BK: 2026 PG: 2168
Recorded: 7/20/2026 at 11:33:46.0 AM
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 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: John E. Nish and Florence J. Nish

Address	Number and Street or RR	City, Town or PO	State	Zip
	657 Pine Avenue	Norwalk	Iowa	50211

TRANSFEREE:

Name: Patrick R. Wright and Janelle R. Wright

Address	Number and Street or RR	City, Town or PO	State	Zip
	3039 Truro Road	Truro	Iowa	50257

Address of Property Transferred:

Number and Street or RR	City, Town or PO	State	Zip
3039 Truro Road	Truro	Iowa	50257

Legal Description of Property: (Attach if necessary)

Parcel "D" located in the SE 1/4 of the NE 1/4 of Section 15, Township 74 North, Range 26 West of the 5th P.M., Madison Co., Iowa, containing 10 acres, as shown in Plat of Survey filed in Book 2003, Page 3638 on June 24, 2003 in Madison Co. Recorder.

1. Wells (check one)

- [ ] No Condition - There are no known wells situated on this property.
- [x] 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)

- [x] 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)

- [x] 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)

- [x] 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)

- [x] 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.
- [x] 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:

Wells- One by house and one by the creek. Neither pumps work. Home is connected to rural water.

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.: 214-674-5625
(Transferor or Agent)

IOWA DNR

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR ADAM GREGG

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 12200 JEB BEDWELL CERT # 13956

Site Information

Parcel Description: **770161528012000**

Address: **3039 truro rd, Truro, IA 50257**

County: **Madison**

Owner Information

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

Business Name:

Owner Name: **John Nish**

Email Address: **farmboy1x@hotmail.com**

Address: **3039 truro rd, Truro, IA 50257**

Phone No: **214-674-5625**

Additional Contact Information

Site related information

No Of Bedrooms: **2**

Facility Type: **Residential**

Last Occupied:

Permit issued by County: **Yes**

All plumbing fixtures enter septic system: **Yes**

Property Information Comments:

Inspection Date: **08/23/2024**

Currently Occupied: **Yes**

System Installation Date: **06/06/2002**

Permit Number:

County contacted for records: **Yes**

Primary Treatment

Tank 1

Tank Name: **Tank 1**

Tank Material: **Concrete**

No. of Compartments: **2**

Date Pumped: **8/29/2024**

Type: **Septic Tank**

Tank Corrosion Type: **None**

Pump Tank Chamber: **No**

Meets Setback to Well: **Yes**

Tank Size (Gal): **1500**

Liquid Level Type: **Normal**

Licensed Pumper Name: **Wiegert**

Well Type: **Private**

Distance To Well (Ft.): **200** | Is Accessible: **Yes** | Lid Intact: **Yes**

Risers Intact: **No** | Effluent Filter Present: **Yes** | Watertight: **Yes**

Tank/Vault Pumped: **Yes** | Inlet Baffle Present: **Yes** | Outlet Baffle Present: **Yes** | Functioning as Designed: **Yes**

Tank Comments: **The tank does not have risers to access the filter**

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: **400** | System Hydraulic Loaded: **Yes**

Gallons Loaded: **250** | Meets Setback to Well: **Yes** | Well Type: **Private**

Distance To Well (Ft.): **200** | 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. The septic tank does not have risers to access the effluent filter.**

IOWA DNR

IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR ADAM GREGG
DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 12200 JEB BEDWELL CERT # 13956

Owner Name:	**John Nish**		
Address:	**3039 truro rd , Truro , IA 50257**		
County:	**Madison**		
Inspection Date:	**08/23/2024**	Submitted Date:	**9/17/2024**

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).

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: **045-02** *Date Issued:* **May 28, 2002**

Issued to: **Paul H. Hutton**
Address: ***3039 Truro Road***
Truro, Iowa 50257 PID # 770161528012600

Legal Description: ***SE NE EX .79A ROAD SECTION 15 T74 R26 OHIO TWP***

POWTS Components Specifications: **1500 gal Lister concrete septic tank Infiltrator 4 @ 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 twelve months 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:

Jean Thompson

Environmental Health Officer Assistant
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 #
045-02	5-28-02	$150 # 1806	5-28-02				

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.

Extra Approved

Please Print All Information.

1. Owner Information (Applicant)

First Name	Last Name
PAUL	HUTTON

Address: 3039 TRURO ROAD

City	State	Zip
TRURO	IOWA	50257

Phone Number (area code) | Fax or E-mail | Cell Phone

2. Contractor Information

First Name	Last Name
SON'S	CONSTRUCTION

Address: 3332 275th STR.

City	State	Zip
ST. CHARLES	IOWA	50240

Phone Number (area code) | Fax or E-mail | Cell Phone

3. System Requirement Information

IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED

	Minimum Tank Size Required
1-3 Bedroom	1000
4 Bedroom	1250
5 Bedroom	1500
6 Bedroom	1750

4. Site and Soil Evaluator (Percolation Test)

PERCOLATION TEST MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT

Date test taken _____ Test taken by _____
Test Results: Hole 1 _____ min/in Hole 2 _____ min/in
Hole 3 _____ min/in Hole 4 _____ min/in
Average _____ min/in Depth of Test Holes _____
Number of Laterals Required _____
Length of Laterals Required _____ ft. ea

5. Type of Submittal

- [X] New
- [ ] Revision
- [ ] Repair, Tank
- [ ] Repair, Treatment Area
- [ ] System Replacement

Previous Permit #:

6. Address Information

Location, Number & Street of project (if unknown, indicate nearest road): ~~Cedar~~ Truro Road

Legal Description: SE NE ex .79A Rd. 15-74-26 Ohio Twp

7. Type of Building (Completed by Owner)

[X] Residential | Number of Bedrooms: | [ ] Commercial/Other Non-Residential | Use:

Other buildings served by this system: None

[ ] Garbage Disposal
[ ] High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: 1

Your contractor or system designer should complete the remaining portion of this application.

8. Primary and/or Mechanical Treatment	Type: Concrete	Manufacturer: Later	Model:	Size (gal): 1500
	Type	Manufacturer:	Model:	Size (gal):
9. Pump/Siphon [ ] Not Applicable	Type	Manufacturer:	Model:	Dosing Frequency:

10. Secondary Treatment Area Type: [ ] Not Applicable

Type of Laterals	Number of Laterals	Length of ea. Lateral	Other	Other	Maximum Trench Depth (inches):
"36" for Filtration	4	100'			36"

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 Recorders Office. Discharge from mechanical systems and sand filters require periodic testing as set forth in IAC Chapter 69 and the results submitted to BOH.

Applicant Signature: Paul Hutton Date: 5-28-02

It is unlawful to start construction, reconstruction, or repair of any POWTS prior to issuance of a POWTS permit by the Environmental Health Officer.

```
PARCEL#       770161528010000   MAPPING#     000001615200004   TAX DISTRICT 770    ADDITION 00015
OWNER INFORMATION               OWNER NUMBER 3029100       ALTERNATE OWNER 0000000
DEED    HUTTON, PAUL                      CONTRACT/                                    HOUSE NUMBER    3039
HOLD                                      MAIL                                         STREET ADDRESS TRURO RD
ADDRESS 3039 TRURO ROAD                   ADDRESS                                               CITY     TRURO
CITY    TRURO              IA 50257       CITY                              00000
LEGAL   SE NE EX .79A RD        SECT 15 TWNSH 074 RANG 26  CLASS A                SPECIAL DISTRICT 0   0   EXEMPT CODE
DESC                            DEED BOOK  138  PAGE  826  SEQUENCE NUMBER 00000  MISC CODES               DRAINAGE      0
                                CONT BOOK       PAGE       PREVIOUS AG VALUE      9900                     NO AG CREDIT
                                PLAT BOOK       PAGE
HOMESTEAD INFORMATION Y/N Y  APPLICATION NUMBER        DATE  11/23/99             HOMESTEAD AMOUNT      0
MILITARY INFORMATION  APPLICATION NUMBER               DATE   0/00/00    0/00/00  MILITARY AMOUNT       0
NAME 1                                    WAR#  00   0/00/00 -  0/00/00  BOOK     PAGE
NAME 2                                    WAR#  00   0/00/00 -  0/00/00  BOOK     PAGE
ACRES- GROSS     3921   EXEMPT     455  DRAINAGE          NET     3466
ASSESSED/ROLLBACK VALUATIONS - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
LAND             10600     10600  BUILDINGS       300        300  BUILDINGS LL       0          0     ** TOTAL      84200      48772
AG DWELLING      73300     37872  MACHINERY         0          0  MINERAL            0          0     ** MILIT          0          0
FRUIT/FOREST         0         0  BRIDGES           0          0                                      ** NET        84200      48772
 * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * *
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MADISON COUNTY ENVIRONMENTAL HEALTH

PERCOLATION TEST REPORT

TEST # _____

Date taken: 5-22-02

By: Jim Vance

Owner: Paul Hutton

Site Address: 3039 Truro Road

Phone No. 641-765-4698

Lot Size: 3Ac Legal Description: The SE.¼ of the NE.¼ of Sec.15-T74N-R26W

Structure: _____ New X Existing # Bedrooms: 4 Installer: _____

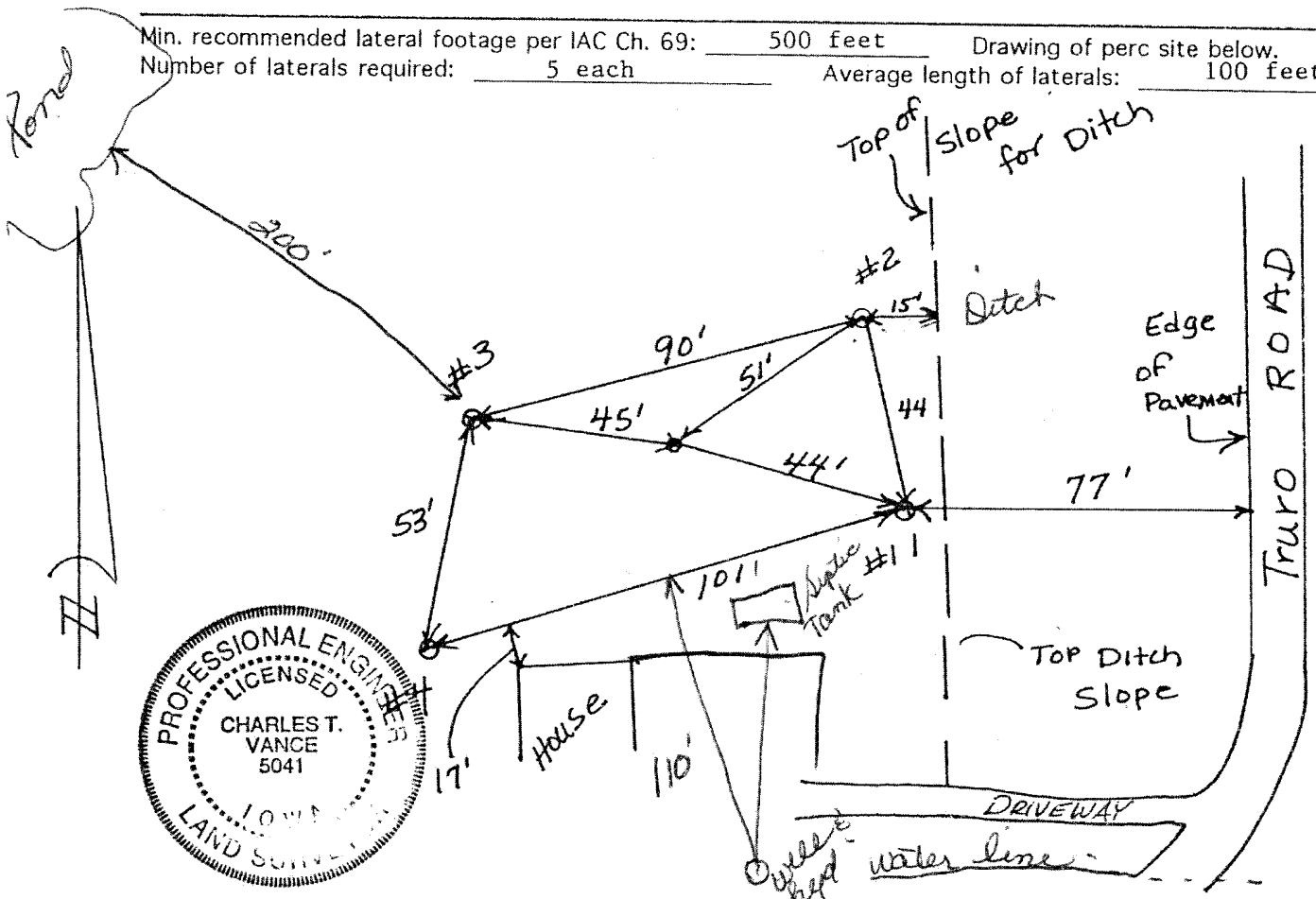
Owner's Current Mailing Address: 3039 Truro Road, Truro, Iowa 50257

Time for 1 inch of water:	1. 21.8 min.	2. 30.0 min.	3. 40.0 min.	4. 20.0 min.
Depth of holes tested:	1. 36"	2. 36"	3. 36"	4. 36"

Results of 6 foot hole: No rock, No water

Min. recommended lateral footage per IAC Ch. 69: 500 feet Drawing of perc site below.

Number of laterals required: 5 each Average length of laterals: 100 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 Vance Date: 23 May 2002 Reg. No. 5041 Exp. Date: 31 Dec. 2003

Permit No 045-02 ***Name: Paul Hutton***
Date of Inspection: 6/6/02 Inspected by: Elton Root
Contractor: Sons Construction
Dwelling under construction or moved in ***Yes*** ☒ ***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 1500 -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.6 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 ☐

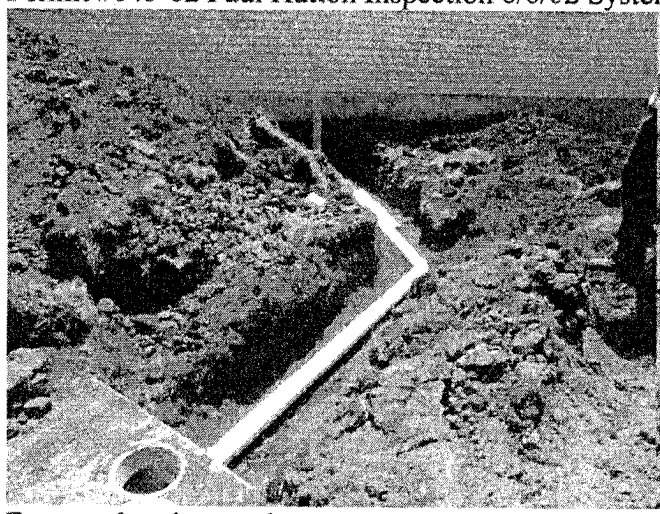
Comments:

Laterals

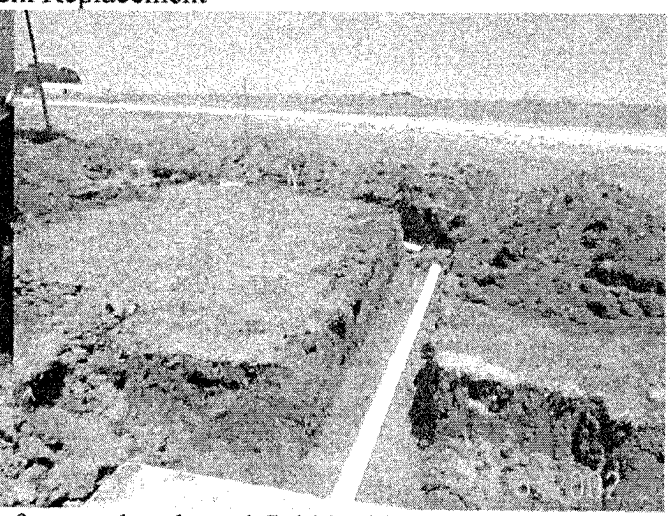
- Distribution lines: 4-inch PVC pipe – 35 SDR.
- Distribution lines screwed to laterals. Yes ☒ No ☐ Will be ☐
- Lateral used. Infil. 36 Reduction? Yes ☒ No ☐
- Lateral depth 36 inches Perc depth 36 inches
- Laterals were level. Yes ☒ No ☐
- Adequate amount of undisturbed soil between laterals. Yes ☒ No ☐
- Distance 9 feet between laterals.

Comments:

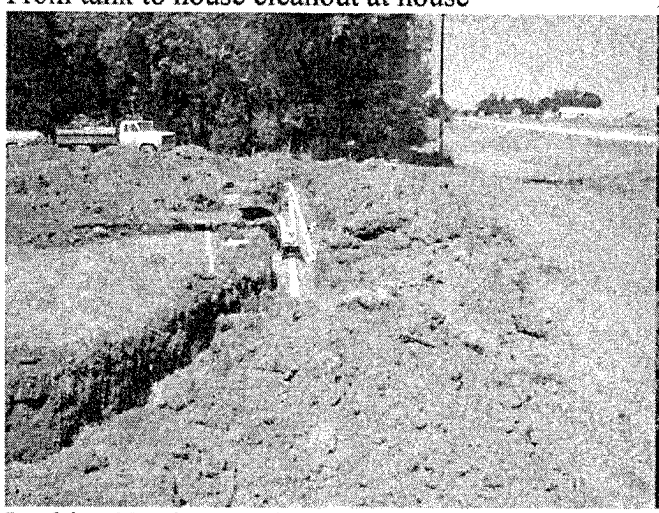
Permit #045-02 Paul Hutton Inspection 6/6/02 System Replacement



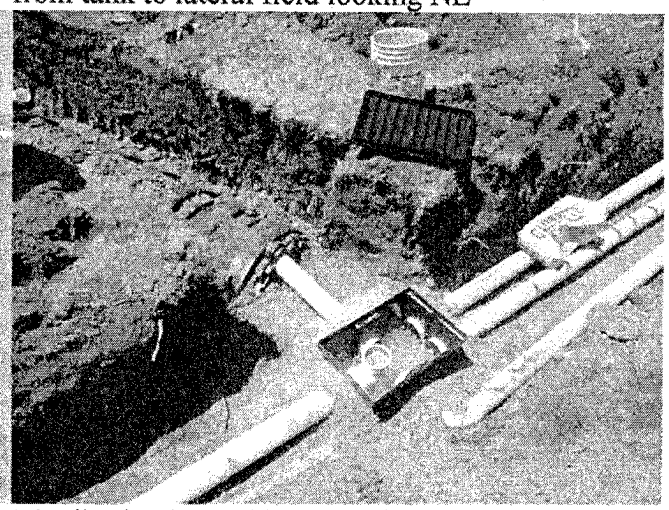
From tank to house cleanout at house



from tank to lateral field looking NE

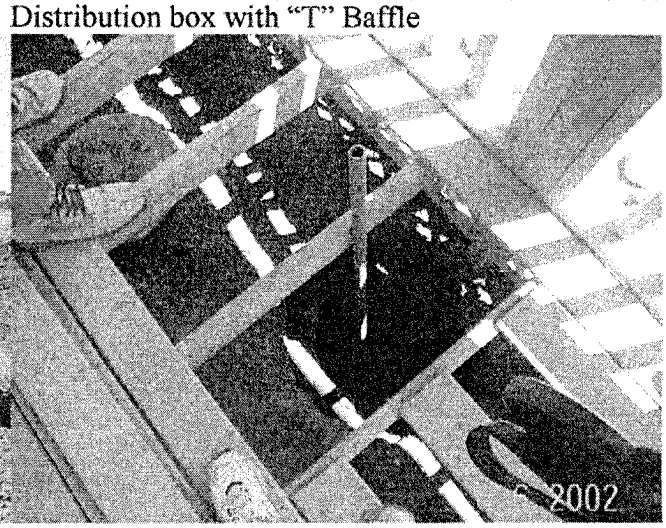


Looking North towards distribution box



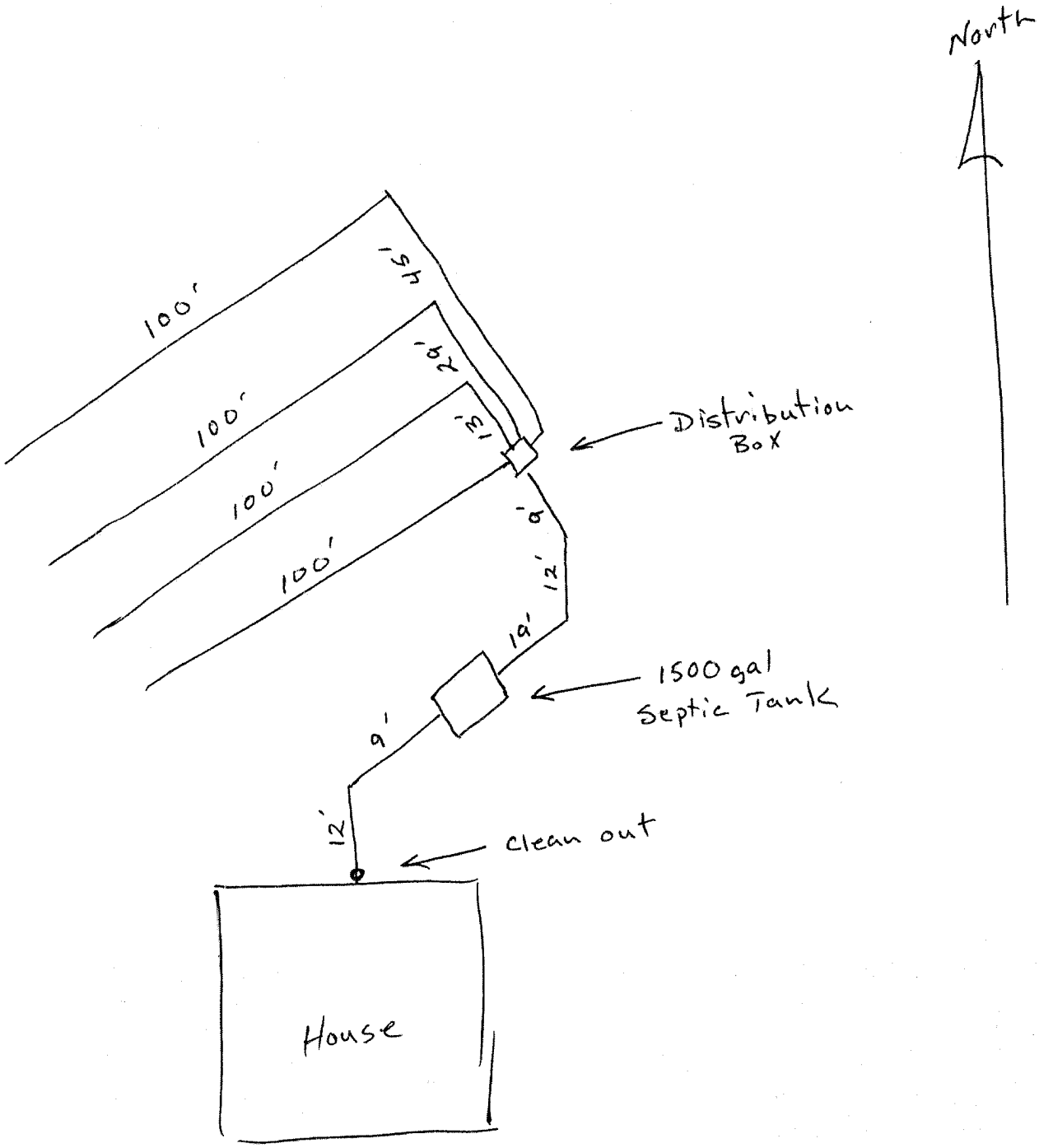
Distribution box with "T" Baffle

Lateral field looking west



Old septic tank under front deck pipe sticking out of Hole in bottom of tank (will be filled)

Permit # 045-02 Paul Hutton Inspection 6/6/02



GREASE TRAP
Recyclable

The Grease Trap Cleaners

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

Customer's Order No. _____ Date 8-29-24

Sold To Ben Bedwell

Address 3039 Truro Rd

CASH	CHARGE	C.O.D	SALESMAN	REC. ON ACCT.
	X			

QUAN.	DESCRIPTION	PRICE	AMOUNT
1	~~Grease Trap~~ Cleaning Septic		500 00
	In Good Working Order At this Time of Pumping		
	Needs to have risers put on it		
	Thank You		

Net 15 Days

TAX	35	00
TOTAL	535	00

SIGNATURE _____