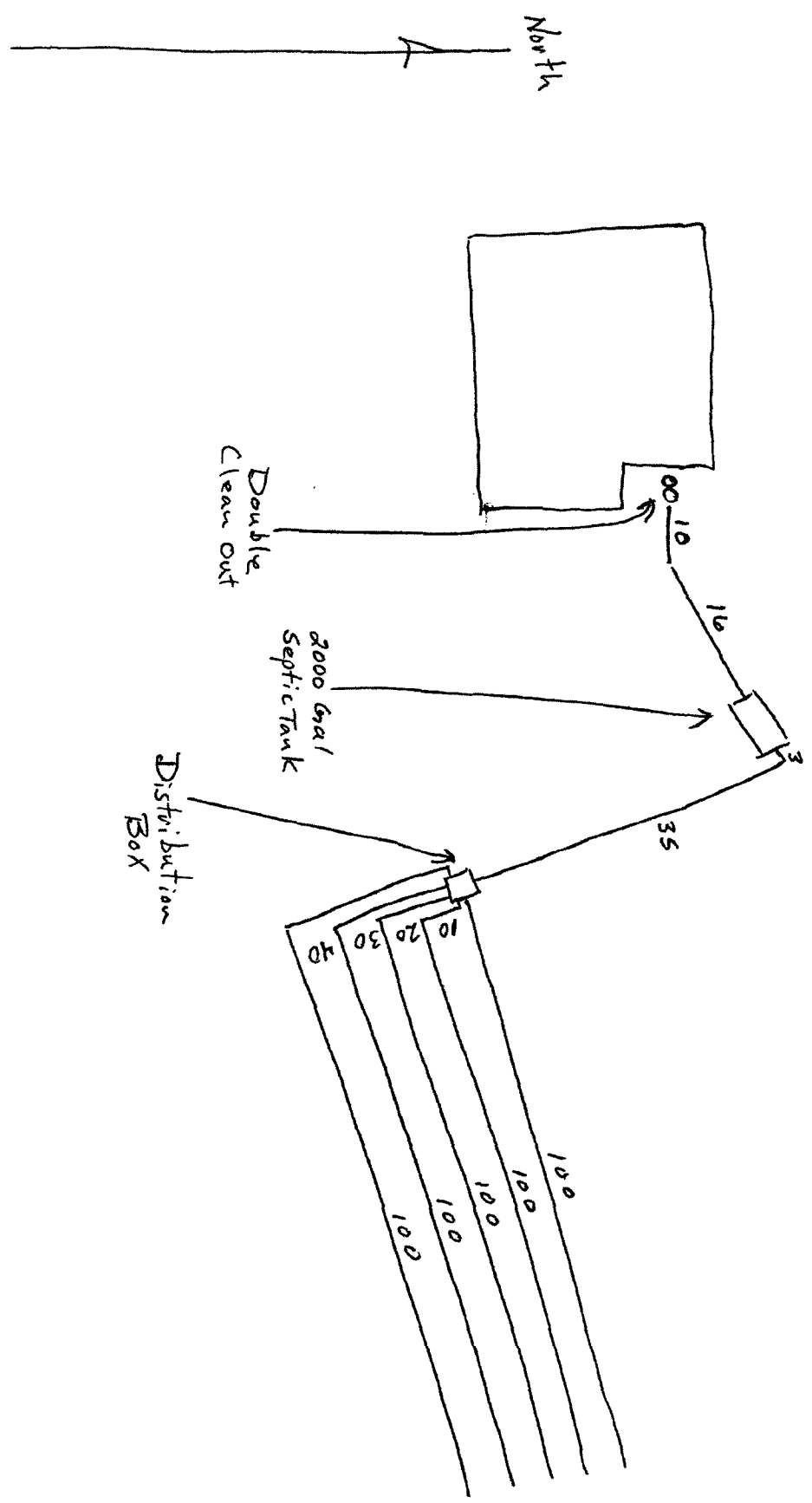
Comments:

**Laterals**

- Distribution lines: 4-inch PVC pipe – SCH35
- Distribution lines screwed to laterals. Yes  No  Will be
- Lateral used. EQ24 Reduction? Yes  No
- Lateral depth 24 inches Perc depth 30 inches
- Laterals were level. Yes  No
- Adequate amount of undisturbed soil between laterals. Yes  No
- Distance 7 feet between laterals.

Comments:

Permit # 106-03 Mitchell Inspection 9/3/03



Permit # 106-03 Jerry & Brenda Mitchell Inspection 9/3/03

