



Document 2026 GW1485

Book 2026 Page 1485 Type 43 001 Pages 11

Date 5/27/2026 Time 12:58:42PM

Rec Amt \$.00

BRANDY MACUMBER, COUNTY RECORDER  
MADISON COUNTY IOWA

**REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT**  
TO BE COMPLETED IN FULL 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/media/5465>.

Attachment 1, if required, can be found at: <https://www.iowadnr.gov/media/5466>.

**TRANSFEROR:**

Name	Lea Anne Falke Family Trust dated February 25, 2026 a/k/a LeaAnne Falke Family Trust dated February 25, 2026			
Address	2817 Carver Road	Winterset	IA	50273
	Number and Street or RR	City, Town or PO	State	Zip

**TRANSFeree:**

Name	Andy Miller and Elizabeth Miller			
Address	2817 Carver Road	Winterset	IA	50273
	Number and Street or RR	City, Town or PO	State	Zip

Address of Property Transferred:

2817 Carver Road	Winterset	Iowa	50273
Number and Street or RR	City, Town or PO	State	Zip

Legal Description of Property: (Attach if necessary)

A tract of land located in the Northeast Quarter (1/4) of the Northwest Quarter (1/4) of Section Three (3), Township Seventy-four (74) North, Range Twenty-eight (28) West of the 5th P.M., Madison County, Iowa, more particularly described as follows, to-wit: Commencing at the Northeast corner of the Northwest Quarter (1/4) of said Section Three (3), running thence West 335 feet, thence South 1050 feet, thence East 335 feet, thence North 1050 feet to the place of beginning, containing approximately 8 acres more or less.

**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:

2026-48

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:

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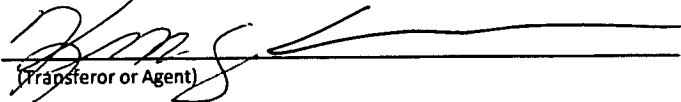
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I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature:  Telephone No.:

(Transferor or Agent)

Madison County Environmental Health  
201 W. Court Ave  
Winterset, IA 50273  
515-462-2636

## Madison County

# Private On-Site Wastewater Treatment System Construction Permit

**This permit shall be posted adjacent to the driveway or construction ingress/egress, and be viewable from the county (or private) road.**

Certificate Number: 2026-48

Date Issued: 05/13/2026

Date Expires: 05/13/2027

Owner(s): FALKE, LEANNE FAMILY TRUST (DED)

Address Location: 2817 CARVER RD WINTERSET, IA 50273

Legal Description: 8.A E PT NE NW

Parcel #: 660140342020000

### POWTS Components Specifications:

Primary treatment 1250g Indianola precast concrete tank, Secondary treatment Planet care Peat/Coco

This Construction Permit has been issued in accordance with the Madison County Environmental Health Regulations, authorizing the construction of a private on-site wastewater treatment system, and shall be null & void one year from permit issuance.

All components of the system must be uncovered for the inspection and the system must be approved before it can be put into operation. Notice for inspection must be received 24 hours in advance (8 a.m. through 4:30 p.m., Monday-Friday). For inspection, contact the Madison County Zoning & Environmental Health Office at (515)-462-2636.

**This certificate is not transferable.**

**ONSITE WASTEWATER SOIL EVALUATION FOR SEPTIC SYSTEM**

Owner: Leanne Falke  
Address: 2817 Carver Rd Winterset  
Report #: HBSE307



Structure: New          Existing X  
Depth to Confining Layer or Water Table: 12 in

Max Design Flow: 450 gal/day  
Soil Loading Rate: N/A gal/sq. ft

Avg. Daily Flow: 150 gal/day  
Max Depth Trench: N/A ft

No. Bedrooms: 3

**Septic System Recommendation:**

I recommend an enclosed filter system that does not utilize soil absorption (discharge pump may be required in the enclosed filter system) for this site due to evidence of high water table levels. Minimum 1,250 gallon storage tank and an effluent filter are required.

**Soil Evaluation:**

A site evaluation and reports from the NCRS web soil survey concludes the site contains silty clay loam. Redoximorphic soil features were found at 12" below grade. Redoximorphic features are a sign that the soil is poorly drained. Water was also found at 24". Code requires a minimum 36" between the bottom of a drainage trench (treatment layer) and the confining layer or water table. Since redoximorphic features were discovered at 12", the site did not meet this requirement. Hence an alternative system was recommended.

**General Notes:**

Private sewage disposal systems shall be located in accordance with the minimum distances show in Table 1 of Iowa Code Chapter 69.

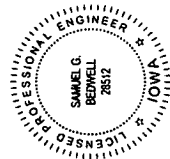
The treatment site shall be protected from heavy traffic and soil disturbances.

The septic system shall be constructed in accordance with Iowa Code Chapter 69 and county requirement unless specified otherwise by this report.

Hay Branch Services reserves the right to amend and/or supplement this report in the event additional information be uncovered or made available.

It is the property owner's responsibility to properly maintain and inspect the septic system on a yearly basis, and address and fix any issues that may arise.

Holes 1-3 (Holes are Similar)	Test Hole Info	Depth (in.)
	Black Silty Clay Loam, Blocky, Strong	0-12
	Gray with Brown Silty Clay Loam, Blocky, Strong, Mottles, Rust, Water at 2'	24-36



I HEREBY CERTIFY THAT THIS ENGINEERING DOCUMENT WAS PREPARED BY ME OR UNDER MY DIRECT SUPERVISION AND THAT I AM A DULY LICENSED ENGINEER UNDER THE LAWS OF THE STATE OF IOWA.

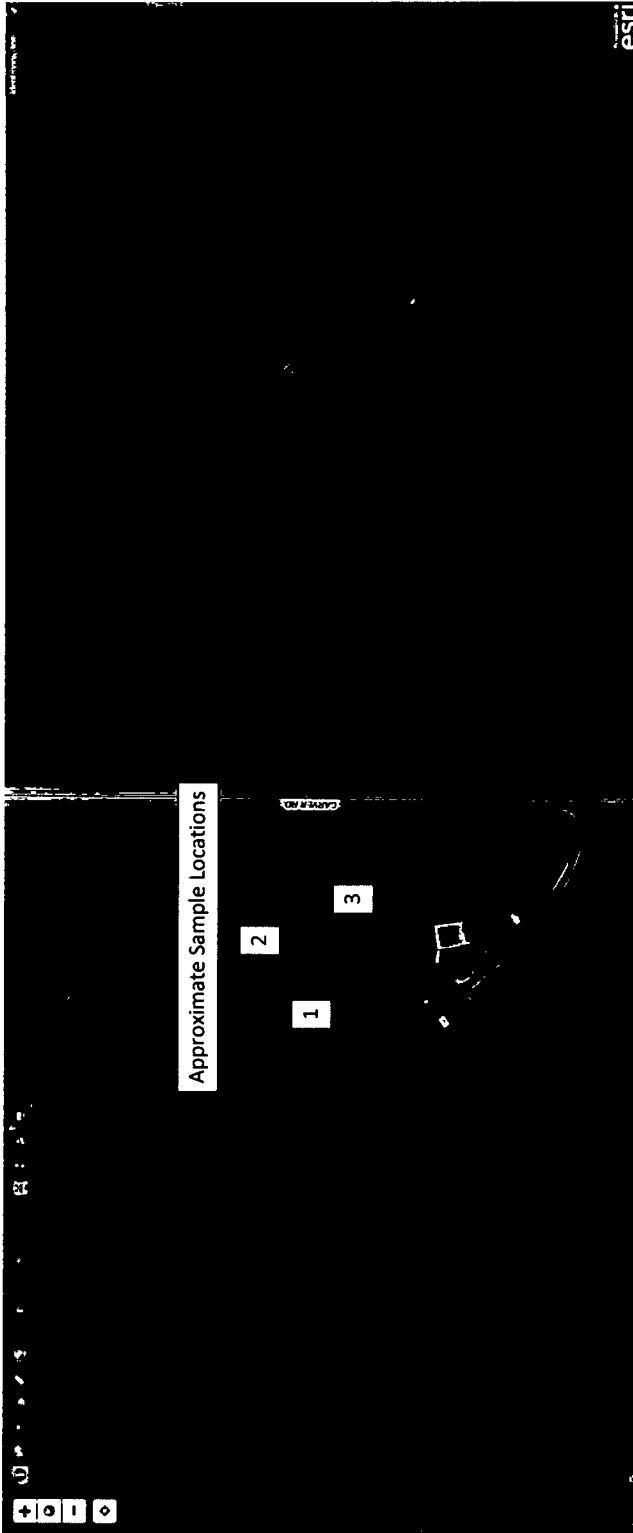
*Sam Bedwell*

SAMUEL G. BEDWELL  
LICENSE NUMBER: 28512

5/5/2026

MY LICENSE RENEWAL DATE IS DECEMBER 31, 2026  
PAGES COVERED BY THIS SEAL: 2

\*Please call 515-681-7585 if there are any questions or comments regarding this report.\*



Approximate Sample Locations

2

1

3

CARRER

Permit # 2026-599548	<b>MADISON COUNTY ENVIRONMENTAL HEALTH</b> 209 E. Madison St., Winterset, IA 50273 Phone: (515)462-2632 - Email: ahornback@madisoncounty.iowa.gov	Permit Fee: Date Paid:
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**PRIVATE SEWAGE DISPOSAL SYSTEM PERMIT**

A permit is required prior to conducting any change that affects the treatment or disposal of the waste, including replacement of the primary or secondary components, or a change in the design of the permitted private sewage disposal system from the design that was originally installed and approved by the administrative authority.

**This non-transferable permit is valid for ONE YEAR.**

Owner Information (Applicant)			Installation Contractor Information		
Name FALKE, LEANNE FAMILY TRUST (DED)			Name Bedwell Builders		
Mailing Address 1907 IRONWOOD TRL			Address 1500 N B Street		
City WINTERSET, IA 50273	State	Zip	City Indianola, IA 50125	State	Zip
Phone Number 5156893700			Phone Number 5156812053		
Email: falkeconstruction@gmail.com			Certification #:		

**Site Information**

Site Address: 2817 CARVER RD WINTERSET	Parcel #: 660140342020000
Legal Description: 8.A E PT NE NW	
S/T/R: 3-74-28	

**Dwelling/Building Information**

<b>Building Type:</b> <input type="checkbox"/> New <input checked="" type="checkbox"/> Existing	<b>Purpose:</b> <input checked="" type="checkbox"/> House <input type="checkbox"/> Accessory Building <input type="checkbox"/> Business	<b>Septic Construction Type:</b> <input checked="" type="checkbox"/> New System <input type="checkbox"/> System Replacement <input type="checkbox"/> Repair - Tank or D-Box <input type="checkbox"/> Repair - Treatment Area	<b>PERCOLATION/SOILS ANALYSIS MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT</b>  Attach Report
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Number of Bedroom: 3	For A Business – What type?
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**Private Sewage Disposal System Design**


<b>Tank</b>	Type:	# of Tanks:	Size:
<b>Tank</b>	Type:	# of Tanks:	Size:

**Secondary Treatment Area**

<input type="checkbox"/> Laterals: Feet Required _____ for _____" Wide Trench _____ Max Trench Depth <input type="checkbox"/> Sand Filter <input type="checkbox"/> At-Grade <input type="checkbox"/> Mound	<input type="checkbox"/> Waterloo Biofilter <input checked="" type="checkbox"/> Enclosed System <input type="checkbox"/> Other: _____
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**Conditions of the Permit**

1. Maintain All Setbacks
2.
3.

<b>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/pump dose/siphon dose must be available. Electrical at the site (no generators) to test the pump must be available. If required, a maintenance agreement must be filled with our office prior to issuance of this permit.</b>		<b>It is unlawful to start construction, reconstruction, or repair of any Septic System prior to issuance of a Septic System permit by the Environmental Health Department.</b>
Applicant Signature: 	Date: 05/14/2026	
Issued by:	Date	

Madison County Environmental Health  
201 W. Court Ave  
Winterset, IA 50273  
515-462-2636

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



***Certificate Number:*** 2026-48

***Date Issued:*** 05/13/2026

***Issued to:*** FALKE, LEANNE FAMILY TRUST (DED)  
1907 IRONWOOD TRL  
WINTERSET IA 50273

***Location & Scope of Work***

***Address:*** 2817 CARVER RD

***Legal Description:*** 8.A E PT NE NW

***Parcel #:*** 660140342020000

***Sec-Twp-Rng:*** 3-74-28

***Parcel Area:*** 8

***POWTS Components Specifications:*** Primary treatment 1250g Indianola precast concrete tank, Secondary treatment Planet care Peat/Coco

***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 & the Madison County Environmental Health Regulations.
3. Permit shall be null & 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 & the system must be approved before it can be put into operation. Notice for inspection must be received 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 and State regulations.

**At Least a 24-hour notice for inspection is required.**

A handwritten signature in black ink, appearing to read "Andrew Hombach".

***Environmental Health Officer  
Madison County Iowa***

Madison County,  
Iowa

Receipt

Payment number 26052017566605EC86A3926052017566

Date paid 05/20/2026 17:57 PM

Payment method Online

Paid by

Ben Bedwell

ben@bedwellbuilders.net

\$200.00 paid on 05/20/2026

Septic Permit

Application ID: 2026-48

Description	Amount
Septic Permit Fee	\$200.00



**Bedwell Builders**

David Falke  
 2817 Carver Rd  
 Winterset, IA 50273

☎ (515) 689-3700  
 ✉ falkeconstruction@gmail.com

JOB	#739
INVOICE DATE	May 09, 2026
PAYMENT TERMS	Upon receipt
DUE DATE	May 15, 2026
<b>AMOUNT DUE</b>	<b>\$0.00</b>

CONTACT US  
 2924 Quaker St  
 Saint Charles, IA 50240

☎ (515) 681-2053  
 ✉ business@bedwellbuilders.net

INVOICE

Services	qty	unit price	amount
Gravity discharge enclosed filter septic system	1.0	\$19,250.00	\$19,250.00
Estimate includes labor, material, permit, concrete tanks, and a rough backfill. Estimate does not include finish grading or seeding. Estimate does not include replacement of existing drain pipe from the house to the existing tank. If the existing septic tank is full at the time of the install, \$650 will be added for pumping.			

Subtotal	\$19,250.00
<b>Job Total</b>	<b>\$19,250.00</b>
<b>Amount Due</b>	<b>\$0.00</b>

Payment History

May 09	Sat 7:19pm	Check	\$10,000.00
May 16	Sat 10:59am	Check	\$9,250.00
			<b>\$19,250.00</b>

Providing quality septic, plumbing, electric, hvac, spray foam, excavation, and general contracting services for over 30 years!

See our Terms & Conditions