

BK: 2025 PG: 50

Recorded: 1/7/2025 at 1:15:32.0 PM

Pages 14

County Recording Fee: \$0.00

Iowa E-Filing Fee: \$0.00

Combined Fee: \$0.00

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 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 Jessica Catherine Vierhout and Robert William Vierhout

Address <u>10355 Kiousville Palestine Rd</u>	Mount Sterling	Ohio	43143
Number and Street or RR	City, Town or PO	State	Zip

TRANSFeree:

Name Derek Juhl

Address <u>16873 Airline Drive</u>	Clive	Iowa	50325
Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

1419 Willow Court	Cumming	Iowa	50061
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

Lot Eleven (11) of Walnut Cove Estates Subdivision, Plat No. 1, located in the East Half (1/2) of the Northwest Quarter (1/4) of Section Twenty-five (25), Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa.

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 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 #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:

<div style="border-bottom: 1px solid black; height: 10px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 10px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	
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I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: _____

(Transferor or Agent)

<i>Robert William Verhout</i>	dodoop verified 12/16/24 3:04 PM CST H7E2-2A5M-QXEF-BMTD
-------------------------------	--

Telephone No.: _____



GOVERNOR KIM REYNOLDS

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 13417 SETH BROWN CERT # 13190

—Site Information

Parcel Description: 071012540110000

Address: 1419 Willow CT, Cumming, IA 50061

County: **Madison**

Owner Information

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

Business Name:

Owner Name: Robert Viernhout

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

Address: 1419 Willow CT, Cumming, IA 50061

Phone No: 712-470-4697

- Additional Contact Information

Name

Chinh Nguyen

Email Address

chinh@baccamrealestateteam.com

Affiliate Type

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: 12/04/2024

Currently Occupied: Yes

System Installation Date: 10/26/2001

Permit Number: 2047

County contacted for records: **Yes**

- Primary Treatment

Tank 1

Tank Name: Tank 1

Tank Material: Plastic

No. of Compartments: 2

Type: Septic Tank

Tank Corrosion Type: Slight

Pump Tank Chamber: No

Tank Size (Gal): 1500

Liquid Level Type: **Normal**

Licensed Pumper Name: **Rogers Septic**

Date Pumped: **12/4/2024** 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:

Water was high in tank when opened due to plugged filter. Pulled, cleaned and put filter back in. Water returned to flow line.

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

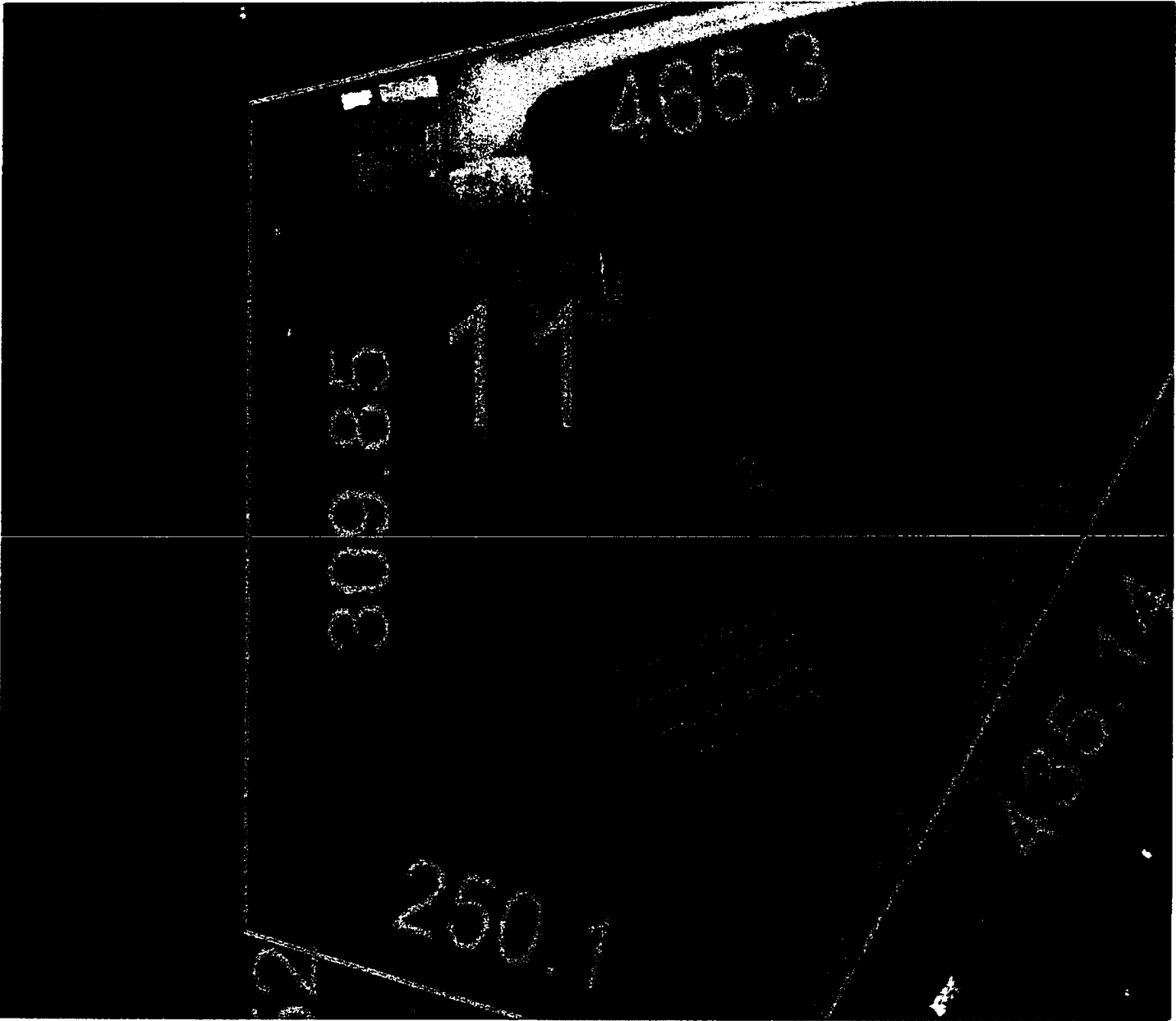
Distribution Type: **Distribution Box** Material Type: **Leaching Chamber** Trench Width: **36**
 Lines: **4** Total Length of Absorption Line: **300** System Hydraulic Loaded: **Yes**
 Gallons Loaded: **200** Meets Setback to Well: **N/A** Well Type:
 Distance To Well (Ft.): Lateral Lines Probed: **Yes** 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: **All wastewater goes to septic. 1500 gallon watertight plastic septic tank in working condition with little distortion. Accessible by inlet and outlet risers and lids. Inlet and outlet baffles present, outlet filter present. Water was high in tank when opened due to plugged filter. Pulled, cleaned and put filter back in. Water returned to flow line. 2 compartment tank. Plastic watertight distribution box in working condition. Baffle 90 present, speed levelers present. Hydraulic load tested(via house) 4x75 equaling 300 ft of chambered laterals with 200 gallons. Each lateral took water and probed dry and clean.**

As-built Diagrams



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

Madison County
Office of
Zoning & Environmental Health

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:		
Tracking No.	Date Received	Fee Paid	Date Issued	Date Inspected	Date Approved	Section/Township	NPDES Authorization #
2047	10/25/01	CK# 2875	10/24/01			25 Lec	

Application will not be accepted 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 (Applicant)				2. Contractor Information <u>Plumber</u>			
First Name		Last Name		First Name		Last Name	
<u>Ron and Amy Vogt</u>				<u>Craig Tolgerson</u>		<u>Const.</u>	
Address				Address			
<u>770 N. Pleasant Hill Blvd</u>				<u>867 NE 57 Ave. Saylor Twp</u>			
City		State		City		State	
<u>P-Hill</u>		<u>IA</u>		<u>DM</u>		<u>IA</u>	
Zip				Zip			
<u>50317</u>				<u>50313</u>			
Phone Number (area code)		Fax or E-mail		Phone Number (area code)		Fax or E-mail	
				<u>515-289-2783</u>		<u>515-288-4440</u>	
3. System Requirement Information				4. Site and Soil Evaluator (Percolation Test)			
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED				PERCOLATION TEST MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT			
Minimum Tank Size Required				Date test taken <u>7/30/01</u> Test taken by <u>Jim Vance</u>			
1-3 Bedroom 1000				Test Results: Hole 1 <u>21.8</u> min/in Hole 2 <u>40</u> min/in			
4 Bedroom 1250				Hole 3 <u>26.8</u> min/in Hole 4 <u>26.7</u> min/in			
5 Bedroom 1500				Average <u>22.6</u> min/in Depth of Test Holes <u>30"</u>			
6 Bedroom 1750				Number of Laterals Required <u>4</u>			
				Length of Laterals Required <u>100</u> ft. ea			
5. Type of Submittal				6. Address Information			
<input checked="" type="checkbox"/> New				Location, Number & Street of project (if unknown, indicate nearest road): <u>140 St</u>			
<input type="checkbox"/> Revision				Legal Description: <u>Lot 11 Plot 1 Walnut Cove Estates</u>			
<input type="checkbox"/> Repair, Tank				<u>Sect 25 Townsh. 027 Range 26</u>			
<input type="checkbox"/> Repair, Treatment Area							
<input type="checkbox"/> System Replacement							
Previous Permit #:							
7. Type of Building (Completed by Owner)							
<input checked="" type="checkbox"/> Residential				Number of Bedrooms: <u>5</u>		<input type="checkbox"/> Commercial/Other Non-Residential Use:	
Other buildings served by this system:				<input checked="" type="checkbox"/> Garbage Disposal			
				<input type="checkbox"/> High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: _____			
Your contractor or system designer should complete the remaining portion of this application.							
8. Primary and/or Mechanical Treatment		Type: <u>Concrete</u>	Manufacturer: <u>Lister</u>	Model:	Size (gal): <u>1,500</u>		
		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							
Type of Laterals	Number of Laterals	Length of ea. Lateral	Other	Other	Maximum Trench Depth (inches):		
<u>3ft in for the top</u>	<u>4</u>	<u>75 L in ft</u>			<u>30"</u>		
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. Mechanical systems require use of a free-access sand filter and must be covered by a maintenance agreement, which must be recorded in the Madison County Records Office. Discharge from mechanical systems and sand filters require periodic testing as set forth in IAC Chapter 69 and the results submitted to BOH.						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: <u>Berly Lee</u>						Date: <u>10/10/01</u>	

MADISON COUNTY ENVIRONMENTAL HEALTH

PERCOLATION TEST REPORT

TEST #

Date taken: July 30, 2001

By: Jim Vance

Owner: Ron Vogt

Site Address:

Phone No. 262-2172

Lot Size: 3.411 acres Legal Description: Lot 11, Walnut Cove Estates, Plat #1, Sec. 25-77-26

Structure: X New

Existing # Bedrooms: 3

Installer:

Owner's Current Mailing Address: 770 N. Pleasant Blvd., Apt. #14, Pleasant Hill, Iowa 50327

Time for 1 inch of water:

1. 21.8 Min.

2. 40.0 Min.

3. 21.8 Min.

4. 26.7 Min.

5. 30"

Depth of holes tested:

1. 30"

2. 30"

3. 30"

4. 30"

5. 30"

6. 30"

7. 30"

8. 30"

9. 30"

10. 30"

11. 30"

12. 30"

13. 30"

14. 30"

15. 30"

16. 30"

17. 30"

18. 30"

19. 30"

20. 30"

Min. recommended lateral footage per IAC Ch. 69: 400 feet

Number of laterals required: 4 each

Average length of laterals: 100 feet

Drawing of perc site below.

Number of laterals required: 4 each

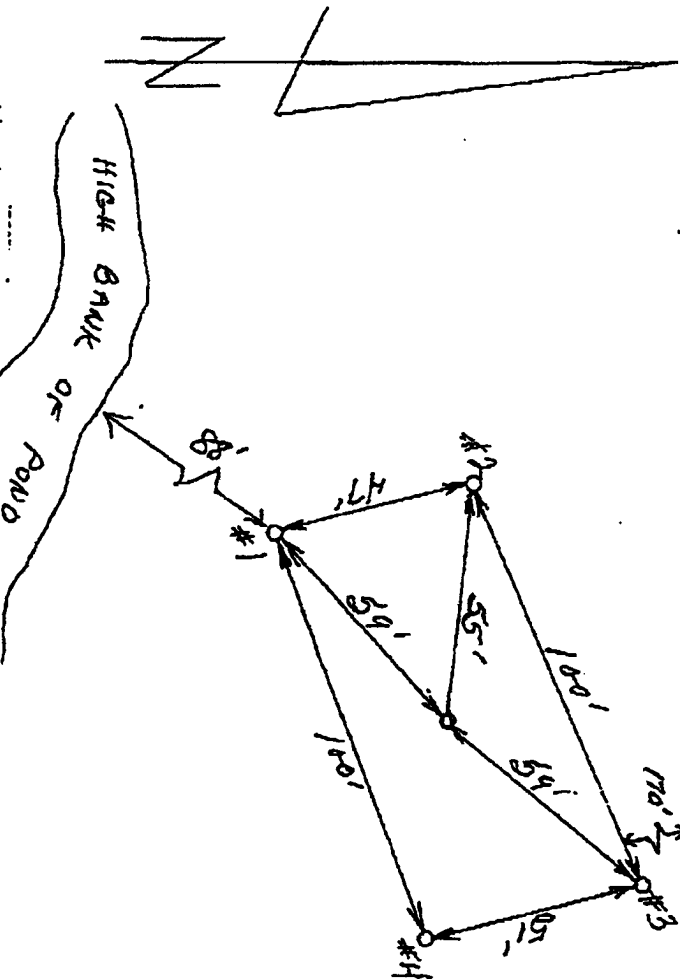
Average length of laterals: 100 feet

Drawing of perc site below.

Number of laterals required: 4 each

Average length of laterals: 100 feet

PROPOSED
HOUSE



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.

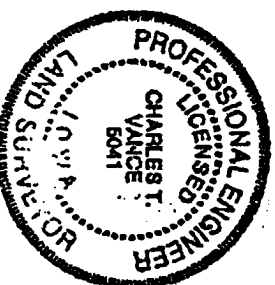
Signed:

Charles T. Vance

Date: 31 July 2001

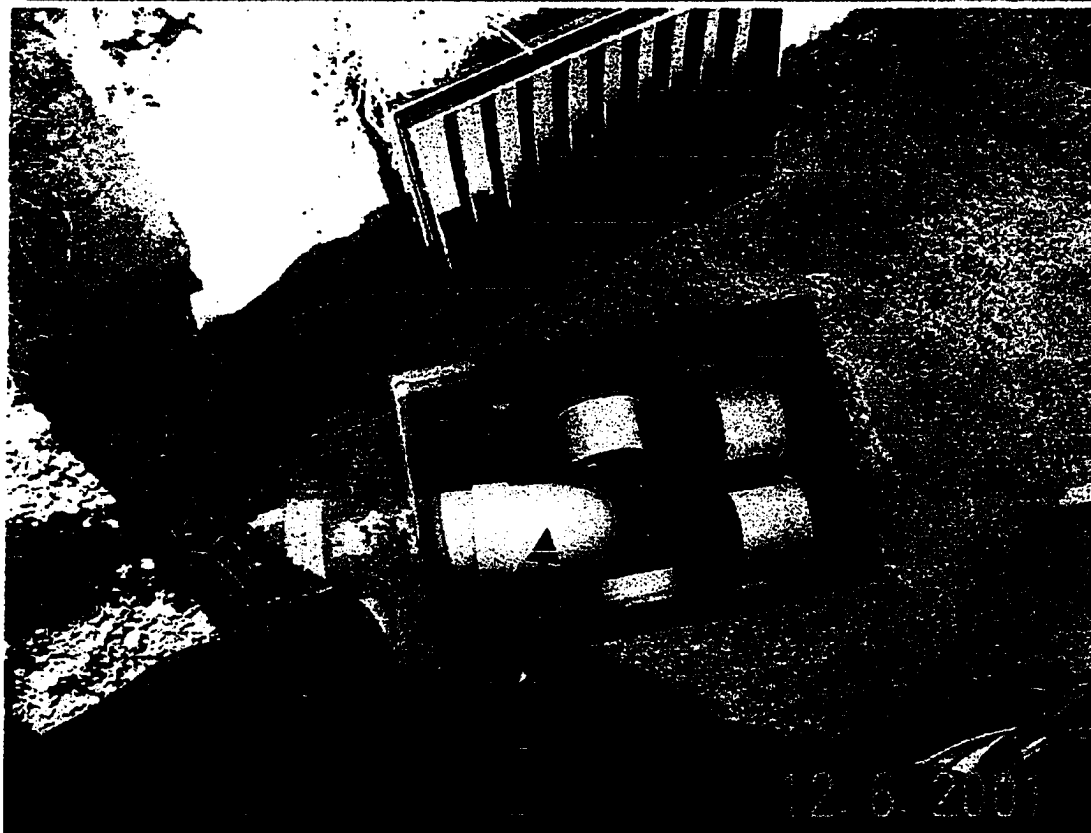
Reg. No. 5041

Exp. Date: 31 Dec, 2001









Contractor to cut hole for air and put concrete around Distribution Box