BK: 2024 PG: 3151

Recorded: 12/27/2024 at 1:56:54.0 PM

Pages 18

County Recording Fee: lowa E-Filing Fee: \$0.00

Combined Fee: Revenue Tax: \$0.00

BRANDY L. MACUMBER, RECORDER

Madison County, Iowa

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

If the transaction is exempt from filing a declaration of value pursuant to lowa Code 428A.1(2), STOP HERE. Pursuant to lowa Code section 558.69(1), when no declaration of value is submitted during a transaction, you are not required to submit a groundwater hazard statement or include the statutory language in lowa Code section 558.69(8A). Please consult your realtor or legal counsel for further advice, including on whether a declaration of value is required. The Department provides this information for statutory reference only.

Instructions for this document can be found at: https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960%20Instructions.pdf

Attachment 1, if required, can be found at: https://www.iowadnr.gov/Portals/idnr/uploads/forms/5420960a.pdf

TRANSFE	ROR:			
Name Rich	nard Freedman Revocable Trust dated	1 10/16/2013	***************************************	
Address 🦸	130 Peredise Road Unit 2003, Number and Street or RR	SVAMPSCOLT MA City, Tollin or P.O.	O (907 Zip
TRANSFE	REE:			
Address _				
	Number and Street or RR	City, Town or P.O.	State	Zip
Address of	Property Transferred:			
2672 Quail	Ridge Ave	Peru	IA	50222
	Number and Street or RR	City, Town or P.O.	State	Zip

Legal Description of Property: (Attach if necessary)

Parcel "C" located in the Southeast Quarter (¼) of Section Twenty-six (26), Township Seventy-five (75) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, containing 10.06 acres, as shown in Amended Plat of Survey filed in Book 2013, Page 1503 on May 24, 2013, in the Office of the Recorder of Madison County, Iowa.

Parcel "E" located in the West Half (½) of the Southeast Quarter (¼) of Section Twenty-six (26), Township Seventy-five (75) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, lowa, containing 8.65 acres, as shown in Plat of Survey filed in Book 2014, Page 1135 on May 14, 2014, in the Office of the Recorder of Madison County, lowa.

ii wono (onook ono)	1.	Wells	(check	one)
---------------------	----	-------	--------	------

□ No Condition - There are no known wells situated on this property.

Condition Present - 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)

- ☐ No Condition There is no known solid waste disposal site on this property.
- Condition Present There is a solid waste disposal site on this property and information related thereto is provided in Attachment #1, attached to this document.

Broken well at back of property has been non-functional for decades.

Septic was just inspected & approved.

3.	Ha	zardous Wastes (check one)
		No condition - There is no known hazardous waste on this property.
		Condition Present - There is hazardous waste on this property and information related thereto is provided in Attachment #1, attached to this document.
4.	Un	derground Storage Tanks (check one)
		No condition - 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.)
		Condition Present - 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. vate Burial Site (check one) No condition - There are no known private burial sites on this property.
5.	Pri	vate Burial Site (check one)
	Ø	No condition - There are no known private burial sites on this property.
		Condition Present - 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.	Pri	vate Sewage Disposal System (check one)
		No condition - All buildings on this property are served by a public or semi-public sewage disposal system.
Ω.	unu Unu	No condition - This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system. ヌミットに もれと
Х	A.	Condition Present 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.
		Condition Present - 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.
		Condition Present - There is a building served by private sewage disposal system on this property. The system is failing to ensure effective wastewater treatment or is otherwise improperly functioning, and 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.
		Condition Present - 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. [Exemption #7]
		Condition Present – There is a building served by private sewage disposal system on this property. This property is exempt from the private sewage disposal inspection requirements pursuant to the following Exemption [Note: for exemption #7 use prior check box]:
		Condition Present - There is a building served by private sewage disposal system on this property. The private sewage disposal system has been installed within the past two years pursuant to permit number:

Review the following two directions carefully:

A. If you selected a box stating "No Condition" for every numbered section above, <u>STOP HERE</u>. Do not submit this form. Instead, pursuant to lowa Code section 558.69(8A), you must include the following language on the first page of the recorded deed, instrument, or other writing:

"There is no known private burial site, well, solid waste disposal site, underground storage tank, hazardous waste, or private sewage disposal system on the property as described in lowa Code section 558.69, and therefore the transaction is exempt from the requirement to submit a groundwater hazard statement."

Please consult your realtor or legal counsel for further advice on this exemption. By law, the owner of the property is responsible for the accuracy of this statement, and the Department provides this information for statutory reference only.

must comp	lete this fo		g providing a		of the numbered se mation, and you m			
Information	required b	y statement	s checked ab	oove should be p	provided here or or	separate	sheets	attached hereto:
		HAT I HAVE		THE INSTRUCTI	ONS FOR THIS FO	RM AND 1	гнат тн	E INFORMATION
						~~		
Signature:	(Transferor	Freedom			Telephone No.:	573 6	592 2	780
			droon					1779

GROUNDWATER HAZARD STATEMENT

ATTACHMENT #1

NOTICE OF WASTE DISPOSAL SITE

a.	So	lid Waste Disposal (check one)
	Ø	There is a solid waste disposal site on this property, but no notice has been received from the Department of Natural Resources that the site is deemed to be potentially hazardous.
		There is a solid waste disposal site on this property which has been deemed to be potentially hazardous by the Department of Natural Resources. The location(s) of the site(s) is stated below or on an attached separate sheet, as necessary.
b.	Ha	zardous Wastes (check one)
	Ø	There is hazardous waste on this property and it is being managed in accordance with Department of Natural Resources rules.
		There is hazardous waste on this property and the appropriate response or remediation actions, or the need therefore, have not yet been determined.
Fu	ther	descriptive information:
		I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM
		AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.
Sig	natu	re: Richard Keeding Telephone No.: 573 692 2780
		Telephone No.: 573 692 2780 (Transferor or Agent) Llevo Freedro 207 615 1779
		~ ` <i>11</i>

Haim Naggar

From:

Andrew Hornback <ahornback@madisoncounty.iowa.gov>

Sent:

Tuesday, November 26, 2024 8:13 AM

To:

Haim Naggar

Cc:

Tina Burk

Subject:

Madison County Environmental Health - Time of Transfer inspection TOT# 13320

You don't often get email from ahornback@madisoncounty.iowa.gov. Learn why this is important

Haim,

According to the time of transfer inspection TOT#13320 the private onsite wastewater treatment system serving 2672 Quail Ridge Ave, Peru, IA meets the requirements of Iowa Administrative Code 567 Chapter 69. Please let me know if you any questions or concerns.

Thanks, Andrew

Andrew Hornback Madison County Environmental Health Officer (515)462-2636

ahornback@madisoncounty.iowa.gov 201 W. Court Ave. Winterset, Iowa 50273

Haim Naggar

From: Iowa Department of Natural Resources-Time of Transfer Program < NPDS-

noreply@iowa.gov>

Sent: Tuesday, November 26, 2024 7:09 AM

To: benbedwellbuilders@gmail.com; Haim Naggar; ahornback@madisoncounty.iowa.gov;

tburk@madisoncounty.iowa.gov; mfairchild@madisoncounty.iowa.gov

Subject: Time of Transfer Inspection #13320 at 2672 Quail Ridge Ave in Peru Has Been

Submitted

Follow Up Flag: Flag Status:

FollowUp Flagged

You don't often get email from npds-horeply@iowa.gov. Learn why this is important

A recent Time of Transfer inspection report was conducted at 2672 Quail Ridge Ave, Peru IA 50222 on 10/7/2024 in Madison county.

This notification was also sent to the County Environmental Health Department for review and the Iowa DNR in accordance with Paragraph 567 IAC 69.2(8)i.

If contact information for the person who ordered the inspection was provided in the inspection report, this notification was also sent to them. If not, you are required to provide them a copy.

The Time of Transfer inspection report and attachments can be found at this link: https://programs.iowadnr.gov/timeoftransfer/Home/DownloadInspectionDocument?id=13320

Any questions should be directed to the Time of Transfer inspector or your county sanitarian.

Regards,

Cory Frank Onsite Wastewater Coordinator Water Quality Bureau NPDES Section



GOVERNOR KIM REYNOLDS DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 13320 BEN BEDWELL CERT # 11612

-Site Information

Parcel Description: 520102686001200

Address: 2672 Quail Ridge Ave, Peru, IA 50222

County: Madison

Owner Information

Property is owned by a business: No

Business Name:

Owner Name: Richard Freedman Trst

Email Address:

Address: 2672 Quail Ridge Ave, Peru, IA 50222

Phone No:

Additional Contact Information

Name

Email Address

Affiliate Type

Haim Naggar

haim@bhhsfirstrealty.com

Realtor

Site related information

No Of Bedrooms: 3

Facility Type: Residential

Last Occupied:

Permit issued by County: Yes

All plumbing fixtures enter septic system: Yes

Property Information Comments:

Inspection Date: 10/07/2024

Currently Occupied: Yes

System Installation Date:

Permit Number:

County contacted for records: Yes

Primary Treatment-

Tank 1

Tank Name: Tank 1

Tank Material: Concrete No. of Compartments: 2

Type: Septic Tank

Tank Corrosion Type: None

Pump Tank Chamber: No

Tank Size (Gal): 2000

Liquid Level Type: Normal

Licensed Pumper Name: Wiegert

Date Pumped: 10/7/2024

Meets Setback to Well: N/A

Well Type:

Distance To Well (Ft.):

Is Accessible: Yes

Lid Intact: Yes

Risers Intact: Yes

Effluent Filter Present: Yes

Watertight: Yes

Tank/Vault Pumped: Yes

Inlet Baffle Present: Yes

Outlet Baffle Present: Yes

Functioning as Designed: Yes

Tank Comments:

General Primary Treatment Comments:

Distribution Type-

Distribution Box 1

Label: Distribution Box 1

Material Type: Plastic

Accessible: Yes

Box Opened: Yes

Baffle Present: Yes

Speed Levelers Present: Yes

Watertight: Yes

Functioning As Designed: Yes

General Distribution System Comments:

Secondary Treatment

Lateral Field1

Distribution Type: **Distribution Box**

Lines: 7

Gallons Loaded: 400

Distance To Well (Ft.):

Grass Cover Present: Yes

Easement Present: N/A

Meets Setback to Well: N/A

Lateral Lines Probed: Yes

Lateral Lines Equal Length: Yes

Material Type: Leaching Chamber

Total Length of Absorption Line: 700

Functioning as Designed: Yes

Trench Width: 36

System Hydraulic Loaded: Yes

Well Type:

Saturation or Ponding Present: No

System Located on Owner Property: Yes

General Secondary Treatment Comments:

Narrative Report

Comments:

TOT Inspection Report Overall Narrative Comments: The system was working properly during the Inspection.



DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 13320 BEN BEDWELL CERT # 11612

Owner Name:

Richard Freedman Trst

Address:

2672 Quail Ridge Ave , Peru , IA 50222

County:

Madison

Inspection Date:

10/07/2024

Submitted Date:

11/26/2024

This page certifies a Time of Transfer inspection was conducted and submitted for the property listed above in accordance with Subrule 567 IAC 69.2(8).

11/26/2024 7:08:32 AM Page: 3 of 3 DNR Form 542-0191

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:

093-06

Date Issued:

July 5, 2006

Issued to:

Brad & Kathie Wilford

Address:

2672 Quail Ridge Ave

Peru, Iowa 50222

520102686001200

Legal Description:

S 1658' S 1/2 SE Section 26 T75 R27 Scott Twp

POWTS Components Specifications: 2000 gal septic tank - 36" chamber 7 @ 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:

Maximum trench depth 31

Thompson Environmental Health Officer

Madison County

Office of Zoning and Environmental Health

Madison County Office of Zoning & Environmental Health

MC-ZEH Form EH01

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

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

	Office Use Only		Temp,E911				
093-06 7-5-0	6 150 7-5	Ssued Date Inspection			on/Township		
Application will not be acc	epted until site and soil	analysis/percolation	on information,	and two diagr	ams of the syste	m layout, profiles and	
cross-sections have been re application must be submit	eceived; and fee has bee	n paid. For system	is requiring an N	PDES Gener	'al Permit #4 (su	rface discharge), its	
Please Print All Informa			XX - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
1. Owner Information (Appli	cant)		2. Contractor In	oformation			
Brad	Last Name		First Name		Last Name		
Address - Qu	rail O	***************************************	Address/	^	77411		
2672 6000	Kidge Ave		2996	295	to In		
City	State	Zip	City	ł	State	Zip	
<i>lecu</i>	IA	50222	Wraters	'et	IA	50273	
Phone Number (area code)		ell Phone	Phone Number (a	rea code)	Fax or B-mail	Cell Phone	
# 515-554-38			462-3			468-0091	
3. System Requirement Infor	mation		4. Site and Soil	Evaluator (Per	colation Test)		
IAC CHAPTER 69 DOUBI		7	PERCOLATIO		T BE COMPLETE ISSUANCE OF P	ED AND APPROVED PRIOR ERMIT	
		k Size Required					
1-3 Bedroom	* .	00	Date test take			- 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12	
4 Bedroom	·	250	Test Results:	Hole 1	min/in Hole	2 min/in	
5 Bedroom 6 Bedroom		i00 /50	Hole 3min/in Hole 4min/in				
o pearoom	1. /	30	Averagemin/in Depth of Test Holes Number of Laterals Required				
			Length of Laterals Required ft. ea				
			Li od				
5. Type of Submittal	6.Address Informati	on	**************************************	THE THOUSE WHEN ALL STOCKS THE LOWENT WHEN A	7/71 /	1011	
New	Location, Number &	Street of project (if	unknown, indicate	nearest road):	: XYZ U	Man Didge HUE	
Revision	Legal Description:	026-0	75 - O2	.7		,	
☐ Repair, Tank							
Repair, Treatment Area		5 /658	51/2	2C			
☐ System Replacement		•	• "				
Previous Permit #: ### Type of Building (Complete			er ni	Same and a second			
Residential	Number of Bedro	oms: 4+1 9	Commercial	/Other Non-Res	sidential Use:		
Other buildings served by this s			Garbage Dis		······································	1974 (1980) 1984 (1984) 1984 (1984) 1984 (1984) 1984 (1984) 1984 (1984) 1984 (1984) 1984 (1984) 1984 (1984) 19	
	None				ce (i.e. whirlpool be	ith, water softener) Qty: 1	
	Your contractor or syste	m designer should co	mplete the remai	ning portion of	this application.		
8. Primary and/or	Type: Omorile	Manufacturer:	roles)	Model:		Size (gal): 2000	
Mechanical Treatment	Type:	Manufacturer:	1000	Model:	·····	Size (gal):	
9. Pump/Siphon ☐ Not Applicable	Туре:	Manufacturer:	ATTANIA I SANTANIA MANANIA MAN	Model:	эмүнжийлүүн бүйлүү орын каталда жайы оры бүсүү өмдүү	Dosing Frequency:	
10. Secondary Treatment Are	a Type:	□ Not Applica	ble				
! *	mber of Laterals Le	ngth of ea. Lateral	Other	O	ther	Maximum Trench Depth	
36 "Chamber		100	**************************************		······································	(inches): 3)	
I hereby attest the truth ar					W. J.P.L. MANNESS HER STORE MANNESS STATE COSTON STATE OF THE STATE OF		
Request for inspection of t	he system must be mad	e 24 hours in adva	nce. Water at th	e site to test		in the state of th	
the distribution box mus						ful to start construction,	
filter and must be covered County Recorders Office.	uy a maintenance agree Discharge from maches	ment, which must rical systems and s	pe recorded in t	ire Madison		n, or repair of any POWTS	
testing as set fo	orth in IAC Chapter 69					nce of a POWTS permit by nmental Health Officer.	
Applicant Signature:	La Carrie de la Ca		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Date:	die Bhylro	mnontal licanii Omcol.	
5-6-1							

VANCE & HOCHSTETLER, P.C. Consulting Engineers
110 West Green Street
Winterset, Iowa 50273-1533
Telephone: (515) 462-3995
FAX: (515) 462-9845

ONSITE WASTEWATER SITE EVALUATION

Owner:	BR	AD (NILFORD					
Address:	113	NE	Belaire	Road	Ankeny	lA	50021	
Property Addre			DUAL		AVENUE			
Legal Descripti	on:	facc	.lin the	NW. 14	SE. 14	Sec.	26-75-27	i
Annual provides the second	(₁ ,		ngga yang sagan sarah da	······································	·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Phone Number:		hone	965-186) 4	***************************************			*******
New/Existing?:			tine					
Bedrooms:	4		V					~~~
Design Flow (g	allons	/day):	600					
Builder:	N/A							
Plumber:	Lari	·y 4.	.F f					********
		stea		· «************************************	***************************************	····	**************************************	
Date of Evaluat	ion:	3-1	4-06					
Performed by:	JR	}-)						

NOTES:

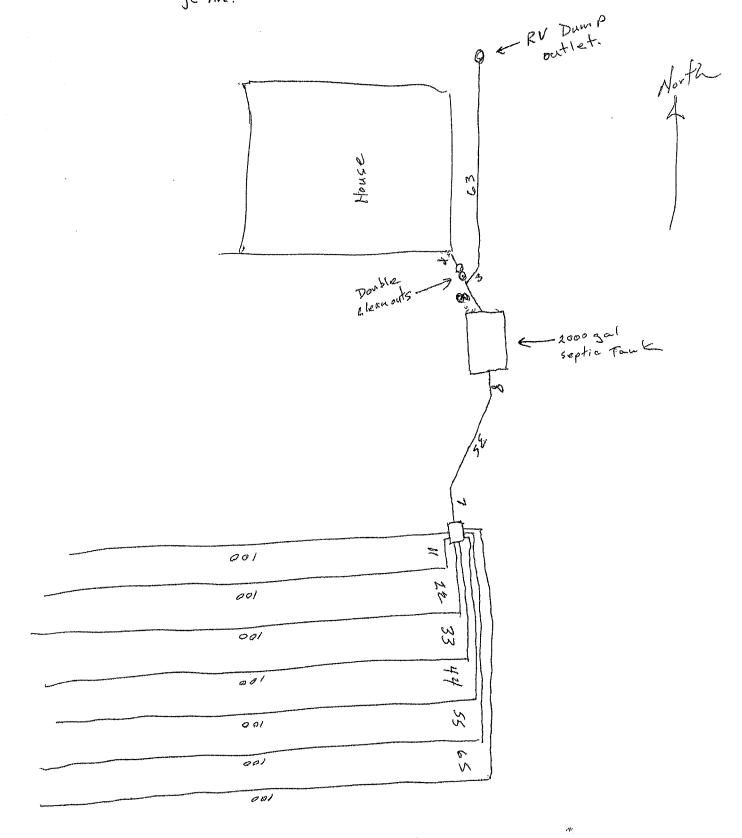
- 1. Proper maintenance and cleaning of the septic tank will extend the useful life span of the lateral drain field. Installation of an effluent filter will also help the performance of the lateral drain field.
- 2. All parties involved in the construction process shall take care to protect the area of the lateral drain field from any vehicle traffic or other soil disturbances. Any such soil disturbance shall void the results of this site evaluation. ("Other soil disturbances" include the placement of fill dirt or removal of native soil from the area of the lateral drain field).
- 3. Any changes to the limiting factors of this project (location of house or drain field, size of house or addition of any accessory structures or driveways, for example), shall invalidate the results of this site evaluation unless said changes are reviewed and approved by the design engineer. Said approval shall be in written form and attached to the original site evaluation.
- 4. This site evaluation was prepared using data obtained from the test locations shown on the attached sheet, the SCS Soil Survey, Madison County, Iowa, and onsite analysis of the test hole data using visual and textural observation of the soil samples. Soil conditions shown on this site evaluation represent the test hole locations only, and do not reflect any variations which may occur in the area of the lateral drain field. If any variations in the soil inside the lateral drain field become evident during construction, it will be necessary to reevaluate this site evaluation.

WILFORD ONSITE WASTEWATER SITE EVALUATION - Sheet 2 of 2

SOIL LOADING RATE: 0.4	gal/sf APPARE	ENT WATER TABLE:	67"	
	MAX. D	EPTH OF TRENCH:	3("	
LATERAL FOOTAGE	(5BR).			
2' wide trench: \\\ \frac{\sqrt{56}}{}{}'	940			
3' wide trench: 560	700			
	تي ا	3)		
BROWN CLAY COAM BRN	CL LOAM	BRN CL LOAM		
1 - MODERATE -	m00	m00	BRNICL COAM - MOD	,
2 BOA JERAY 26" BEC	V/GRAY CL 23	BRN/GRAY CL COAM		,
4 MOD/WEAK - LOI	AM-MODINEAK	- maplusax	- BEN/GRAY CL LOAM	
5			moo/weak	
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2 300	\	\		
6 WEAK/MOTTLES @ 69" WEAK		,, , , , , , , , , , , , , , , , , , ,	HOUSE POCCH	
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CESSIO TO		3.		
CIRCLE SOLVER		Thereby certify that this er	ngineering document was prepared by me supervision and that I am a duly licensed	
J. RUSSELL 10 HOCHSTETLER		Professional Engineer unde	r the laws of the State of Iowa.	
13652		I. RUSSII LHOCHSTETI	LER Date	
Manual and a sea of the state o		Licease #12052 My licease renewal date is Pages or sheets covered by	December 31, 2007.	
	•	Sol A	NALYJIJ	
		***************************************	······································	

Permit No 093-06 Name: Wilford 911 Sign Locate
Date of Inspection: 7/7/06 Inspected by: Elton Root Contractor: Huff & Son
Dwelling under construction or moved in Yes No 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. 12 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. EQ36 Reduction? Yes No
 Lateral depth 30 inches Laterals were level. Yes No□
• Adequate amount of undisturbed soil between laterals. Yes⊠ No.
Distance 6 feet between laterals.
Comments:

Permit # 093-06 Wilford Inspection 7/7/06 2672 Quil Ridge Ave.



Access outsides



The Grease Trap Cleaners A Division of

Recyclable



WIEGERT DISPOSAL INC.
P.O. Box 344 1-800-728-4908
Martensdale, IA 50160

Customer Order No		•						
	Ben B	reduce II			Date 1	0-	42-1	· · · · · · · · · · · · · · · · · · ·
		Queil I	Ridge	Ave R	· ·	**************************************	***************************************	***************************************
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