



Customer No.: TYROLPR

Invoice No.: 59556

# LOVELACE PUMP CO., INC.

9914 County M  
 Argyle, WI 53504  
 FAX – 608-465-1114  
 lovelacepump@tds.net

## Invoice

Argyle – 608-465-3314  
 Dodgeville – 608-935-3581  
 Barneveld – 608-924-1815  
 New Glarus – 608-527-6100

Bill To: **TYROL PROPERTIES**  
 3487 BOHN RD.  
 MOUNT HOREB, WI 53572

Job Site: **SCOTT MCKAY**  
 3506 BOHN RD.  
 MOUNT HOREB, WI 53572

Invoice Number		Invoice Date		Invoice Due Date		
59556		03/05/21		04/04/21		
Purchase Order Number		Order Date	Sales Person		Our Order Number	
		03/05/21	SCOTT LOVELACE		55916	
Quantity	Item Number	Description			Unit Price	Amount
		SEPTIC INSPECTION				200.00
		WELL INSPECTION				150.00
		BACTERIA, NITRATE, & ARSENIC WATER SAMPLES				130.00
		INSPECTION COMPLETED & SAMPLES TAKEN ON 03/02/21				
Invoice subtotal						480.00
Invoice total						480.00

**PAID**

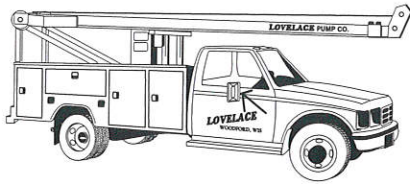
**Family Business Since 1910**

Complete Water Systems • Complete Septic Systems • Pump Installation & Service • Well Drilling Available • Radio Dispatched Trucks • Livestock Waterers • Backhoe Service

Interest will accrue at 18% per annum after 30 days.

Credit Cards Accepted.





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Dodgeville – 608-935-3581  
Barneveld – 608-924-1815  
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## SEWAGE DISPOSAL/WATER SUPPLY INSPECTION REPORT

REQUESTING PARTY: TYROL PROPERTIES LLC  
3487 BOHN RD  
MOUNT HOREB, WI 53572

PROPERTY ADDRESS: SCOTT MCKAY  
3506 BOHN RD  
MOUNT HOREB, WI 53572  
DANE CTY. - VERMONT TWN.

### ..... WATER SYSTEM

A well inspection was completed by Lovelace Pump Company on 03/02/2021. This was an above ground visual inspection only (no components were pulled from the well and inspected). This well was drilled in 1964. Currently, the well is only 4" above grade. It is required to extend the steel well casing to a minimum of 12" above grade to meet the current Wisconsin well code. Also, this water system needs to have a sample faucet installed 12" above the floor, and the electrical wires at the wellhead need to be enclosed inside of conduit to meet the code. Lastly, it is recommended that a pressure relief valve be installed.

### SEE ATTACHED WATER SAMPLE SHEET

Bacteriological: Safe -- Nitrate: <0.03 mg/L as N (Safe)-- Arsenic: None Detected ug/L (Safe)

### SEWAGE DISPOSAL SYSTEM

A septic inspection was completed by Lovelace Pump Co. on 03/02/2021. This was an above-ground inspection only. There was no effluent found above ground or evidence of any backup at the time of the inspection. This is a mound type system installed in 1984 for a three-bedroom house. This system is dry, and the tanks do not need pumping at this time. It is recommended to install locks and chains and warning labels over the septic tank lids; for safety and to meet the current code. Also, the septic alarm does not sound, only the light comes on, and the observation pipe on the tank does not have a cap. Lastly, there is a shallow line draining into the inspection part of the septic tank. It is unknown what this line is draining, but it should be relocated to the inlet side of the tank.

The undersigned cannot guarantee continued acceptability of the private waste disposal system and/or water supply due to unpredictable factors which could later determine the life or compliance of the system.

Company Name: Lovelace Pump Company

Address: 9914 County Road M, Argyle, WI 53504

Inspector: Scott Lovelace

Signature \_\_\_\_\_

**Family Business Since 1910**

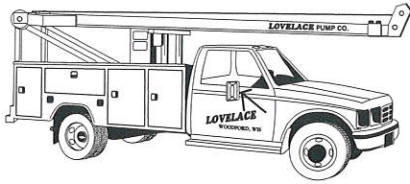
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 New Glarus – 608-527-6100

## Existing Private Sewage System Inspection Report

### Contact Information

Inspection Requested By TYROL PROPERTIES LLC		Telephone Number (608) 437-4135	
Mailing Address 3487 BOHN RD	City MOUNT HOREB	State WI	ZIP Code 53572
Property Owner's Name SCOTT MCKAY		Telephone Number	
Mailing Address 3506 BOHN RD	City MOUNT HOREB	State WI	ZIP Code 53572

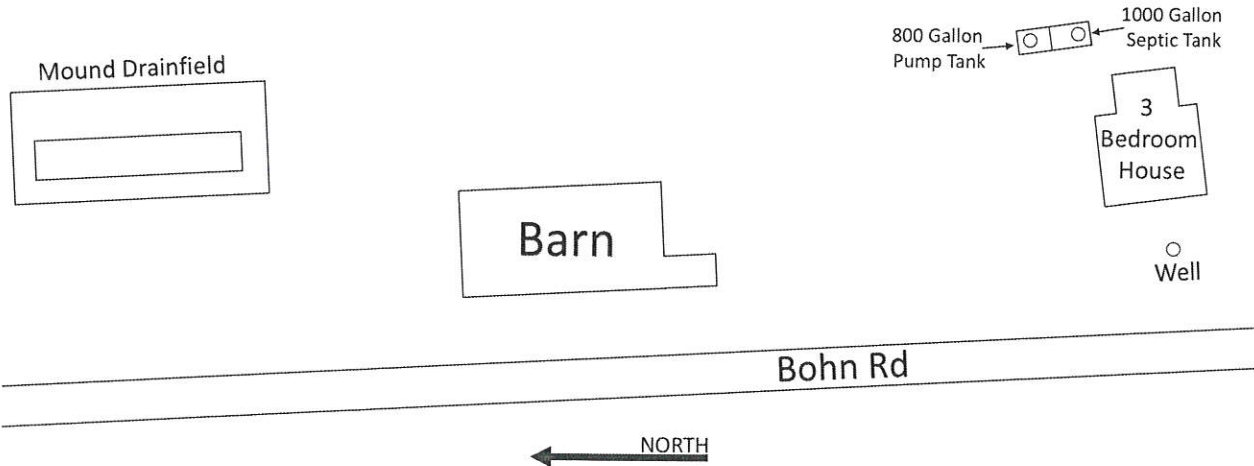
### Property Location

Fire Number 3506	Street or Road BOHN RD	<input type="checkbox"/> City <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village of VERMONT		County DANE
¼ ¼ SE	¼ SE	Section 28	Township 7 N	Range E <input checked="" type="checkbox"/> 6 W <input type="checkbox"/>
Year Installed 1984		Currently Occupied? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Permit Available at County? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### Comments and Recommendations

A septic inspection was completed by Lovelace Pump Co. on 03/02/2021. This was an above-ground inspection only. There was no effluent found above ground or evidence of any backup at the time of the inspection. This is a mound type system installed in 1984 for a three-bedroom house. This system is dry, and the tanks do not need pumping at this time. It is recommended to install locks and chains and warning labels over the septic tank lids; for safety and to meet the current code. Also, the septic alarm does not sound, only the light comes on, and the observation pipe on the tank does not have a cap. Lastly, there is a shallow line draining into the inspection part of the septic tank. It is unknown what this line is draining, but it should be relocated to the inlet side of the tank.

### Sketch of Premises (not to scale)



### Certification and Disclaimer

I certify that the above information is true and correct to the best of my knowledge as observed on 03/02/2021. Operational aspects and observations reported are based on the conditions noted at the time of inspection. This inspection does not in any way guarantee or warrant the continued operation of the system described herein.

Inspected by: Scott Spaulding License Number: 226852 Date: 3.2.21  
*Family Business Since 1910*

Complete Water Systems • Complete Septic Systems • Pump Installation & Service • Well Drilling Available • Radio Dispatched Trucks • Livestock Waterers • Backhoe Service

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## Property Transfer Well and Pressure System Inspection

Form 3300-221 (R 11/19)

**Notice:** Pursuant to ch. 280, Wis. Stats., and ch. NR 812, Wis. Adm. Code, this form shall be used to document any well and pressure system inspection conducted as part of a property transfer. Inspections are voluntary, and well owners are not required to bring systems into compliance as a result of the inspection. Inspectors must provide the completed form to the requester of the inspection. Do not send forms to DNR.

Contact Information			
Inspection Requested By TYROL PROPERTIES LLC			Telephone Number (608) 437-4135
Mailing Address 3487 BOHN RD	City MOUNT HOREB	State WI	ZIP Code 53572
Well Owner's Name SCOTT MCKAY			Telephone Number
Mailing Address 3506 BOHN RD	City MOUNT HOREB	State WI	ZIP Code 53572

Property Location			
Fire Number 3506	Street or Road BOHN RD	<input type="radio"/> City <input checked="" type="radio"/> Town <input type="radio"/> Village of VERMONT	County Dane
$\frac{1}{4}$ $\frac{1}{4}$ SE SE	Section 28	Township 07 N	Range 6 W
Latitude (DD, ex. 44.444)		Longitude (DD, ex. -89.999)	
		WUWN	

**Identified noncomplying features (noted below with a check mark)**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>1. <input type="checkbox"/> Unused Well</li> <li>2. <input type="checkbox"/> Stovepipe or Thin-Walled Well Casing</li> <li>3. <input type="checkbox"/> Dug Well</li> <li>4. <input type="checkbox"/> Buried Suction Line</li> <li>5. <input type="checkbox"/> Alcove (Subsurface Pumphouse) or Pit</li> <li>6. <input type="checkbox"/> Non-Walkout Basement or Below-Grade Crawl Space Well</li> <li>7. <input type="checkbox"/> Poor Well Casing Pipe Condition</li> <li>8. <input type="checkbox"/> Contamination Source less than minimum separation distance from well: _____</li> <li>9. <input type="checkbox"/> Well in Floodway or Flood Fringe</li> <li>10. <input type="checkbox"/> Well at Risk from Localized Flooding</li> <li>11. <input type="checkbox"/> Cross-Connection</li> <li>12. <input type="checkbox"/> Driven Point Well &lt; 25 well casing pipe or installed after 1-31-1991 with no well construction report</li> </ul> | <ul style="list-style-type: none"> <li>13. <input type="checkbox"/> Nonpressure Conduit</li> <li>14. <input type="checkbox"/> Hand Pump</li> <li>15. <input type="checkbox"/> Offset Pump or Piping Height Above Basement Floor</li> <li>16. <input type="checkbox"/> Yard Hydrant</li> <li>17. <input type="checkbox"/> Materials for Pump and Supply Piping</li> <li>18. <input type="checkbox"/> Flowing Well Installation</li> <li>19. <input type="checkbox"/> Check Valve Location</li> <li>20. <input type="checkbox"/> Well Cap or Seal</li> <li>21. <input checked="" type="checkbox"/> Casing Height</li> <li>22. <input checked="" type="checkbox"/> Electrical Wires at Wellhead Not Enclosed in Conduit</li> <li>23. <input checked="" type="checkbox"/> Sample Faucet is Missing or Noncomplying</li> <li>24. <input type="checkbox"/> Casing less than 6" in diameter for a well terminating in limestone, dolomite, shale, quartz or granite</li> <li>25. <input type="checkbox"/> Extreme Health/Safety Hazard</li> </ul> |
|---|--|

Comments	
<ul style="list-style-type: none"> <li><input type="checkbox"/> Pre-1991 Driven Point Pipe Depth &lt; 25 feet</li> <li><input type="checkbox"/> Well Construction Report Not on File or Unlocatable</li> <li><input type="checkbox"/> Well Located in Special Well Casing Depth Area</li> <li><input type="checkbox"/> Pre-1979 Two-Wire Submersible Pump</li> <li><input type="checkbox"/> Evidence of Some Corrosion on Well Casing Pipe</li> <li><input type="checkbox"/> Inaccessible or Difficult Location for Future Well Work</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Inaccessible or Difficult Location for Future Pump Work</li> <li><input type="checkbox"/> Non-Vermin-Proof Well Cap or Well Seal</li> <li><input type="checkbox"/> Unable to confirm whether well terminates in limestone, dolomite, shale, quartz or granite</li> <li><input type="checkbox"/> Other:</li> </ul>

**Compliance Determination**

Based on my personal inspection of the real property, the well and pressure system: (check one)

- Complies** with NR 812, Wis. Adm. Code
- Does not Comply** with NR 812, Wis. Adm. Code
- Complies** with NR 812, Wis. Adm. Code, except that a more comprehensive search or additional research is needed to evaluate potential violations that may exist but are not fully identifiable as part of the basic visual inspection, such as:
  - an unused well     floodway/floodplain     contamination source     other:

This form lists the visible conditions of the well and pressure system on the property at the time of inspection and does not imply or give any guarantee. Some features such as well cap, casing height or nonpressure conduit may comply for purposes of this inspection, but may require an upgrade the next time work is done on the well or pressure system.

Signature of Licensed Water Well Driller or Pump Installer 	Individual License # 5922	Date 03/02/2021	Telephone Number (608) 465-3314
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Water Sample Collection Information Form

Do not use this form for Public Water Compliance Samples

Collection Date (MM/DD/YY)

3, 2, 21

Time: 11:30 AM/PM

Collected By

Scott

License # (pump installer/well driller)

6353

Owners Name

Tyrol Properties

Owners Telephone Number

Owners Street Address

3487 Bohn Rd

Well Address (Street or Legal Description)

3506 Bohn Rd

City, State, Zip Code

Mount Horeb WI 53572

Town/City

Vermont

County

Dane

Mail Results To:

Name: LOVELACE PUMP CO., INC

Email Address (for electronic results)

LPC@CO

Address: 9914 CITY M ARGYLE, WI 53504

Prepaid Bacteriology

City State Zip Code

Bacteriological Arsenic

Nitrate Other

Test(s) Requested

Sampler Remarks, if needed:

Private Sample Information Only

Reason for Test:

Annual Test  Taste/Odor  Other  Real Estate  Previous Unsafe

Sample Location:

Bath Tap  Kitchen Tap  Other  Pressure Tnk. Tap  Milk house  Boiler drain

Is Chlorine Present? Yes  No  Does the well serve the public? Yes  No

Public #:

Pump or Well Information Only

\*Results are Required to be submitted to DNR

Reason for Test:

\*Pump Work  \*New Well

Well Construction Information

Drilled  Jetted  Other:  Driven Point  Dug

Driller (If new Well):

Lab Name:

LV Laboratories LLC

Les Vondra

1015 S. Madison St

Lancaster, WI. 53813

(608)723-4096

Email: lesv@chorus.net

Lab Cert. #

105-443

Amount Paid:  Cash  Check

Date Paid: \_\_\_\_\_

Check No. \_\_\_\_\_

Staff Initials: \_\_\_\_\_

Laboratory Use Only

Bacteriological Approved Method

MMO-MUG (Colisure)  Membrane Filter  Presence/Absence  Other

Nitrate Approved Method

4500-NO3, SM 20th ed.

Sample Rejection:

Old  Overgrown  Turbidity  Chlorine Present-CL  Frozen-FR  Shipping Problem-SP

Laboratory Results:

Bacteriological Interpretation:

SAFE (Coliform Absent)

UNSAFE (Coliform Present) and:

Fecal/E. Coli Present  Fecal/E. Coli Absent

Arsenic: \_\_\_\_\_ ug/L

Wisconsin Department of Health Services (DHS) recommends that you stop using your water for drinking or food preparation if Arsenic level is greater than 10 ug/L (ppb)

Nitrate: 20.03 mg/L as N

Department of Natural Resources state that water is considered unsafe for infants under 1 year of age and pregnant women when nitrate level is greater than 10 mg/L (ppm)

Other: \_\_\_\_\_ : \_\_\_\_\_ mg/L or ug/L

Date/Time Received: 3-3-21 9:20A

Bacteriological Nitrate Sample No. F531 F532

Arsenic Sample No.

Date Reported 3-4-21

Date Received by DNR

Sampling Disclaimer

LV Laboratories, LLC reserves the right to reject any sample that is received non-compliant. All sample(s) must be received within 48 hours from the time the sample is collected. For additional samples rejections, see above. Sampler will be notified of sample rejection. If sampler requests testing to be done upon notification of sample rejection, LV Laboratories, LLC agrees to accept the sample(s) for testing and will qualify the results by dating and initialing below.

LV Labs will keep copies for five years before disposal.

LV Laboratories, LLC

Date:



**Water Sample Collection Information Form**

Do not use this form for Public Water Compliance Samples

Collection Date (MM/DD/YYYY) 3, 2, 21 Time: 11:30 AM/PM  
 Collected By Scott License # (pump installer/well driller) 6353

Owners Name Tyrol Properties Owners Telephone Number ( )

Owners Street Address 3487 Bohn Rd Well Address (Street or Legal Description) 3506 Bohn Rd

City, State, Zip Code Mount Horeb WI 53572 Town or City Vermont County Dane

Mail Results To: Name LOVELACE PUMP CO., INC  
 Address 9914 CITY M ARGYLE, WI 53504  
 City State Zip Code

Email Address (for electronic results) LP@PC  
Prep: Bacteriology

Test(s) Requested  
 Bacteriological  Nitrate   
 Arsenic  Other

Sampler Remarks, if needed:

**Private Sample Information Only**  
 Reason for Test:  
 Annual Test  Real Estate  
 Taste/Odor  Previous Unsafe  
 Other  
 Sample Location:  
 Bath. Tap  Pressure Tnk. Tap  
 Kitchen Tap  Milk house  
 Other Boiler drain  
 Is Chlorine Present? Yes  No   
 Does the well serve the public? Yes  No   
 Public #:

**Laboratory Use Only**  
 Bacteriological Approved Method  
 MMO-MUG (Colisure)  
 Membrane Filter  
 Presence/Absence  
 Other  
 Nitrate Approved Method  
 4500-NO3, SM 20th ed.

**Sample Rejection:**  
 Old  Chlorine Present-CL  
 Overgrown  Frozen-FR  
 Turbidity  Shipping Problem-SP

**Laboratory Results:**  
**Bacteriological Interpretation:**  
 SAFE (Coliform Absent)  
 UNSAFE (Coliform Present) and:  
 Fecal/E. Coli Present  
 Fecal/E. Coli Absent

**Pump or Well Information Only**  
 \*Results are Required to be submitted to DNR  
 Reason for Test:  
 \*Pump Work  \*New Well  
**Well Construction Information**  
 Drilled  Driven Point  
 Jetted  Dug  
 Other:  
 Driller (If new Well):

**Arsenic:** N.D. ug/L  
 Wisconsin Department of Health Services (DHS) recommends that you stop using your water for drinking or food preparation if Arsenic level is greater than 10 ug/L (ppb)

Lab Name: LV Laboratories LLC Lab Cert. # 105-443  
 Les Vondra  
 1015 S. Madison St  
 Lancaster, WI. 53813  
 (608)723-4096 Email: lesv@chorus.net

Nitrate: \_\_\_\_\_ mg/L as N  
 Department of Natural Resources state that water is considered unsafe for infants under 1 year of age and pregnant women when nitrate level is greater than 10 mg/L (ppm)  
 Other: \_\_\_\_\_ : \_\_\_\_\_ mg/L or ug/L

Amount Paid: \_\_\_\_\_  Cash  Check  
 Date Paid: \_\_\_\_\_ Check No. \_\_\_\_\_  
 Staff Initials: \_\_\_\_\_

Date/Time Received: 3-3-21  
 Bacteriological Nitrate Sample No. \_\_\_\_\_ Arsenic Sample No. G225A  
 Date Reported \_\_\_\_\_  
 Date Received by DNR 3/5/21

**Sampling Disclaimer**

LV Laboratories, LLC reserves the right to reject any sample that is received non-compliant. All sample(s) must be received within 48 hours from the time the sample is collected. For additional samples rejections, see above. Sampler will be notified of sample rejection. If sampler requests testing to be done upon notification of sample rejection, LV Laboratories, LLC agrees to accept the sample(s) for testing and will qualify the results by dating and initialing below. LV Labs will keep copies for five years before disposal.

LV Laboratories, LLC \_\_\_\_\_ Date: \_\_\_\_\_



1990 Prospect Ct., Appleton, WI 54914 \* 800-801-7590

LV LABS WATER  
1001 S MADISON STREET  
LANCASTER, WI 53813

Home Owner Q225A / TYROL PROPERTIES  
Well ID/Address 3506 BOHN ROAD  
Well City  
Sample Location BOILER DRAIN  
Lab # 557134  
Collected By/Date SCOTT 3/2/2021

Report Date 04-Mar-21

Analyte	Result	Units	LOD	LOQ	Dil	Dig	Date	Run Date	Mthd	Analyst	QC Code
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Inorganic  
Metals

<b>Arsenic, Total</b>	<b>None Detected</b>	ug/l	0.8	2.7	1		3/4/2021	3113B	BP		1
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(as total As) Elevated arsenic levels are believed to cause skin cancer, and blood and nervous system disorders. The EPA and the WI DNR consider levels above 10 ug/L (parts per billion) in drinking water harmful.

LOD Limit of Detection

None Detected = Result was less than the LOD

LOQ Limit of Quantitation

Code	Comment
1	All laboratory QC requirements were met for this sample.

Laboratory Director

Please visit our website at [www.cleanwatertesting.com](http://www.cleanwatertesting.com)

WI DNR Lab Certification # 445126660

EPA ID# WI 00063

WI Dept of Ag Lab ID # 152673-D3

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