

REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT
TO BE COMPLETED BY TRANSFEROR

TRANSFEROR:

Name Kevin Eaton

Address 3010 Rustic Ave Peru IA 50222
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Jamal Delati

Address 1213 64th St West Des Moines IA 50266
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

3010 Rustic Ave Peru IA 50222
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

The West 320 feet of the North 429 feet of the Northeast Quarter (1/4) of Section Thirteen (13), Township Seventy-four (74) North, Range Twenty-seven (27) West of the 5th P.M., Madison County, Iowa

1. Wells (check one)

- ☐ There are no known wells situated on this property.
☒ 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)

- ☒ There is no known solid waste disposal site on this property.
☐ 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)

- ☒ There is no known hazardous waste on this property.
☐ 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)

- ☒ 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.)
- ☐ 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)

- ☒ There are no known private burial sites on this property.
- ☐ 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)

- ☐ All buildings on this property are served by a public or semi-public sewage disposal system.
- ☐ This transaction does not involve the transfer of any building which has or is required by law to have a sewage disposal system.
- ☒ 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.
- ☐ 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.
- ☐ There is a building served by private sewage disposal system on this property. 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.
- ☐ 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 #9]
- ☐ This property is exempt from the private sewage disposal inspection requirements pursuant to the following exemption [Note: for exemption #9 use prior check box]: _____
- ☐ The private sewage disposal system has been installed within the past two years pursuant to permit number _____

Information required by statements checked above should be provided here or on separate sheets attached hereto:

Well is West of home by gate

Cistern located between back & barn

Well is not in use (there ~~was~~ is/has never been a pump connected)

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.: (727) 226-3589



Time of Transfer Inspection Report (DNR Form 542-0191)

Property information

Current owner Kevin and Becky Easton 515-493-9450
Buyer _____ Realtor Becky Knight 515-707-3446
Mailing address 3010 Rustic Ave Peru, Iowa 50222

Site Address/County 3010 Rustic Ave Peru Ia / Madison County
Legal Description 3.15 A NW Cor NE NW Sec. 13 Walnut Twp.

No. of bedrooms 5 Last-occupied? 15 Records available yes

Permit/installation date 6-30-11 Separation distances all no? yes
032-11

Septic system information

Septic tank(s): size 1,500 gal material concrete condition excellent
Tank pumped? yes date 3-21-19 licensed pumper yes ST 307
Septic/trash/processing tank: size _____ material _____ condition _____
Tank pumped? _____ date _____ licensed pumper _____

Aerobic treatment unit (ATU) mfr _____ size _____
Tank pumped? _____ date _____ licensed pumper _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

Pump tanks/vaults: type _____ size _____ condition _____

Distribution system: distribution box yes outlets used no condition excellent
Header pipe(s) 1 # of lines 3 Pressure dosed? no

Secondary treatment:

length of absorption fields 3 x 100' 300 ft. determined by Vance Smith
condition of fields Good determined by Vance Smith
type of trench material 36" chambers

Size of sand filter _____ determined by _____
Vent pipes above grade? _____ discharge pipe located? _____
Effluent sample taken? _____ Results _____

Media filters: type _____
Maintenance contract? _____ expiration date _____ service provider _____
Condition _____

NPDES General Permit No. 4: required? _____ permitted? _____ NOI provided _____



Time of Transfer Inspection Worksheet

Other Components

Alarms no Working? _____ Disinfection no Working? _____

Control Box no Timers no Inspection Ports no

Other Components Effluent filter clean once a year!

Overall condition of the private sewage disposal system

Acceptable? yes Unacceptable? _____

Explain (attach additional pages as needed): _____

Comments: Have septic tank pumped and cleaned every
3 to 5 years

Site status at conclusion of Time of Transfer inspection:

Verify that controls are set on the appropriate mode.

Power is on to all components.

Revisit all components to verify lids are secure.

Gather all tools for removal from the site.

Verify that no sewage is on the ground surface.

Using this worksheet, write a narrative report of the inspection results.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified Inspector: [Signature] Date: 3-21-19
Name (print): Dance Smith Certificate #: 8992
Address: 502 West Main Street, St. Charles, IA 50240
Phone #: 641-396-2440

**ANYTIME SEPTIC SERVICES II
VANCE SMITH
ST. CHARLES, IA 50240
641-396-2440**

REAL ESTATE SEPTIC INSPECTION

On March 21, 2019, Anytime Septic Services II did Time of Transfer Real Estate Inspection on septic tank, distribution box and lateral field at 3010 Rustic Ave, Peru, Iowa, 50222. Kevin and Becky Easton residence.

Septic tank is a 1,500 gallon two compartment concrete Pella Precast tank that I pumped and cleaned with water. Tank is 8 inches below ground surface with 6 x 28 inch plastic risers and 28 inch EZ plastic screwed down lids at ground level above manufactured tee baffles on both inlet and outlet ends of tank. On the outlet end of tank is a 4 inch round gray colored effluent filter with tee handle inserted into baffle that needs to be cleaned at least once a year, Very Important to do! By lifting filter straight upward from baffle and hosing off and reinserting into baffle which I did. Septic tank is in excellent condition.

Distribution box is a plastic Tuff Tite box and is 12 inches below ground surface with concrete surrounding for support. Inside box is a 4 inch schedule 40 piped tee baffle and 3 schedule 40 piped lines leaving box through 3 speed levelers equally distributing effluence's to lateral field. Box is in excellent condition.

Lateral field is a level ground and consist of 3 runs of 36 inch plastic infiltrated chambers at 100 feet each totaling 300 feet of laterals that are 18 to 24 inches below ground surface with no evidence of any ponding or surfacing above absorption field and no popping sound from probing all 3 laterals.

Complete septic system is piped with schedule 40 pipe with outside clean out and curtain drain discharging through schedule 40 pipe.

Both distribution box and lateral field is in a fenced in area don't recommend horses or cattle above box and lateral field.

NOT RESPOSIBLE FOR ANY FAILED SEPTIC SYSTEMS.

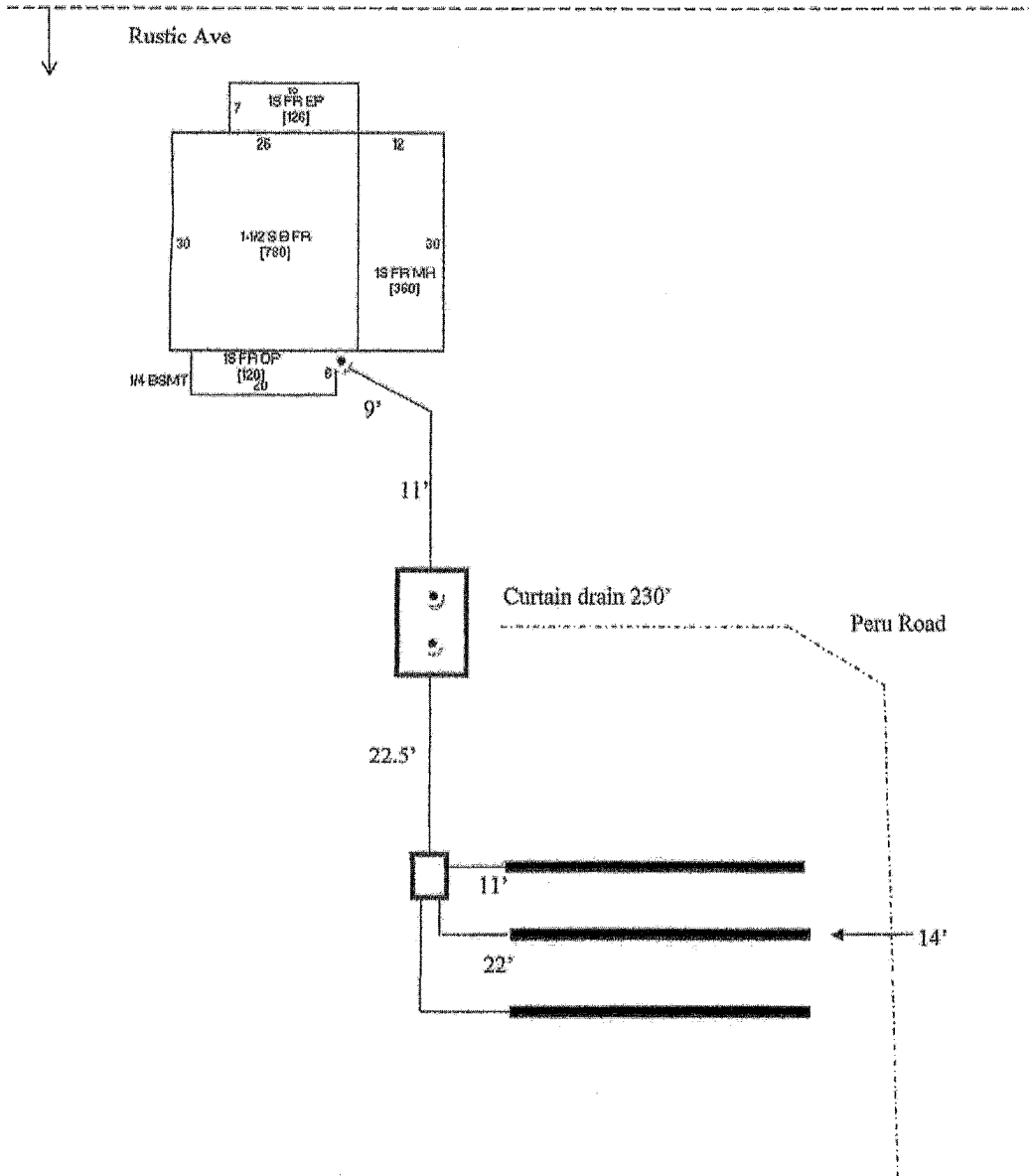
Permit No 032-11

Date of Inspection: 6-30-11

Contractor: Mark Mease 468-1671 or 468-0373

Name: Michael Burk

Inspected by: Jean Thompson





BOECKMAN SERVICES

1990 CLOVER AVENUE
CRESTON, IA 50801

PHONE: (641)-344-6468
Louk Boeckman, CPSS-PSCI

June 8, 2011

MADISON COUNTY HEALTH & ZONING
Elton Root, Sanitarian
PO Box 152
Winterset, IA 50273-0152

RE: Soil Analysis for Michael Burk
1030 Rustic Avenue
Peru, IA 50222
Section 13 Walnut Township

Dear Mr. Root:

Enclosed are the soil analysis results conducted on June 4, 2011 and soil transect for the existing home site of Michael Burk located in section 13 of Walnut Township near Peru, Iowa.

A total of 5 soil borings were made during this investigation. The loading rate is .55 gallons per square foot for the potential soil absorption field. The total footage for the field if constructed would be 500 feet with a 2-foot trench width for 450 gallons per day water usage or 3-bedroom home. The wide chamber product can be used with 300 feet of 3-foot trench at this home site.

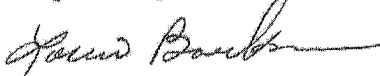
Soil borings indicate the soils are Sharpsburg soils. Soils at this site are moderately well drained and have a seasonal high water table of 4 to 6 feet during spring months or during heavy rainfall periods. Active seasonal high water table was observed at depths of 3 to 6 feet during this investigation.

If this site is used for soil absorption field, trenches must be constructed at depths of 24-30 inches with a maximum depth of 36 inches. Suitable area is located NE of the existing home site and in the pasture area. Other area of consideration is located north of the home site. It is not recommended to construct trenches near the old terrace located just east of the test area because it may influence a high seasonal high water table.

Also note the seasonal high water table was observed during this investigation at about 37 inches to 77 inches. These readings may be due to adjacent wetter soils upslope and recent rains. It is recommended a curtain drain installed upslope of the field at depths of 5-7 feet. This will help lower seasonal high water table and improve performance of the field.

If there are any questions, you can contact me at 641-344-6408.

Respectfully submitted,


Louis Boeckman, CPSS

Enclosure:

Soil Analysis Results
Soil boring & Transect
Drawing of Site
Receipt-Sent to Burk

Cc: Michael Burk
Mease Construction

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 182
Winterset, IA 50273-0182
Telephone: (515) 462-2636

Permit Number: 032-11

Date Issued: 6/10/11

Issued to: Michael Burk
Address: 3010 Rustic Ave,
Peru, IA 50222

720151342020000

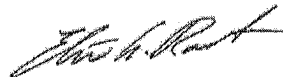
Legal Description: 3.15A NW COR NE NW Section 13 Walnut Twp.

POWTS Components Specifications: 1500gal. Septic Tank & 3ea. 36in. Chamber Laterals @ 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: This system will require a curtain drain per soils report.



Environmental Health Officer
Madison County
Office of Zoning and Environmental Health

L BORINGS AND TRANSECT OF ON-SITE WASTEWATER TREATMENT AND DISPOSAL SYSTEM SITE

DATE: 6-14-2011 Time Started: 12:00 PM Time Completed: 4:00 PM
Conducted By: Kevin S. Brackley Certification: CSES-July 08
HOME OWNER: Walter J. Eyrte
ADDRESS: 1830 Riverview Avenue
NEARBY HAZARDOUS WASTE OR OTHER DISPOSAL SYSTEM SITE

LOCATION: SE back end of 966 lot NW 1/4 of NE corner of 13th St. & 1st St.
 LANDSCAPE/LANDFORM: SLOPE TYPE: (Place "x" on Diagrams-Back of Sheet)
 SOIL SYMBOL: 570C
 SOIL NAME: Nioka Silty Clay loam, 5 to 9 percent slope
 ASPECT (°): E (100°)
 CITY: Levell
 SECTION NO.: 13
 TOWNSHIP: 60S 100W
 COUNTY: Y. 24 N. R. 27 W.
 STATE: 50322
 ZIP: 50322
 Lat: 46.01349
 Long: -93.91222
 Elev (ft.): 1744
 SOIL PERMEABILITY: mod. slo.

[illegible][illegible][illegible]

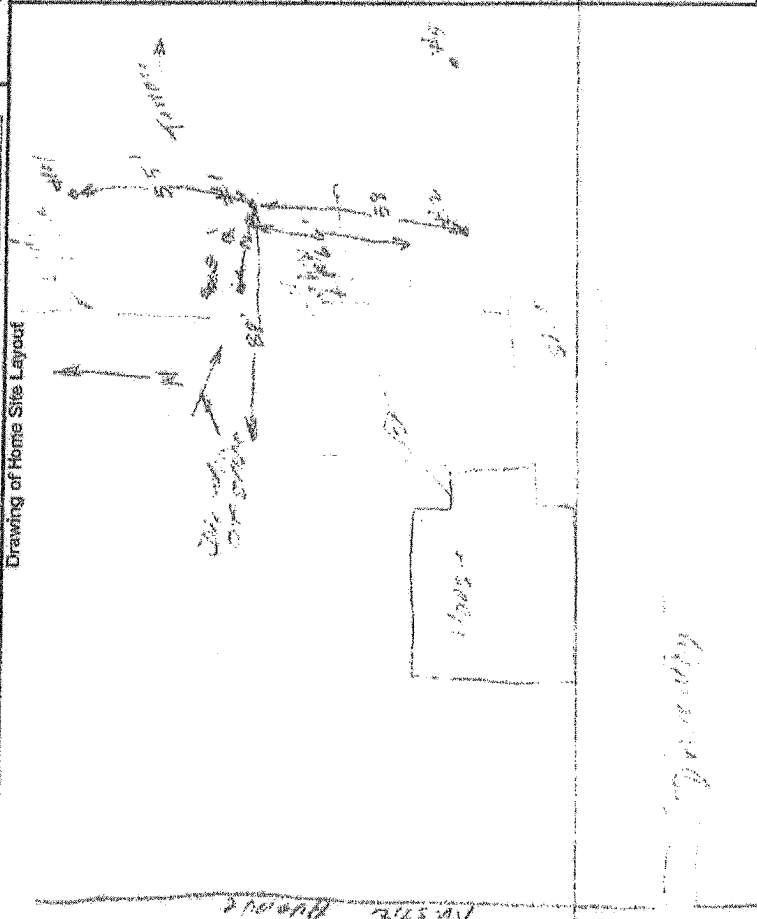
DEPTH (inches)	HOR- ZON	SOIL TEXTURE	COLOR		COATS OF CLAY FILMS	STRUCT- TURE	CONG- TENCY	FOOTS	BOUN- DARY	MOIST STATE	COMPAC- TION	PM or REMARKS	LR LOADING
			MATRIX	REDOX									
0-1	Bu	5-0L 30-000	10YR 5/6			clg 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
7-13	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
13-19	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
19-25	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
25-31	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
31-37	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
37-43	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
43-49	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
49-55	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5
55-61	Bu	5-0L 30-000	10YR 5/6			10YR 5/6 0.000	slg 0.0	0.0	AS	100	100	10-35	0.5

PM = PARENT MATERIAL--(1) Loess, (2) Glacial Till, (3) Weathered Glacial Till, (4) Valley Fill, (5) Outwash, (6) Eolian, & (7) Alluvium

Handbook of the
Museum of the
Smithsonian Institution

Revised by LEB
03/10/2003 10:08 AM

ANALYSIS



Madison County
Office of
Zoning & Environmental Health

Application to Construct
Private Sewage Disposal System (PSDS)

112 N. John Wayne Dr.
P.O. Box 152
Winterset, IA 50273
Telephone (515) 462-2636

Office Use Only					Temp 0911	
Tracking No.	Date Received	Fee Paid	Check #	Date Issued	Section/Township	
032-1	6/10/11	\$150	1234	6/14/11	18 Walnut	

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	
MICHAEL	DUICK		MARK	MEASE	
Address			Address		
3010 Rustic Ave			2989 TIO RD		
City	State	Zip	City	State	Zip
PRU	IA	50222	TRUO	IA	50257
Phone Number (area code)		Cell Phone	Phone Number (area code)		Cell Phone
		515 783 0229			515 468 1671

3. System Requirement Information		4. Site and Soil Evaluator (Percolation Test/Soils Analysis)											
IAC CHAPTER 69 DOUBLE COMPARTMENT TANK REQUIRED <table border="1"> <thead> <tr> <th></th> <th>Minimum Tank Size Required</th> </tr> </thead> <tbody> <tr> <td>1-3 Bedroom</td> <td>1250</td> </tr> <tr> <td>4 Bedroom</td> <td>1500</td> </tr> <tr> <td>5 Bedroom</td> <td>1750</td> </tr> <tr> <td>6 Bedroom</td> <td>2000</td> </tr> </tbody> </table>			Minimum Tank Size Required	1-3 Bedroom	1250	4 Bedroom	1500	5 Bedroom	1750	6 Bedroom	2000	PERCOLATION/SOILS ANALYSIS MUST BE COMPLETED AND APPROVED PRIOR TO THE ISSUANCE OF PERMIT Date test taken <u>6/11</u> Test taken by <u>Boeckman</u> Passed: <u>X</u> Failed: <u> </u> Percolation Rate: <u> </u> Soils Loading Rate: <u>JS</u>	
	Minimum Tank Size Required												
1-3 Bedroom	1250												
4 Bedroom	1500												
5 Bedroom	1750												
6 Bedroom	2000												

5. Type of Submittal		6. Address Information	
☐ New House ☒ Existing House ☐ Repair, Tank ☐ Repair, Treatment Area ☐ System Replacement		911 Address or nearest road: <u>3010 Rustic Ave</u> Legal Description: <u>3.15A NW 102 NE NW Section 13-74-27</u>	

7. Type of Building (Completed by Owner)			
Building Square ft.	Number of Bedrooms: <u>3</u>	Number of Bathrooms: <u>1 1/2</u>	Non-Residential uses: <u> </u>
Other buildings served by this system: <u>None</u>		Any other circumstances which may affect water usage: <u>None</u>	

8. Tanks			
Your contractor or system designer should complete the remaining portion of this application.			
Septic Tank	Type: <u>Concrete</u>	Size: <u>1500</u>	Manufacturer: <u>Tella Pte Cast</u>
Pump Tank	Type: <u> </u>	Size: <u> </u>	Manufacturer: <u> </u>
Additional Tank	Type: <u> </u>	Size: <u> </u>	Manufacturer: <u> </u>

9. Secondary Treatment Area					
Laterals	Type: <u>36" Chamber</u>	Length of each: <u>100 ft</u>	Total number: <u>3</u>	Maximum trench Depth: <u>36"</u>	
Sand Filter	Square ft.: <u> </u>	Length: <u> </u>	Width: <u> </u>		
Pest System	Model: <u> </u>	Manufacturer: <u> </u>			
Other	Description: <u> </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. 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: <u> </u>	Date: <u> </u>	

MC-ZEH Form EH01

March 2009

Permit No 032-11

Name: Michael Burk

Date of Inspection: 6-30-11

Inspected by: Jean Thompson

Contractor: Mark Mease 468-1671 or 468-0373

Existing Dwelling

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 ☐ Will be ☐
- 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 Pella PreCast Concrete ☒ Plastic ☐
- Capacity 1500 -gallon
- Two compartments, both meet the specifications for capacity. Yes ☒ No ☐
- Baffle Yes ☒ No ☐
- Inlet/Outlet tees are ok. Yes ☒ No ☐
- Effluent filter in the outlet. Yes ☒ No ☐ Manufacture: Polly
- Tank depth.
- Risers Yes ☒ at grade No ☐ Less than 12" ☐
- Lids above grade screwed on Yes ☐ No ☐ Will be ☒

Comments: curtain drain around system.

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: Did not balance the D Box not all lines hooked up

Laterals

- Distribution lines: 3 -inch PVC pipe - 40 SDR.
- Distribution lines screwed to laterals. Yes ☐ Will be ☒
- Lateral used. 36" chambers 3 @ 100' Reduction? Yes ☒ No ☐
- Lateral depth less than 30 Perc depth 36 inches
- Laterals were level. Yes ☒ No ☐
- Adequate amount of undisturbed soil between laterals. Yes ☒ No ☐
- Between feet between laterals.

Comments:

Permit No 032-11

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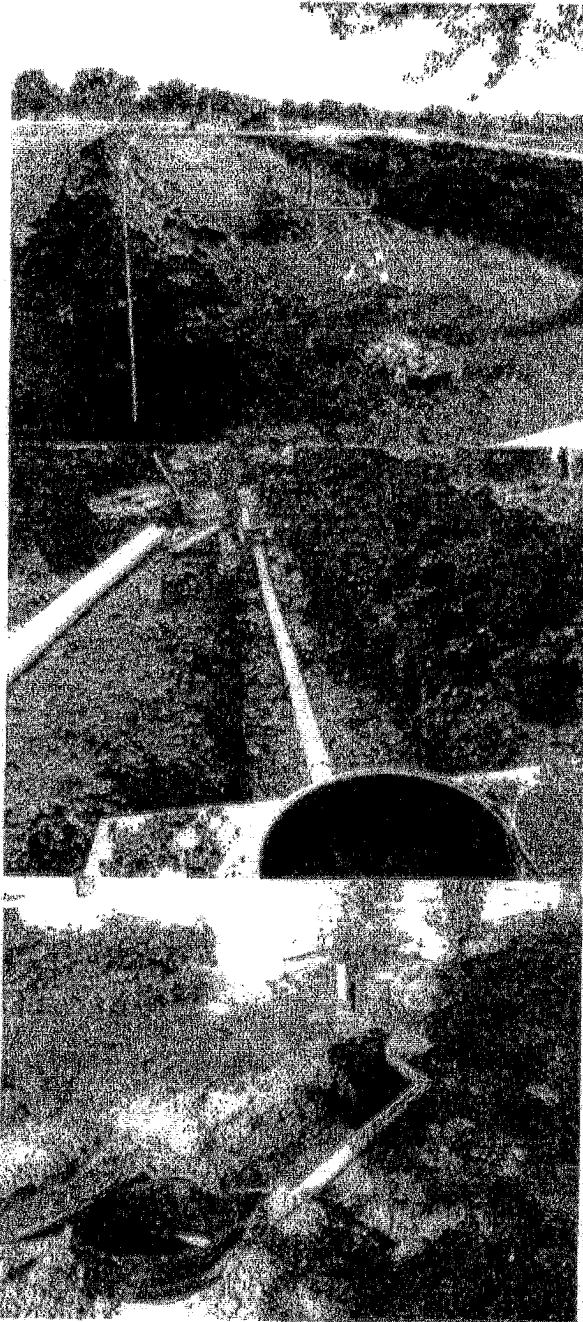
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Date of Inspection: 6-30-11

Contractor: Mark Mease 468-1671 or 468-0373

Name: Michael Burk

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Curtain drain 230'