

BK: 2026 PG: 2261  
Recorded: 7/30/2026 at 8:37:08.0 AM  
Pages 20  
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    | JOSHUA R. DAVIS AND MARY F DAVIS |                  |           |
| Address | 2985 142 <sup>ND</sup> CT        | VAN METER        | IA 50261  |
|         | Number and Street or RR          | City, Town or PO | State Zip |

**TRANSFeree:**

|         |                                |                  |           |
|---------|--------------------------------|------------------|-----------|
| Name    | MARK BARGLOF AND BETSY BARGLOF |                  |           |
| Address | 2807 165 <sup>TH</sup> AVENUE  | BURT             | IA 50522  |
|         | Number and Street or RR        | City, Town or PO | State Zip |

Address of Property Transferred:

|                           |                  |       |       |
|---------------------------|------------------|-------|-------|
| 2985 142 <sup>ND</sup> CT | VAN METER        | Iowa  | 50261 |
| Number and Street or RR   | City, Town or PO | State | Zip   |

Legal Description of Property: (Attach if necessary)

**Lot Thirty (30) of PHASE II, TIMBER RIDGE ESTATES, located in the Northeast Quarter (1/4) of Section Twenty-nine (29) in Township seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa, except Parcel "F", located therein, continuing 0.20 acres, more or less, as shown in Plat of Survey filed in Book 2006, Page 5246 on December 19, 2006, in the Office of the Recorder of 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:

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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)

Telephone No.: 515.225.8488

**TIME OF TRANSFER INSPECTION TOT# 22440 DREW HODGES CERT # 14481**

Site Information

Parcel Description: **031012920300000**

Address: **2985 142nd Ct., Van Meter, IA 50261**

County: **Madison**

Owner Information

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

Business Name:

Owner Name: **Mary Davis**

Email Address: **davis.f.mary@gmail.com**

Address: **2985 142nd Ct., Van Meter, IA 50261**

Phone No: **515-669-8188**

Additional Contact Information

Name  
**Mary Davis**

Email Address  
**davis.f.mary@gmail.com**

Affiliate Type  
**Realtor**

Site related information

No Of Bedrooms: **4**

Inspection Date: **07/24/2026**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date: **05/09/2016**

Permit issued by County: **Yes**

Permit Number: **023-16**

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

County contacted for records: **Yes**

Property Information Comments:

Primary Treatment

**Tank 1**

Tank Name: **Tank 1**

Type: **Septic Tank**

Tank Size (Gal): **1500**

Tank Material: **Concrete**

Tank Corrosion Type: **Slight**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **No**

Licensed Pumper Name: **Rogers septic**

|                               |                                     |                                   |
|-------------------------------|-------------------------------------|-----------------------------------|
| Date Pumped: <b>7/24/2026</b> | Meets Setback to Well: <b>N/A</b>   | Well Type:                        |
| Distance To Well (Ft.):       | Is Accessible: <b>Yes</b>           | Lid Intact: <b>Yes</b>            |
| Risers Intact: <b>Yes</b>     | Effluent Filter Present: <b>Yes</b> | Watertight: <b>Yes</b>            |
| Tank/Vault Pumped: <b>Yes</b> | Inlet Baffle Present: <b>Yes</b>    | Outlet Baffle Present: <b>Yes</b> |
| Tank Comments:                | Functioning as Designed: <b>Yes</b> |                                   |

General Primary Treatment Comments:

#### Distribution-Type

##### Distribution Box 1

|                                  |                                     |                                    |
|----------------------------------|-------------------------------------|------------------------------------|
| Label: <b>Distribution Box 1</b> | Material Type: <b>Plastic</b>       | Accessible: <b>Yes</b>             |
| Box Opened: <b>Yes</b>           | Baffle Present: <b>Yes</b>          | Speed Levelers Present: <b>Yes</b> |
| Watertight: <b>Yes</b>           | Functioning As Designed: <b>Yes</b> |                                    |

General Distribution System Comments :

#### Secondary Treatment

##### Sand Filter1

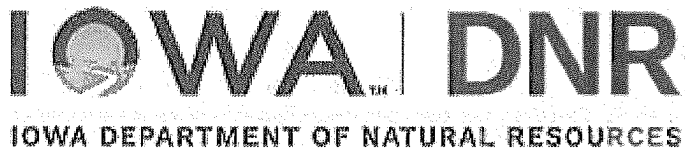
|                                              |                                            |                                        |
|----------------------------------------------|--------------------------------------------|----------------------------------------|
| Filter Type: <b>Subsurface</b>               | Distribution Type: <b>Distribution Box</b> | Material Type: <b>EPS</b>              |
| Absorption Area: <b>975</b>                  | System Hydraulic Loaded: <b>Yes</b>        | Gallons Loaded: <b>200</b>             |
| Discharge At Time of Inspection: <b>No</b>   | CBOD5 Results:                             | TSS Results:                           |
| Disinfection Present: <b>No</b>              | Disinfection Type:                         | Tertiary Treatment Present: <b>Yes</b> |
| Tertiary Treatment Type: <b>Soil</b>         | Meets Setback to Well: <b>N/A</b>          | Well Type:                             |
| <b>Absorption Field</b>                      |                                            |                                        |
| Distance To Well (Ft.):                      | Sand Filter Probed: <b>Yes</b>             | Vent(s) Located: <b>Yes</b>            |
| Saturation or Ponding Present: <b>No</b>     | Grass Cover Over System: <b>Yes</b>        | Outlet Found: <b>No</b>                |
| Sample Taken: <b>No</b>                      | GP4 Permitted:                             | GP4 Required:                          |
| System Located on Owner Property: <b>Yes</b> | Easement Present: <b>N/A</b>               | Functioning as Designed: <b>Yes</b>    |
| Comments:                                    |                                            |                                        |

General Secondary Treatment Comments:

#### Narrative Report

TOT Inspection Report Overall Narrative Comments: **All wastewater goes to septic. 1500 gallon watertight concrete septic tank with slight deterioration. Unable to probe through outlet wall. Accessible by lids and risers to ground surface. Two compartment tank. Inlet and outlet baffle present. Effluent filter present. Plastic D-box is watertight and in good working condition. Inlet baffle present. Speed levelers present. Hydraulic load tested (via house) 200 gallons to 15ft W by 65 ft L equaling 975 sq ft sand-filter. Sand-filter took all water and probed dry/clean. Sand-filter discharge goes to 200 ft of**

rockless (SB2 8") laterals probed dry/clean.



GOVERNOR KIM REYNOLDS  
LT. GOVERNOR CHRIS COURNOYER  
DIRECTOR KAYLA LYON

**TIME OF TRANSFER INSPECTION TOT# 22440 DREW HODGES CERT # 14481**

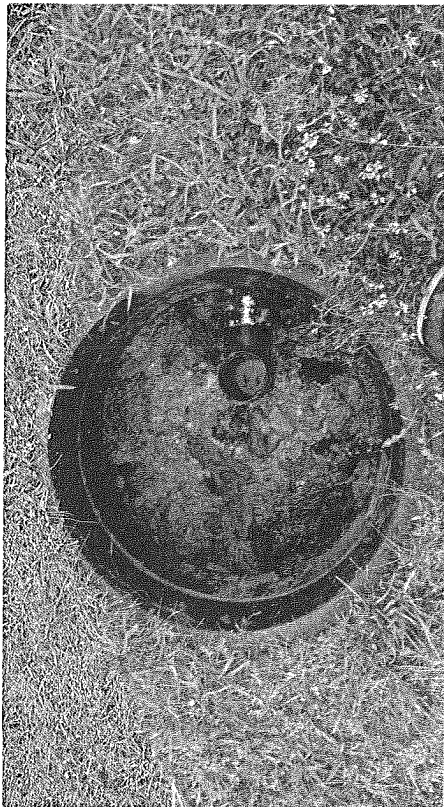
Owner Name: **Mary Davis**

Address: **2985 142nd Ct. , Van Meter , IA 50261**

County: **Madison**

Inspection Date: **07/24/2026**

Submitted Date: **7/24/2026**





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:** 023-16

**Date Issued:** 05-09-2016

**Issued to:** Josh Davis  
**Address:** 33048 Walnut Place  
Waukeee, IA 50263

*2985 142nd Ct.*

**Legal Description:** Lot 30 Timber Ridge Estates Phase 2 3.22 Acres  
PID# 131012920300000 Sec 29 T77N R26W Lee TWP

**POWTS Components Specifications** 1500 gal. septic tank & 960 sq. ft. Sand Filter-Gravity  
*Follow with 200 ft of laterals*

**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 & construction shall be in accordance with county & state codes.

*Lara Burk*

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

Application to Construct  
Private Sewage Disposal System (PSDS)

| Office Use Only |               |          |         |             | Temp E911:       |  |        |
|-----------------|---------------|----------|---------|-------------|------------------|--|--------|
| Tracking No.    | Date Received | Fee Paid | Check # | Date Issued | Section/Township |  |        |
| 023-16          | 5/9/16        | 200.00   | 4357    | 5/9/16      | 142nd Ct         |  | 29-See |

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                                                    |            |
|-------------------------------------------------|------------|-------------------------------------------------------------------------------------------|------------|
| First Name                                      | Last Name  | First Name                                                                                | Last Name  |
| Josh and Mary                                   | DAVES      | Jason                                                                                     | Dopp       |
| Address                                         |            | Address                                                                                   |            |
| 33048 Walnut Place                              |            |                                                                                           |            |
| City                                            | State      | City                                                                                      | State      |
| Waukegan                                        | IA         |                                                                                           | IA         |
| Zip                                             |            | Zip                                                                                       |            |
| 50263                                           |            |                                                                                           |            |
| Phone Number (area code)                        | Cell Phone | Phone Number (area code)                                                                  | Cell Phone |
| 515-314-5200                                    |            | 641-891-6064                                                                              | -Cell      |
| 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                      |            | Date test taken 4/19 Test taken by Jim Carroll                                            |            |
| 1-3 Bedroom                                     | 1250       | Passed: _____ Failed: _____                                                               |            |
| 4 Bedroom                                       | 1500       | Percolation Rate: _____                                                                   |            |
| 5 Bedroom                                       | 1750       | Soils Loading Rate: _____                                                                 |            |
| 6 Bedroom                                       | 2000       |                                                                                           |            |

| 5. Type of Submittal                                                                                                                                                                                                                | 6. Address Information                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| <input checked="" type="checkbox"/> New House<br><input type="checkbox"/> Existing House<br><input type="checkbox"/> Repair, Tank<br><input type="checkbox"/> Repair, Treatment Area<br><input type="checkbox"/> System Replacement | 911 Address or nearest road: 142nd Ct                   |
| Previous Permit #:                                                                                                                                                                                                                  | Legal Description: Timber Ridge Estates Phase 2 Lot #30 |
|                                                                                                                                                                                                                                     | 29-77-26                                                |

| 7. Type of Building (Completed by Owner)                                    |                       |                                                       |                       |
|-----------------------------------------------------------------------------|-----------------------|-------------------------------------------------------|-----------------------|
| Building Square ft.: 2293                                                   | Number of Bedrooms: 4 | Number of Bathrooms: 3                                | 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                                                                                      |                  |                 |                      |                       |
|-----------------------------------------------------------------------------------------------|------------------|-----------------|----------------------|-----------------------|
| Your contractor or system designer should complete the remaining portion of this application. |                  |                 |                      |                       |
| Septic Tank                                                                                   | Type: Concrete   | Size: 1500      | Manufacturer: Pella  |                       |
| Pump Tank                                                                                     | Type:            | Size:           | Manufacturer:        |                       |
| Additional Tank                                                                               | Type:            | Size:           | Manufacturer:        |                       |
| 9. Secondary Treatment Area                                                                   |                  |                 |                      |                       |
| Laterals                                                                                      | Type: SB 2       | Length of each: | Total number: 200 Ft | Maximum trench Depth: |
| Sand Filter                                                                                   | Square ft.: 960' | Length: 64'     | Width: 15'           | Gravity               |
| 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>Matthew C. Engst</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date: 5/10/16 |                                                                                                                                                     |

ONSITE WASTEWATER SITE EVALUATION FOR SEPTIC SYSTEM Pages with report 4 REPORT # 3730RR

OWNER NAME: Davis PROPERTY ADDRESS: Lot 30 Timber Ridge

OWNER ADDRESS: \_\_\_\_\_

PHONE # \_\_\_\_\_ LOT SIZE: \_\_\_\_\_ acres

NO. BEDROOMS: 4 AVERAGE DAILY FLOW 300 PEAK DAY DESIGN FLOW 600 gallons STRUCTURE X NEW    EXISTING

BUILDER: Iron Crest Homes PLUMBER: \_\_\_\_\_

THE TREATMENT SITE SHALL BE PROTECTED FROM ANY AND ALL TRAFFIC, AND ANY SOIL DISTURBANCES. DISTURBING THE TREATMENT SITE SHALL VOID THIS RECOMMENDATION.

THE USE OF THIS DESIGN TO OBTAIN THE ONSITE WASTEWATER COUNTY CONSTRUCTION PERMIT AND THE CONSTRUCTION OF THE ONSITE SYSTEM IS AN ACCEPTANCE OF THE CONDITIONS ON PAGE 2 OF THIS REPORT.

The owner and contractor are responsible for verifying that the system layout is within the property boundaries. James Carroll has not verified the property and easement boundaries.

Site and Soil are not suitable for laterals or mound system. I recommend a sand filter followed by 200 feet of gravelless pipe (8" or 10") or 8 inch sock wrapped perforated tile line

The tile line shall be one continuous line shaken down the hill side as shown on the attached drawing.

No wastewater will be surfacing when the septic tank and sand filter system are maintained and functioning properly. The soil around the tile line may be wet.

AN EFFLUENT FILTER IS REQUIRED FOR ALL SYSTEMS.



|                                        |       |       |       |
|----------------------------------------|-------|-------|-------|
| SOIL LOADING RATE 0                    | _____ | _____ | _____ |
| WATER TABLE/CONFINING AT               | _____ | _____ | _____ |
| MAXIMUM DEPTH OF TRENCH 0              | _____ | _____ | _____ |
| INCHES                                 | _____ | _____ | _____ |
| BASED ON SERVICE AREA OF TRENCH BOTTOM | _____ | _____ | _____ |
| 2-FOOT WIDE TRENCH 0                   | _____ | _____ | _____ |
| 4-FOOT WIDE TRENCH 0                   | _____ | _____ | _____ |
| 16-INCH WIDE CHAMBER 0                 | _____ | _____ | _____ |
| FEET                                   | _____ | _____ | _____ |

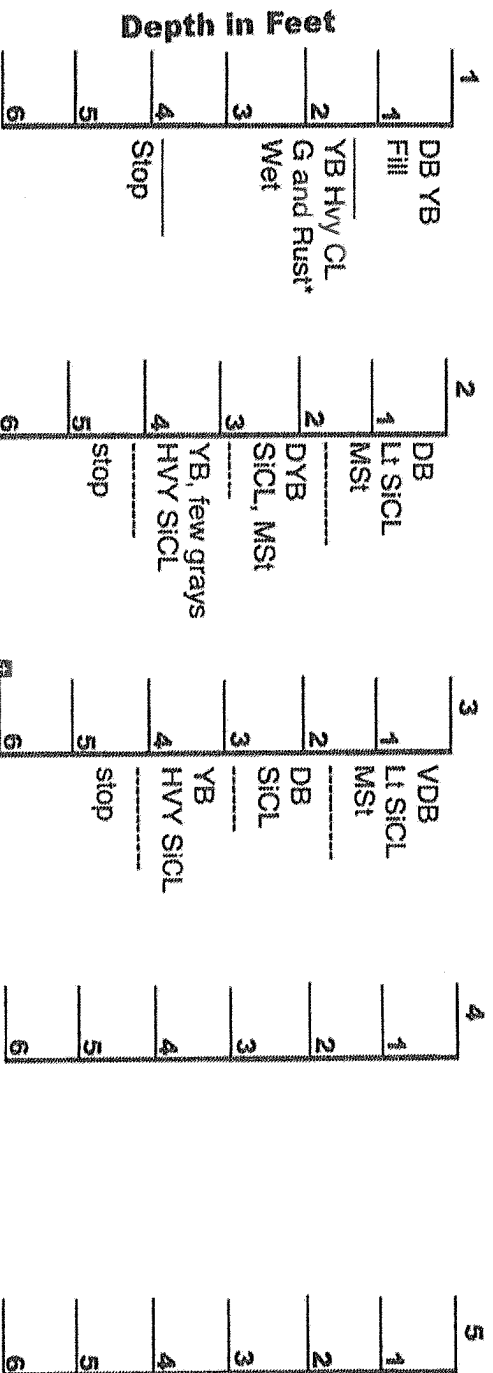
I HEREBY CERTIFY THAT THIS ENGINEERING DOCUMENT WAS PREPARED BY ME OR UNDER MY DIRECT PERSONAL SUPERVISION AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF IOWA

DATE 4/19/15 REG. NO. 11328 MY LICENSE RENEWAL DATE IS DECEMBER 31, 2017.

JAMES A. CARROLL, P.E. PAGES WITH THIS REPORT 4  
The analyses and recommendations in this report are based in part upon the data obtained from the soil tests performed at the indicated locations, the SCS County Soil Survey book, onsite inspection and the soil texture class was determined by the "Feel Method". This report does not reflect any variations, which may occur between borings or across the site. The nature and extent of such variations may not become evident until construction. If variations then appear evident, it will be necessary to reevaluate the recommendations of this report.

In the event that any changes in the design, nature, or location of the project as outlined in this report occur, the data and recommendations contained in this report shall not be considered valid unless the changes are reviewed and verified in writing by James A. Carroll, P.E.

# Soil Probe Number Confining Layer Location (\*)



Textures S-Sand, St-Sandy Loam, L-Loam, Sil-Silty Loam, Si-Silt, SCL-Sandy Clay Loam, SC-Sandy Clay, CL-Clay Loam, SiCL-Silty Clay Loam, SiC-Silty Clay, C-Clay, FS-Fine Sand.  
 Color DYB-Dark Yellow Brown, YB-Yellow Brown, Y-Yellow, B-Brown, VDB-Very Dark Brown, GB-Gray Brown, G-Gray, LG-Light Gray, DG-Dark Gray, PB-Pale Brown, BY-Brownish Yellow, BK-Black, Wh-White, RB-Reddish Brown, R-Red.  
 Other MSt-Moderate Structure, WSt-Weak Structure, Mast-Massive Structure, Ls-Loose, Hvy-Heavy, Lt-Light.  
 The use of this design to obtain the onsite wastewater county construction permit and the construction of the system is an acceptance of the following conditions:

The septic system Engineer, James Carroll, has evaluated the site and located what appears to be a suitable location for an onsite septic system. However easements, floodplains, wetlands, wells, property lines, underground utilities were not marked, located or identified to the Engineer. The drawing may contain any or all of these items however they are not accurately shown. It is the responsibility of the Property Owner, Home Builder, and Septic Contractor to locate any and all of these items. The contractor is solely responsible for locating all underground utilities shown or not shown, and for the safety and protection of all such underground utilities and repairing any damage. In the event that any item is located in the proposed septic area the Engineer will be called to re-evaluate the site.

The Engineer will not be inspecting or overseeing any of the work performed by the Contractor. All work performed by the Contractor shall comply with IAC 567 Chapter 69 and County Ordinances unless specifically show/detailed in this report and design.

Engineer will not supervise, direct, control, or have authority over or be responsible for Contractor's means, methods, techniques, sequences, or procedures of construction, or the safety precautions and programs incident thereto, or for any failure of contractor to comply with State and County Laws and Regulations applicable to the performance of the work. Engineer will not be responsible for Contractor's failure to perform the work in accordance with State and County requirements and the attached design. Engineer will not be responsible for the acts or omissions of Contractor, any Subcontractor, any Supplier, or of any other individual or entities performing any of the work, or the failure of any State or County Regulator in accepting the work Completed.

The Property Owner, Home Builder, and Septic Contractor agree that by using this report/design for the onsite system they shall indemnify and hold harmless the Engineer from and against all losses and all claims, demands, payments, suits, actions, recoveries, and judgment of every nature, and description brought or recovered against them by reasons of any act or omission of the said Property Owner, Home Builder, and Septic Contractor, its agents, or employees, in the execution of the work.

Lot 30 Timber Ridge



lay tile or gravelless pipe Level East-west.  
May slope pipe down hill to next Level  
run.

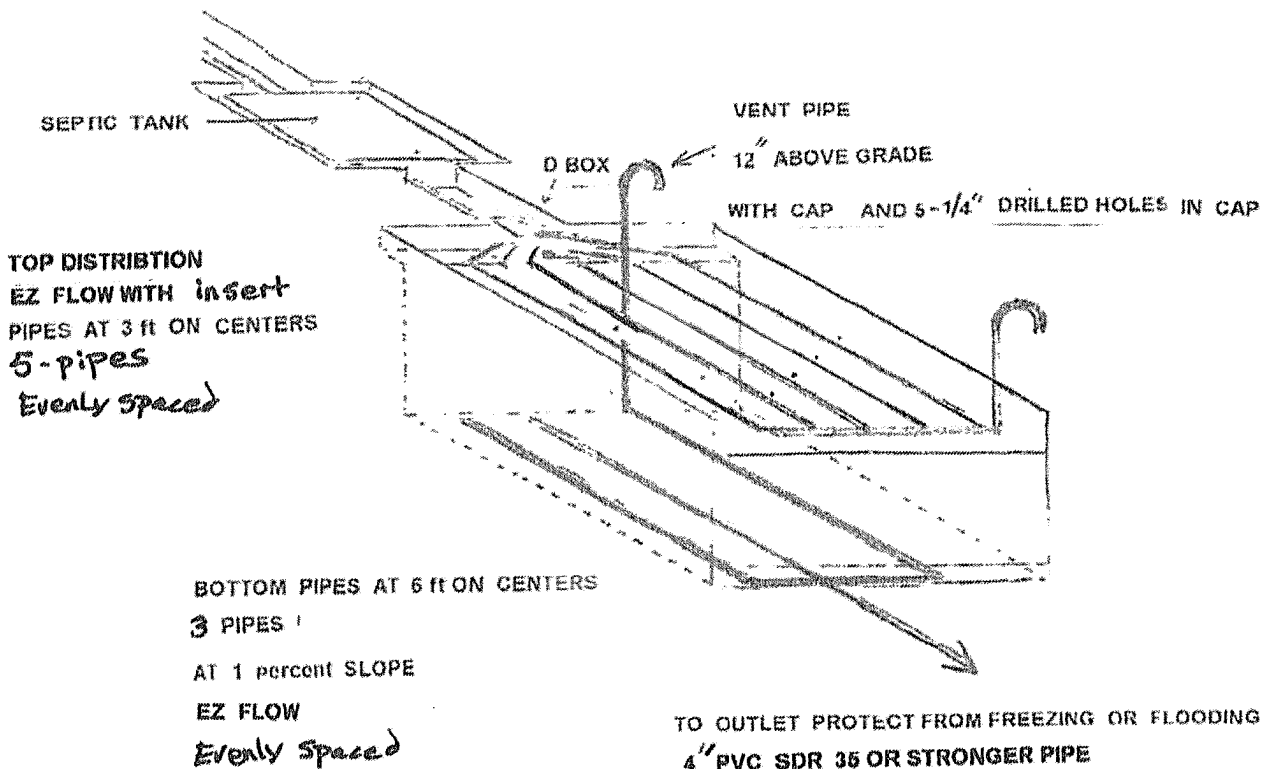
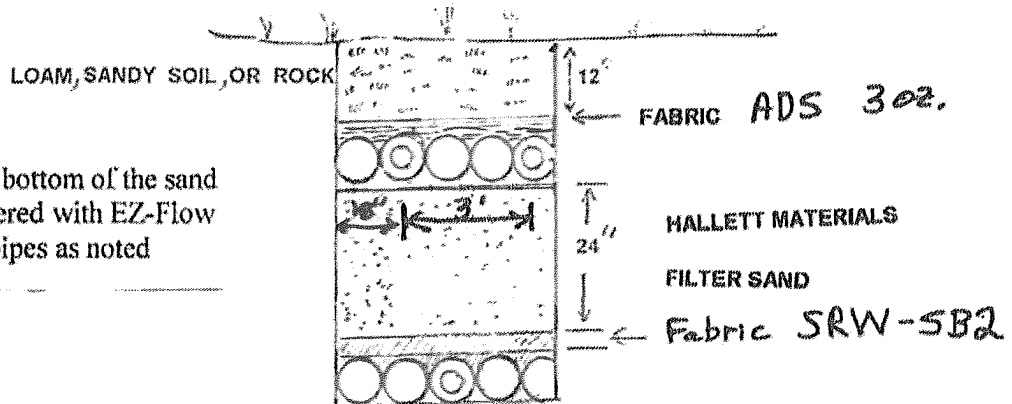
# SAND FILTER

240 SF PER BEDROOM

4-Bedroom 960 SF

15' x 65'

The top and bottom of the sand shall be covered with EZ-Flow with insert pipes as noted



Telephone or Fax Number: 712-563-2030

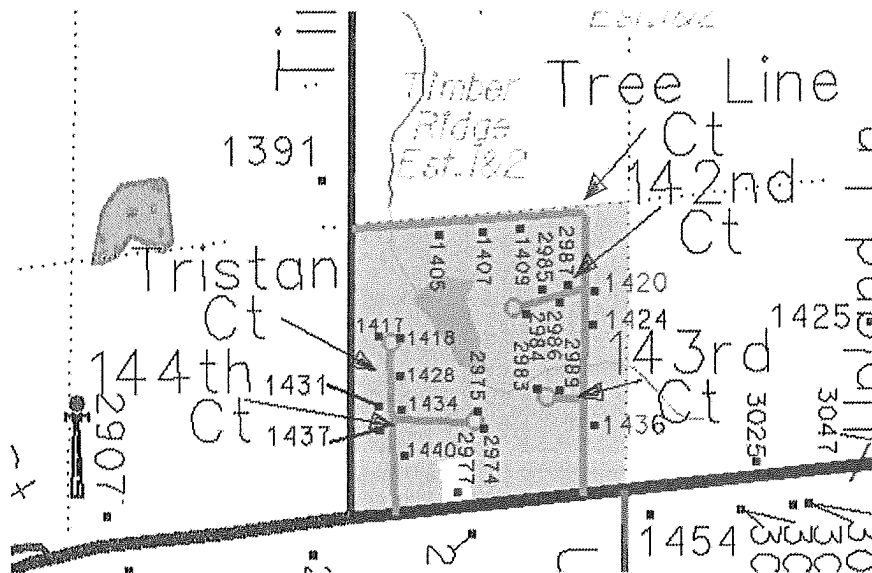
Email [lynhansen@iowatelecom.net](mailto:lynhansen@iowatelecom.net)

May 20, 2016

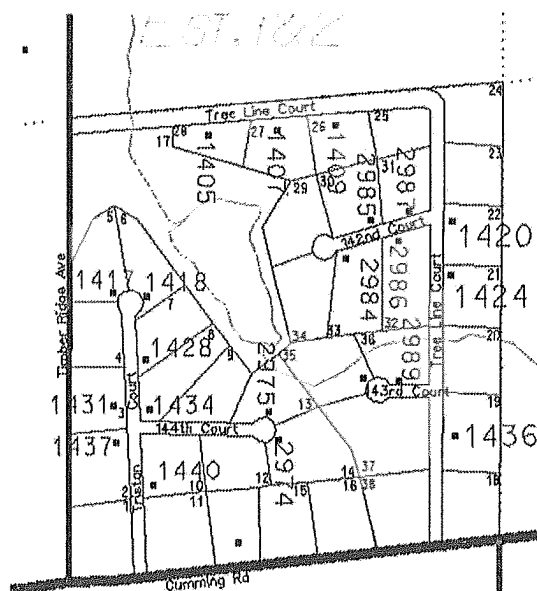
Ref: Madison County: Address Issued – 2985 142<sup>nd</sup> Ct

| Madison County Map Entries |        |          |          |      |           |                     |               |           |          |         |          |     |                                                                       |
|----------------------------|--------|----------|----------|------|-----------|---------------------|---------------|-----------|----------|---------|----------|-----|-----------------------------------------------------------------------|
| MAP INSERT                 | MAPPED | Verified | Location | #    | Date      | Name                | Address       | Community | Township | Section | Zip Code | ESN | MEMO                                                                  |
| 1,2                        | x      |          | County   | 2119 | 5/20/2016 | Mary & Joshua Davis | 2985 142nd Ct | Van Meter | LEE      | 29      | 50261    | 507 | GPS provided 41,445480 -93.869590 Timber Ridge Estates Phase 2 Lot 30 |

Insert 1: 2985 142<sup>nd</sup> Ct



Insert 2:



Permit No 023-16 Name: Davis 911 Sign Locate ☐

Date of Inspection: 8/18/16 Inspected by: Elton Root

Contractor: Jason Dop

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/Pump Tank Size & Manufacturer Pella 1500  | 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. Poly Lock 4" Gray                                                |
| • Tank depth 6 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:

**Secondary Treatment**

- Gravity Feed Sand Filter
- 15 ft. x 65 ft. Gravity Feet
- Non Discharging followed by 200 ft. of SB2 8" Laterals

Comments:

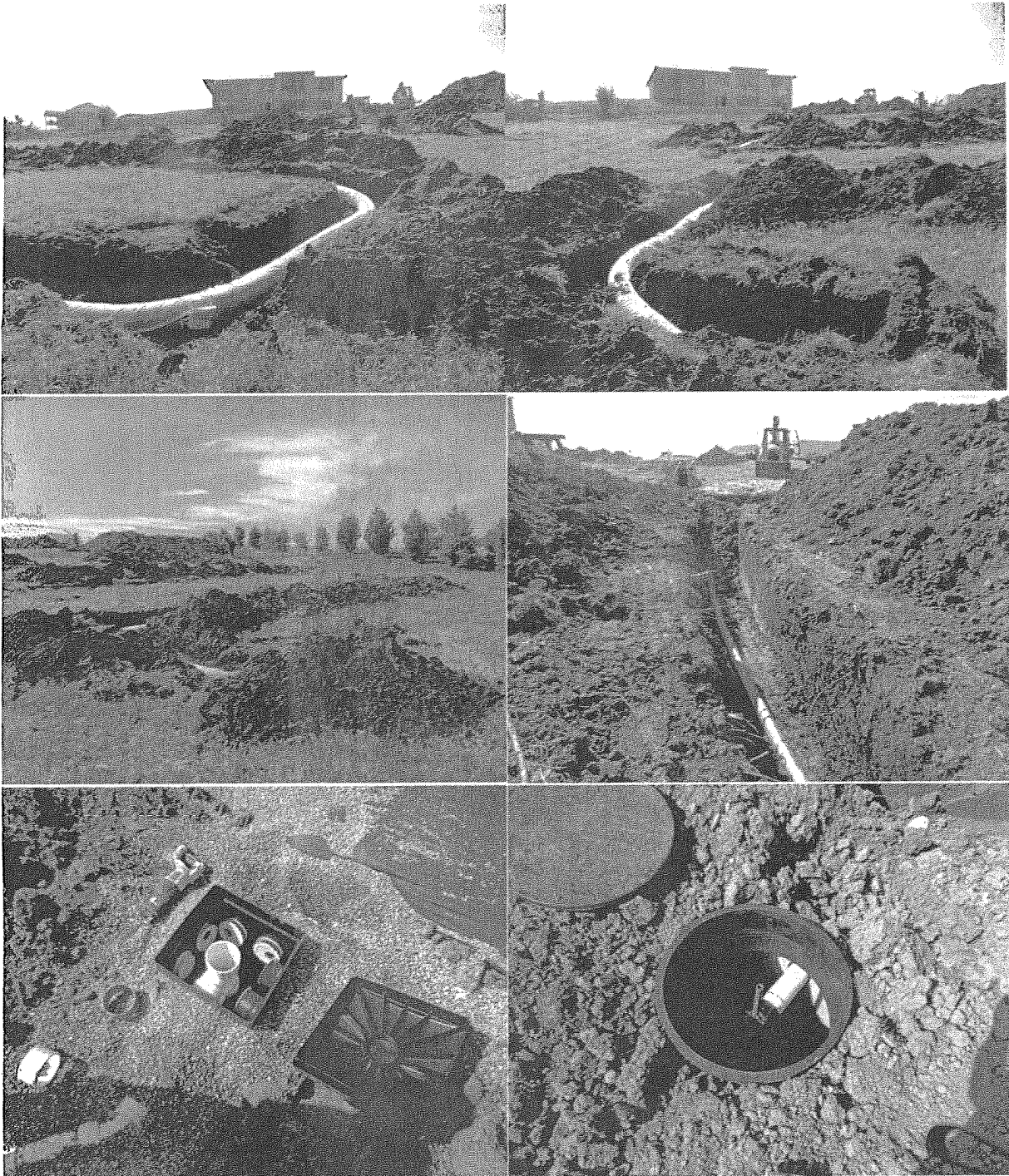
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2985 142<sup>nd</sup> Court



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2985 142<sup>nd</sup> Court



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