

BK: 2026 PG: 301  
Recorded: 1/29/2026 at 11:36:24.0 AM  
Pages 18  
County Recording Fee:  
Iowa E-Filing Fee: \$0.00  
Combined Fee:  
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	Ian Matthew Sparks		
Address	2463 328th Lane	Peru	IA
	Number and Street or RR	City, Town or PO	State
			Zip

**TRANSFeree:**

Name	Shelly A. Hughes		
Address	2463 328th Lane	Peru	IA
	Number and Street or RR	City, Town or PO	State
			Zip

Address of Property Transferred:

2463 328th Lane	Peru	Iowa	50222
Number and Street or RR	City, Town or PO	State	Zip

**Legal Description of Property: (Attach if necessary)**

Parcel "H" located in the West Half (½) of the Southeast Quarter (1/4) of Section Twenty-eight (28), Township Seventy-four (74) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa, containing 10.00 acres, more or less, as shown in Plat of Survey filed in Book 2018, Page 1885 on June 15, 018, 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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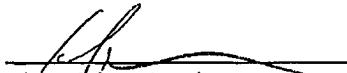
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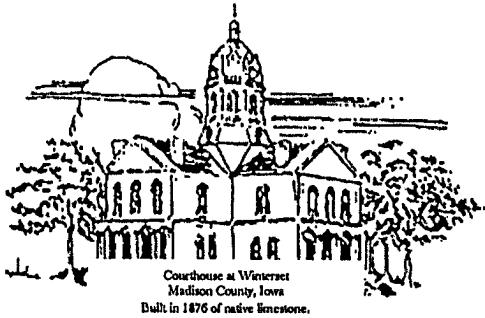
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I HEREBY DECLARE THAT I HAVE REVIEWED THE INSTRUCTIONS FOR THIS FORM AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature:

  
(Transferor or Agent)

Telephone No.: (515) 339-2462



## Madison County Office of Zoning and Environmental Health

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Ryan Hobart, Zoning Administrator  
Andrew Hornback, Environmental Health Officer  
Phone: 515-462-2636, Fax: 515-462-5002

January 22<sup>th</sup>, 2025

Ian Sparks  
2463 328<sup>TH</sup> LN  
Peru, IA 50222

Dear Mr. Sparks,

According to the Time of Transfer inspection TOT# 19204 the private onsite wastewater treatment system serving 2463 328<sup>th</sup> LN Peru IA, failed to meet the requirements of Iowa Administrative Code 567 chapter 69 and Madison County General Environmental Health Regulations. However, You have completed the necessary remediation, and the systems serving this property are now in compliance with the current codes.

Sincerely,

Andrew Hornback, Environmental Health Officer  
Madison County Environmental Health & Zoning

**TIME OF TRANSFER INSPECTION TOT# 19204 JEB BEDWELL CERT # 13956**

Site Information

Parcel Description: **741152800999910**

Address: **2463 328th Ln, Peru, IA 50222**

County: **Madison**

Owner Information

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

Business Name:

Owner Name: **Ian Sparks**

Email Address:

Address: **2463 328th Ln, Peru, IA 50222**

Phone No: **515-339-2462**

Site related information

No Of Bedrooms: **2**

Inspection Date: **01/06/2026**

Facility Type: **Residential**

Currently Occupied: **Yes**

Last Occupied:

System Installation Date: **06/22/2004**

Permit issued by County: **Yes**

Permit Number: **023-04**

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): **1250**

Tank Material: **Concrete**

Tank Corrosion Type: **Slight**

Liquid Level Type: **Normal**

No. of Compartments: **2**

Pump Tank Chamber: **No**

Licensed Pumper Name: **Wiegert**

Date Pumped: **1/6/2026**

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: **No**

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

Tank Comments: The risers were cracked and broken at the top on both sides. The risers were added later and they used a hammer drill to make the wholes which exposed some rebar on the outlet side.

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: **No**

Functioning As Designed: **No**

General Distribution System Comments : The distribution box was cracked in two places, one in the lid and one in the bottom corner where my shovel is placed in the picture. I felt it with my hand to confirm it was cracked.

Secondary Treatment

**Lateral Field1**

Distribution Type: **Distribution Box**

Material Type: **Leaching Chamber**

Trench Width: **24**

Lines: **5**

Total Length of Absorption Line: **500**

System Hydraulic Loaded: **Yes**

Gallons Loaded: **250**

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

Well Type:

Distance To Well (Ft):

Lateral Lines Probed: **Yes**

Saturation or Ponding Present: **No**

Grass Cover Present: **Yes**

Lateral Lines Equal Length: **Yes**

System Located on Owner Property: **Yes**

Easement Present: **N/A**

Functioning as Designed: **No**

Comments: **1 out of the 5 laterals failed the hydraulic test**

General Secondary Treatment Comments:

Narrative Report

TOT Inspection Report Overall Narrative Comments: The septic tank had a little exposed rebar on the outlet side but was otherwise in good condition, the top half of both risers were cracked. The distribution box had a crack in the lid and at the bottom. One lateral failed out of five.



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS  
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

**TIME OF TRANSFER INSPECTION TOT# 19204 JEB BEDWELL CERT # 13956**

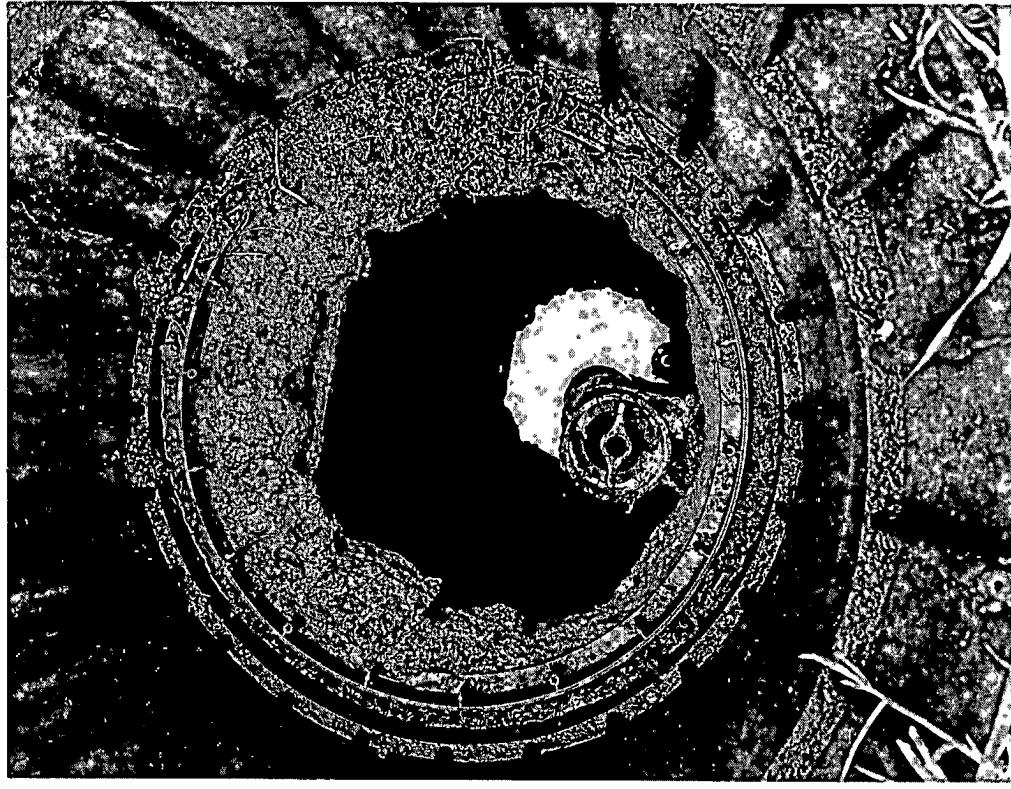
Owner Name: **Ian Sparks**

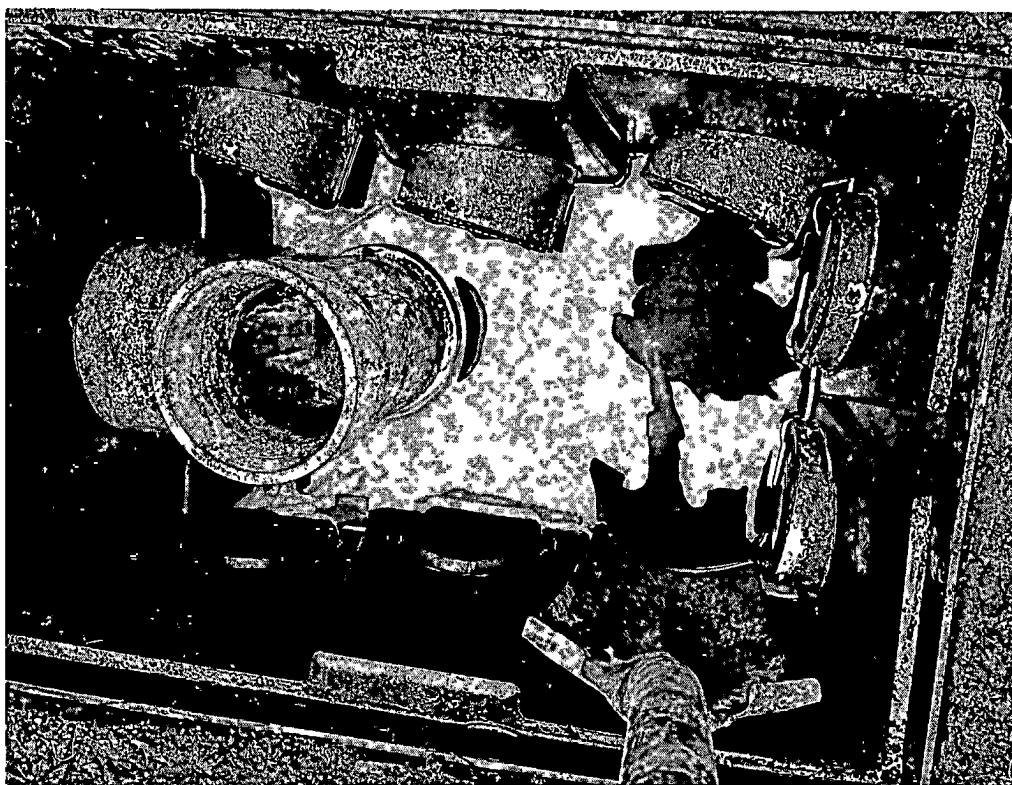
Address: **2463 328th Ln , Peru , IA 50222**

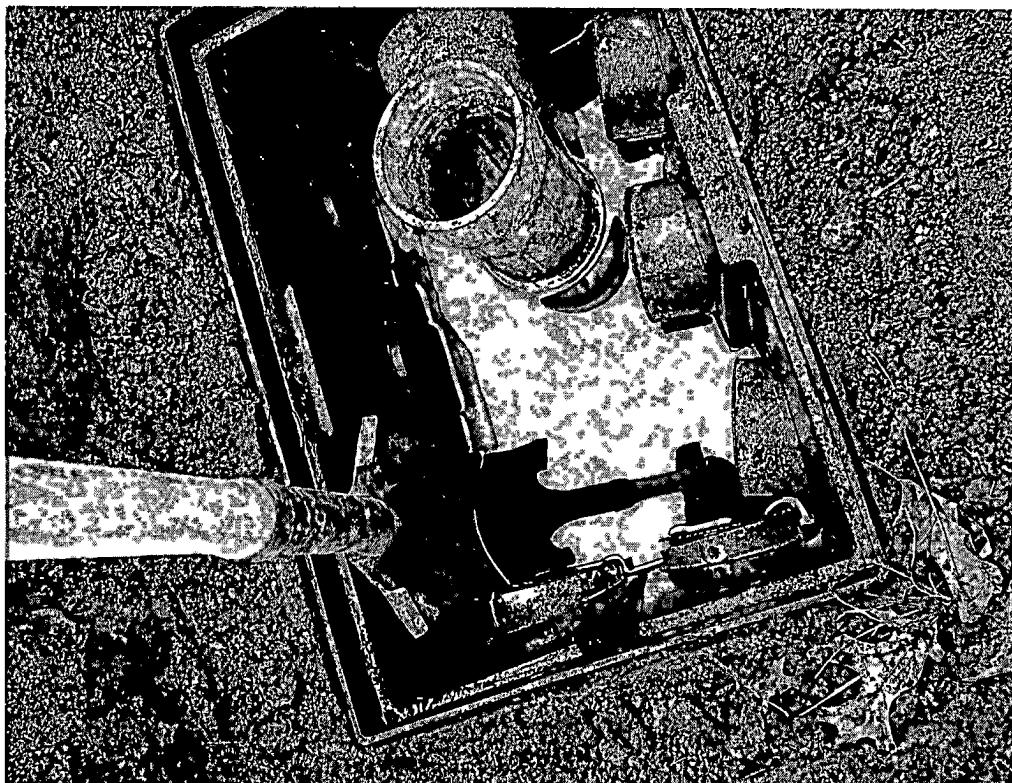
County: **Madison**

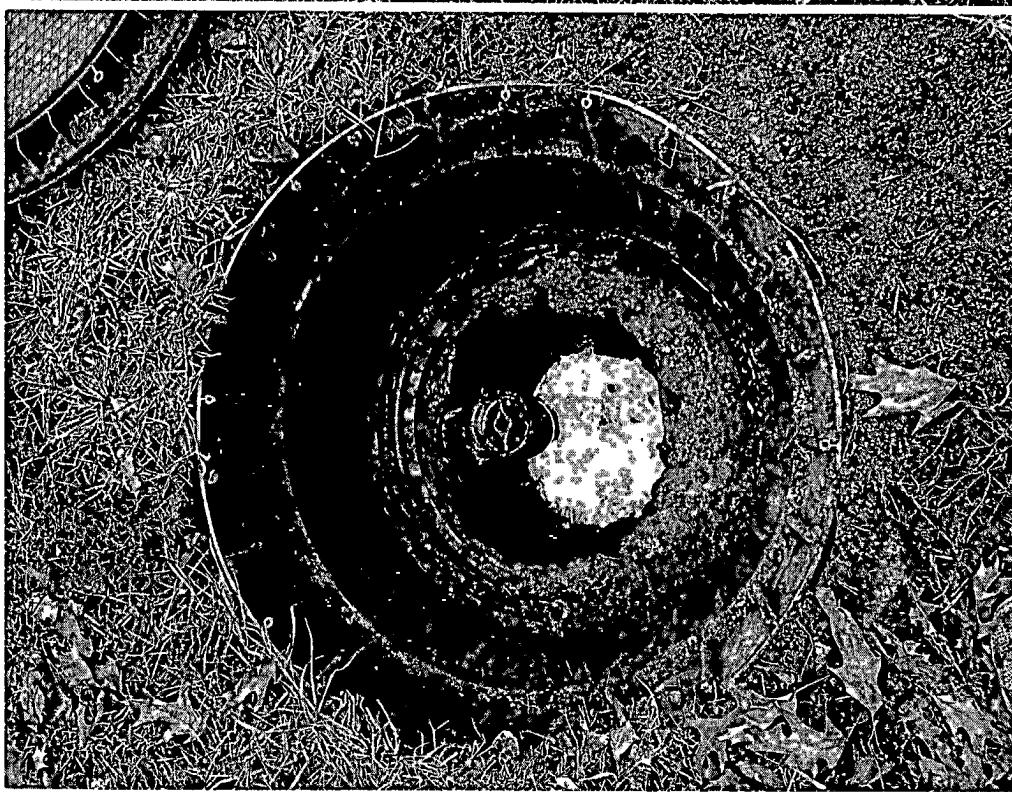
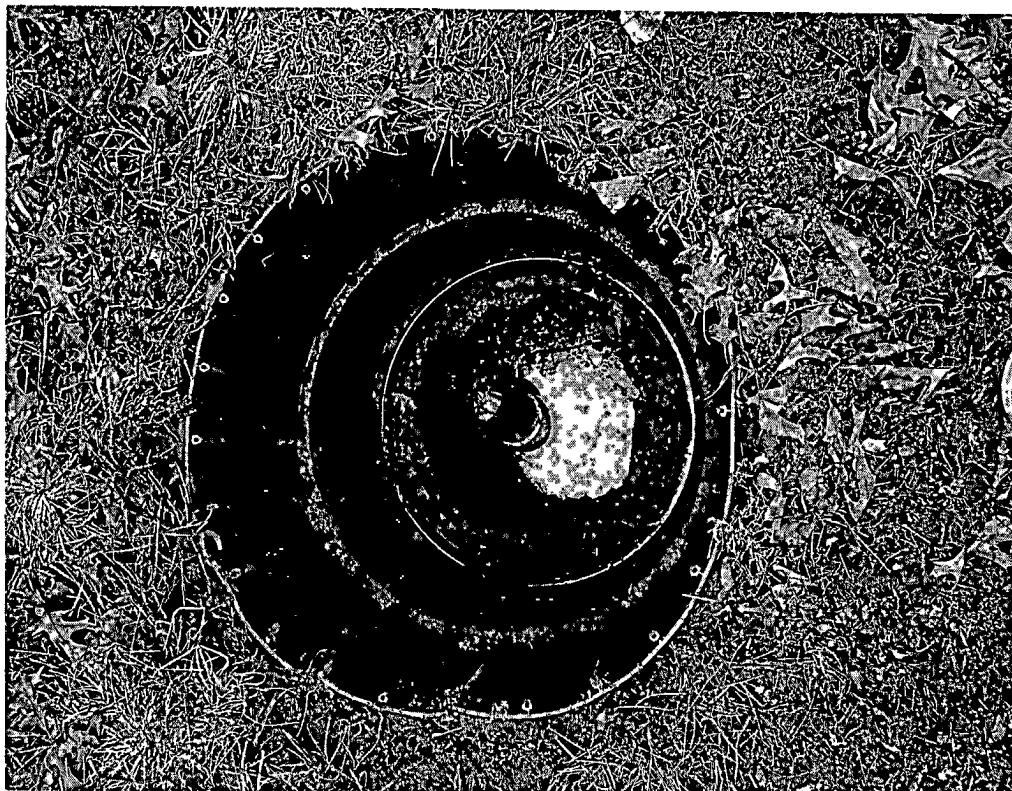
Inspection Date: **01/06/2026** Submitted Date: **1/6/2026**

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: 023-04

Date Issued: 4/14/04

Issued to: Harley Johnson  
Address: 3356 Pheasant Run Trail  
Peru, Iowa 50222

2463 328<sup>th</sup> Ln  
741152800999800

Legal Description: 8.08A Old RR ROW Section 28 T74N R27W Walnut Township

1250 5ea  
POWTS Components Specifications: 1000gal. Septic Tank & Aea. EQ24 Laterls @ 100ft.

*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: Separation 11 ft. of undisturbed soil between laterals. Drainage to be installed upslope as recommended by Soil analysis.*

  
Environmental Health Officer  
Madison County  
Office of Zoning and Environmental Health

Application to Construct  
Private On-Site Wastewater Treatment  
System (POWTS)

Office Use Only						Temp. E911: <u>2463</u>	<u>328th Lane</u>
Tracking No.	Date Received	Fee Paid	Date Issued	Date Inspected	Date Approved	Section/Township	NPDES Authorization #
<u>03011104150</u>	<u>11/04/01</u>	<u>\$100.00</u>	<u>11/04/01</u>				<u>328th Lane</u>

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																																				
First Name	Last Name		First Name	Last Name																																			
<u>Harley J</u>	<u>Johnson FF</u>		<u>Richard</u>	<u>Dillinger</u>																																			
Address			Address																																				
<u>3356 Pheasant Run Trail</u>			<u>Clinton Creek Rd</u>	<u>3178 Peru</u>																																			
City	State	Zip	City	State	Zip																																		
<u>Peru</u>	<u>IA</u>	<u>50222</u>	<u>Peru</u>	<u>IA</u>	<u>50222</u>																																		
Phone Number (area code)	Fax or E-mail	Cell Phone	Phone Number (area code)	Fax or E-mail	Cell Phone																																		
<u>515-681-2224</u>			<u>763-2126</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																																				
<table border="0"> <tr> <td>1-3 Bedroom</td> <td>Minimum Tank Size Required</td> </tr> <tr> <td>4 Bedroom</td> <td><u>1000</u></td> </tr> <tr> <td>5 Bedroom</td> <td><u>1250</u></td> </tr> <tr> <td>6 Bedroom</td> <td><u>1500</u></td> </tr> <tr> <td></td> <td><u>1750</u></td> </tr> </table>			1-3 Bedroom	Minimum Tank Size Required	4 Bedroom	<u>1000</u>	5 Bedroom	<u>1250</u>	6 Bedroom	<u>1500</u>		<u>1750</u>	<table border="0"> <tr> <td>Date test taken</td> <td><u>3-24-01</u></td> <td>Test taken by</td> <td><u>Jim Vance</u></td> </tr> <tr> <td>Test Results:</td> <td>Hole 1 <u>40</u> min/in</td> <td>Hole 2 <u>36.4</u> min/in</td> <td></td> </tr> <tr> <td></td> <td>Hole 3 <u>48</u> min/in</td> <td>Hole 4 <u>53</u> min/in</td> <td></td> </tr> <tr> <td></td> <td>Average <u>44.55</u> min/in</td> <td>Depth of Test Holes <u>24</u></td> <td></td> </tr> <tr> <td></td> <td>Number of Laterals Required <u>4</u></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Length of Laterals Required <u>about 100</u> ft. ea</td> <td></td> <td></td> </tr> </table>			Date test taken	<u>3-24-01</u>	Test taken by	<u>Jim Vance</u>	Test Results:	Hole 1 <u>40</u> min/in	Hole 2 <u>36.4</u> min/in			Hole 3 <u>48</u> min/in	Hole 4 <u>53</u> min/in			Average <u>44.55</u> min/in	Depth of Test Holes <u>24</u>			Number of Laterals Required <u>4</u>				Length of Laterals Required <u>about 100</u> ft. ea		
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5. Type of Submittal	6. Address Information			
<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision <input type="checkbox"/> Repair, Tank <input type="checkbox"/> Repair, Treatment Area <input type="checkbox"/> System Replacement  Previous Permit #:	Location, Number & Street of project (if unknown, indicate nearest road): <u>328 Lane</u> Legal Description: <u>Section 28- madison Co. walnut Twp.</u> <u>808A old RR Row 28-74-27</u>			
<input checked="" type="checkbox"/> Residential      Number of Bedrooms: <u>2</u>				<input type="checkbox"/> Commercial/Other Non-Residential      Use: <input type="checkbox"/> Garbage Disposal <input type="checkbox"/> High Water Usage Appliance (i.e. whirlpool bath, water softener) Qty: _____
Other buildings served by this system: <u>None</u>				

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>1000</u>	<u>1250</u>
9. Pump/Siphon	Type: _____	Manufacturer: _____	Model: _____	Size (gal): _____	
<input type="checkbox"/> Not Applicable				Dosing Frequency: _____	
10. Secondary Treatment Area	Type: _____	<input type="checkbox"/> Not Applicable			
Type of Lateral	Number of Lateral	Length of a Lateral	Other	Other	Maximum Trench Depth (inches): <u>24"</u>
<u>6034</u>	<u>4</u>	<u>100</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 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.

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>Harley J. Johnson FF</u>	Date: <u>4-13-01</u>
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## MADISON COUNTY ENVIRONMENTAL HEALTH

## PERCOLATION TEST REPORT

TEST #

Date taken: 3-24-04By: Jim VanceOwner: Harley Johnson

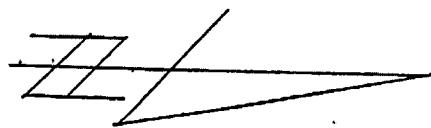
Site Address: \_\_\_\_\_

Lot Size: 3 acresPhone No. 641-763-2037Legal Description: Part of the NW. 1/4 of the SE. 1/4 of Sec. 28-T74N-R27WStructure: X New

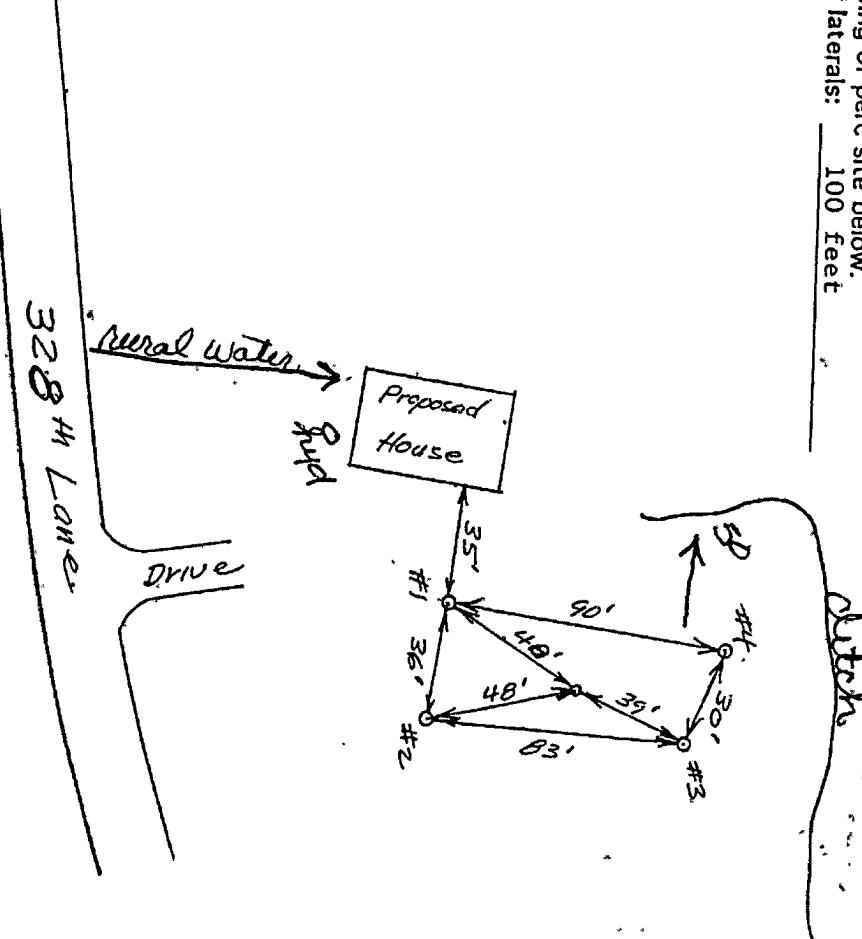
Existing

# Bedrooms: 2

Installer: \_\_\_\_\_

Owner's Current Mailing Address: 3356 Pheasant Run Trail, Peru, Iowa 50222Time for 1 inch of water: 1. 40.0 min2. 36.9 min3. 48.0 min4. 53.3 minDepth of holes tested: 1. 24"2. 24"3. 24"4. 24"Results of 6 foot hole: No Rock No WaterMin. recommended lateral footage per IAC Ch. 69: 400 feetNumber of laterals required: 4 eachAverage length of laterals: 100 feet

PROFESSIONAL ENGINEER  
LICENSED  
CHARLES T.  
VANCE  
5041



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: \_\_\_\_\_

Date: 25 March 2004Reg. No. 5044Exp. Date: 31 Dec. 2005

• RLI1002 PID 741152800999800 00 Tax Dist 741 00 Class A INQUIRY  
2003 '061 Map# 000001528400002 GIS#

**Location**      **Street**      **City**  
**Recorded**      REC      125      269

## Documents

<b>Misc</b>		<b>Exempt Code</b>	<b>No Ag Cr</b>	<b>VIN#</b>
<b>Sec-Twp-Rng</b>	028 074 027	<b>Cty-Adm-Blk</b>	00028	<b>Title</b>

Legal Desc 8.08A OLD RR ROW

Applications	Typ 1	AGL	Ovr	Amt	700	Typ 2	...	Ovr	Amt
	Typ 3	...	Ovr	Amt		Typ 4	...	Ovr	Amt

Acres	Type	Description	Value
-------	------	-------------	-------

	100%	Rollback Gr	8.08	LND Land	3,100	Rollback Net	8.08
Grs	3,100	3,100 Ex	.00				
Mil		PE	.00				
Net	3,100	3,100 Dr	.00				
		Net	8.08				

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

Permit No 023-04

Name: Harley Johnson

911 Sign Locate

Date of Inspection: 6/22/04

Inspected by: Elton Root

Contractor: Self

Dwelling under construction or moved in Yes  No

**Setbacks**

Meets required setbacks.

• Rural Water	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
• Private wells/Groundwater heat pump bore holes/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  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 1250 -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.
- Tank depth.8 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

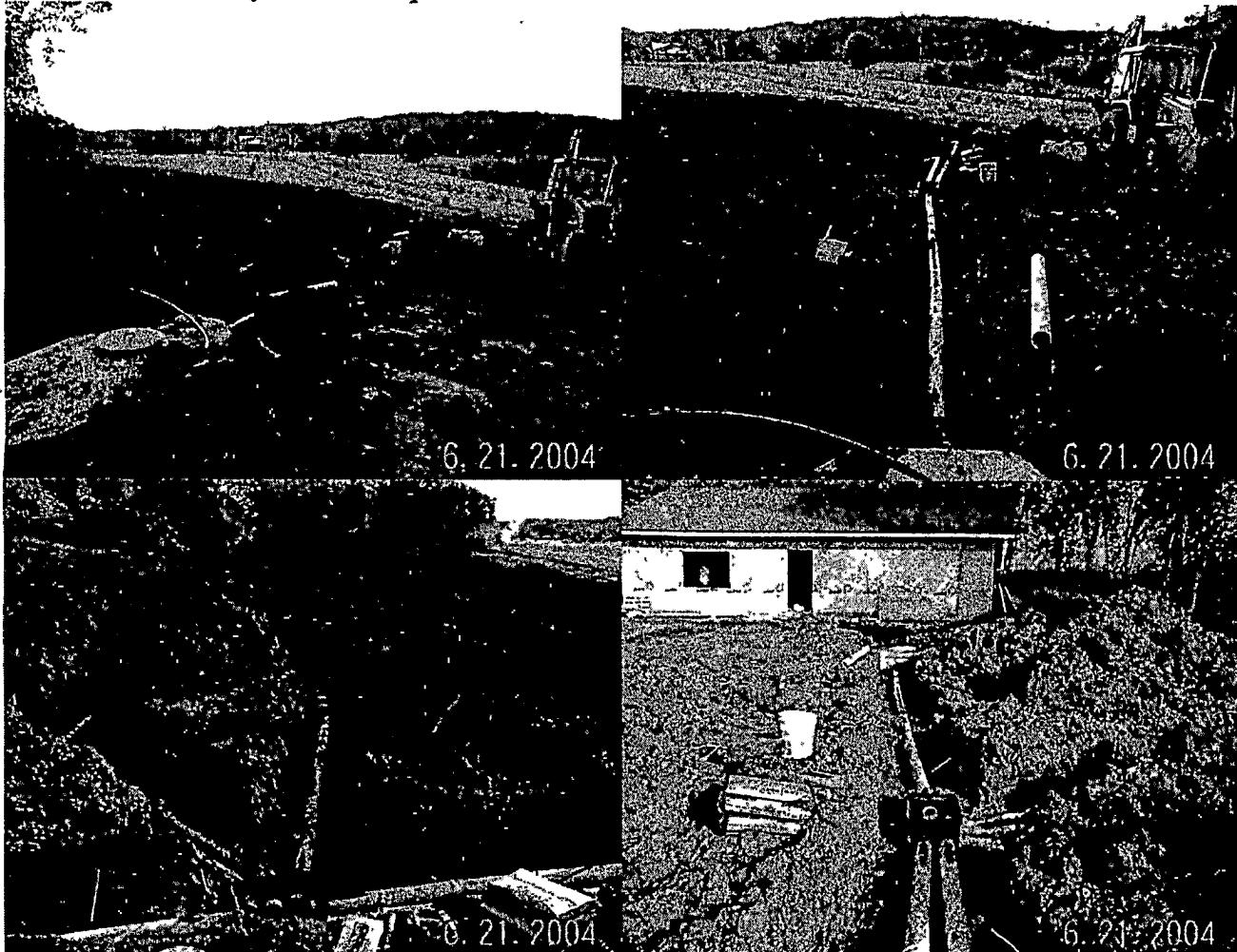
Comments:

**Laterals**

- Distribution lines: 4-inch PVC pipe – SCH40
- Distribution lines screwed to laterals. Yes  No  Will be
- Lateral used. EQ24 Reduction? Yes  No
- Lateral depth 24 inches Perc depth 24 inches
- Laterals were level. Yes  No
- Adequate amount of undisturbed soil between laterals. Yes  No
- Distance 6 feet between laterals.

Comments:

Permit # 23-04 Harley Johnson Inspection 6/22/04



Permit # 023-04 Harley Johnson Inspection 6/22/04

2463 328th Lane

