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Book 2018 Page 3765 Type 43 001 Pages 16 Date 11/20/2018 Time 10:15:42AM INDX

DNR form 542-0960 (July 18, 2012)

**ANNO SCAN** 

LISA SMITH, COUNTY RECORDER MADISON COUNTY 10WA

CHEK

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

Name Zachary Michael Clayton	DEL 14 50000	MATERIAL PROPERTY AND ADMINISTRATION OF THE PROPERTY OF THE PR	
Address 25892 RIVERVIEW RIDGE RD. AI  Number and Street or RR	City, Town or P.O.	State	Z)p
TRANSFEREE:			
NameTyler L. Houg			
Address 816 S. 4TH AVE. Winterset, IA 502	273 City, Town or P.O.	State	Zip
Agrandi proc de pre ci 4 e 2	only, round at rive.	Giate	zφ
Address of Property Transferred:			
1721 158TH ST. Earlham, IA 50072  Number and Street or RR	City, Town, or P.O.	State	Zip
	Life of the William		
Legal Description of Property: (Attach if			
A tract of land commencing at a point 9 feet V Southwest Quarter (1/2) of Section Thirty-two (			the
South 183 feet; thence East to the Point of Be			
Twenty-eight (28) West of the 5th P.M., Madis	son County, Iowa.		
1. Wells (check one)  There are no known wells situated of stated below or set forth on an at 2. Solid Waste Disposal (check one)  There is no known solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to this control of the solid waste disposal si Attachment #1, attached to the solid waste disposal si Attachment #1, attached to the solid waste	on this property. The type(s), local tracked separate sheet, as neces sposal site on this property. It on this property and information	ssary.	
3. Hazardous Wastes (check one)	The second state of the se		
☐ There is no known hazardous wa ☐ There is hazardous waste on this Attachment #1, attached to this of	property and information related locument.	thereto is provided	in <sup>®</sup>
4. Underground Storage Tanks (check	-		
☐ There is an underground storage	tank on this property. The type(s below or on an attached separa		

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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
tm	formation required by statements checked above should be provided here or on separate
	neets attached hereto:
	And William Hot Afat
	The well was filled back in 2015/2016
_	
_	when the new soptie was put in.
	<b>,</b>
	I HERERY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
	I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
	FORM
	FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Si	FORM

DNR form 542-0960 (July 18, 2012)

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## **EXHIBIT A**

A tract of land commencing at a point 9 feet West of the Southeast corner of the Northwest Quarter (¼) of the Southwest Quarter (¼) of Section Thirty-two (32), thence North 183 feet; thence West 295.8 feet; thence South 183 feet; thence East to the Point of Beginning, in Township Seventy-seven (77) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa.



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

# Property information Current owner Zach Clayton Buver Tyler Houg Realtor Mailing address 1721 158th St, Earlham Site Address/County 1721 158th St, Earlham Madison Co Legal Description No. of bedrooms 3 Last occupied? yes Records available Permit/installation date Separation distances ok/ no? Septic system information Septic tank(s): size 1250 gal material Concrete condition working condition Tank pumped? YES date 10/25/18 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 3 condition working condition Header pipe(s) # of lines Pressure dosed? Secondary treatment: length of absorption fields \_\_3x100ft=300ft \_\_\_\_\_\_ determined by \_\_County\_record/probe \_\_\_\_\_\_ determined by \_\_hydraulic\_load\_test/probe type of trench material 36" 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 provided \_\_\_\_\_



# Time of Transfer Inspection Report

Other components	s: Working?	disinfection	working?
Wigiting	working:	distillection	working:
Control box	Timers	inspection ports	A PAR AND
Other components	S		
Overall condition	of the private sewage disposal syste	em_	
Report system sta	tus		
r <u>s and outlet filter</u>		bution box in working ers took water and pro	•
<ul><li>Ve</li><li>Po</li><li>Re</li><li>Ga</li></ul>	clusion of Time of Transfer inspection of the controls are set on the approper is on to all components. Exist all components to verify lids another all tools for removal from the scrify that no sewage is on the ground	ropriate mode. re secure. nite.	
Using this worksh	neet, write a narrative report of the in	nspection results and att	ach a site sketch.
the inspection. It	tes the condition of the private sewa does not guarantee that it will conti	nue to function satisfact	orily.
Signature of Certi	ified inspector: Rich Rogers		Date:10/31/18
Name (print):	Rick Rogers 401 NE 52nd Ave, Des Moines, IA 50313	C	ertificate #: <u>9597</u>
Address:	401 NE 52nd Ave, Des Moines, IA 50313		
Phone #	515-745-8352		
	f this report, the narrative report and ng the inspection, the county sanitar		
Iowa DNR Private Sewage D 502 E. 9 <sup>th</sup> St. Des Moines, IA 5	•		

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

# Authorization to Construct a Private On-site Wastewater

Treatment System (POWTS)

112 N. John Wayne Drive

P.O. Box 152

Winterset, IA 50273-0152

Telephone: (515) 462-2636

Permit Number: 100-15

Date Issued: 12/7/2015

Issued to:

Clayent LLC

Address:

P.O. box 41

Adel, IA 50003

1721 1584h St.

Legal Description:

1.2A SE Pt NW SW PID # 200033264020000

Sec 32 T77N R28W Madison TWP

POWTS Components Specifications 1250 gal. septic tank & 3 36" Laterals @ 100' ea.

#### 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: Max. trench depth 36"

Environmental Health Officer Assistant

Madison County

Office of Zoning and Environmental Health

# Madison County Office of Zoning & Environmental Health

## Application to Construct Private Sewage Disposal System (PSDS)

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

	Office Use Or	ily		Temp E911:	1721	15849	57.
Tracking No.   Date R	received Fee Paid 7-15 150	Check # 1891	Date Issued 12-7-15		Section/Tov 32-YY	vnship Co	<u></u>

Application will not be accepted until site and soil analysis/percolation information 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 along with appropriate forms for recording before a permit will be issued.

	fore a permit			a. go,, ica appii	ication mu	st be subliffed	to this of	iice aio	ng with appro	priate forms for	
	Please Print All Information.										
First Name	1. Owner Information (Applicant)					2. Installation Contractor Information  First Name  Last Name					
	Clayent LLC.					uff We	// /	ast Nam	e 		
Address P.O. Box 41						Address					
Adel		S	state A 5	Zip -0003	City State Zip						
Phone Number 5/5 -	(arca code) 4/8-86/	Ce	Il Phone		Phone Number (area code)  Cell Phone  Cell Phone  641 344 4705						
	ulrement Infor				4. Site an	d Soil Evaluator (					
IAC CHAP	TER 69 DOUBL			-		COLATION/SOII APPROVED PR	S ANALY	SIS MU	JST BE COMP		
		Mini	mum Tank Si	ze Required							
1-3 Bedroor			1250		Date test	t taken	Test take	by		<del></del>	
4 Bedrooi			1500		Passed:	ion Rate:		Faile	d:		
5 Bedrooi			1750		Percolat	ion Rate:					
6 Bedrooi	m		2000		Soils Lo	ading Rate:					
5. Type of Sub	mittal	6. Addr	ess Information			s. /		,			
☐ New House		011 244		nad:	721	1584	n S	<b>f</b> .			
Existing Ho	use	911 Audi	ess or nearest r	oad:	1721 1584h St.						
Repair, Tani	k	Legal De	scription:	1 7	A SE PT NWSW						
☐ Repair, Trea	itment Area	Ì		1.0							
☐ System Rep	lacement				32-77-28						
Previous Perm	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN COLUMN 2 IN COLUMN										
	ilding (Complete										
Building Squar	e ft.:	Number of Bed	rooms:	Number of Bath	rooms: mstances wi	nich may affect wat					
Otter bundings	served by disse	rsiciii.		1							
				Water softener	s must be r	outed to a brine p	it indepen	dent of s	eptic system.		
8. Tanks		Your contrac	ctor or system d	esigner should co	emplete the	remaining portion	o oi this ap	puenno	D.		
Septic Tank		Type: Cor	rooto	Size: 12	<b>5</b> 0	Manufacturer:	Lis	fer	`		
Pump Tank	A	Type:		Size:		Manufacturer:					
Additional Ta	nk	Type:		Size:		Manufacturer:					
		La contraction of the contractio					- 1 (3 - 11 to 1 (3 (1 to 1 (to				
9. Secondary Laterals	Treatment Area		Length of each	100'	Total nu	mber: 3		Maxim	um trench Dept	h: 36"	
Sand Filter	Square ft.:	Merce	Length:	<u> </u>	Width:			······································			
Peat System	Model:		Manufacturer		-						
Other	Description:										
for inspecti box must be recorded in t	ion of the syste available. Dis the Madison C forth in IAC C	m must be n charging sys ounty Recor	ade 24 hours tems must be d ders Office. Di	in advance. Wa covered by a m ischarging syste	iter at the aintenance ems also re	on this application site to test the decagreement, where the periodic to the test that the test the test the test t	istributio ich shall esting as	n be set	construction, or repair of a issuance of a the Environ	wful to start reconstruction, ny PSDS prior to PSDS permit by nmental Health Ticer.	
MC-ZEH Form	EH01	ww			nor the warm of the	10-1	· ()			March 2009	



# BOECKMAN SERVICES

1990 CLOVER AVENUE CRESTON, IA 50801

PHONE: (641)-344-6408 Louis Boeckman, CPSS-PSCI

Saturday, August 22, 2015

MADISON COUNTY HEALTH & ZONING Elton Root, Sanitarian PO Box 152 Winterset, IA 50273-0152

Soil Analysis for Linda Clayton — Clayant LLC
1721 158th Street
Earlham, IA 50072
Section 32 Madison Township

Adel 50003

Dear Mr. Root:

Enclosed is soil analysis results conducted on Thursday, August 20, 2015 for the existing home site of Linda Clayton located in section 32 of Madison Township near Earlham, Iowa

A total of 5 soil borings were made during this investigation. The loading rate is .61 gallons per square foot for the potential soil absorption field. The total footage for the field if constructed would be 400 feet with a 2-foot trench width for 450 gallons per day water usage or 3-bedroom home. The wide chamber product can be used with 300 feet of 3-foot trench at this home site.

The test area is located just west of the home site and in the yard area.

Soil borings indicate the soils are Nira soils. Soils at this site are moderately well drained and have a seasonal high water table of 2 to 5 feet during spring months or during heavy rainfall periods. Active seasonal high water table was observed at depths of 2 to 3-1/2 feet during this investigation.

Nira soils in this area are underlain by weathered till at depths of 7 to 8 feet or more. Redox feature were observed at depths of 1-1/2 to 2-1/2 feet and gray matrix colors at depths of 2 to 4-1/2 feet.

If this site is used for soil absorption field, trenches must be constructed at depths of 24-30 inches with a maximum depth of 36 inches. It is recommended constructing trenches within test holes 1 through 4. Test hole 5 will have wetter soil conditions.

A curtain/tile drain is recommended to installed upslope of the field at depths of 5-7 feet. This will help lower seasonal high water table and improve performance of the field. It is also recommended to divert gutter drains from the house and building away from the soil absorption area.

Please note a well is located just west of the house. This well may needed be plugged to meet the separation distance requirements.

If there are any questions, you can contact me at 641-344-6408.

Respectfully submitted,

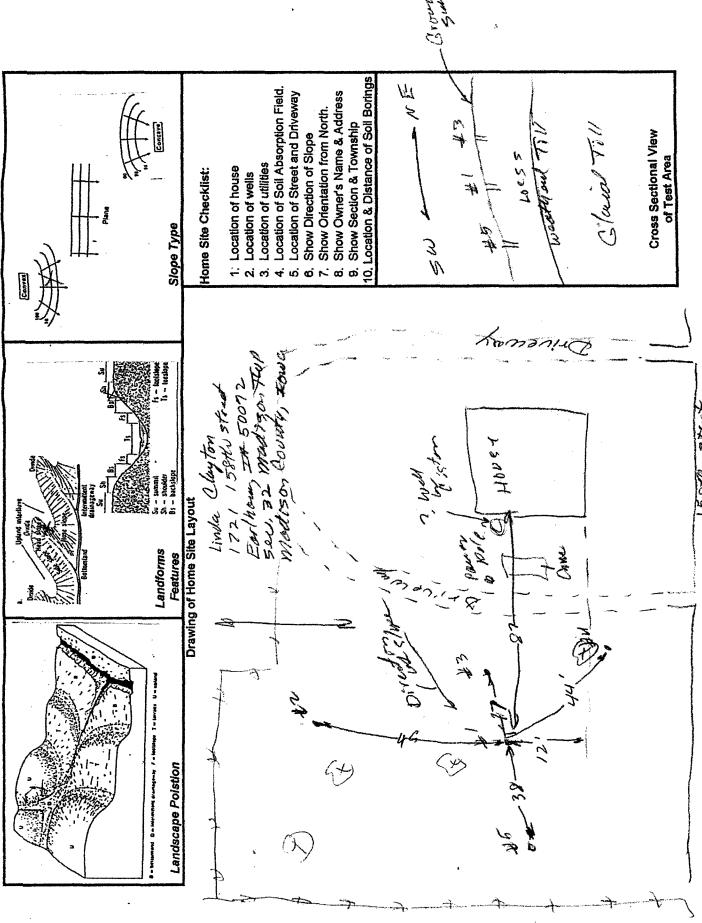
Louis Boeckman, CPSS

#### Enclosure:

Soil Analysis Results
Soil boring & Transect
Drawing of Site
Curtain Drain information
Receipt—Sent to Clayton

Cc: Linda Clayton Travis Witt

ZIP: \$20.22 COUNTY: 77.44.50 Lat: 4/4 42.654 Long: 944.10496. Long: 944.10496. No. of Bedrooms: 3 Average Loading Rate = 10/8 GPD = 450 Average Loading Rate = 10/8 Round to Round to R	æ	(2,2)		36.65	1721	47	Trend Day in	00-40	1 10-50 t 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Fig. 500.72 COUNTY: 7726.44 Lat: 4/2.654 Long: -944.1049L Elev (ft.): 106.1 No. of Bedrooms: Average Loading Ra GPD = 45.7 LR = 72.7 TW = 2 = 30.7 TW = 3 = 240.7 Formula: GPD = LLB = EOOTA	19 <	590	7	ń	ń	٠.	1		25-26"
SYSTEM SITE  ST. ZZRP:  ZN. R.ZZ W. COU  Z O Z  Z O Z  Z O Z  ST. ZZRP:  Lat:  Long  GPD  LR  LR  LR  LR  LR  LR  LR  LR  LR  L	PM or REMARKS	Loess							Cadox For Coly Matrix Cly Mark
	COMPAC- TION						, , , , , , , , , , , , , , , , , , ,		18
D Dispose	MOIST (	ž							(4) Valley Fill, (5) Outwash, (6) Eollan, & (7) Alluvium Rapy, re Curtain fill Lacin out up 8 light attens
HOME OWNER: ADDRESS: CITY: SECTION NO:: TOWNSHIP: ATA 9 0.6 ILITY: TER TABLE (#.): A.5	BOUN- DARY	AS	\$ 2	N N	, O	26			Rago Re Curtain Drawing (7) All
HOME SECTION S	ROOTS	<b>≯</b> 0	7.7	オハナハ	Ì	\		·	Outwash, C
ASTEWATER TREATIVE HOME DESTRUCTION HOME AND A MOLE SECTION OF THE	CONSIS- TENCY	ţ	Cr	d	Ġ	4	D		ley Fill, (5)
E WASTE OFFICE O		O des	2.93 <u>71</u>	12 54	1624	7	nam!		
NSECT OF ON-SITE WASTEWATER TREATMENT AN \$200 Time Completed: \$200 MM HOME OWNER: ADDRESS: Cartification: \$100 MM MM MM SECTION NO.: Y" on Diagrams-Back of Sheet! Towns High Water Table (#): \$200 MM MM. AND MO.1 NO.1 NO.1 NO.2 NO.4 NO.4 NO.5 NO.6 NO.6 ST.	COATS or			Barlon!	Thro,	K**/	<u> </u>		leathered Glacial Till, (Note Well)
SANSECT Character of Discontinuous and Continuous a	REDOX								TIIL, (3) Weat
- av 3 2 5 0	COLOR	Pesal	16.44/	1/2016-12 1/38-2	y y	2.536	-¢		PM = PARENT MATERIAL(1) Loess, (2) Glacial Till., (3) Weathered Glacial Till,  Revised by LEB 4/4/14 8:15 AM 501L ANALYSIS 1/03 550 1000 1000 1000 1000 1000 1000 1000
SOIL BORINGS AND TIME Starts aducted By: Louis Boese Houcted By: Louis Boese Houcted By: Louis Boese Houcked By: Louis Boese Type: (Pia Symbol: 570C ASPECT (Pia SYMBOL: 570C BORINGS: THICKNESS OF SURFACE SOIL (In.): DEPTH TO GNOOMTHICKNESS: Depth TO GNOOMTHICKNESS: Depth TO GLAY MAXIMUM: DEPTH TO CLAY MAXIMUM: DEPTH OF ACTIVE W.T.:	SOIL TEXTURE	5.26 3	Sarl	5,24	3492	23 48	3, en 32, en		AL(1) Loess B AM 703
SOIL BORING TE: \$\insert{S-20-20.5}\$  Conducted By: \$\insert{LQD/5}\$  TON: \$\insert{S-100.5}\$  TON: \$\insert{S-100.5}\$  SOIL SYMBOL: \$\insert{S-100.5}\$  ASPECT (9): \$\insert{S-100.5}\$  DEAINAGE: \$\insert{S-100.5}\$  THICKNESS OF SURFACE  DEPTH TO CONC  (FEATURES: DEPTH TO GRA  DEPTH TO CLAY!  DEPTH TO CLAY!	HORI- ZON	do	Ø	849	99	69	Bec	\	= PARENT MATERIAL( Revised by LEB 4/4/14 8:15 AM SOIL ANALYSIS 1/03
SOIL BORING DATE: \$-20-20/5 Conducted By: \$Lou/5 Conducted By: \$Lou/5 LANDSCAPE-LANDFORM-SLOPE SOIL SYMBOL: \$70C ASPECT (?): \$2(3-50) DRAINAGE: \$0IL THICKNESS OF SURFAC DEPTH TO CONG REDOX FEATURES: I DEPTH TO GRA DEPTH TO CLAY R DEPTH TO CLAY R	DEPTH (Inches)	6-13	13/	750	39	39	40-	, .	PM = PARENT Revised 4/4/14 SOIL ANAI



Revised by LEB

200000264040000 2008/22/2009/00 27/03/20/20/2000 MADISON 20008826600000 2000823:00000

Parcel ID

200033264020000

Sec/Twp/Rng 32-77-28

Property Address 1721 158TH ST

EARLHAM

**Brief Tax Description** 

Class Acreage

Alternate ID n/a

R 1.2 Owner Address CLAYENTLLC

**RCS** 

4708 MERCANTILE DR. FORTWORTH, TX 76137

District

MADISON

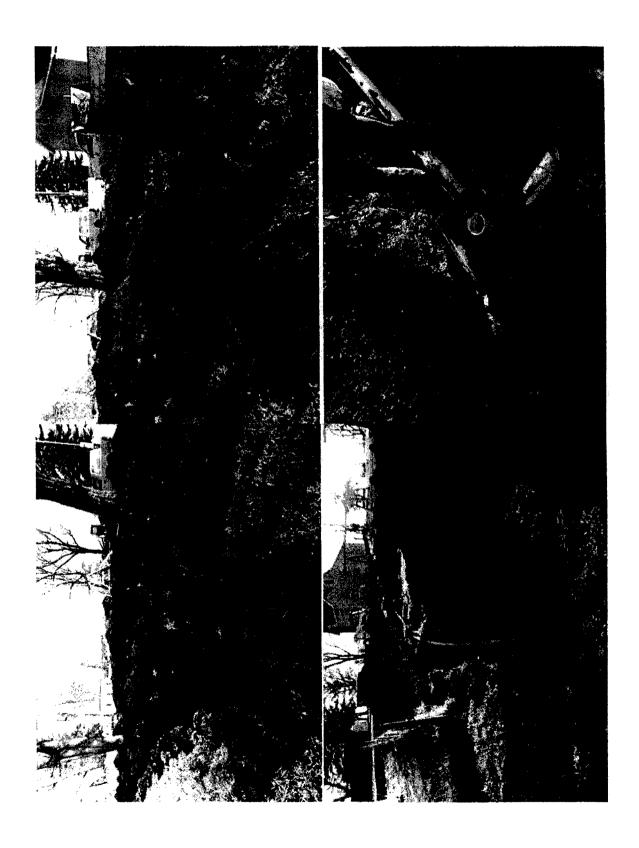
1.2A SEPT NW SW

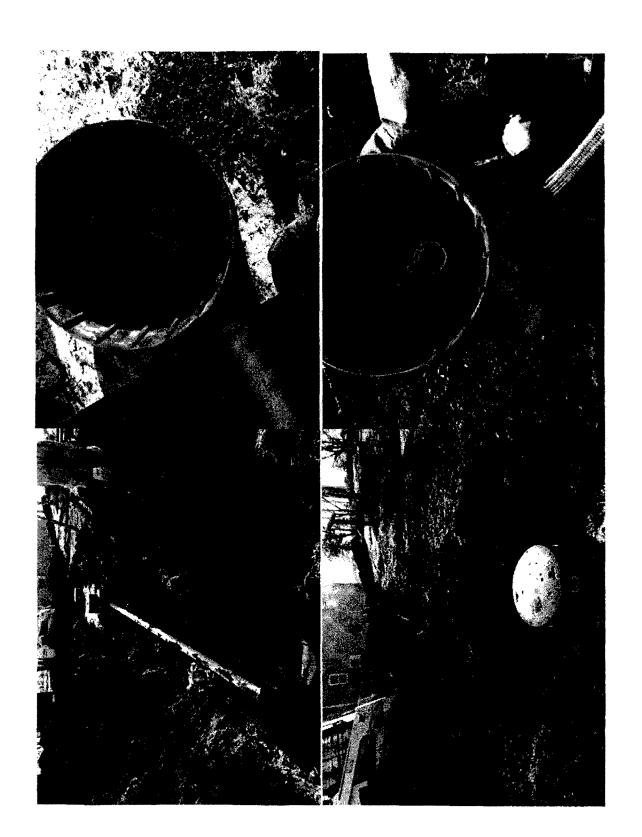
(Note: Not to be used on legal documents)

Septic Permit # 100-15

Permit No 100-15 Name: Clayent 9 Date of Inspection: 12/19/15 Inspected by: Elton Root Contractor: Huff Well LLC Dwelling under construction or moved in Yes No	11 Sign Locate	; <b></b> ]
Setbacks		
Meets required setbacks.		
<ul> <li>Rural Water</li> <li>Private wells/heat pump wells/suction water lines/lakes</li> <li>Outside required 50-foot setback for tank</li> <li>Outside required 100-foot setback for laterals</li> <li>Streams/ponds (25-25 ft)-ditches (10-10 ft)</li> <li>Indications of water lines under pressure</li> <li>Comments:</li> </ul>	Yes \ Yes \ Yes \ Yes \ Yes \ Yes \	No
<ul> <li>Building Sewer</li> <li>Clean outs – one right outside of house</li> <li>location of cleanout inside house and set requirement</li> <li>Pipe is SCH 40 and has a 4-inch diameter.</li> <li>Grade – has adequate fall.</li> <li>Comments:</li> </ul>	Yes ⊠ Yes ⊠ Yes ⊠	No   No   No   No
<ul> <li>Pump Tank Size &amp; Manufacturer</li> <li>Septic compartments meet the specs for capacity.</li> <li>Baffle</li> <li>Inlet/Outlet tees are ok.</li> </ul>	Concrete Con	Plastic   Plastic   Plastic   No   No   No   No   No   No   No   N
<ul> <li>Brand <u>Tuf-Tite</u> Other</li> <li>Bedded in cement.</li> <li>Has required inlet baffle.</li> <li>Outlet levels –are level.</li> <li>Comments:</li> </ul>	Yes⊠ Yes⊠ Yes⊠	No Will be No Unknown
<ul> <li>Laterals</li> <li>Distribution lines: 4 -inch PVC pipe - SDR35</li> <li>Lateral used. 36" Low Profile Reduct</li> <li>Lateral depth. 30 inches Perc depth 36 inches</li> <li>Laterals were level.</li> <li>Adequate amount of undisturbed soil between laterals.</li> <li>Distance 6 feet between laterals.</li> </ul>	tion? Yes⊠ Yes⊠	Yes No No No No No No No

Comments:





Permit # 100-15
Inspection 12/19/15
1721 158th Street
North

