

TIME OF TRANSFER INSPECTION TOT# 18290 DONALD VILLHAUER, JR. CERT # 10440

Site Information

Parcel Description: **NE 1/4, SE 1/4, SEC 27, T 79, R 4, Springdale**

Address: **2263 Eureka Ave, West Liberty, IA 52776**

County: **Cedar**

Owner Information

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

Business Name:

Owner Name: **Kurt Parizek**

Email Address: **kurtparizek@gmail.com**

Address: **2263 Eureka Ave, West Liberty, IA 52776**

Phone No:

Site related information

No Of Bedrooms: **3**

Facility Type: **Residential**

Last Occupied:

Permit issued by County: **Yes**

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

Property Information Comments:

Inspection Date: **10/24/2025**

Currently Occupied: **Yes**

System Installation Date: **06/05/1980**

Permit Number: **15-80**

County contacted for records: **Yes**

Primary Treatment

Tank 1

Tank Name: **Tank 1**

Tank Material: **Concrete**

No. of Compartments: **2**

Date Pumped: **10/24/2025**

Distance To Well (Ft.): **100+**

Risers Intact: **No**

Tank/Vault Pumped: **Yes**

Tank Comments:

Type: **Septic Tank**

Tank Corrosion Type: **Slight**

Pump Tank Chamber: **No**

Meets Setback to Well: **Yes**

Is Accessible: **Yes**

Effluent Filter Present: **No**

Inlet Baffle Present: **Yes**

Outlet Baffle Present: **Yes**

Tank Size (Gal): **1250**

Liquid Level Type: **Normal**

Licensed Pumper Name: **Triple B Construction**

Well Type: **Private**

Lid Intact: **Yes**

Watertight: **Yes**

Functioning as Designed: **Yes**

General Primary Treatment Comments:

Distribution Type

Distribution Box 1

Label: **Distribution Box 1**

Material Type: **Concrete**

Accessible: **Yes**

Box Opened: **Yes**

Baffle Present: **No**

Speed Levelers Present: **No**

Watertight: **Yes**

Functioning As Designed: **Yes**

General Distribution System Comments :

Secondary Treatment

Lateral Field1

Distribution Type: **Distribution Box**

Material Type: **Rock and PVC Pipe**

Trench Width: **24**

Lines: **3**

Total Length of Absorption Line: **90**

System Hydraulic Loaded: **Yes**

Gallons Loaded: **250**

Meets Setback to Well: **Yes**

Well Type: **Private**

Distance To Well (Ft): **100+**

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: **Time of Transfer inspection conducted on October 24, 2025. Interior plumbing inspected, all sewage and gray water enters septic tank. Located and inspected septic tank. Septic tank was found to be a 1,250 gallon two compartment concrete tank with concrete baffles. Tank had cast iron inlet and outlet lines. No cleanout noted between house and tank. Tank was located in a bean field, North of the residence. Corrosion noted to outlet baffle. Tank did not have risers to the surface and did not have an effluent filter. Effluent exits tank in cast iron for approximately 5 feet then turns into 4 inch Sch40 for 3ft then back to cast as it enters the concrete distribution box. The distribution box uses 3 outlets to disburse effluent to 3 - 90 foot laterals of 6 inch perforated PVC pipe covered with rock. Each lateral was 2 feet wide.. A hydraulic load test of 250 gallons +/- of water conducted, the system showed no signs of seepage or backup. At the time of inspection, the system appears to be working as designed.**



IOWA DEPARTMENT OF NATURAL RESOURCES

GOVERNOR KIM REYNOLDS
LT. GOVERNOR CHRIS COURNOYER

DIRECTOR KAYLA LYON

TIME OF TRANSFER INSPECTION TOT# 18290 DONALD VILLHAUER, JR. CERT # 10440

Owner Name: Kurt Parizek

Address: 2263 Eureka Ave , West Liberty , IA 52776

County: Cedar

Inspection Date: 10/24/2025

Submitted Date: 10/24/2025

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).

PRIVATE SEWAGE DISPOSAL SYSTEM
APPLICATION TO INSTALL

CEDAR COUNTY HEALTH DEPARTMENT

Description of Private Sewage Disposal System

TITLE HOLDER KIRT PARIZEK (JOSEPH PARIZEK) MAILING ADDRESS RT 2 LOT 3 W. LIBERTY
LEGAL DESCRIPTION NE 1/4, SE 1/4 SECTION 27-79-4 TOWNSHIP SPRINGDALE
ADDRESS 2263 Enclave Ave, West Liberty, IA 52776 CONTRACTOR _____
TYPE OF BUILDING MOBILE - none, now dwelling in 1981 LOT SIZE OR ACREAGE 6.54 ac m/h
EXISTING _____ PROPOSED CONSTRUCTION X UNDER CONSTRUCTION _____

NUMBER OF:

- A. Family Units _____
B. Occupants _____
C. Bedrooms see Assessor's rec says 3 Bdrm below

BASEMENT DRAINS TO:

- A. Septic Tank _____
B. Leaching Pit _____
C. Other _____

BUILDING SEWER:

- A. Cast Iron ✓
B. Vitrified Clay _____
C. Concrete _____
D. Other _____

JOINTS ARE:

- A. Caulked Lead _____
B. Cement _____
C. Other _____

SEPTIC TANK:

Material concrete, Hahn
Gauge (if Metal) _____
Effective Capacity (below
water line) 1250 (1000)

DISTANCE FROM PROPERTY LINES: Front _____ Rear _____ Side _____ Side _____

*690
PERCOLATION TEST: Time in minutes required for 1 inch of water to seep away 19
10 SQ FT (300 sq ft) 3 bedroom home 2' width

ABSORPTION UNIT:

TYPE OF MATERIAL SURROUNDING TILE:

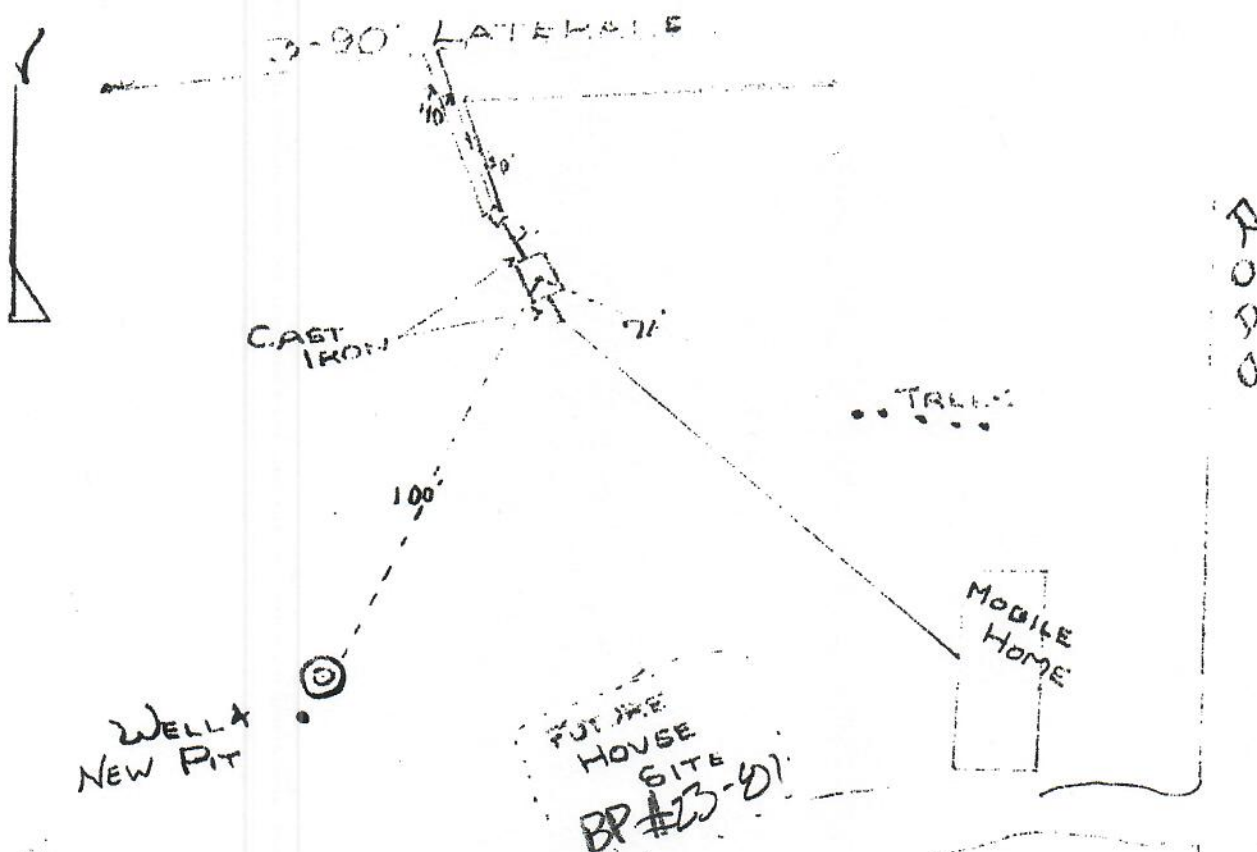
Total Square Feet _____
Type of Tile PVC
Depth of Tile 20-24"
Slope (per 100 ft.) _____
3/4" Washed River Gravel (Preferred) ✓
Other _____
Depth Below Tile (6" required) 8-10"
Depth Over Tile (2" required) 2"

(Show drawing of sewer system on back of sheet)

DISTANCE FROM PROPERTY LINES: Front _____ Rear _____ Side _____ Side _____

DISTANCE FROM WELL: Proposed _____ Existing well

Existing well



This permit does not insure any form of guaranty. It only states that the sewer system complies with the Cedar County Rules and Regulations pertaining to residential sewer systems.

KIRT PARIZEK
NE 1/4 SE 1/4 SEC 27-29-4

I certify that, to the best of my knowledge, the above information is correct, that all proposed work as indicated will be completed in accordance with the Cedar County Regulations before the facilities are placed in operation, and that adequate maintenance procedures will be followed. I will also comply with regulations that require that the Health Department be notified at least seven and one-half working hours in advance, between 8:00 a.m. and 4:00 p.m., that the site is ready for final inspection prior to covering.

It is understood that the local board of health may require a connection to a public sewer when one becomes available in the future.

Date 5-29-80

Signed

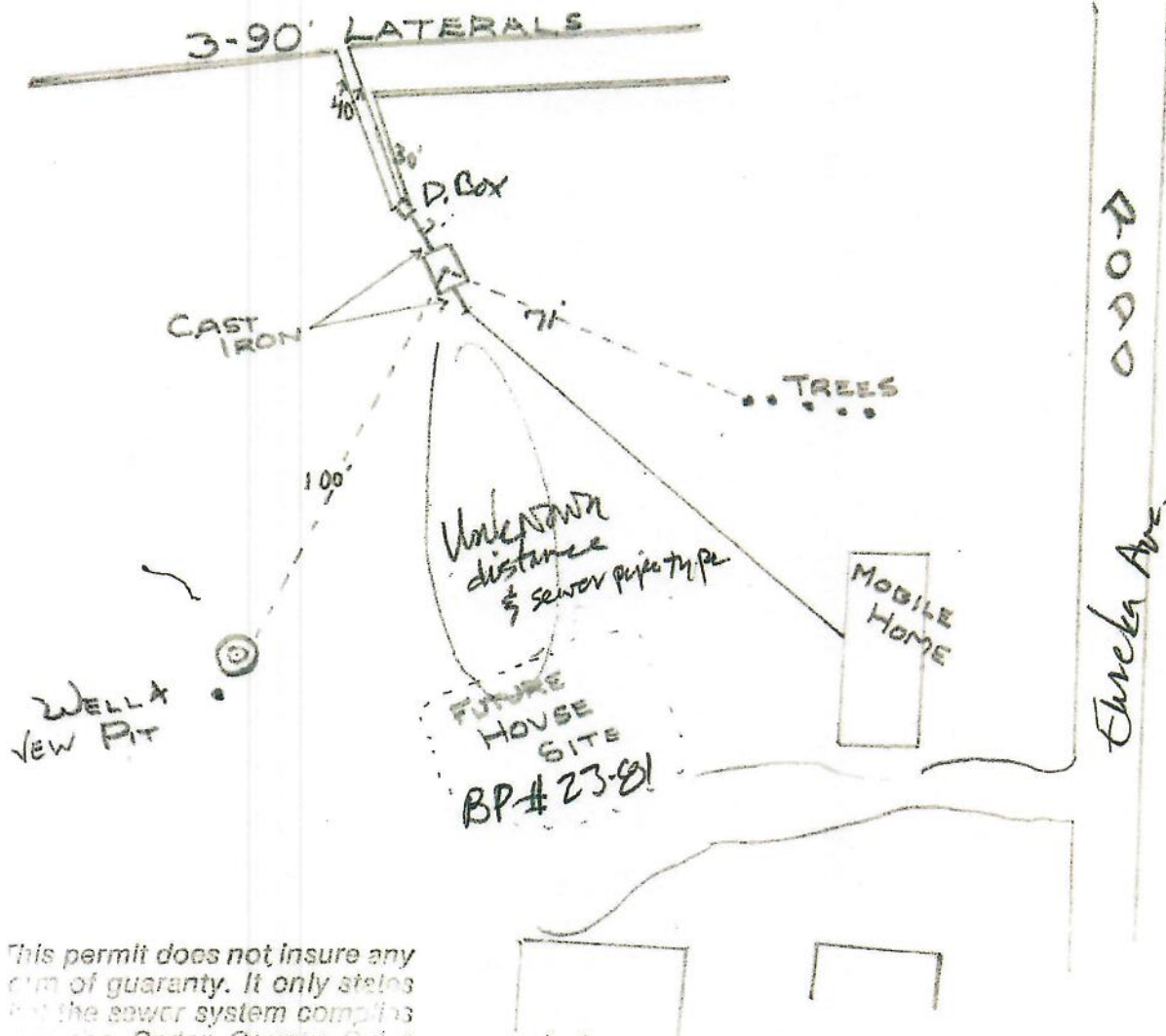
[Signature]
(Signature of Applicant)

Date Application Approved 5-30-80

[Signature]
(Representing the Cedar County Board of Health)

Date of Final Inspection 6-5-80 By

[Signature]
(Representing the Cedar County Board of Health)



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 form of guaranty. It only states
 that the sewer system complies
 with the Cedar County Rules
 and Regulations pertaining to
 residential sewer systems.

KIRT PARIZEK
 NE 1/4 SE 1/4 SEC 27-29-4
 2263 Eureka Ave., West Liberty
 PSD# 15-80