



Document 2025 GW2650

Book 2025 Page 2650 Type 43 001 Pages 17

Date 10/01/2025 Time 12:16:15PM

Rec Amt \$.00

INDX  
ANNO  
SCANBRANDY MACUMBER, COUNTY RECORDER  
MADISON COUNTY IOWA

CHEK

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

If the transaction is exempt from filing a declaration of value pursuant to Iowa Code 428A.1(2), STOP HERE. Pursuant to Iowa 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 Iowa 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>**TRANSFEROR:**Name Roger E. McNeley

Address <u>13537 Tripoli St</u>	<u>Indianola</u>	<u>IA</u>	<u>50125</u>
Number and Street or RR	City, Town or P.O.	State	Zip

**TRANSFeree:**Name Michael Leetch

Address <u>SUBJECT PROPERTY</u>			
Number and Street or RR	City, Town or P.O.	State	Zip

Address of Property Transferred:

<u>2283 Clark Tower Rd</u>	<u>Winterset</u>	<u>IA</u>	<u>50273</u>
Number and Street or RR	City, Town or P.O.	State	Zip

Legal Description of Property: (Attach if necessary)

**SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF****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.

**3. Hazardous 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. Underground 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.

**5. Private Burial Site (check one)**

- ☒ 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. Private Sewage Disposal System (check one)**

- ☐ No condition - All buildings on this property are served by a public or semi-public sewage disposal system.
- ☐ 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.
- ☒ 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, **STOP HERE**. Do not submit this form. Instead, pursuant to Iowa 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 Iowa 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.

B. If you checked any box stating "Condition Present" for any of the numbered sections above, continue below. You must complete this form, including providing all required information, and you must submit this form to the county recorder's office with declaration of value.

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

well is front yard not connect to  
anything

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

Signature:

*Ken Engard McElly*  
(Transferor or Agent)

Telephone No.:

515 468 3824

## **EXHIBIT "A"**

**A tract of land located in the South Half (1/2) of the Southwest Quarter (1/4) of Section Six (6), in Township Seventy-five (75) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, containing 4.207 acres, as shown in Property Line Retracement Survey filed in Book 2011, Page 314 on January 28, 2011 in the Office of the Recorder of Madison County, Iowa.**



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS  
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

## TIME OF TRANSFER INSPECTION TOT# 17584 BEN BEDWELL CERT # 11612

### Site Information

Parcel Description: **520100660020000**

Address: **2283 Clark Tower Rd, Winterset, IA 50273**

County: **Madison**

### Owner Information

Property is owned by a business: **No**

Business Name:

Owner Name: **Roger Mcneley**

Email Address: **rmcneley@gmail.com**

Address: **2283 Clark Tower Rd, Winterset, IA 50273**

Phone No: **515-468-3924**

### 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: **09/03/2025**

Currently Occupied: **Yes**

System Installation Date: **04/11/2011**

Permit Number: **004-11**

County contacted for records: **Yes**

### Primary Treatment

#### Tank 1

Tank Name: **Tank 1**

Type: **Septic Tank**

Tank Size (Gal): **1250**

Tank Material: **Concrete**

Tank Corrosion Type: **None**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **No**

Licensed Pumper Name: **wiegert**

Date Pumped: **9/4/2025**

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**

Material Type: **Leaching Chamber**

Trench Width: **36**

Lines: **4**

Total Length of Absorption Line: **356**

System Hydraulic Loaded: **Yes**

Gallons Loaded: **250**

Meets Setback to Well: **N/A**

Well Type:

Distance To Well (Ft.):

Lateral Lines Probed: **Yes**

Saturation or Ponding Present: **No**

Grass Cover Present: **Yes**

Lateral Lines Equal Length: **Yes**

System Located on Owner Property: **Yes**

Easement Present: **N/A**

Functioning as Designed: **Yes**

Comments:

General Secondary Treatment Comments:

Narrative Report

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

**TIME OF TRANSFER INSPECTION TOT# 17584 BEN BEDWELL CERT # 11612**

Owner Name: Roger Mcneley

Address: 2283 Clark Tower Rd , Winterset , IA 50273

County: Madison

Inspection Date: 09/03/2025

Submitted Date: 9/16/2025

Madison County  
Office of Zoning and  
Environmental Health

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

201 W Court Ave.  
P.O. Box 152  
Winterset, IA 50273-0152  
Telephone: (515) 462-2636

Permit Number: 016-22

04/08/2022

Issued to: Roger McNeley  
Address: 2283 Clark Tower Rd.  
Winterset, IA 50273

**Legal Description:** 4.2A CENT PT W of Hwy S ½ of SW Per Srvy B2011 P314  
PID# 520100660020000 Sec 6 T75N R27W Scott TWP

**POWTS Components Specifications:** Existing Septic-Connection to new home. Septic pumping/inspection required, Along with installer & EH Officer verification that D-Box & laterals are all functioning. At time of connection this is required to all be verified.

**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:** All fees, maintenance, testing, & construction shall be in accordance with Engineer, Manufacturer, County, & State regulations.

At least a 24-hour notice for inspections.

12/2/22 Huff well said  
this was completed + Brook  
had inspected. She said she  
would get me the info.

12/2/23 Info. never recvd. T.B.



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

Huff well said everything did get  
done that was needed.



Application to Construct  
Private Sewage Disposal System (PSDS)

201 Court W.  
P O Box 152  
Winterset, IA 50273  
Telephone (515) 462-2636

OFFICE USE ONLY

Tracking No.	Date Received	Fee Paid	Check #	Date Issued	Property Address	Section/Township
016-22	4/8/22	100.00	24406		2283 Clark Tower Rd	6-Scott

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.

Please Print All Information.

1. Owner Information (Applicant)			2. Installation Contractor Information		
Name Roger McNeley			Name Travis With		
Address 2283 Clark Tower Rd.			Address		
City Winterset, IA	State IA	Zip 50273	City Winterset	State IA	Zip 50273
Phone Number 515-468-3924			Phone Number 515-971-0549		
Email:			E-Mail		

3. System Requirement Information	4. Site and Soil Evaluator (Percolation Test/Soils Analysis)								
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED	PERCOLATION/SOILS ANALYSIS MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT								
Minimum Tank Size Required	Attach Report								
<table border="1"> <tr> <td>1-3 Bedroom</td> <td>1250</td> </tr> <tr> <td>4 Bedroom</td> <td>1500</td> </tr> <tr> <td>5 Bedroom</td> <td>1750</td> </tr> <tr> <td>6 Bedroom</td> <td>2000</td> </tr> </table>	1-3 Bedroom	1250	4 Bedroom	1500	5 Bedroom	1750	6 Bedroom	2000	
1-3 Bedroom	1250								
4 Bedroom	1500								
5 Bedroom	1750								
6 Bedroom	2000								

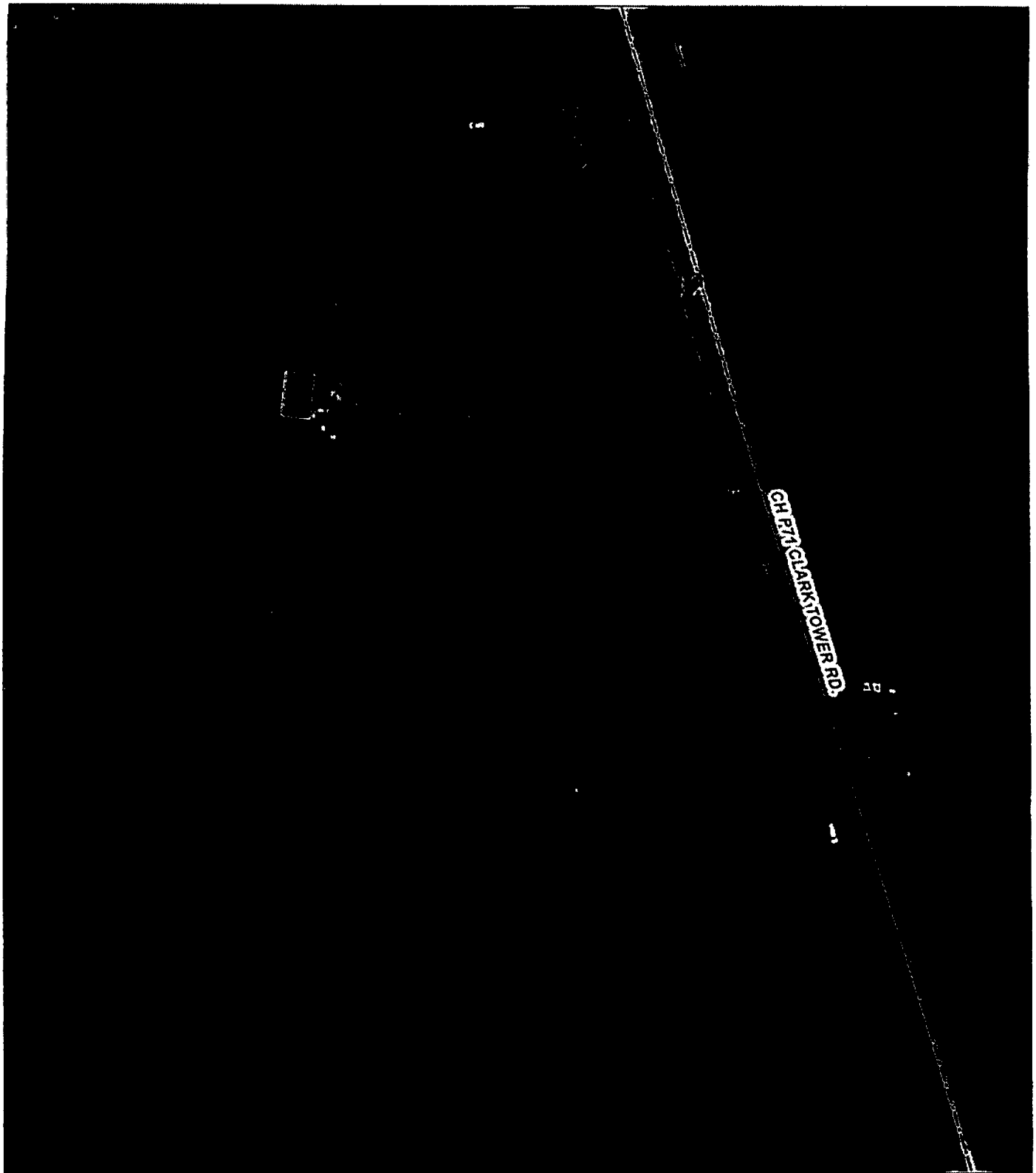
5. Type of Submittal	6. Property Information
<input checked="" type="checkbox"/> New House <input type="checkbox"/> Existing House <input type="checkbox"/> Repair, Tank or D-Box <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement Previous Permit #:	PID# 520100660020000 Legal Description: 6-75-27 4.2A Cent At W of Hwy 5 1/2 of SW Per Srvc B2011 P314

7. Type of Building (Completed by Owner)			
Building Square ft.: 1800	Number of Bedrooms: 3	Number of Bathrooms: 2	Non-Residential uses:
Other buildings served by this system:		Any other circumstances which may affect water usage:	
Water softeners must be routed to a brine pit independent of septic system.			

8. Tanks			
Septic Tank	Type:	Size:	Manufacturer:
Pump Tank	Type:	Size:	Manufacturer:
Additional Tank	Type:	Size:	Manufacturer:

9. Secondary Treatment Area					
Laterals	Type:	Length of each:	Total number:		Maximum trench Depth:
Sand Filter	Square ft.:	Length:	Width:		
Peat System	Model:	Manufacturer			
Other	Description: Tank to be pumped + inspected - D-Box + lateral functioning be verified.				

I hereby attest the truth and accuracy of all facts and information presented on this application. Request for inspection of the system must be made 24 hours in advance. Water at the site to test the distribution box must be available. Discharging systems must be covered by a maintenance agreement, which shall be recorded in the Madison County Recorders Office. Discharging systems also require periodic testing as set forth in IAC Chapter 69 and Madison County Environmental Health Regulations.		It is unlawful to start construction, reconstruction, or repair of any PSDS prior to issuance of a PSDS permit by the Environmental Health Officer.
Applicant Signature: Roger McNeley, Jay Carner, Maxwelle for STRANAY Construction	Date: 4-8-22	



Parcel ID 520100660020000  
Sec/Twp/Rng 6-75-27  
Property Address 2283 CLARK TOWER RD  
WINTERSET

Alternate ID n/a  
Class R  
Acreage 4.2

Owner Address MCNELEY, ROGER E  
2283 CLARK TOWER RD  
WINTERSET, IA 50273

District SCOTT WINTERSET WFD  
Brief Tax Description 4.2A CENT PT W OF  
HWY S 1/2 OF SW PER  
SRVY B2011 P314  
(Note: Not to be used on legal documents)

Temp. Dwelling # 037-22  
Dwelling # 038-22  
Septic # 016-22

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: 004-11*

*Date Issued: 3/21/11*

*Issued to: Philip & Patricia Barry Family Trust*

*Address: ~~3367 Ivy Avenue~~  
Lorimor, IA 50149*

*2283 Clark Lower Rd.  
5201006600 20000*

*Legal Description: 4.2A CENT PT 15.11A W OF HWY S  $\frac{3}{4}$  E  $\frac{1}{2}$  SW Section 6-75-27*

*POWTS Components Specifications: 1250gal. Septic Tank & 3ea. 36in. Laterals @ 90ft.*

*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 lateral trench depth is 24 inches.*



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

Application to Construct  
Private Sewage Disposal System (PSDS)

Office Use Only					Temp E911:		
Tracking No. 004-11	Date Received 3/21/11	Fee Paid \$150	Check # 4531	Date Issued 3/21/11	Section/Township 6 Lincoln		

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.

Please Print All Information.

<b>1. Owner Information (Applicant)</b>				<b>2. Installation Contractor Information</b>			
First Name		Last Name		First Name		Last Name	
Philip & Patricia Barry Family Trust				Huff & Son			
Address 3367 Ivy Avenue				Address 1996 295 <sup>th</sup> Lane			
City		State		City		State	
Lorimor, IA		50149		Winterset, IA		50273	
Phone Number (area code)		Cell Phone		Phone Number (area code)		Cell Phone	
(515) 462-3120				(515) 462-3569		(515) 468-1668	
<b>3. System Requirement Information</b>				<b>4. Site and Soil Evaluator (Percolation Test/Soils Analysis)</b>			
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED				PERCOLATION/SOILS ANALYSIS MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT			
Minimum Tank Size Required				Date test taken 6/17/10 Test taken by Vance & McDonald			
1-3 Bedroom		1250		Passed: _____		Failed: _____	
4 Bedroom		1500		Percolation Rate: 18			
5 Bedroom		1750		Soils Loading Rate: _____			
6 Bedroom		2000					
<b>5. Type of Submittal</b>				<b>6. Address Information</b>			
<input type="checkbox"/> New House <input type="checkbox"/> Existing House <input type="checkbox"/> Repair, Tank <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement Previous Permit #:				911 Address or nearest road: 2283 Clark Tower Road Legal Description: 4.2A CENT PT 15.11A W OF HWY S ¼ E ¼ SW Section 6-75-27			
<b>7. Type of Building (Completed by Owner)</b>							
Building Square ft.:		Number of Bedrooms: 3		Number of Bathrooms:		Non-Residential uses:	
Other buildings served by this system: None				Any other circumstances which may affect water usage: Water softeners must be routed to a brine pit independent of septic system.			
<b>8. Tanks</b>							
Your contractor or system designer should complete the remaining portion of this application.							
Septic Tank		Type: Concrete		Size: 1250		Manufacturer: Lister	
Pump Tank		Type:		Size:		Manufacturer:	
Additional Tank		Type:		Size:		Manufacturer:	
<b>9. Secondary Treatment Area</b>							
Laterals		Type: 36 inch Chamber		Length of each: 90 ft.		Total number: 3	
Sand Filter		Square ft.:		Length:		Width:	
Peat System		Model:		Manufacturer			
Other		Description:					

I hereby attest the truth and accuracy of all facts and information presented on this application. Request for inspection of the system must be made 24 hours in advance. Water at the site to test the distribution box must be available. Discharging systems must be covered by a maintenance agreement, which shall be recorded in the Madison County Records Office. Discharging systems also require periodic testing as set forth in IAC Chapter 69 and Madison County Environmental Health Regulations.		It is unlawful to start construction, reconstruction, or repair of any PSDS prior to issuance of a PSDS permit by the Environmental Health Officer.
Applicant Signature: <i>Larry Huff</i> For Philip & Patricia Barry	Date: March 21, 2011	

## MADISON COUNTY ENVIRONMENTAL HEALTH

## PERCOLATION TEST REPORT

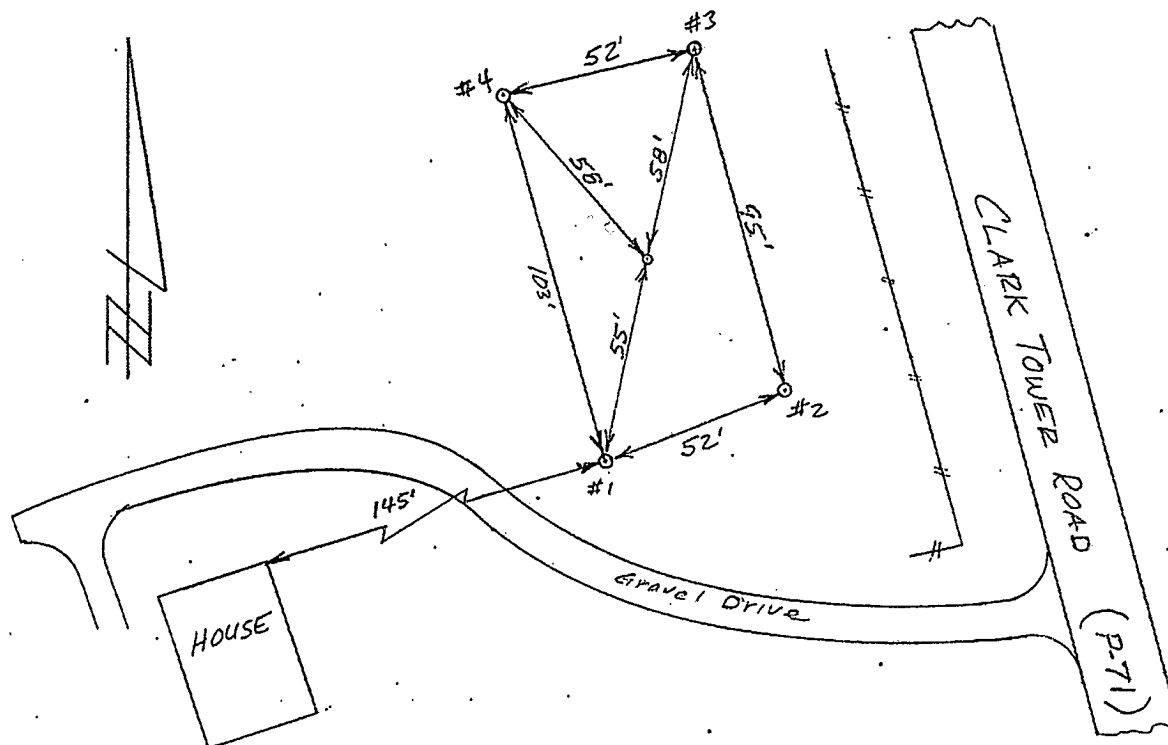
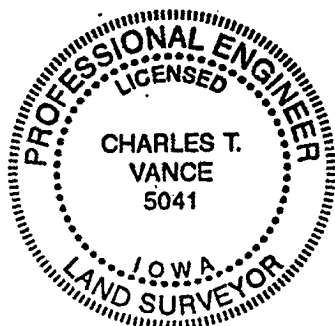
TEST #

Date taken: 6-17-10By: Jim Vance & Bryan McDonaldOwner: Philip & Patricia Barry Trust Site Address: 2283 Clark Tower Rd.Phone No. 462-3120Lot Size: 4.2 acres Legal Description: Part of S.3/4 of E.1/2 of SW.1/4 lying W. of Hwy in Sec.6-T75N-R27W

Lot # / Subdivision and/or 1/4 1/4 Sec Twp Range

Structure: New X Existing # Bedrooms: 3 Installer:Owner's Current Mailing Address: Realitor: Madison Co. Realty, 65 Jefferson St., Winterset, IA 50273Time for 1 inch of water: 1. 20 min 2. 16 min 3. 16 min 4. 20 min 5.    6.   Depth of hole at time of test: 1. 24" 2. 24" 3. 24" 4. 24" 5.    6.   Results of 6 foot hole: Lots of loose Rock only got 4' deep

Width of Trench	Total Lateral Footage	Number of Laterals Req'd	Avg. Length of Laterals
2 feet	405 feet	5 each	81 feet
3 feet	270 feet	3 each	90 feet



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. VanceDate: 18 June 2010Reg. No. 5041Exp. Date: 31 Dec 2011

RLI1002 PID 520100660020000 00 Tax Dist 520 000 Class R INQUIRY  
2010 061 Map# 000001106300007 GIS#  
Inquiry  
Property 009992715 DED BARRY, PHILIP & PATRICIA FAMILY TRUST 5/6/1988 \*  
Ownership 3367 IVY AVE  
LORIMOR IA 50149

0000000000  
Location 2283 Street CLARK TOWER RD City WINTERSET  
Recorded QCD 2008 1371 4/30/2008 1371 2008/04/15  
Documents REC 125 609

Misc Exempt Code No Ag Cr Vin  
Sec-Twp-Rng 006 075 027 Cty-Adn-Blk 00006 Title  
Legal Desc 4.2A CENT PT 15.11A W OF HWY S 3/4 E1/2 SW  
Applications Typ 1 Ovr Amt Typ 2 Ovr Amt  
Typ 3 Ovr Amt Typ 4 Ovr Amt

			Acres	Typ	Value	Rollback	Acres
100%Gs	101,600	Gr	4.20	LND	44,000	21,353	3.90
100%Nt	101,600	Ex	.30	BLD	57,600	27,953	
TaxGrs	49,306	PE	.00	EXM			.30
Milt		Dr	.00				
TaxNet	49,306	Net	3.90				

F3=Exit F10=Owners F12=Prev F13=Rec Doc F14=Image F15=Legal F16=Notes  
F17=IE F18=TaxHist F19=Applc F20=Value F21=Print F22=View Image F23=Indexing

Permit # 004-11 Barry Family trust inspection 4/11/11

2283 Clark Tower Road



Permit No 004-11 Name: Barry Trust 911 Sign Locate ☐

Date of Inspection: 4/11/11 Inspected by: Elton A. Root

Contractor: Huff & Son

Dwelling under construction or moved in Yes ☒ No ☐

Setbacks

Meets required setbacks.

- |   |   |                             |
|---|---|-----------------------------|
| • Rural Water   | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Private wells/heat pump wells/suction water lines/lakes | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Outside required 50-foot setback for tank               | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Outside required 100-foot setback for laterals          | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Streams/ponds (25-25 ft)-ditches (10-10 ft)             | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Indications of water lines under pressure               | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

Comments:

**Building Sewer**

- |   |   |                             |
|---|---|-----------------------------|
| • Clean outs – one right outside of house               | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • location of cleanout inside house and set requirement |   |                             |
| • Pipe is SCH 40 and has a 4-inch diameter.             | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
| • Grade – has adequate fall.                            | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |

Comments:

**Tank**

- |   |  |   |
|---|--|---|
| • Septic Tank Size & Manufacturer 1500 Lister       | Concrete <input checked="" type="checkbox"/>                                     | Plastic <input type="checkbox"/>  |
| • Pump Tank Size & Manufacturer                     | Concrete <input type="checkbox"/>  | Plastic <input type="checkbox"/>  |
| • Septic compartments, meet the specs for capacity. | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>   |
| • Baffle  | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>   |
| • Inlet/Outlet tees are ok.                         | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>   |
| • Effluent filter in the outlet.                    | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Manuf. Zabel |   |
| • Tank depth. 36 inches                             |  |   |
| • Risers  | Yes <input checked="" type="checkbox"/>  | No <input type="checkbox"/>   |
| • Lids above grade screwed on                       | Yes <input type="checkbox"/>   | No <input type="checkbox"/> Will be <input checked="" type="checkbox"/> |

Comments:

**Distribution Box**

- |                               |   |                             |   |
|-------------------------------|---|-----------------------------|---|
| • Brand <u>Tuf-Tite</u> Other |   |                             |   |
| • Bedded in cement.           | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Will be <input type="checkbox"/>            |
| • Has required inlet baffle.  | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Will be <input type="checkbox"/>            |
| • Outlet levels –are level.   | Yes <input type="checkbox"/>            | No <input type="checkbox"/> | Unknown <input checked="" type="checkbox"/> |

Comments:

**Laterals**

- |   |  |  |
|---|--|--|
| • Distribution lines: 4 -inch PVC pipe – SCH 35         |  |  |
| • Lateral used. 36" Chamber                             | Reduction? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |  |
| • Lateral depth. 22 inches                              | Perc depth 24 inches   |  |
| • Laterals were level.                                  | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>            |  |
| • Adequate amount of undisturbed soil between laterals. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>            |  |
| • Distance 9 feet between laterals.                     |  |  |

Comments:



Permit # 004-11

2283 Clark Tower Rd.

